

"THEY WANTED TO ERASE US"

Myanmar's 2017 "Clearance
Operations" through the Eyes of
Rohingya Children and Genocide

LEGAL ACTION WORLDWIDE
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Acknowledgements

LAW dedicates this research to the Rohingya children who lost their lives during the Myanmar military's brutal "clearance operations" in 2017, and to those who survived the atrocities and continue to bear an unconscionable burden of the violence inflicted on them, their families, and their communities. LAW extends its deepest gratitude to all those who participated in this research, confided in us, and shared the horrific experiences they endured, including the loss of their loved ones. Their courage in speaking out and pursuing justice is profoundly inspiring—we must have the courage to seek justice alongside them.

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About Legal Action Worldwide (LAW)

Legal Action Worldwide (LAW) is an independent, non-profit organisation comprised of human rights lawyers and jurists working in fragile and conflict-affected areas in the Middle East, Africa, and Asia. LAW works to bring justice to individuals and communities that have experienced grave human rights violations and abuses, with a particular focus on gender equality and gender-based violence.

LAW's Rohingya Crisis programme seeks to advance international justice and accountability for the serious international crimes committed against the Rohingya in Myanmar. LAW represents over 400 Rohingya survivors of the 2017 "clearance operations" to ensure meaningful Rohingya participation in international justice processes. One of the key pillars of our programme is the network of community volunteers, the 'Survivor Advocates' who assist and provide peer support to individual clients and raises awareness within their community about the on-going international justice and accountability processes.

This research focuses on understanding what the Rohingya children currently living in the refugee camps in Cox's Bazar, Bangladesh, experienced and witnessed during Myanmar military's 2017 "clearance operations" and study their psychological and developmental well-being, nearly eight years after their deportation from Myanmar. All participants in this research were informed about its purpose before they gave consent to participate. LAW verified the identities of interview participants, cross-checked the accuracy of their reported locations or villages of origin. Please note the names of participants and certain specific locations have been redacted for confidentiality. LAW has obtained the informed consent of all persons photographed in this report.

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Key Terms

- **Adolescent:** A person aged 10 to 19 years, as defined by the United Nations. (UNICEF) While this report uses the terms 'Adolescent', 'Child' and 'Youth' and in accordance with the internationally recognised definitions, it acknowledges that these definitions overlap with one another. Adolescence includes individuals in their childhood as well as early youth. Similarly, the term 'youth' includes individuals in their late adolescence.
- **Arakan Army (AA):** The Arakan Army, formed in 2009, is an ethnic armed organisation based in Myanmar's Rakhine state. It is the military wing of United League of Arakan (ULA) and is a part of the broader insurgency against Myanmar's junta. The AA's stated aim is to seek greater autonomy or independence for the Rakhine people. It is known for engaging in armed conflict with the Myanmar military and, in recent years, has been accused of human rights abuses, forced recruitment, and other atrocities in areas under its control.
- **Child:** A person under the age of 18 years, as defined by the United Nations. (UNICEF)
- **Clearance Operations:** On 9 October 2016 and 25 August 2017, Myanmar authorities launched what they referred to as "clearance operations" in response to attacks by the Arakan Rohingya Salvation Army (ARSA). The reality of these "clearance operations" were planned, widespread, and characterised by systematic violence against Rohingya civilians led by the Myanmar military and other security forces, which resulted in their largescale displacement.
- **Hijra:** Gender-based cultural community in South-Asian region mainly consisting of transwomen (persons assigned male at birth but who identify as a woman), but also *kotbi* (males who play the receptive roles in homosexual intercourse and/or feel and express themselves typically as "effeminate", and may or may not cross-dress), intersex and other diverse people who follow different traditions, livelihood, lifestyle, and language.
- **Myanmar Armed Forces/Myanmar military/Junta:** The Myanmar Armed Forces are known as Tatmadaw, which translates into Imperial or Royal Armed Forces with the suffix 'daw' or 'taw' denoting 'royal' or 'sacred'. In Myanmar, they are usually referred to as Sit-Tat, meaning Sit (Armed or Military), Tat (Forces). Given the Tatmadaw's historic brutality, including the international crimes described in this report, LAW uses the terms Myanmar military or junta (instead of the Tatmadaw with its 'royal' or 'sacred' connotations) interchangeably throughout this report to describe Myanmar's Armed Forces. References to Myanmar security forces encompass the Myanmar Armed Forces and the Myanmar Police Force. On 1 February 2021, the Tatmadaw deposed the democratically elected government, and transferred power to the Commander-in-Chief of Myanmar's Armed Forces, Min Aung Hlaing. The military-led system of government (junta) subsequently established the State Administration Council (SAC), to which Min Aung Hlaing delegated his legislative power.
- **Rohingya armed groups:** These refer to insurgent non-state armed organisations formed by members of the Rohingya Muslim minority in Myanmar, in response to longstanding systematic oppression. The most notable groups are the Arakan Rohingya Salvation Army (ARSA), which emerged in 2012 and came to prominence in 2016, and the Rohingya Solidarity Organisation (RSO), whose formation dates to 1982. Other smaller factions exist but are less organised and influential. While the purported aim of these different groups is to position themselves as a resistance movement, they have been accused of carrying out offensives against security forces and attacking civilians, carrying out illicit drug trade, and exacerbating insecurity in the camps in Cox's Bazar.
- **Sexual violence:** A perpetrator commits an act of a sexual nature against one or more persons or causes such person or persons to engage in an act of a sexual nature by force, or by threat of force or coercion, such as that caused by fear of violence, duress, detention, psychological oppression or abuse of power, against such person or persons or another person, or by taking advantage of a coercive environment or such person's or persons' incapacity to give genuine consent (Definition of 'sexual violence' under article 7(1)(g)-6 of the Rome Statute).
- **Sexual and gender-based violence (SGBV):** Violence that is directed at a person on the basis of their gender or sex. It includes acts that inflict physical, mental, or sexual harm or suffering, as well as threats or coercion related to these kinds of harm. SGBV can include, but is not limited to, rape and sexual violence. Non-sexual forms of gender-based violence can include, for example, the attack on a girl's school, or the bombing of an LGBTIQ+ community centre.
- **Special Representative to the Secretary General on Children and Armed Conflict:** The SRSR on CAAC is a senior United Nations official mandated to promote the protection, rights, and well-being of children affected by armed conflict. This role was established by the UN General Assembly in December 1996 with a renewal and expansion in

December 2021. Reporting directly to the UN Secretary General, the SRSG leads global advocacy, monitors grave violations against children, and engages with parties to conflict to end and prevent these abuses.

- **Survivor/Victim:** LAW uses the terms survivor and victim throughout this research to refer to individuals who have directly experienced or witnessed a violation or abuse. Both terms are used as LAW recognises that not all victims are survivors. Some do not survive the violation or abuse, while others do survive but identify as a victim, not a survivor.
- **Working Group on Children and Armed Conflict:** The Working Group on Children and Armed Conflict was established to address the impact of

armed conflict on children. Comprising of all the 15 members of the Security Council this Working Group was established in 2005 and works through consensus. It reviews reports from the UN Secretary-General on grave violations against children, formulates recommendations, and monitors compliance by parties listed in the Secretary-General's annual report. The Working Group engages in dialogue with governments and armed groups to promote action plans aimed at ending and preventing violations such as recruitment, killing, sexual violence, and attacks on schools and hospitals.

- **Youth:** A person aged between 15 to 24 years, as defined by United Nations. (UNICEF).



Photo: LAW/ Akhyar Ali ©

Executive Summary

The present report sets out the targeted and brutal destruction of Rohingya children's lives and futures primarily from Myanmar's 2017 "clearance operations." Drawing on 86 testimonies, and clinical assessments¹ carried out by Legal Action Worldwide (LAW) over the course of 10 months, it presents a consolidated record of Rohingya children's accounts which credibly and consistently reveal killings, sexual violence, enforced disappearances, the destruction of homes and religious sites, and the deliberate creation of life-threatening conditions.

The findings in this report demonstrate that the acts perpetrated by the Myanmar military against, and impacting, children in the context of the 2017 "clearance operations" constitute underlying genocidal acts of causing serious bodily and mental harm and, in conjunction with the killings, the deliberate infliction of conditions of life calculated to bring about the physical destruction of the Rohingya group in part. These acts fall squarely within article II(a), (b), and (c) of the Genocide Convention as interpreted by international courts and tribunals.

These findings are consistent with prior United Nations (UN) fact-finding and expand the evidentiary record by foregrounding children's experiences and the long-term developmental impact of the violence they endured. It further examines the link between the atrocities experienced and witnessed by Rohingya children in Myanmar and their current psychological condition, building qualitative clinical evidence on the on-going and cumulative impact on Rohingya children's lives. LAW finds that these patterns, moreover, clearly fall within prohibited acts under article II of the Genocide Convention.

During the "clearance operations," Rohingya children were systematically targeted for violence. They reported shootings, stabbings, beatings, rape and other forms of sexual violence, abductions, and the burning of their villages. Children were executed alongside family members or killed while fleeing. Infants were killed by being thrown into bodies of water or fire. LAW's findings reveal that these atrocities spanned at least 42 villages and unfolded with such consistency and coordination that they formed a clear operational pattern by the Myanmar Armed Forces, often with Rakhine militia support.

Girls were raped, often by multiple perpetrators, mutilated, or brought to military sites where they were detained and assaulted in brutal incidents of sexualised enslavement. Several witnessed their family members being killed. More than 40 per cent of child participants witnessed the killing of immediate family members, and many lost both parents.

Survivors continue to suffer serious physical and psychological harm. Clinical assessments undertaken by LAW reveal symptoms of chronic trauma, including intrusive thoughts and flashbacks, dissociation, depression, and disrupted cognitive development. Recurrent messages of inferiority and the destruction of religious life contributed to a sense that the violence targeted the Rohingya group's existence, evidenced by statements such as "They wanted to erase us."

The loss of family structures, cultural silence around trauma, and continued insecurity in refugee settings including primarily in Cox's Bazar, Bangladesh, have deepened the effects of the long-term impact. LAW's clinical findings indicate a broader pattern of psychosocial destruction that undermines cultural continuity and collective well-being.

The report finds that the profound physical, psychological and developmental harm presented in the report clearly meets the "long-term disadvantage" and other relevant jurisprudential thresholds to establish serious bodily and mental harm under article II(b) of the Genocide Convention.

LAW further finds that the dehumanisation of the Rohingya children through hate speech propagated by the Myanmar military and the overall brutality of violence against children -- perpetrated through acts including killings, sexual violence, combined with exposure to killings and disappearance of loved ones -- was probative of an intent to destroy the Rohingya group's next generations. The removal of caregivers and community anchors dismantled core social structures and undermined children's identity formation, and capacity to envisage a future, and impairs the continuity and growth of the group.

Additionally, children described escaping the violence including flight through rivers and forests while wounded, or starving. Many experienced severe hunger, dehydration, untreated injuries, and risked drowning. They reported extortion, abductions, and beatings at checkpoints. LAW finds that these life-threatening circumstances amount to imposition of destructive conditions of life under article II(c) of the Genocide Convention.

These findings must inform the on-going international justice proceedings. A credible and effective accountability response, moreover, requires coordinated action across sanctions, investigations, international justice processes, child-sensitive engagement, rehabilitation, and education.

Recommendations

1. Prioritise effective methods to end impunity and hold perpetrators accountable

Initiate new and enforce existing sanctions

- Considering Myanmar is a persistent violator engaged in grave violations against children, the Working Group on Children and Armed Conflict should: (i) adopt the conclusions of the Secretary General's report on Myanmar; (ii) recommend a comprehensive sanctions regime against the Myanmar junta to the UN Security Council, including against entities supporting Myanmar military's access to military equipment and funds.
- A UN sanctions committee on Myanmar should be established for monitoring and reporting to take consistent and strong action.
- States should continue to enforce existing, and initiate new sanctions against identified perpetrators, and individuals and entities supporting the Myanmar military, among others for the purpose of discouraging actions which violate the rights of children.

Initiate structural investigations within domestic jurisdictions

- Where possible, States should initiate structural investigations in their domestic jurisdictions to prosecute crimes by the Myanmar junta under the principle of universal or extraterritorial jurisdiction, following Argentina's lead.
- Where and when necessary, States should amend or instate national legislation that allows for the prosecution of international crimes.
- Legal action to halt arms exports to Myanmar must be upheld in domestic jurisdictions in line with States' foreign policies based on human rights and respect for international law, following South Africa's lead.
- Relevant States must create an exception to the immunity for third-party content enjoyed by social media companies such as Meta in relation to their role in amplifying hate speech linked to genocidal violence.² Where necessary, states must assume jurisdiction over Meta's operations and transnational human rights impacts, following Kenya's lead. States should also explore regulatory avenues under business and human rights frameworks, including mandatory human rights due diligence requirements, to hold social media companies accountable for amplifying child-targeted hate speech that contributes to atrocity crimes.

Support and advocate for progress regarding on-going international investigations and accountability processes

- States must call upon Myanmar to immediately fulfil all provisional measures issued by the ICJ in *The Gambia v. Myanmar* case on Application of the Convention on the Prevention and Punishment of the Crime of Genocide, including preventing acts that may inflict conditions of life depriving of access to food and medicine to Rohingya population that significantly impacts children. Interim reporting by Myanmar on compliance with provisional measures should be made public and available to survivors, and an ad-hoc committee should be created by the ICJ to monitor the implementation of the provisional measures by Myanmar, until the merits decision is delivered.
- States should initiate a resolution for the UN Security Council to immediately refer Myanmar to the ICC for investigation.
- States should support and advocate for the ICC Office of the Prosecutor to formally accept NUG's article 12(3) declaration, which would allow the ICC to expand the current investigation to crimes against Rohingya within Myanmar beyond crime of deportation and persecution and other inhumane acts, and include international crimes since the 2021 coup.
- States should enforce all arrest warrants issued for perpetrators of international committed in Myanmar, including against perpetrators residing in or traveling through their domestic territories.

2. Recognise Rohingya children as stakeholders in the on-going international justice and accountability processes

- Child-sensitive and child-competent approach must be adopted in investigations to effectively and safely engage with children. Investigations must be resourced with trained investigators, interpreters, psychosocial experts, analysts and lawyers, and engage with the local knowledge to adapt to child's lived experience, abilities and vulnerabilities.
- Evidence of grave violations or crimes against and affecting Rohingya children must be mainstreamed in legal proceedings and not reduced to marginal

references. Such evidence must be considered as determinative factor in establishing serious international crimes including state responsibility for genocide, particularly with respect to demonstrating prohibited acts and specific intent.

- Considering the Myanmar military's dehumanisation of Rohingya children, extreme brutality against them during 2017 "clearance operations", and the long-term physical and psychological consequences on those who survived, such conduct should be key part of any prosecutorial strategy to hold the Myanmar military and individual officials accountable for the crime of genocide against Rohingya.
- Children and youth who engage contribute to international justice and accountability efforts whether as witnesses or in other capacities otherwise must be provided access to protection avenues by host states or humanitarian response. Their engagement should and be formally recognised under as human rights defender frameworks profile to ensuring they receive support in case of protections risks.

3. Fund and establish comprehensive, long-term rehabilitation support for Rohingya children to address the multifaceted impacts of atrocities committed by Myanmar military

- Exposure to violent death, forced separation from caregivers, and vulnerability among Rohingya children, in Myanmar and now in forced displacement require specialised professional services beyond the psychosocial support available in camps. Healing requires systemic, culturally informed psychosocial interventions aimed at restoring belonging, and intergenerational dignity.
- Donors, humanitarian agencies, and service providers must prioritise and adequately fund rehabilitation services for Rohingya child-survivors, at the very least for highly vulnerable children including but not limited to those who faced physical injuries, orphans who are not socially integrated, and psychological support for children suffering mental health disorders, in order to tackle the lack of comprehensive care available for Rohingya children.
- Member States must adopt amendments to UN General Assembly and Human Rights Council resolutions to promote reparations including through creation of a Victims' Trust Fund.
- International justice mechanisms must pursue reparations within judicial processes for Rohingya and particularly, children. Survivor-centred and age-informed approach to the design and implementation of reparations programmes should

be ensured, including but not limited to: access to appropriately trained child-competent medical staff, and instituting psychological therapy programmes for child survivors. (See Box D for more discussion on reparations.)

4. Urgently advance the right to education for Rohingya children and youth in refugee camps, recognising that denial of education perpetuates genocidal destruction and persecution originating in Myanmar

- Donors must immediately increase funding for humanitarian agencies to reopen closed learning centres, affecting over 230,000 to 300,000 children, and the host government must lift restrictions on accreditation and formal education pathways. Learning centres should be recognised and resourced as safe spaces for psychosocial stabilisation and protection from recruitment, trafficking, and gender-based violence.
- Aid organizations should collaborate with existing community-led initiatives, including the Rohingya community school board, recognising the crucial role of community teachers in ensuring structured academic learning.
- Educational access must be expanded to include secondary, university-level, and vocational training programs that are inclusive across genders, including the *hijra* community, to enable youth to emerge as educated leaders capable of engaging with their traditional knowledge, thereby breaking cycles of intergenerational trauma, inherited despair and cultural disconnection.
- States should collaborate with UNHCR to provide complementary pathways to Rohingya students to pursue higher education, following Philippines's lead.

Myanmar's Accountability Landscape

Decades of entrenched marginalisation and discrimination against the Rohingya group in Myanmar, coupled with the collapse of independent oversight mechanisms following the 2021 military coup, mean there is no effective domestic recourse available to Rohingya victims. Moreover, the judiciary has been politicised to the extent that due process is unattainable, and domestic initiatives have failed to produce genuine, independent, or effective investigations or prosecutions. This absence of due process, combined with a pervasive climate of impunity, has left survivors with no meaningful avenue for redress within national institutions.

Although Myanmar maintains a system of military tribunals, these mechanisms also do not provide a credible pathway to justice for Rohingya victims. Proceedings are controlled by the Tatmadaw hierarchy, and they lack transparency and independent judicial oversight. Past cases, including the famous Inn Din massacre trial in 2018, involved only low-ranking soldiers, and resulted in limited sentences followed by early releases. Such factors underscore a pervasive unwillingness to pursue senior command responsibility. Moreover, since the 2021 coup, Myanmar's military tribunals have been used primarily to suppress dissent, and there is no evidence that they have addressed the widespread and systematic crimes committed against the Rohingya. These shortcomings reinforce LAW's assessment that Myanmar's domestic mechanisms are neither capable nor willing to offer meaningful accountability.

In 2019, the Pre-Trial Chamber of the International Criminal Court (ICC) authorised the Prosecutor's investigation on the basis that elements of the alleged crimes occurred on the territory of Bangladesh, a State Party to the Rome Statute.³ The Office of the Prosecutor is investigating alleged crimes against humanity, including deportation and persecution, committed against the Rohingya population, and in 2024, requested an arrest warrant for military leader Min Aung Hlaing for crimes against humanity, specifically the deportation and persecution of the Rohingya.⁴

In February 2025, the federal court in Argentina ordered arrest warrants against 25 Myanmar government officials, including the Commander-in-Chief of the Armed Forces, Min Aung Hlaing, for genocide and crimes against humanity committed against the Rohingya between 2012 and 2018.⁵

Positive developments before the ICC, together with the on-going universal-jurisdiction case in Argentina, represent significant steps toward individual criminal accountability for crimes committed against the Rohingya.

Concurrently, before the International Court of Justice (ICJ), the case of *The Gambia v. Myanmar* concerns Myanmar's alleged breaches of the Genocide Convention during the 2016 and 2017 "clearance operations."⁶ This case is the principal mechanism addressing Myanmar's state responsibility. In January 2020, the ICJ ordered provisional measures requiring Myanmar to prevent further genocidal acts,⁷ and in July 2022 it confirmed its jurisdiction over the dispute.⁸

Meta (the parent company of Facebook) faces multiple legal challenges globally regarding its alleged role in amplifying hate speech against Rohingya communities during the 2017 crisis. These include an OECD complaint,⁹ an SEC filing in the United States alleging securities law violations,¹⁰ and class actions in both the United Kingdom and the United States (under appeal following dismissal).¹² Together, these cases reflect rising scrutiny of Meta's accountability for platform-driven harms.

Despite these international developments, justice remains a distant prospect for Rohingya communities. In Cox's Bazar, refugees across all age groups consistently emphasise that justice is inseparable from security, education, healthcare, and the prospect of safe and voluntary repatriation.

At recent high-level discussions on the Rohingya situation during the 80th UN General Assembly, and in the dialogues leading up to these events, Rohingya youth and community representatives emerged as central voices articulating their community's priorities and aspirations.¹³ They consistently expressed a strong desire for safe and dignified repatriation, conditioned upon the restoration of citizenship, justice and accountability, and guarantees of non-occurrence.

The growing involvement of Rohingya youth in advocating for safe, dignified, and peaceful pathways to resolve the crisis demonstrates that they are a critical demographic and a genuine constituency for change in Myanmar. Their perspectives underline the urgent need to ensure that the voices and experiences of children, as independent rights holders, are meaningfully incorporated into formal justice processes, including investigations, prosecutions, deliberations, and States' actions to address impunity. Holistic, meaningful justice involves more than accountability for past crimes and must also respond to the long-term physical and psychological impacts of violence that continue to shape the lives of Rohingya refugees, including children.

1

Introduction



**"I CANNOT
THINK OF
GOOD
THINGS"**

This report documents how the crimes committed against the Rohingya during the 2017 “clearance operations” specifically affected children, applying a child-rights and child-competent framework to present the full extent of their victimisation. It further examines the link between the atrocities experienced and witnessed by Rohingya children in Myanmar and their current psychological condition, building qualitative clinical evidence on the on-going and cumulative impact on Rohingya children’s lives. Taken together, these documented harms and patterns of victimisation provide clear and compelling evidence consistent with the elements of genocide, including indicators of the intent to destroy the Rohingya group in whole or in part.

For decades preceding the 2017 “clearance operations,” children in Myanmar faced grave violations, largely in ethnic minority areas where the Myanmar military has conducted sustained operations and where communities have long been exposed to violence, displacement, and chronic service deprivation. The 2021 military coup accelerated their suffering on a national scale. Since February 2021, the Myanmar Armed Forces¹⁴ have carried out widespread violations against children during intensified hostilities with ethnic armed organisations and People’s Defence Forces (PDF), including through the extensive use of aerial attacks in populated civilian areas. These operations have killed and maimed children across multiple regions and have repeatedly damaged hospitals, schools, and other facilities protected under international humanitarian law (IHL).

Internal displacement has also reached unprecedented levels. Of over 3.5 million people displaced inside Myanmar today,¹⁵ children comprise more than one-third.¹⁶ Their access to food, education, healthcare, and basic protection is either deliberately denied or severely disrupted, exposing them to heightened risk of disease, exploitation, and long-term developmental harm. The promulgation of the military’s forced conscription law in February 2024 has contributed to this insecurity – although the law formally excludes individuals under 18 years old, its passage has generated acute fear within communities already affected by the recruitment and use of children prior to the coup.¹⁷

In successive annual reports, the Special Representative of the Secretary-General for Children and Armed Conflict has characterised Myanmar as a persistent and severe violator of children’s rights. Recent verified data indicates 5,141 grave violations affecting 4,089 children, covering killing and maiming, recruitment and use, sexual violence, abductions, attacks on schools and hospitals, and the denial of humanitarian access.¹⁸ This represents over a four-fold increase (400 per cent) compared to pre-coup reporting, reflecting both the expansion of conflict and the systematic nature of the military’s conduct as it affects children.¹⁹ In the current escalation of violations against children across Myanmar, the situation facing Rohingya children is qualitatively different.

Not only are they harmed within the country’s post-coup armed conflict, but they have also been subjected to decades of identity-based persecution aimed at weakening the physical survival and continuity of the Rohingya group. Their treatment reflects a sustained and discernible policy in which discrimination, segregation, and violence converge to restrict every aspect of childhood and development.

For more than 60 years, the Rohingya have experienced structural exclusion driven by a state-manufactured narrative of demographic threat (see Sec. II., Context, below). Rohingya children are born into deprivation by being denied nationality, restricted from education and healthcare, and confined through stringent control over their movement. During the 2017 “clearance operations,” UN fact-finding bodies documented killings, maiming, multiple perpetrator rape (“gang rapes”), and torture of children, alongside the destruction of villages and mass expulsions that uprooted entire communities. Periodic military operations in Rakhine State continue to repeatedly target Rohingya civilians, with children being among the primary victims.

Renewed conflict between the Myanmar military and the Arakan Army (AA) since late 2023 has driven at least 150,000 Rohingya across the border into Bangladesh, adding to the more than 1.2 million refugees residing in the Cox’s Bazar camps.²⁰ Current arrivals are approximately 42 per cent children, echoing patterns from 2017 when more than half of those deported²¹ were under 18 years old.²² The camps in Cox’s Bazar now present a different but persistent set of risks, including insecurity driven by abductions, extortion, and armed group recruitment; movement restrictions including curfews; and the collapse of already curtailed education access following severe funding cuts that have left more than 300,000 children at risk of losing access to school.²³ For desperate adolescents, the absence of higher education pathways entrenches hopelessness and increases exposure to recruitment and use in hostilities.

The hundreds of Rohingya victims and survivors supported by LAW consistently describe an acute fear that their society is losing an entire generation. They point specifically to the killing and maiming children, including infants, during the 2017 violence as an emblematic attack on the group’s future, and emphasise that the recognition of Rohingya identity and the restoration of rights in Myanmar are essential to safeguarding their children and grandchildren. In their articulation of justice, children’s security, dignity, and long-term prospects are central – both symbolically and materially. Grave violations against Rohingya children are also legally significant. LAW’s findings reveal that the violence directed at them continues to shape the assessment of specific elements of international crimes, including the prohibited acts under the Genocide Convention. Yet children and adolescents remain under-represented in evidence-gathering and under-examined in legal characterisations generally.

Their experiences are often absorbed into generalised Rohingya victim accounts without child-specific analysis, despite their distinct vulnerabilities and the evidentiary weight their testimonies carry. This gap is consistent with a broader pattern where international criminal

jurisdictions have been inconsistent in their attention to crimes affecting children. A more rigorous integration of child-specific harm into international justice processes is therefore essential.

Key Questions

The field research for this report focused on three key questions:

- (1) **What is the on-going psychosocial and developmental impact of the atrocities witnessed or endured by Rohingya children and adolescents during the 2017 “clearance operations”?**
- (2) **What is the consequent impact of such harm to Rohingya children and adolescents and on the Rohingya community as a whole? and**
- (3) **Do the harms inflicted on Rohingya children and adolescents, and their long-term consequences, amount to genocidal acts under international law and contribute evidence relevant to establishing genocidal intent?**

The research applied a multidisciplinary methodology to address these questions in a coherent and reliable way. Psychologists, anthropologists, and lawyers jointly analysed data from survivors who were between five and 17 years old during the 2017 “clearance operations.” Their accounts were assessed through a psychological and developmental lens, and the resulting findings were evaluated within relevant international legal frameworks. The analysis identifies the specific and enduring harms experienced by Rohingya children and adolescents, and the recommendations set out in the report (see Sec. VII., below) aim to assist international actors in advancing child-centred accountability and reparations.



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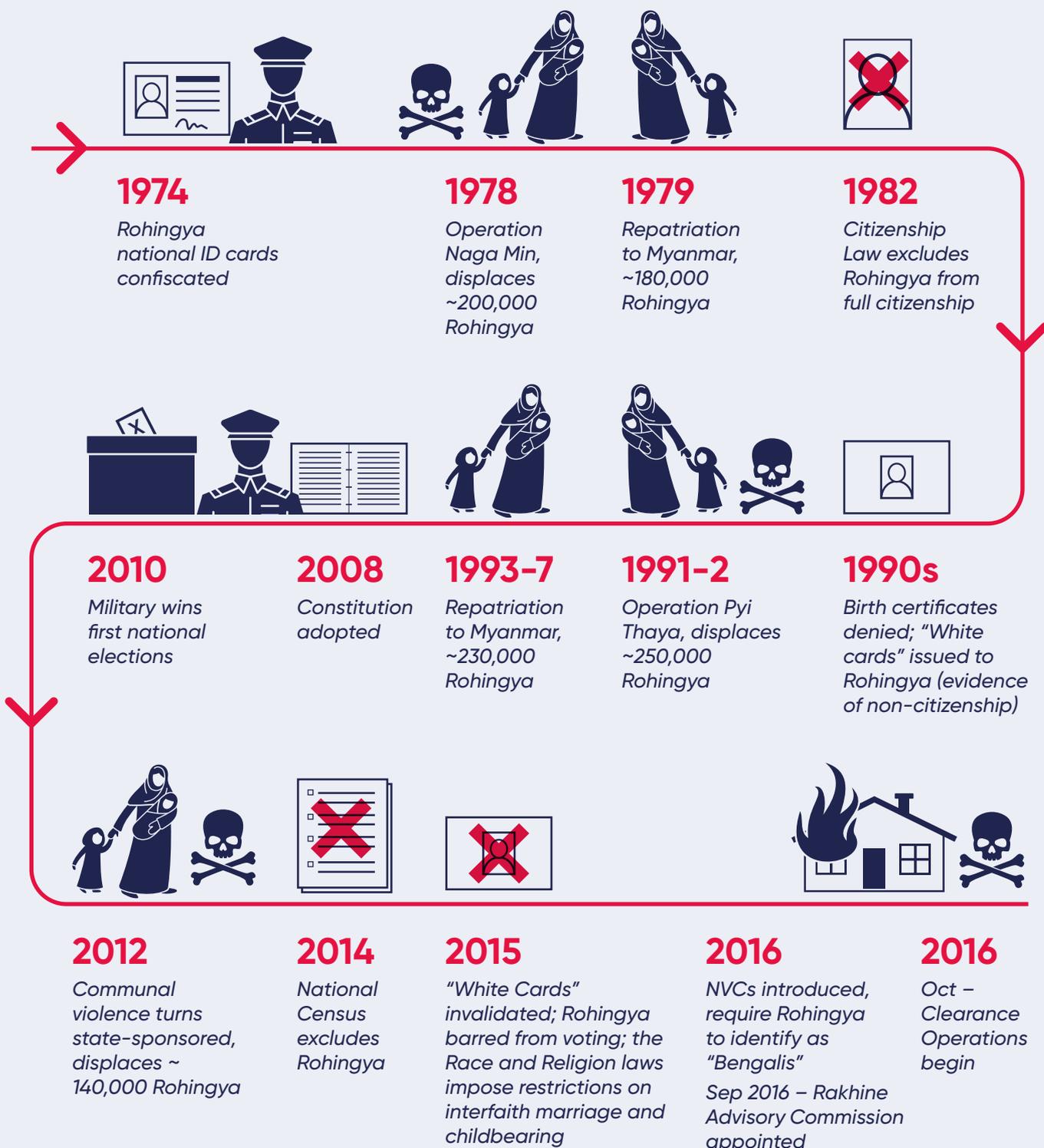
Context

**"THEY DID
NOT WANT
US TO BE
EDUCATED"**

Since the 1962 military coup, Myanmar's predominantly Muslim Rohingya population has endured more than six decades of institutionalised discrimination and state-directed violence, including over 40 years of exclusion from citizenship.²⁴ Successive governments have advanced a nationalist agenda that entrenches the "othering" of the Rohingya, by adopting policies and practices that marginalise them from birth and draw on a manufactured narrative that their very existence threatens Burmese identity.²⁵

Within this system of entrenched discrimination and exclusion, Rohingya children are among the most affected and acutely vulnerable. They are born stateless, denied legal status and access to education and healthcare, and repeatedly displaced by cycles of violence or born into displacement.²⁶ This leaves them in states of persistent deprivation, whether confined to internally displaced persons (IDP) camps in Rakhine State or living as refugees in neighbouring countries, including Bangladesh.²⁷

2.1. Brief History of Myanmar military operations targeting Rohingya including children



The Myanmar military has conducted large-scale operations against Rohingya communities in Rakhine State repeatedly since 1978, often justified as immigration enforcement or responses to alleged security threats. A review of United Nations (UN) and other publicly available documentation reveals a consistent pattern across these operations, in which children have been subjected to, and affected by, the same categories of violations as adults.

1978 – Operation Nagamin (Dragon King)

Operation Nagamin (“Dragon King”), launched in 1978, was formally described as a nationwide registration exercise intended to verify citizenship and document non-citizens ahead of a planned census.²⁸ In practice, the Myanmar military and immigration authorities carried out a campaign of coercive searches, arrests, and violence that forced more than 200,000 Rohingya to flee to Bangladesh.²⁹ The Government asserted that the scale of the exodus demonstrated the Rohingya’s alleged illegal status, yet the operation identified very few undocumented residents. Myanmar subsequently concluded an agreement with Bangladesh to repatriate “lawful residents of Burma who are now sheltered in the camps in Bangladesh.”³⁰ Most Rohingya were returned by 1979, although approximately 10,000 people, largely children, died in the camps from hunger, malnutrition, and disease following cuts to humanitarian assistance.³¹

1991–1992 – Operation Pyi Thaya (Clean and Beautiful Nation)

A further mass displacement occurred in 1991–92 following Operation Pyi Thaya (“Clean and Beautiful Nation”), during which roughly 250,000 Rohingya fled to Bangladesh. Although the operation was presented as an immigration and security measure, it involved widespread persecution of Rohingya communities, including extra judicial killings, torture, arbitrary detention, enforced disappearances, intimidation, gang rape, forced labour, looting, the burning of homes, forced eviction, land confiscation, population resettlement, and the systematic destruction of villages and mosques.³² The Government further pursued a policy of moving non-Muslim Burmese into northern Rakhine State while restricting the movement of Muslims, contributing to the displacement.³³

During this period, many men and children, were subjected to forced labour, amounting to enslavement considering the power of ownership exercised over the civilians. They were forced to dig ditches, broadening roads, and laying stones for infrastructure projects – building new villages for non-Muslim settlers which the armed forces had moved into the Rakhine area. Those who slowed down were often beaten,³⁴ and many never returned. Accounts of survivors collected at the time reveal targeted attacks against their children; in one instance in Buthidaung, over 100 women were abducted

along with their children and marched to the military camp where they were detained. At least 20 infants and young children were killed on the way upon being thrown violently by the military soldiers on the roadside for crying. In another instance of violence in Buthidaung, at least 10 children were snatched by military soldiers from their parents trying to flee to Bangladesh, “swung like sacks” by their ankles, and their heads smashed against the riverbank, killing them.³⁵ These violations were carried out primarily by the military, and security personnel were reported to have confiscated or destroyed National Registration Cards held by Rohingya Muslims.³⁶

2012 – Communal violence and escalation of persecution

Communal violence in 2012 between Rakhine Buddhists and Rohingya Muslims in Rakhine State, escalated into state-supported widespread killings and displacement of the Rohingya.³⁷ The military and security forces often acting alongside ethnic Rakhine committed serious violations, including killings, arson, and arbitrary arrests.³⁸

Children were shot, beaten, and tortured, while others were displaced or orphaned. The bodies of victims, including minors, were often taken away by authorities, leaving families without information on their whereabouts.³⁹ The violence also exposed girls to heightened risk of sexual violence and exploitation. In June 2012, for example, up to 20 Rohingya girls were abducted from the Narzi quarter in Sittwe and subjected to sexualised enslavement by soldiers.⁴⁰ According to the Rakhine Inquiry Commission (established by the Myanmar government), 192 people were killed, more than 265 injured, and 8,614 houses destroyed during the violence, though these figures are believed to be well below the actual scale.⁴¹

By July 2013, around 140,000 people – approximately 95 percent of whom were Rohingya Muslims – remained displaced within Rakhine State, including large numbers of children deprived of basic services such as healthcare and education.⁴² Rohingya students have been barred from enrolling at Sittwe University since 2012, effectively cutting off their access to higher education.⁴³

2016 “Clearance Operations”

In October 2016, a small group of Rohingya men (allegedly belonging to the Arakan Rohingya Salvation Army) attacked Burmese police posts in Rakhine State, killing nine officers.⁴⁴ Security forces led by the Myanmar military responded with brutal attacks against the Rohingya population at large. During these operations, the military burnt Rohingya villages mainly in Maungdaw, carried out mass executions of Rohingya men and boys, and committed widespread sexual violence against women and girls. Children, including infants, were deliberately targeted, during the attacks.⁴⁵

According to the UN Office of the High Commissioner for Human Rights (OHCHR), victims ranged from newborns to teenagers, and included children who were killed by live ammunition or stabbed while at home, fleeing to safety, or while in farms or fields.⁴⁶ For instance, in Dar Gyi Zar village, soldiers captured up to 200 men, women, and children, separating the men and boys aged approximately 12 and older, and summarily executed them.⁴⁷

2017 'Clearance Operations'

Following the 2016 "clearance operations", Rohingya communities in Myanmar were subjected to intensified movement restrictions and a heightened security presence in their villages. This period saw a broad range of violations, including arbitrary arrests and sexual and gender-based violence against women and girls, who were raped in their homes or taken to military facilities where they were raped or gang-raped. At the same time, escalating hate speech against the Rohingya fuelled inter-communal tensions, media reported activities by ARSA, and the authorities mobilised and armed Rakhine militia groups. On 10 August 2017, Myanmar airlifted more than 1,600 soldiers from the Tatmadaw's 33rd and 99th Light Infantry Divisions to Rakhine State from northern Myanmar.⁴⁸ Myanmar national media reported that these divisions were being sent to "carry out area clearance."⁴⁹ Other military units were also re-deployed to northern Rakhine State and stationed in areas normally guarded by Border Guard Police units.⁵⁰ These forces were accompanied by tanks, armoured personnel carriers, heavy artillery, helicopters, and naval vessels.⁵¹

On 25 August 2017, the Myanmar military resumed the "clearance operations" in northern Rakhine state following an attack by the Arakan Rohingya Salvation Army (ARSA) on a Myanmar military base and up to 30 security outposts earlier on the same day. The ARSA fighters were largely untrained individuals wielding sticks and knives, with a small number bearing arms and improvised explosive devices (IEDs).⁵² For the next two months, the Myanmar military implemented one of the most devastating and horrific attacks on Rohingya civilians, resulting in the death of at least 10,000 people⁵³ and the mass exodus of at least 720,000 survivors – half of them children⁵⁴ – able to escape the violence.

The UN's Independent International Fact-Finding Mission on Myanmar (FFM), appointed by the UN Human Rights Council in March 2017 to establish the facts and circumstances of the alleged human rights violations and abuses by military and security forces in Myanmar, described the "clearance operations" as a "human rights catastrophe" that was both "foreseeable and planned",⁵⁵ and that the patterns of killings, torture, and sexual violence, and the extreme scale and brutality were consistent with the crime of genocide.⁵⁶

Throughout the operations, Myanmar security forces did not distinguish between civilians and military objectives. Children were among the most severely affected.

Médecins sans Frontières (MSF) estimated that at least 730 children under the age of five were killed between 25 August and 24 September 2017, of which 59.1 per cent were shot, 14.8 per cent burned to death, and nearly 7 per cent beaten to death.⁵⁷ The burning of villages disproportionately affected children, who were often sleeping, too slow and/or too frightened to flee.⁵⁸

The UN FFM further documented targeted acts against children, with crimes against and affecting children recorded (mainly as reflected within the adult survivors' testimonies) in at least 24 villages across three townships. Overall, the accounts of crimes against children in the FFM report focused on the killings including summary execution of boys as young as eight-year-old, alongside men, maiming of children, and sexual violence against girls.

The UN FFM also recorded multiple accounts of children drowning as they fled.⁵⁹ Near Min Gyi village, for example, numerous Rohingya civilians who tried to swim across a river to escape drowned, particularly children and the elderly, drowned, with witnesses having recalled seeing children's bodies floating downstream after attacks.⁶⁰ In some locations, security forces were reported to have taken infants from their mothers and thrown them into the river, deliberately drowning them; one witness described seeing soldiers throw several babies into the water in this manner.⁶¹ In Kyet Yoe Pyin, witnesses recounted soldiers slitting the throat of a six-year-old boy and stomping a four-year-old boy to death, before throwing the bodies into a burning house.⁶² In Min Gyi, Maungdaw Township, infants were also killed while their mothers were raped and then burned alive.⁶³ Similarly, in Rathedaung Township's Koe Tan Kauk village, survivors described finding the bodies of children among the dead.

The findings of this study align with the UN FFM's documentation of killings and sexual violence, and offer a more comprehensive picture of children's victimisation by analysing the accounts of child survivors themselves across more than forty villages and incorporating the full range of non-lethal harms inflicted upon them (see Sec. IV. on Narratives, below.)

Overall, the violence inflicted on children during the 2017 "clearance operations" must be seen within this broader context of earlier campaigns against Rohingya communities.

2.2. Brief history of Statelessness

Myanmar's legal and policy framework systematically deprives Rohingya children of the basic protections guaranteed under domestic and international law. Although Myanmar ratified the Convention on the Rights of the Child in 1991, it has persistently breached its core obligations and failed to safeguard Rohingya children's fundamental rights to life, security, education, health, protection from exploitation, and nationality.

1982

Citizenship Law

CITIZENSHIP LAW

The 1982 Citizenship Law established a three-tier system – full, associate, and naturalised citizenship – based on proof of ancestry linked to one of 135 officially recognised national races. Rohingya were deliberately excluded from this list, making them ineligible for full citizenship.⁶⁴ As a result, children born to Rohingya since 1982 have been stateless from birth. Without citizenship or formal birth registration, they are denied access to education, healthcare, and other essential public services.⁶⁵

1990s

Birth certificates denied; "White cards" issued to Rohingya (evidence of non-citizenship)

INTERGENERATIONAL STATELESSNESS

Successive administrations used bureaucratic tools to entrench statelessness and erase Rohingya identity.

1994 - Denial of Birth Certificates

From 1994 onward, the government refused to issue birth certificates to Rohingya children, deepening their loss of legal documentation and reinforcing statelessness.⁶⁶ Without these documents, children were unable to obtain proof of identity or access basic services such as schooling and healthcare.⁶⁷

1995 - Temporary Registration Cards "White Cards"

In 1995, the authorities issued temporary registration cards, or "white cards", which did not constitute proof of citizenship and expressly excluded Rohingya from any citizenship rights.⁶⁸ While these cards allowed limited participation in certain aspects of social life, including earlier elections, they were never recognised as citizenship documents.⁶⁹

2015-16

"White Cards" invalidated, NVCs introduced

2015 - National Verification Cards (NVCs)

Shortly before the 2015 general elections,⁷⁰ the government revoked all white cards, officially declaring them invalid for any legal or political use.⁷¹ In many areas, security forces and administrators coerced Rohingya families into surrendering their cards,⁷² warning that failure to comply could result in arrest or loss of what little freedom of movement they had. Numerous instances of Rohingya being coerced by the Myanmar military to accept NVCs – which confer no citizenship rights – have been documented, including during meetings convened by Rakhine administrators and military officials in the weeks preceding the "clearance operations", where Rohingya elders were threatened with mass killings if they refused to accept the cards.⁷³

Through these overlapping laws and administrative restrictions, Myanmar has weaponised its bureaucracy against the Rohingya, turning legal and administrative systems into instruments of exclusion. This has rendered Rohingya children effectively invisible within the state's legal framework, denying them recognition, education, healthcare, and safety, and provides essential context for the assessment of genocide.

2.3. Life of persistent and severe deprivation for Rohingya children in Myanmar

Around 630,000 Rohingya remain in Rakhine State, subjected to systematic violations and severe restrictions on liberty, including roughly 150,000 confined in internally displaced persons camps described as open-air prisons. Approximately 69,000 of those confined – nearly half – are children.⁷⁴ Many have spent their entire lives in conditions of extreme deprivation. The camps are fenced, guarded, and physically segregated from surrounding communities, and children are denied basic freedoms, healthcare, education, and security. These policies have resulted in chronic malnutrition, poor sanitation, stunted growth, and profound psychosocial harm among displaced Rohingya children.⁷⁵

Such policies of enforced segregation and the aforementioned discriminatory laws, regulations, orders, rules involving removal of legal status and erosion of rights of the Rohingya, clearly demonstrates domination by one racial group over another. The crimes against and affecting children presented in the findings in Sec. IV below therefore should be considered as having been committed in the context of maintaining an institutionalised regime of systematic oppression, which as noted by the FFM indicates the commission of the crime of apartheid.⁷⁶ Further, Myanmar authorities have also imposed population control policies on the Rohingya, including restrictions on marriage, childbirth, and family size that were coupled with punitive fines for non-compliance. The discriminatory population control measures imposed and the heavy fines to be paid upon breach, not only violate Rohingya parents' reproductive autonomy but also render many Rohingya children unregistered and undocumented from birth, deepening their statelessness and exclusion.

Overall, Rohingya children in Rakhine State have been systematically denied access to education due to movement restrictions, discriminatory practices, and the absence or inferior quality of available schooling, and these barriers persist today.⁷⁷ Owing to safety concerns, government teachers are hesitant to teach in Rohingya areas.⁷⁸ Additionally, some public schools refuse to admit Rohingya children, and in schools that do accept them, they are often segregated from their peers.⁷⁹ Entrenched discrimination also extends to the curriculum and the placement of schools. Many schools are located far from Rohingya villages, making daily attendance nearly impossible because of travel restrictions and the risk of arrest or violence.⁸⁰

Access to healthcare is equally difficult for Rohingya children.⁸¹ Severe restrictions on freedom of movement impede access to medical care for Rohingya children in Rakhine State, as most healthcare facilities are located outside their designated villages or IDP camps.⁸² Only a handful of primary healthcare providers operate in

the Rohingya area, and mainstream medical systems generally deny their treatment. Night-time curfews in Rakhine State prevent Rohingya families from seeking emergency care for children who are injured or fall ill at night, or mothers who go into labour. Those seeking medical treatment must pass through checkpoints where they are frequently subjected to extortion and the risk of arrest. Families are often forced to pay bribes simply to reach clinics or hospitals.⁸³

Rohingya children in Myanmar continue to face serious harm amid active hostilities since late 2023, including escalating and systematic abuses by the Arakan Army. Newly arrived refugees interviewed by LAW report that Rohingya children have been arbitrarily arrested, forcibly recruited, and used for forced labour by Arakan Army forces. At the same time, the Myanmar military's ongoing transport blockades have pushed Rakhine State to the edge of starvation. Humanitarian access remains severely restricted, and food and medical supplies are critically scarce. As a result, Rohingya children in Rakhine State are disproportionately affected, experiencing acute malnutrition and preventable disease at alarming levels.

2.4. Rohingya Children in refugee camps in Cox's Bazar

After being forcibly expelled from their homes during the 2017 "clearance operations" and deported to Bangladesh, Rohingya children who sought refuge in Cox's Bazar continue to face severe restrictions on their rights to education and healthcare. There are currently 605,107 children living in the refugee camps.⁸⁴ Conditions remain dire: the camps are overcrowded, security risks are high, and children face abductions for ransom, recruitment by Rohingya armed groups, and widespread sexual and gender-based violence against girls.⁸⁵ In the months following their displacement, Médecins Sans Frontières (MSF)⁸⁶ recorded alarmingly high mortality and malnutrition rates among newly arrived Rohingya refugees, noting that young children were dying at levels far exceeding established emergency thresholds.⁸⁷

Although the mortality rate later dropped,⁸⁸ children in the camps still face serious health challenges.⁸⁹ A recent UNICEF report in 2025, documented that 15 per cent of Rohingya children are malnourished and that the number of children needing treatment for severe malnutrition had grown to 27 per cent in just one year.⁹⁰ As recently as 2023, MSF reported that in a population already severely affected by chronic malnutrition – where 40 per cent of children under five are stunted – rates of severe acute malnutrition are rising. This condition carries a significantly higher risk of death when combined with common childhood illnesses that are widespread in the camps.⁹¹ This is occurring amid an acute and worsening funding crisis that has already forced the suspension of education services for more than 300,000 Rohingya children, and now threatens further reductions to health services and food rations, which are already at minimal levels.

3

Methodology

**"THEY
DESTROYED
MY LIFE AND
FUTURE"**

This 10-month research, conducted between November 2024 to August 2025, employed a multidisciplinary qualitative methodology to analyse the psychological and developmental impact of the 2017 “clearance operations” in Myanmar on Rohingya child survivors and witnesses. LAW, working with a team of five child psychologists, one anthropologist, engaged with 86 Rohingya children and youth (32 female, 49 male, and five *hijra* participants) currently residing in the Cox’s Bazar camps. Of these, 71 were survivors who had been between five and seventeen years old during the 2017 operations,⁹² originating from forty-two villages across three townships in northern Rakhine State; the remaining 15 were registered refugees born in the camps. Forty (40) participants subsequently took part in individual psychosocial evaluations.

Among those who presented with physical complaints linked to the 2017 violence in Myanmar, a medical doctor conducted a physical examination which involved review of available medical records, and documentation of current symptoms and functional limitations. The research team also conducted eight focus group discussions and twelve key informant interviews with international gender and child-protection experts, humanitarian practitioners, community teachers, imams, and local CSO/CBO representatives.

Desk Review:

A comprehensive review of 65 key UN and NGO reports, court submissions, relevant judicial decisions, and academic literature was undertaken to analyse existing documentation on crimes committed against Rohingya children in Myanmar, available evidence on mental-health outcomes and longer-term impacts, and the international legal framework and jurisprudence governing atrocity crimes against children.

Research Tools:

Guided by a community-participatory approach, the research design was informed by consultations with child psychologists and LAW’s network of Survivor Advocates⁹³ and benefited from the input of international legal experts and humanitarian actors working with Rohingya children.

Child-competent, trauma-informed Standard Operations Procedures (SOPs) for participant identification and screening were developed, drawing on best practices from international investigative guidance and policies, including those issued by UNITAD⁹⁴ and the ICC.⁹⁵

Data was collected through a semi-structured interview questionnaire developed by the technical team, whose members have expertise in child psychology, psychiatry, and anthropology.

The interviews and FGDs were guided by a theoretical framework built around four core research questions examining:

- (1) **how children and adolescents understood and interpreted the adverse experiences they suffered;**
- (2) **the long-term cognitive, physical, emotional, and social impacts on their development and well-being;**
- (3) **the effects of these experiences on the formation of identity; and**
- (4) **the transgenerational consequences of victimisation, analysed through a life-course approach.**

Participant identification:

Participants aged 13 to 25 who had fled Myanmar as minors (between ages 5 and 17) during the 2017 “clearance operations” were identified by LAW’s network of Survivor Advocates on the basis of their willingness and ability to participate. A second sample consisted of adolescents aged 13 to 17 who were born in the refugee camps in Bangladesh to parents who had fled in earlier waves of displacement and were registered refugees. This second group was included to help distinguish impacts directly attributable to the atrocities witnessed or experienced in Myanmar in 2017 from those arising from the chronic stressors of life in displacement.

Informed consent and screening:

LAW’s legal team conducted the initial meetings with prospective participants to obtain informed consent and, where consent was provided, to undertake screening to document the circumstances of their flight from Myanmar and establish their profile. Following this screening, an in-house MHPSS expert assessed preliminary referral needs and identified any factors that could expose a child to further harm by recounting experiences of violence. These assessments were incorporated into LAW’s determination of participant suitability in accordance with the principle of “Do No Harm.”

For participants under 18 years of age, the LAW team obtained informed consent from both the child and their parent or guardian.⁹⁶ The child’s consent was sought separately, using child-competent procedures to respect their agency and establish trust. All participants – and, where relevant, their parents or guardians – received a referral assessment conducted by LAW’s two in-house MHPSS experts. Additionally, LAW remains in contact with the participants and in particular, followed up on the referrals. The participants also took part in a briefing by LAW to share about the findings of the research that they contributed to.

Interviews and FGDs:

Of the 86 participants screened, 40 were selected for individual interviews based on their direct experiences or witnessing of atrocities in Myanmar. Three psychologists were deployed to Cox’s Bazar to conduct in-person, semi-

structured interviews. Each interview was documented through an individual psychosocial assessment report accompanied by field observations.

TYPE OF INTERVIEW/AGE GROUP	SAMPLING	INTERVIEWS	PARTICIPANTS
Psychosocial interviews with boys (13-17)	Purposive	07	07 boys
Psychosocial interviews with male youth (18-25)	Purposive	06	06 male youth
Psychosocial interviews with girls (13-17)	Purposive	07	07 girls
Psychosocial interviews with female youth (18-25)	Purposive	06	06 female youth
Psychosocial interviews with <i>hijra</i> youth (18-25)	Purposive	04	04 <i>hijra</i>
Psychosocial interviews with registered refugee children (born in the camps)	Randomised	10	05 boys, 05 girls
		TOTAL PARTICIPANTS INTERVIEWED	40 (18 m, 18 f, 4 <i>hijra</i> individuals)
Overall Screenings (13-25)	Semi-randomised	86	25 boys, 21 girls, 24 male youth, 11 female youth and 5 <i>hijra</i>
FGDs	Semi-randomised	65	22 boys, 17 girls, 9 female youth, 27 male youth

Overall, a team of ten interpreters supported the screenings, interviews, and focus group discussions. All interpreters were highly familiar with the Chittagonian or Rohingya languages and had prior experience working with Rohingya communities, including with vulnerable groups.

Analysis:

A thematic and descriptive analytical approach was used to identify patterns in participants’ accounts. Data coding of the individual psychosocial assessment reports was conducted using Atlas.ti software, supplemented by insights from the focus group discussions. These findings were integrated with the technical team’s clinical analysis and informed by key informant interviews with multiple stakeholders to support validation and triangulation. LAW’s legal team then conducted a legal assessment of the consolidated findings in relation to the crime of genocide.

Limitations:

- The sample size and qualitative methodology, while appropriate for generating an in-depth understanding of participants’ subjective experiences, limit the statistical generalisability of the findings.
- The number of interviews conducted was constrained by challenges in participant identification. Survivor Advocates had to provide counselling to address

concerns about safety, cultural barriers, particularly for girls, and to build the trust necessary to ensure confidentiality and anonymity.

- Participants were subject to movement restrictions within the camps, and some were unable to attend interviews due to security concerns.
- Burden of proof: During the screening phase, survivors and parents or guardians were not interviewed using evidentiary standards required for criminal proceedings, and full witness statements were not taken. This reflected the purpose of the research, which was to understand long-term physical and mental health impacts rather than to collect testimonial evidence for litigation.
- Medical examination: Forensic dating of the injuries was not attempted due to low-resource setting. Medical examination of those presenting with physical complaints was a medically informed interpretation of current symptoms and long-term consequences. It included temporal verification through the physical presentation of mature scars, deformities, chronic pain and long-standing functional deficits. The attribution of the injuries to the 2017 “clearance operations” was based on medical plausibility and alignment between the survivor’s account and the clinical characteristics of the injury.

4

Findings: Child-Specific Narratives of the 2017 “clearance operations”

**“THEY TOOK
MY SISTER,
AND I NEVER
SAW HER
AGAIN”**

Key international justice and accountability mechanisms have been clear that Rohingya children suffered killings, maiming, drownings, and sexual violence. This is noted in the investigations of the UN FFM, mainly reflected in the adult survivors' testimonies (as detailed in Sec. II, above). Further, reports by humanitarian actors (based on derivative studies) have provided age-disaggregated data in relation to killings (of those under five) and displacement of Rohingya children during the 2017 "clearance operations."⁹⁷ Research surveys have also documented the mental health outcomes observed among Rohingya refugees exposed to systemic atrocities and violations in Myanmar.⁹⁸ The documentation efforts so far, however, have largely overlooked: (1) the full extent of crimes against and affecting children committed based on children's own accounts, particularly through non-lethal conduct, and (2) the distinct psychological and developmental suffering for the children in particular who survived the violence. 2017 "clearance operations."

The limited attention to the plight of children in international accountability mechanisms is not unique to the Rohingya context and has existed across multiple international and hybrid courts in the past.⁹⁹ The reasons for lack of focus on crimes against children in the indictments or trials, has been noted to be due to the scale of the crimes, which makes it challenging for investigators and prosecutors to reveal the nuanced extent of children's experiences. Children have been largely construed as passive subjects of protection and the investigators and prosecutors are less inclined both to interview children and to rely on their testimonies, and even on those of adults testifying about events they witnessed as children, as they may not consider children credible.¹⁰⁰

Nevertheless, international criminal law jurisprudence has been progressing toward overcoming this gap by depicting how children often become intentional targets of atrocity crimes. This report's factual findings, detailed below, build on the existing references to Rohingya children within the key investigative reports and legal submissions/judicial decisions thus far and provide a more holistic portrayal of their victimisation. By adopting a child-sensitive lens, LAW documented the following recurring categories of acts against and affecting children during and in the months-long build up to the 2017 "clearance operations." The information is based on accounts of the 71 individuals belonging to 42 villages in the northern Rakhine State, who were screened for the research:

Experiencing physical harm:

Many participants described sustaining gunshot wounds to their ears, arms, and legs, or being beaten, stabbed, and physically attacked by weapons such as guns, rods, and knives. At least 14 participants experienced such physical violence at the hands of the military (often accompanied by Rakhine militias or civilian vigilante groups who were armed with long knives, collectively referred to as *Mogb* by the participants), either while they were in their

homes, schools, or mosques during the military's attack on their village, or during their flight to Bangladesh through the multiple villages, hills, and forests when they were confronted by the military or other security forces. Participants who experienced gunshot wounds emphasised distinctly how it was unbearable to flee to Bangladesh due to their untreated injuries and severe bleeding at the time. In a few instances, these child survivors were believed by their families to have died, were found by villagers, and only later able to reunite with their families.

A participant who was 10 years old during the 2017 "clearance operations" was shot in her left leg during the attack on her village and as her house was set on fire; she underwent multiple surgeries in Bangladesh and suffers from a permanent disability. A male participant, who was 17 at the time, was shot in his left eye while in his house during the attack on the village as military soldiers entered people's homes. He lost consciousness and regained his senses two days later in Bangladesh. It is clear from the accounts that the military did not distinguish between the children and adults once they surrounded the villages and began their door-to-door attacks, let alone distinguish between civilians and the purported ARSA fighters.

In many cases children were deliberately attacked in their homes alongside their parents and grandparents while trying to protect their families or while trying to protect themselves from being killed. A male participant, aged nine at the time of the violence, recounted that soldiers attempted to cut his head with a knife; as he raised his arm to shield himself, the blade struck his hand, leaving a permanent scar. Another male participant, aged eight at the time, showed scars on his forehead where military soldiers struck him with a gun. Notably, children were among those abducted from their homes during the operations in some villages as well (discussed below). One such female participant, 16-years-old at the time, was abducted from her home, detained for seven days, and shot in her arm while she tried to escape captivity.

Others described how they were shot while trying to hide, mostly in the fields outside their homes at the time of the attacks, only later realising that they had been shot and were bleeding; two such participants lost their fingers. These participants did not realise they were shot as they were in a state of shock during the attacks; while hiding, they had helplessly witnessed their parents, family, relatives, and friends being shot dead and being thrown onto piles to be burnt. Children were further subjected to brutal acts of physical and sexual violence against themselves or while their mother or other female relatives were being raped or had interfered as much by hearing the screams and cries of their relatives. LAW met one survivor, aged 14 during the attacks, who described how soldiers inserted a metal rod into her knee as she was being gang-raped, rendering her unable to walk to the border to flee, so villagers had to carry her. Another 16-year-old girl, aged only eight during the attacks, said

she had screamed when military soldiers were trying to rape her mother and they struck her on her head to silence her. These acts of violence against children resulted in the loss of body parts, other disabilities, recurring infections, and chronic pain. The participants who shared with LAW their accounts of physical violence were examined by a medical doctor and the nature and causes of their injuries were verified (see Annex I below).

Witnessing killings:

Over 40 per cent of the survivors of the 2017 “clearance operations” who participated in this research, directly witnessed the killing of at least one of their immediate family members. At least six participants lost both their parents.¹⁰¹ Children recounted being separated from their family especially under gunfire or while crossing rivers, which made their flight particularly arduous and cumbersome. While in some cases, children who were separated from their parents while fleeing managed to reunite with their immediate family in the camps in Cox’s Bazar (they came along with the villagers), in other cases, they could not reunite with their family at all and to date are unaware of their parents’ fate or whereabouts.

For instance, one 16-year-old-female participant, who is currently living with her aunt in the camps, recalled that during the attack, *“I got separated. I was trying to flee, I wanted to cross the river, but it was very deep, and very hard, I don’t know how to swim. I almost drowned. Some villagers helped me and saved me, and we went inside the forest to hide.”*¹⁰²

Participants witnessed the killings of their family members including fathers, brothers, mothers, grandparents, siblings, and even infants, committed predominantly by the military, and in some cases accompanied by the *Mogh*. They saw their families being shot, beheaded, or thrown alive into rivers and left to drown. Many often described witnessing the violent killing of their family while their parents or older siblings were trying to protect them – children described with pervasive guilt how their fathers or brothers were shot at while trying to shield and protect them. For instance, a 14-year-old female participant described: *“my father was trying to protect us, and he was holding me. He was also carrying my brother by hand. My father fell down after he was shot and my brother died.”*¹⁰³ She, too, had been shot by a bullet and fell when her father was killed. Another participant, a 23-year-old female, recounted that her brother-in-law bled to death after being shot while holding his child close to his chest in an effort to keep him safe.¹⁰⁴

Further, nearly 60 per cent of all participants witnessed killing of extended family or other members of the Rohingya community. Children witnessed people being shot, stabbed, beheaded, and burnt alive trapped inside houses that had been set on fire. Some others recalled seeing infants and young children being killed and their bodies being discarded into a river or thrown into fires. Among the participants in this study who witnessed the murder

of their immediate family, relatives, and other community members, the vast majority – 73 per cent – witnessed children being violently killed including their own siblings and their infants (in case of minor mothers), across ages ranging from as young as few days old to adolescents. These children were either shot to death, stabbed, or kicked to death, or thrown into fire or rivers by the Myanmar military accompanied by the Rakhine civilians, or in some cases burnt while trapped in homes in the village. Overall, nearly all 71 “clearance operations” survivors from 42 villages narrated witnessing murder, with consistent patterns in the methods used across all three townships. Moreover, the vast majority vividly described witnessing dismembered dead bodies, men beheaded, mutilated, and thrown into rivers, the burnt bodies of women including those who were visibly pregnant at the time with wounds to their abdomen, and corpses left unburied or floating in rivers. Participants encountered corpses not only in their respective villages but also in villages located along their flight path to Bangladesh.

Experiencing sexual violence and sexualised enslavement:

LAW met with several participants who faced sexual violence at the hands of the military during attacks in 2017. These acts included rape and gang rape, often accompanied by other acts of a sexual nature including forced nudity, forced touching, kissing and pressing of breasts. These incidents occurred inside homes, village compounds, and detention sites/military camps.

Brutal incidents of sexual violence involving multiple perpetrators spanning days and, in some cases, across gender identities, often took place following the arbitrary arrest of the survivors, during periods of confinement in detention settings. Such acts caused severe physical and mental anguish, in acts amounting to torture. Survivors were further subjected to repeated incidents of sexual violence under conditions of ownership-like control, including deprivation of liberty, coercion, and the inability to leave, further amounting to sexualised enslavement. A female participant, then aged 17, described how five military soldiers entered her home and killed her mother and brother who tried to help her. She and her sister were taken to a site where many other girls were being held. There, her sister and several other girls were shot dead, while she was raped repeatedly:

“I was raped by three men on different intervals. While the fourth military man was about to come and rape me, I escaped, this military man was not vigilant as he was on nesha (substance). I ran through the mora (jungle), until I reached the next village where I met a maternal cousin.”¹⁰⁵

One hijra survivor, a 15-year-old then who presented as a boy as a child, was abducted and detained while

trying to flee the village with her mother during the “clearance operations.” She believes she was targeted by the police as she and her mother had previously visited the *kachabri* (local dispute resolution forum) to enquire about status of her father’s detention by the police. During her detention, she was gangraped in custody: *“They did to us what they do to women... they took us inside a room and did those terrible things. There were 5 people. If we wanted to cry or made a sound they shoved their guns inside our mouths. They came to us one after another... They used their penis and inserted into our mouth and anus. If we did not let them do those things, then they would stomp us with their boots and hit us with their guns.”*¹⁰⁶ Though she managed to escape and reunite with her mother, she is to date unaware of the fate or whereabouts of her father.

Another *bijra* participant, then aged 13 years old, was picked up alongside at least 10 to 15 girls during the attack on her village, and gangraped by military soldiers in detention for

three days, and then left her for dead. *“They captured me and put me in a room. There were 10-15 more girls. They raped us. There were 15-20 military men raping us. 7 military men raped me individually one by one. They used to beat us up if we resisted or cried. They beat, punched, and kicked me. I was almost dead after 3 days. When I could not move, they took me back to my house and threw my body in the yard.”*¹⁰⁷

More broadly, participants recalled how detention was the norm for the Rohingya, especially for boys and young men. When the military would walk past their houses, they would round up all the boys and young men, sometimes for no other purpose than to force them sit in sun the entire day. This resulted in boys living in fear of the military; several participants LAW met with reported that, since 2012 and more frequently, 2016 onwards, they felt compelled to hide inside their homes or run away into the forests or to farms upon seeing the military even passing by.

“I have seven brothers and sisters. I was married when I was very young. My husband was only 18 years old when he was killed eight years ago in Myanmar. We were only married for less than a year. My father married me and my sister off early because he wanted to protect us from being raped. But still, the military came. When the violence happened in our village, one of my sisters was severely beaten and injured. One of my brothers was also beaten severely, and now he has mental health problems.

I was raped. I was injured. I still have scars on my leg and arm. It happened in my home. My brother saw it and tried to protect me, and because of that, they beat him very badly. They took my clothes; I was left naked. My sister was raped at the same time, and her husband was killed trying to save her. He was beheaded. My sister survived but she became almost disabled.

My parents were also beaten. My father was badly injured; they hit him in his private parts, and he still suffers when he goes to the toilet. My mother was beaten on her head and body and later lost most of her eyesight. She was older, so they did not rape her, but she begged them to rape her instead of her daughters. They refused and beat her anyway. She now has many health problems and gets sick whenever she remembers what happened in 2017.

I still remember seeing other women being raped and killed. I saw with my own eyes when the militaries cut the breasts of women and killed them with knives. They slaughtered them like animals. My husband tried to protect me, but the military tied his hands and shot him dead in front of me. We managed to escape by fleeing into to an area with bamboo trees to hide. My mother gave us medicine because we were raped. Some girls became pregnant, but we took medicine and did not. My brother, who witnessed the rape, and was severely beaten for trying to protect us, is still mentally unwell. He hurts himself, breaks things, and sometimes disappears from home. He cannot work or take care of himself.

Still, I cannot sleep well. I have nightmares about rapes.”¹⁰⁸

Witnessing sexual violence:

Participants in this study narrated at least 23 instances of directly witnessing sexual violence¹⁰⁹ at the hands of military and other security forces, as well as by *Mogh* members against their female relatives, including mothers, sisters, cousins, and aunts, and other community members. This included rape, attempted rape, and other acts of sexual violence including forced nudity, groping, and biting. All of these instances occurred directly in front of them, in homes, and village compounds. Several others described having to watch their mothers or other female relatives or villagers being tied up and forcibly taken away, and later returning from

military camps/outposts, detention sites, looking visibly shaken and deeply traumatised. These instances occurred across villages in all three townships such as Tula Toli, Shudapara and Lalboinna in Maungdaw; Nakkindoung, Pondo Prang, Monibil, Borfara, Taimmakhali and Taung Bazar in Buthidaung; and Chut Pyin in Rathedaung. Participants from Chut Pyin particularly described witnessing the rape of pregnant women. For instance, a participant witnessed women being separated and taken into a room: *“I saw a woman being raped. She was physically injured, she was burnt. I saw that with my own eyes.”*¹¹⁰

The fact that women and girls were raped in front of their family including children or taken away to be raped in premises near their children, is corroborated by LAW's 2023 study with SGBV survivors. Participants in LAW's 2023 study spoke about their children witnessing their rape, and how it impacted their children, including through reversal of the caretaking role between the parent and child. It further affected their own physical and/or psychological ability to support the healthy early development of their children.¹¹¹

Disappearance of family:

Participants described how their fathers, brothers, or brothers-in-law were taken by the military at the time of the attack in their villages, and never returned. This left families unaware of the fate or whereabouts of the men, and particularly vulnerable without the primary breadwinners or heads of household.

For instance, a 23-year-old *bijra* participant's father was taken by the military after they called in the villagers for what was described as a meeting. The participant explained, *"The militaries called us and said there was "a meeting" in the village. So my father went alone. But they took him away, they detained him; he never came back. We waited again, hoping that my father would show up. But after a few days, we couldn't wait any longer, we had to leave because we were too scared."*¹¹²

Another participant recounted, *"The military came to my village at around noon and started taking people out to the military camp, that day; They took around 100 men, and my father was among them. Until now I do not know if my father has been killed or not."*¹¹³

Similarly, a third participant described, *"The husbands of two of my sisters were killed in Burma. They were detained in front of me and were taken away. They did not come back. It means that they were killed. If they had fled, we would have heard from them."*¹¹⁴ Less frequently, female family members also disappeared during the military operations. For example, a participant witnessed her teenage sister taken away by the military, and presumed she had been killed: *"My sister was about 15-years-old. They took her to the military camp and I never saw her again."*¹¹⁵

Rohingya children's accounts of witnessing the killings and enforced disappearances of their family members, in particular their parents, were translated during the interviews into distinct narratives of how they had to bear forced separation from their family absent any fault of their own, save for their identity as Rohingya Muslims. The pervasive impact of these experiences on child-survivors was explored in detail, as discussed in Sec. V.

Destruction of homes and communal sites:

Participants consistently recounted the destruction of homes during the attacks. Villages were stormed into, with houses set on fire and "reduced to ashes."

Children described bombs and petrol being used to burn down homes. At least 23 participants shared that they witnessed their own houses destroyed, while others recalled seeing neighbourhoods, mosques, and schools engulfed in flames. Several raised that the military set fire to houses, sometimes after killing the residents or once people had fled. In other cases, people were locked inside before their homes were set on fire.

Many participants in the research distinctly recounted how mosques were destroyed, religious leaders executed, and prayers banned in Myanmar. This reinforces the understanding of the root causes of the Rohingya crisis, i.e., religious discrimination was central to the violence and atrocities committed during the 2017 "clearance operations."

Conditions during flight:

All participants emphasised that they were forced to flee in extremely perilous conditions. In some cases, the journey took as long as 15 days and children crossed several villages along with their families or with others in the community, where they witnessed death and destruction along the way. Notably, a few participants mentioned that they witnessed naked bodies of women who had been mutilated, especially in their breasts and genitalia while crossing the destroyed villages. For participants who were shot and bleeding, the journey with untreated injuries was unbearably difficult and they had to be carried and often collapsed or were unconscious for most part of it. At least one survivor noted that the others in the community did not want to flee alongside her and her family as it was believed that the military was killing those with gunshot wounds as well as that victim's entire family if they spotted them. Children further suffered from severe food and water shortages, hunger, dehydration, and illness during journeys through forests, hills, and rivers. Their condition during flight was often so miserable that some reported that their families considered collective suicide, "accepting" that their fate was to die.

Several people reported being stopped by the military, security forces, ethnic militias, or civilian vigilante groups (known locally as *Mogh*). During these encounters, any food they carried was confiscated and their belongings were extorted, if they had not already been looted or burned during the attack on their village. Many described being forced to sit without food or water for up to three days.

When the military or security forces intercepted them, it was frequently reported that girls and young women were taken away. All the children LAW spoke with who eventually reached Bangladesh had done so only because they and their families found moments to escape. They did not know what happened to the people left behind, including the girls and young women who were taken.

5

Psychosocial and Developmental Impact



"I FEEL GUILTY

I AM ALIVE"

The cumulative exposure to violence during critical stages of childhood (between 5 to 17 years of age) has led to profound and layered harm among Rohingya children and youth in the camps (currently between 13 and 24 years of age), extending across their emotional, cognitive, and social development dimensions. The expressions of existential grief, confusion, shame, and hopelessness among Rohingya children and youth reveal symptoms that extend far beyond isolated instances of individual

psychological harm. The consistent patterns of harm observed among the child survivors reveal observable traces of disrupted sense of self and future, and the dismantling of the social, cultural, and psychological foundations of the Rohingya group, essential to child development and community continuity – thereby constituting a prolonged and systemic process of collective psychosocial destruction.¹¹⁶

Key Findings

1. Rohingya children have interpreted and internalised the 2017 “clearance operations” by the Myanmar military as the intentional dismantling of their world.

Children perceive the violence they experienced beyond physical violence – as dehumanisation, violations of their core belief system, and irreparable disruption to their daily lives and an existential threat.

2. Multiple core areas of Rohingya children’s development have been severely impacted.

The most affected domains include:

- Cognitive development: difficulties with memory, concentration, and learning.
- Emotional regulation: disproportionate emotional responses, withdrawal, and dissociation.
- Social integration: mistrust, isolation, and disrupted peer relationships, particularly observed among orphans.

3. Strong evidence of complex trauma which has long-term consequences, and demonstrates the intensity of the violence Rohingya children were exposed to.

Signs of trauma observed among Rohingya children such as anxiety, depression, intrusive thoughts, and flashbacks, are tied to their experiences in Myanmar, particularly the loss of their family members and the expulsion from their home country. They are also confronted with the profound deterioration of social and family ties linked to the systematic destruction of their immediate and wider social environment. All these elements interfere with their ability to live healthy and meaningful lives.

4. Rohingya children who faced physical violence at the hands of the Myanmar military experience disabilities, improperly healed wounds, recurring infections, and chronic pain; beyond the physical burden, this serves as a source of emotional distress deepening their isolation.

5. Child-survivors and witnesses also face psychosomatic symptoms triggered due to intrusive memories of experiences in Myanmar.

6. The acts perpetrated against and affecting Rohingya children during the 2017 atrocities damaged their identity formation.

Children experienced a forced disconnect from a stable sense of self during critical life stages due to internalisation of the rejection and exclusion imposed by the Myanmar military. The targeting of the Rohingya’s communal life (e.g., places of worship, homes, schools) coupled with forced separations or witnessing the death or disappearance of family, shattered traditional sources of protection and belonging, resulting in the loss of cultural continuity.

7. Intergenerational transmission of trauma and silence perpetuates emotional suffering and inherited despair.

The rupture of parent-child relationships, often marked by silence, grief, and emotional unavailability, places children in a position of absorbing unprocessed pain. This dynamic has created a cycle of emotional burden, where trauma is passed down through parent-child role shifts, and unspoken fears rather than only through direct narratives, compounding the trauma of the violence itself.

8. Coping strategies expressed by children reveal both survival mechanisms and traces of the trauma endured.

The narratives around participants’ resilience, manifested in expressions of faith, solidarity, and educational aspirations, is not evidence of recovery, but rather signals the magnitude of loss and moral collapse, and the symbolic existential protest among survivors.

9. Experiencing the 2017 “clearance operations” as a child is directly linked to severe psychological impact.

Camp-born children better retained psychological foundations compared to 2017 child-survivors. Evident trauma symptoms – such as pain, secondary trauma, and emotional dysregulation – coexisted with underlying resilience. Pre-2017 stability, including parental support and school access, bolstered cognitive abilities and individuality, enabling vitality absent in direct survivors.

Underlying Data

- The psychosocial evaluation of 30 child-survivors of the 2017 “clearance operations” belonging to 20 villages across the northern Rakhine State in Myanmar, by a team of clinical psychologists in Cox’s Bazar, forms the basis of the clinical findings of this research. An additional 10 children born in the camps were evaluated to serve as a “control group” to evaluate the connection between serious long-term impacts and the conduct of the Myanmar military against 2017 survivors, notwithstanding the daily stressors of camp life (see Sec. II on Methodology).
- In addition, a medical doctor met with the survivors who directly experienced physical violence to study their injuries.

Analytical Framework

- The analysis by the experts (the team of five psychologists and an anthropologist) presented in this research draws on the integrated life course approach and developmental psychology framework, to document how children and youth have experienced, internalised, and interpreted the traumatic events they witnessed or endured as minors, and how these events have altered their developmental trajectories.
- The impact was studied across four key domains: (1) subjective perception of the adverse experiences; (2) psychosocial and developmental impacts; (3) identity and belonging; and (4) intergenerational impact.
- The findings were triangulated with existing clinical constructs such as “complex trauma,” “moral injury,” and transgenerational transmission of distress, and interpreted through established developmental psychology theories,¹¹⁷ ensuring conceptual rigor and coherence.

Age-differential impact

Participants were disaggregated into three age cohorts based on their age at the time of the atrocities in Myanmar in 2017 and their current age at the time of data collection (2025):

Current age	Incident age
13-15	5-7
16-19	8-11
20-25	12-17

This developmental segmentation enabled the analysis to reveal the age-specific psychological and emotional responses to trauma, as well as the differential long-term consequences observed among these cohorts. Notably, the youngest cohort (13-15 years-old) often described

disrupted memory, confusion, and attachment trauma; the middle group (16-19 years-old) displayed emotional dysregulation, and intensified guilt and “moral injury” from perceived inaction, and the oldest cohort (20-24 years-old) reflected existential grief, despair and acute psychosocial dislocation. (For more details on Differential Impact in Early and Middle Childhood, see Annex II.)

5.1. Meaning and Perception of Adverse Experiences among Rohingya Children

Children actively engage in making sense of the violence and atrocities they are exposed to, rather than being passive subjects. They attribute meaning to their experiences, often in ways that compound their trauma.¹¹⁸

Rohingya children and youth perceive their experiences in Myanmar not only as external events but as profound personal and moral ruptures.

Participants recounted surviving mass killings including by hiding under dead bodies, witnessing the killing of their own family, experiencing physical or sexual violence themselves or witnessing it brutally inflicted against their immediate family, the destruction of their homes, villages, and religious sites, and the unbearable conditions in which they fled to Bangladesh – they consistently interpreted these experiences as irreparably disrupting their current lives.

Sadness, fear, and social withdrawal:

- Most participants reported persistent sadness, “*Everyday my heart is aching*”¹¹⁹ and “*I feel sad because many people were killed, I lost my two uncles...*”¹²⁰ The sadness and grief is tied to memories of the loss of loved ones and former life. “*The killing of my family members, burning of our houses and forcing us to move out of our country will stay with us for a long time. This pain will stay with us for years as we frequently experience flashbacks.*”¹²¹ Participants also described fear and distress in response to loud noises, in some cases a fear of impending danger and hypervigilance, isolation from peers, and withdrawal from daily life.

Guilt:

- Many younger participants described an overwhelming helplessness during attacks, later accompanied by feelings of guilt over being unable to save others. Girls who survived sexual violence internalised deep shame, compounding their trauma. Psychologists note that these survivors show signs of “moral injury,” a newer concept in trauma research. The concept of moral injury refers to the psychological impact of witnessing or being unable to stop acts that violate one’s moral code and the collective sense of justice adding to their trauma.

A 15-years-old boy who witnessed his brother being shot by military while holding his brother's hand states *"Maybe I did not protect him enough."*¹²²

"I feel guilty that I am alive, and my brothers and sister are dead."¹²³

Anger and frustration:

- Anger and frustration were also commonly shared, mainly reflecting a sense of injustice and desire for empowerment. *"They killed my people for nothing... One day Allah will punish them"*,¹²⁴ and *"I feel angry with the military...sometimes I wish I were a boy to go and fight them."*¹²⁵ These emotional burdens also shaped participants' sense of identity and future.

Overall, participants' own narratives of their emotional and psychological responses crucially reveal that children's developing minds interpret the 2017 events as the intentional dismantling of their world. Their testimonies reflect a deep violation of their beliefs and human dignity. Expressions such as *"they wanted to erase us"*; or *"they wanted to destroy our community. I don't understand why,"*¹²⁶ show how children internalised the violence as dehumanization and existential threat, not just victimization.

Notably, some participants in the research distinctly recounted how the mosques were destroyed, religious leaders executed, and prayers banned in Myanmar; these participants understood such acts as specifically targeted against them because of their religion, in that they wanted to wipe them out simply for what they are.

5.2. Long-term impacts on the cognitive, physical, emotional, social development and well-being of children and adolescents

Exposure to the 2017 atrocities has caused profound, lasting harm to Rohingya children and adolescents, altering their neurobiological development,¹²⁷ and producing complex trauma which affects every domain of life and interferes with their ability to live healthy and meaningful lives. On-going displacement severely limits their ability to recover.

5.2.1 Physical health:

Three sources of information were considered to understand the impact on physical health among the participants: 1) Health problems due to direct violence experienced, 2) Physical symptoms that are part of psychological harm (also known as somatic symptoms), 3) Health problems associated with particular diseases.

For some participants, physical injuries linked to gunshot wounds, severe beatings, and sexual violence have led to disabilities that impact their ability to engage in education, work, daily activities, and everyday tasks such as going to the bathroom. Some mentioned long-term issues with pain management, infections, and muscle weakness. Others shared that they did not receive adequate medical treatment following their injuries, leading to complications such as infections and improperly healed wounds. For many, the on-going pain is not just a physical burden but also a source of emotional distress, deepening feelings of isolation, and helplessness. The medical doctor upon physical examination verified all injuries reported during the research and concluded a range of long-term impact on the survivors including long-term functional disability. (Annex I)

An 18-year-old woman who was shot in her leg by the military], noted

"I feel constant pain in my leg, the bullet affected my bones which makes me have continuous pain in my leg. I also feel sad; I am in and out of hospital due the frequent infections in my leg. I cannot go to school and some people bully me because of my disability."¹²⁸

Respondents frequently described symptoms such as headaches, dizziness, loss of appetite, heart palpitations, and fatigue. These physical reactions would emerge during moments of deep sadness or anxiety, often triggered by memories of violent events, and of family members who were killed. The testimonies highlighted the connection between emotional distress and physical pain.

A 14 year-old-boy who witnessed his mother and grandmother get shot dead notes,

"[One] day I almost fainted, I was doing things in the house and was thinking about my mother and father, my whole body started sweating and my heart moving fast."¹²⁹

Some respondents mentioned chronic health issues such as tuberculosis, and persistent infections, which have been exacerbated by poor living conditions in the camps and lack of access to medical care. Respiratory issues, chronic pain, and untreated reproductive health problems were also frequently mentioned.

5.2.2 Cognitive functioning:

Participants frequently reported challenges with memory, concentration, and learning. Respondents often described how thinking about family members who were killed, or recalling scenes of violence led to lapses in memory and confusion. Several respondents consistently described difficulty concentrating or focussing in school

or while performing tasks, difficulties in retaining school lessons or recalling recent information during social interactions. Many cited intrusive thoughts, nightmares, and flashbacks as primary reasons for their inability to focus and memory.

A 17-year-old boy says,

“When I remember how they cut my hand and killed many people in my village, I cannot concentrate on learning things in Madrassa (school)...I find it difficult to study. Yesterday in school, I remembered my uncles and those killed. I was thinking how they were feeling when they were being killed, ‘did they get scared’? I was thinking about this and could not finish studying.”¹³⁰

5.2.3 Emotional regulation issues:

Many children and adolescents evinced patterns of emotional dysregulation owing to their traumatic history. Most frequently observed were loss of emotional control, disproportionate and exaggerated emotional responses, outbursts of anger, chronic anxiety, depression, emotional numbness, and self-harm. Other less reported emotional regulation issues included feelings of confusion, mood swings and suicidal ideation.

Many other participants described themselves as short-tempered and shared difficulties controlling anger, managing emotional outbursts, and responding to stress – all of which they linked to their experiences in Myanmar, of the uprooting and the loss, that has led to bleak prospects for future.

One 24-year-old woman who faced sexual violence, witnessed her husband’s killing and had her family attacked explains about her brother,

“He cannot express himself and talks differently and hits himself... He breaks things at home; he breaks plates and dishes at home it is very hard for my family”¹³¹

A 19-year-old man who lost his brother in Myanmar notes,

“I feel angry and confused at the same time as I keep questioning why they are only targeting my community and not other communities in Myanmar. This anger sometimes makes me react aggressively towards others, making it hard for me to maintain friendships.”¹³²

Some participants reported that the fear of these strong emotions would cause them to withdraw from social interactions as a means of managing their emotions, resulting in feelings of loneliness or contributing to strained relationships with family and peers.

5.2.4 Social integration:

The children and adolescent participants showed a high proportion of social avoidance and a tendency to isolate. For instance, a 19-year-old youth whose two brothers were killed by the military mentioned that he isolates himself from his family because he does not want them to see him in distress. He prefers to be alone when memories return, as he feels it is safer to process alone. Another 19-year-old who faced violent events during which he lost his two brothers and several relatives noted, *“I feel better when I am alone”¹³³*

Among all the participants who engaged in this research, no less than 19 lost at least one of their parents in 2017 and at least six were orphaned due the events of 2017. A further six lost at least one of their parents in the camps. These participants across gender particularly expressed unbearable pain for losing their parent(s) in the circumstances that they did and a deep sense of hopelessness; many shared instances of bullying, difficult relationships with their peers, and the belief that they are stigmatised within the community for being orphans. One 15-year-old boy who lost his parents and siblings noted,

“When I think about my family, I go to a corner and stay alone. I separate myself from other people.”¹³⁴

One 14-year-old boy who witnessed the killing of his parents, two brothers and two sisters, noted:

“People (children) say that I don’t have good food because I don’t have parents. Some mock me. I don’t have close friends. I never had any kind of close relationship.”¹³⁵

A 20-year-old *hijra* who faced sexual violence explained,

“But the most painful is my father’s disappearance. I miss him so much. And I don’t know what happened to him exactly. We never got to know each other. We don’t know how he died. And that is the most painful for me.”¹³⁶

5.2.5 Complex Trauma:

Complex trauma refers to a type of trauma that occurs repeatedly and cumulatively, usually over a period within specific relationships and contexts. The term came into being over the past decade as researchers found that some forms of trauma were much more pervasive and complicated than others. Complex trauma encompasses feelings of depression, anxiety, behavioural issues and emotional regulation problems; its genesis occurs at a sensitive stage of development and is the result of exposure to an extreme experience that involves imminent threat of harm.

Strong evidence of intrusive memories, also known as flashbacks – a common symptom of post-traumatic stress disorder (PTSD) – was observed in many of the participating children and adolescents demonstrating the intensity of the devastating effect of the experiences of violence they faced or witnessed. When they recalled traumatic experiences, feelings of depression were accompanied by anxiety and fear and, in many cases general distress, and physiological reactions such as increased heart rate, apprehension, trembling, headaches, and nausea. They use the word “*ashanti*”¹³⁷ often to express these feelings.

A 14-year-old boy who witnessed his mother and grandmother being shot and killed noted,

“I cannot think about good things. I always think about my mother and father. I want to think about other things, but it is hard. My head is thinking about the shooting of my mother and father in front of my eyes”¹³⁸

One 20-year-old *hijra* who was detained and suffered severe physical injury, and sexual violence explains,

“I have a lot of nightmares. I have dreams of my father being tortured, being dismembered in front of me... I am just standing, and I cannot move”¹³⁹

“I have bad images coming all the time... The smell of my wounds. The struggles of the journey.”¹⁴⁰

A distinct feature of participants’ testimonies in this study is the witnessing of atrocities. Many children saw family members attacked, killed, or raped, which left deep psychological scars. As noted in the previous section relating to moral injury, witnesses described feeling guilt and helplessness: *“I felt very ashamed when the military raped my cousin sister in front of me, it was very embarrassing.”*¹⁴¹ ; *“If I was older, I would have attacked them,”*¹⁴² said a 16-year-old boy whose father and brother were both shot and killed in front of him. The psychologists concluded it was evident that the

participants show severe symptoms of complex trauma, and that these symptoms are the result of witnessing high-intensity situations involving systematic violence and atrocities.

5.2.6 Cumulative Trauma and Development Disruption:

The violations and atrocities suffered by the child-survivors interviewed in this research, form a continuum of traumatic adversity that includes the conditions in Myanmar prior to the 2017 “clearance operations,” flight from Myanmar, life in displacement, insecurity in camps, and loss of community networks. According to studies in Rwanda and Cambodia, such cumulative experiences are associated with persistent emotional distress and impaired cognitive and social development.¹⁴³

Before 2017, the Rohingya had already lived and endured under structural oppression in Myanmar: they lacked citizenship and faced systematic discrimination resulting in the denial of proper education and healthcare. Many were impoverished and food-insecure even before the 2017 crisis, and some girls were forcibly married off early to protect them from rape by the Myanmar military and security forces. These factors meant communities had limited resources and were highly vulnerable when the “clearance operations” wave of violence began.

As noted, the flight to Bangladesh itself was deeply traumatic. Participants described harrowing treks through jungles, and river crossings. Along the way, families suffered further losses: children died from illness and hunger, and participants shared accounts of abductions or rapes during flight. These experiences further instilled fear and helplessness even before the arrival at the camps.

Upon arrival, camp life introduced new stressors that reactivated trauma. Overcrowded, “prison-like” conditions provoked constant anxiety among the participants. Education is extremely limited, and many youths have dropped out due to poor schooling. Of critical concern is the insecurity within camps. Participants reported widespread kidnapping, extortion, and violence. For instance, one 24-year-old youth disclosed: *“I was kidnapped in December 2024. They beat me, tried to rape me... my family had to pay with the ration card.”*¹⁴⁴ Another said kidnappers attempted to force him into a criminal gang. These on-going threats mean that even in “refuge,” children live in fear: *“There are a lot of kidnappings...if you don’t pay the ransom, they kill you.”*¹⁴⁵ Such chronic insecurity in the refugee environment compounds trauma.

Access to services such as education, food, healthcare, shelter, and psychological support, is crucial for the well-being of children affected by any kind of extreme violence; it provides them with the essential resources and support to recover from trauma and rebuild their lives. These services and their safety are vital for their physical and mental health, development, and futures. The forced displacement and deportation by the Myanmar military



have left Rohingya children, adolescents, and youth without access to adequate education and healthcare, which interfere with their well-being and adequate development.

5.2.7 Coping Mechanisms:

The coping mechanisms primarily employed by participants include seeking social interaction with friends and family for comfort and distraction, and conversely, the practice of isolation and withdrawal to manage intense emotions or avoid triggering memories. Many who sought social interaction as a coping mechanism, however, reported being unable to count on friends and family for emotional support. This was often the case because family and friends were often coping with their own reactions to the trauma of their experiences and life in displacement.

Many participants highlighted long-term aspirations primarily for education and a commitment to community involvement as a means to overcome adversity. While the participants acknowledged that these activities represented pathways to future, they simultaneously expressed being unable to realistically pursue aspirations as a coping mechanism due to the on-going situation in Myanmar and their refugee status, and therefore noted that they had no option but to resort to isolation and trying to control their strong emotions internally.

“Dreaming big has become nightmares. It is not possible anymore”¹⁴⁶

Additionally, many use spirituality and religious practices (like prayer) as a source of strength and hope,¹⁴⁷ while some note engagement in self-help activities like studying, sports, or artistic expression – although it was acknowledged that these opportunities were often limited by a lack of space for playing sports, as well as fears of moving through the camps, and the restrictions on movement. A few others resort to substance abuse for temporary escape.

Despite adoption of a range of coping strategies, their ability to mitigate the impact of harm is limited due to their on-going displacement. Moreover, the psychologists note that the narratives around participants’ resilience, manifested in expressions of faith, solidarity, and educational aspirations, is not evidence of recovery, but demonstrates the scale of what was at stake, including the annihilation of their collective. In other words, they signal the magnitude of loss and the symbolic refusal to surrender to the totality of the trauma, as a form of existential protest and moral memory.¹⁴⁸

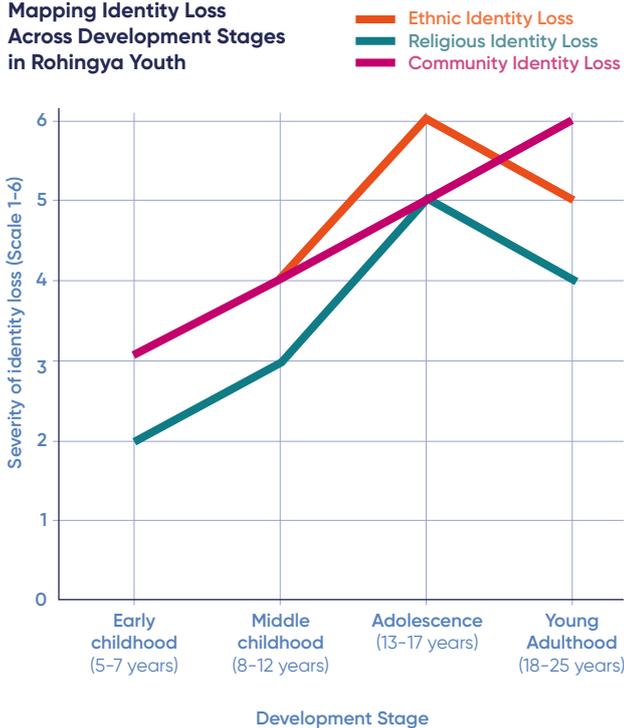
5.3. Impact on Identity Formation

The crimes committed against the Rohingya population did not bear only lethal, physical and material harm — the acts of the perpetrators prior to and during 2017 “clearance operations” targeted the psychological core of its victims: their identity. This meant deep and lasting harm for children, whose sense of coherent self was still forming.

As per the life course approach followed for the clinical analysis in this study, such damage to identity is not transient or fleeting — it reshapes future trajectories. It leads to persistent psychological issues such as anxiety, depression and affects educational, relational, and occupational outcomes.

Using key developmental and psychosocial theories, the psychologists assessed the impact of the experiences in Myanmar on the participants’ identity development, self-perception, and belonging. (Figure 1 below visualizes how identity loss across ethnic, religious, and community dimensions intensifies over time, shaped by age-specific vulnerabilities).

Mapping Identity Loss Across Development Stages in Rohingya Youth



5.3.1 Collapsed self-worth demonstrates systematic dehumanisation:

Participants affected in early childhood through late adolescence, described how being treated as less than human stripped them of dignity and even their identity. Many described themselves through labels imposed by Myanmar officials, or used within the news, or public discourse, including by the humanitarian response: “stateless,” “refugees,” “bad people,” and “voiceless.” These externally imposed identities were found to be internalised as shame and confusion. Even achievements, like education, are pursued under erasure of identity.

“The world only sees us as refugees. I don’t think they care.”¹⁴⁹

“I wish I were Bangladeshi. They have access to education and good manners.”¹⁵⁰

“I describe myself as: imprisoned, voiceless, persecuted.”¹⁵¹

“The only way to study is to hide my identity. I have to say I’m Bangladeshi.”¹⁵²

The psychologists concluded that such forced disconnect from a stable identity shaped by fear, rejection and survival during critical life stages has undermined the participants’ psychological development.¹⁵³

5.3.2 Fractured sense of belonging:

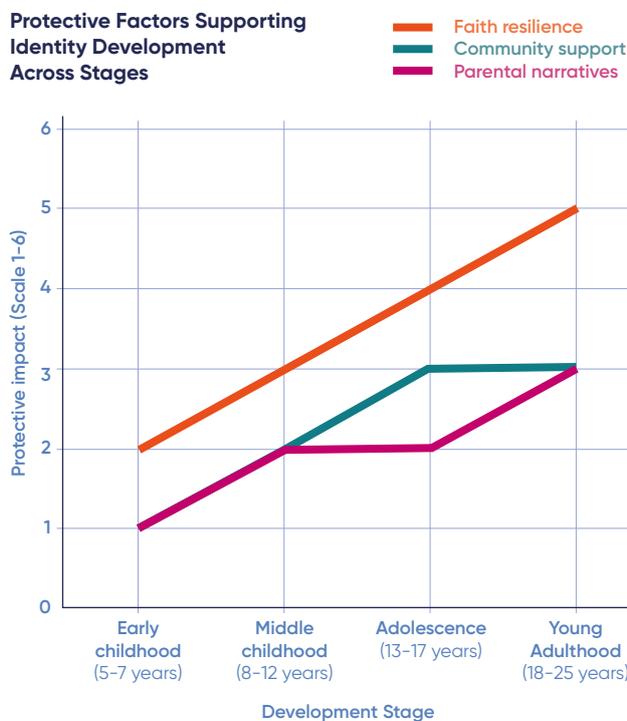
The concept of belonging — central to psychological security — has been fundamentally ruptured for Rohingya children and youth. Many participants expressed feeling rejected by both Myanmar and Bangladesh.

Children exposed between the ages of 5 and 10 internalise these losses not only as fear and grief but as existential disorientation — “Why do they want me to disappear?” — revealing the perceived intent to erase their identity. Even within the Rohingya community, the sense of belonging was fraught. Some distanced from affiliating with their own community, criticising the internal violence, corruption, or due to trauma or disillusionment.

Further, cultural disintegration in displacement including erosion of language, customs, and collective memory emerged as a core harm. The inability to practice communal rituals, share stories, or transmit identity across generations breaks the cultural continuity that underpins both individual and collective identity development.

“Our dances, music, and food are no longer practiced here. I have separated myself from my tradition.”¹⁵⁴

While some participants did share the suffering of the community and faith as the foundations of collective Rohingya identity indicating resistance to erasure, for instance, *“I still feel part of the Rohingya. We live the same way, we share the same destiny,”*¹⁵⁵ however notably depending on the age of a child, protective factors such as faith may offer only limited support to sustain identity through adversity (Figure 2 below).



Overall, the psychologists conclude that the mass violence premised on identity in Myanmar, the on-going exclusion and rejection in displacement, coupled with the insecurity due to pervasive criminality and lack of community protection, have together severely fractured the emotional scaffolding for children that supports identity formation, thereby impacting their sense of self and sense of belonging.

5.4 Intergenerational Impact

This research aimed to understand if and how the traumatic experiences endured by one generation affect the development and well-being of their subsequent generation. Considering that the Rohingya community has suffered systematic violations of their rights for decades and targeted violence in Myanmar, the intergenerational analysis is relevant to comprehend its cumulative impact on children and adolescents. The life course approach was adopted to understand the intergenerational impact. This approach emphasises how past experiences can shape future health, social, and psychological outcomes.¹⁵⁶

Impact of parental trauma on child development: Many participants described that observing their parents struggle with grief (often linked to loss of family and

memories of violence), anxiety, or social isolation, made them internalise that grief, often leaving them to feel the weight of these inherited emotions. For some, it triggered their own feelings of vulnerability, fear, and anxiety.

“I can see it in his face when he talks about it, he is a man so he will not show his feelings, but I can see how he changes his breathing and how he gets so sad, and when I see he is sad, I feel sad too”¹⁵⁷

“I feel sad when my mum is sad. She keeps on sitting and she feels sad. I do not feel like eating when she is sad.”¹⁵⁸

“My mother is always in tears, she says she wants to go back to Myanmar. Every time she cries, I feel sad, but I know I cannot do anything about it.”¹⁵⁹

Some families chose to shield their children from these memories to prevent further emotional harm.

“They will hear the stories about what happened to us and the difficult experience in the camp and this will make them sad. How can they not feel the pain when they hear what we went through?”¹⁶⁰

Other respondents expressed feelings of abandonment due to their parents’ emotional unavailability (though often in indirect terms to avoid criticising their parents). Interviewees shared that their parents, overwhelmed by grief or psychological distress, would sometimes become distant or unresponsive. This emotional gap left them feeling isolated and disconnected, particularly in the midst of coping with their own trauma and needing support. Some described becoming caretakers for their siblings or even for their parents, stepping into roles of responsibility at a young age due to their parents’ inability to provide emotional or physical support.

“My mother is always sad because of the death of my two brothers. She cries a lot. It happens often. When it happens, she cannot do any housework. She tells me “My daughter do anything you can, I will not and cannot do anything today.”¹⁶¹

The parent-child bond in the Rohingya community therefore serves as an emotional conduit for unspoken trauma, shaping development through fear and insecurity. Further, in light of the longstanding systematic discrimination against the Rohingya, the cumulative trauma perpetuates within the society:

- Disrupted parenting capacities: passing down of fear, anxiety, and overprotection; and
- Risk of learned helplessness and inherited low self-worth.

This mirrors evidence from Rwanda and Cambodia whereby unresolved trauma alters trajectories decades later, resulting in mental illness and familial strain.¹⁶²

5.5 Collective Destruction and its Psychosocial Imprint on Child Survivors

The evidence presented in this report demonstrates that the violence and atrocities committed against Rohingya children and adolescents represent far more than individual episodes of trauma, and constitute a process of deliberate collective destruction.

It is important to note that mass violence, particularly that which affects civilian populations unable to defend themselves against military force, does not have the same consequences as combat situations.¹⁶³ The feeling of complete helplessness that overwhelms civilian victims confronted with asymmetric violence is characterised by a total loss of agency and confidence in their immediate environment. It is precisely this destruction of the entire fabric of daily social life that the violence against Rohingya aimed to achieve.

The consequences that are easily observable in survivors are not limited to psychological trauma,¹⁶⁴ but go far beyond, to include a loss of confidence in the present and the future, a feeling of powerlessness, a loss of autonomy, despair, and the feeling of being completely subject to the violence of others. By depriving individuals of their social and familial foundations, the entire group is deliberately put at risk because the group is no longer able to ensure its own continuity by providing material, emotional, and symbolic resources to each of its members. This process denotes collective destruction as per the psychologists and is vividly reflected in the children's narratives.

5.6 Direct co-relation between 2017 atrocities and severity of psychological harm

LAW's clinical findings indicate that experiencing and witnessing the 2017 atrocities is directly linked to severe psychological impact notwithstanding the survivors' hardship in displacement.

The present research delineated the psychosocial disparities between Rohingya children who survived the 2017 "clearance operations" in Myanmar and those born in refugee camps in Bangladesh. Drawing on participant narratives, the analysis reveals that the direct exposure to atrocities in Myanmar eight years ago distinctly shapes the developmental trajectories of the two separate groups of Rohingya refugee children.

Forced displacement and deportation of Rohingya in 2017 by the Myanmar military transformed the lives of camp-born children, introducing secondary trauma and a brutal rupture in their identity formation due to the sudden rejection by the host community, despite near-assimilation prior to 2017.

For the first time, parents disclosed their own histories of persecution in Myanmar, re-actualising familial trauma and instilling fear of repatriation to a country perceived as synonymous with death and unknown horrors. Concurrently, living conditions deteriorated drastically. Freedom of movement was curtailed, school access revoked, and camps became overcrowded with degraded security, resource scarcity, and violence.

Participants articulated a stark before/after divide, with trauma rooted in identity conflict: *"I am not a Rohingya, people who came here from Myanmar are Rohingya, me I was born here, I am just a refugee but not a Rohingya."*¹⁶⁵

Despite these challenges, camp-born children often retained preserved psychological foundations compared to survivors.

Across both groups, the 2017 events induced symptoms of trauma, yet developmental outcomes diverged. Survivors of the massacres appeared most psychologically impacted, with stunted growth from societal fabric erosion and familial care loss, hindering recovery. Camp-born children, benefiting from pre-2017 solid foundations (e.g., safer parental upbringings and education), exhibited emotional and intellectual vitality, cognitive abilities, and individuality aiding resilience despite identity struggles and degraded conditions.

The full analysis on the differential impact between 2017 survivors and children born in the camps is noted in Annex III.

6

Legal Analysis

**"THE MOST
PAINFUL IS
MY FATHER'S
DISAPPEARANCE,
I MISS HIM
SO MUCH"**

Genocide

Genocide is an international crime grounded in both treaty and customary international law and recognised as a peremptory norm (*jus cogens*) from which no derogation is permitted. It was first codified in the Convention on the Prevention and Punishment of the Crime of Genocide (Genocide Convention)¹⁶⁶ and later incorporated verbatim into article 6 of the Rome Statute of the International Criminal Court (ICC).¹⁶⁷ Article II of the Genocide Convention defines genocide as any of the following acts committed with intent to destroy, in whole or in part, a national, ethnical, racial, or religious group, as such:

- (a) **killing members of the group;**
- (b) **causing serious bodily or mental harm to members of the group;**
- (c) **deliberately inflicting on the group conditions of life calculated to bring about its physical destruction in whole or in part;**
- (d) **imposing measures intended to prevent births within the group;**
- (e) **forcibly transferring children of the group to another group.**

Myanmar signed the Genocide Convention in 1949 and ratified it on 14 March 1956.¹⁶⁸ It has therefore been continuously bound by its obligations to prevent and punish genocide in both peacetime and during periods of armed conflict. Under article III, Myanmar must also prevent and punish conspiracy, direct and public incitement, attempts, and complicity in genocide. In January 2020, the International Court of Justice (ICJ) reaffirmed these obligations, indicating provisional measures requiring Myanmar to take all steps within its power to prevent the commission of any genocidal acts against the Rohingya group and to preserve evidence relating to such acts.¹⁶⁹ These duties exist in parallel with Myanmar's obligations under customary international law, which independently prohibit genocide and impose correlative duties of prevention and punishment.¹⁷⁰

Children and genocide

International courts and tribunals have approached the position of children in genocide in two principal ways. First, they have recognised that the crimes inflicted upon children within a protected group – including killings, sexual violence, forced displacement, and the destruction of family units – constitute underlying genocidal acts when committed with the requisite intent. Second, they have treated actions and declarations targeting children as probative of genocidal intent, particularly when those acts reveal a desire to eliminate the group's future biological and social continuity. Children are not simply a subset of victims, but rather they embody the group's capacity for survival. Their deliberate targeting is therefore legally significant both for establishing genocidal acts and for inferring specific intent.

Guided by the jurisprudence of the ad hoc tribunals, the ICJ, and the ICC, as well as the drafting history and authoritative commentary on the Genocide Convention, the analysis below examines whether specific acts committed against Rohingya children by Myanmar forces constitute underlying genocidal acts and how the unique vulnerabilities and developmental stages of children strengthen the inference of genocidal intent.

Killing members of the group

Participants from 42 villages described largescale killings of children, often in direct and personal terms. Seventy-three (73) per cent witnessed the violent killing of children, including siblings and – in the case of minor mothers – their own infants. The age range of child victims extended from a few days old to adolescence. The methods of killing were varied but uniformly brutal: children were shot, stabbed, kicked to death, hurled into fires or rivers, or burned alive inside homes. Others died during flight from Myanmar due to untreated injuries, hunger, or dehydration. LAW's adult clients have provided corroborating accounts, including at least 29 testimonies describing killings of children through indiscriminate shooting, slashing with blades, or being thrown violently to the ground, often in connection with the rape of their mothers or other sexualised violence. These accounts align with broader patterns documented in a health survey produced by Médecins Sans Frontiers (MSF),¹⁷¹ and the UN FFM's findings of child killings and maiming in more than 20 villages. Taken together, this evidence establishes that children were killed both indiscriminately and deliberately. The scale, method, and consistency of these killings across villages reveal a pattern of violence that was calculated to inflict maximum physical and psychological suffering on the Rohingya group and to terrorise survivors. Within the framework of article II(a) of the Genocide Convention, these killings constitute acts of genocide when viewed in conjunction with the intent analysis below.

Causing serious bodily or mental harm to members of the group

The Genocide Convention does not define "serious bodily or mental harm," nor does it list exhaustive examples. International courts have therefore interpreted article II(b) by examining whether the underlying acts were carried out knowingly or with awareness that such harm would follow as a natural and foreseeable consequence. The jurisprudence of the ICTR and ICTY recognises that serious bodily harm encompasses torture, rape, and non-lethal physical violence that causes disfigurement or significant injury to internal or external organs.¹⁷² Acts such as inhumane treatment,¹⁷³ degrading treatment,¹⁷⁴ deportation,¹⁷⁵ persecution,¹⁷⁶ and rape¹⁷⁷ have all been accepted as capable of amounting to serious bodily or mental harm. The category is therefore intentionally broad and requires a fact-specific assessment in each case.¹⁷⁸

The ad hoc tribunals have also been clear that permanence is not required. In *Akayesu*, the ICTR held that serious bodily or mental harm “need not be permanent and irremediable.”¹⁷⁹ In *Krstić*, the ICTY clarified that the harm must extend beyond “temporary unhappiness, embarrassment, or humiliation” and instead must cause “a grave and long-term disadvantage to a person’s ability to lead a normal and constructive life.”¹⁸⁰ This threshold reflects the understanding that genocide destroys not only human life but human potential.

Intervening States in *The Gambia v. Myanmar* have urged a refined understanding of “serious harm” when the victims are children. The joint intervention of the UK, France, Germany, Denmark, the Netherlands, and Canada emphasised that assessing whether an act is “serious” or “tends to contribute” to the physical or biological destruction of the group¹⁸¹ must take into account the particular vulnerability and developmental stage of child victims.¹⁸² Ireland likewise argued that the severity of the impact on children and young adults – who lack the developmental, psychological, and social resources of adults – is a critical factor in construing article II(b).¹⁸³ These two submissions reflect what may be deemed a growing recognition that the same act may have exponentially greater destructive consequences when inflicted upon children.

The findings of LAW’s research provide precisely the kind of objective clinical evidence needed to operationalise article II(b) in a child-specific manner. The evidence demonstrates how the grave violations experienced by Rohingya children produced enduring physical, psychological, cognitive, and neurobiological harm. As explained in Sec. V., these are not short-lived consequences but rather deep, structural disruptions of development that continue into adolescence and adulthood. They therefore satisfy the thresholds articulated in international jurisprudence on serious bodily and mental harm.

Grave and long-term disadvantage to leading a normal and constructive life

Child survivors who were beaten, stabbed, or shot reported enduring physical impairments, permanent or semi-permanent disabilities, chronic pain, unhealed wounds, and recurrent infections that restrict their ability to study, work, or carry out daily tasks. These descriptions align closely with the type of physical harm recognised by the ICTR and ICTY as meeting article II(b).¹⁸⁴

The mental harm documented in the present report is equally severe. The psychologists concluded that cumulative exposure to extreme violence during the critical developmental window of age 5 to 17 produced profound harm across emotional, cognitive, and social domains. Participant assessments revealed persistent patterns of social withdrawal, emotional dysregulation, intrusive thoughts, nightmares, insomnia, anxiety, depression, self-harm, and suicidal ideation.

The children also displayed concentration deficits, difficulty retaining information, and impaired capacity to engage in interpersonal relationships – all classic markers of chronic traumatic stress. The experts further found that the destruction of a coherent sense of identity during formative developmental years has had serious long-term implications. The children internalised messages of rejection, dehumanisation, and exclusion, resulting in damaged self-worth, impaired belonging, and ruptures in relational trust. These identity-based injuries, which shape the way a child understands themselves in relation to their family, community, and future, are among the most enduring consequences of genocidal violence. Statements such as “*they wanted to erase us*”¹⁸⁵ and “*they wanted to destroy our community. I don’t understand why*”¹⁸⁶ demonstrate the extent to which Rohingya children interpreted the violence not merely as individual victimisation but as an existential assault on their group.

Taken together, the physical and psychological impacts documented by LAW clearly satisfy the “grave and long-term disadvantage” standard under article II(b) and deprive Rohingya children of their ability to lead normal and constructive lives. This is precisely the form of harm that international courts have recognised as constituting serious bodily or mental harm under the Genocide Convention.

Confronting death and survivor guilt

International criminal jurisprudence has long recognised that surviving imminent execution, and the psychological aftermath of such survival, can amount to serious bodily or mental harm under article II(b). The ICTY in *Tolimir* described the accounts of individuals who narrowly escaped mass execution as “of the most serious nature,” emphasising that the enduring impact of such experiences met the threshold of serious bodily and mental harm.¹⁸⁷ The *Blagojević* Trial Chamber similarly held that individuals who survived mass executions, often after witnessing the killing of relatives or community members, suffered severe mental harm arising from terror, helplessness, and the awareness of their own impending death.¹⁸⁸ These findings confirm that experiencing the immediate threat of death and witnessing the killing of others, especially family members, can itself constitute an underlying genocidal act.

The evidence gathered by LAW mirrors these established patterns. Rohingya children frequently described surviving direct encounters with lethal violence, including watching parents, siblings, relatives, and neighbours murdered at close range; seeing bodies piled on top of one another; and fleeing through scenes of mass killing. Many recounted hiding under corpses or feigning death to avoid being detected. Others described near-fatal drowning while crossing rivers or marshes during their flight. These descriptions are indistinguishable from the types of experiences recognised in *Tolimir* and *Blagojević* as constituting serious mental harm.

The psychologists' assessments confirm that these events produced complex trauma marked by persistent sadness, intrusive memories, hypervigilance, guilt, and chronic emotional dysregulation.¹⁸⁹ Survivor guilt was a consistent theme: children reported feeling responsible for not saving siblings or other family members, a reaction that experts identify as a form of moral injury that corrodes self-worth and produces enduring psychological distress. These long-term effects directly impair daily functioning, learning capacity, interpersonal relationships, and the ability to plan or imagine a future. Within the meaning of article II(b), these impacts plainly amount to serious mental harm.

In the Rohingya context, these harms were not incidental or confined to isolated events, but rather were the predictable consequences of systematic killings carried out in front of children, sometimes after forcing them to watch the torture, rape, or execution of family members. The foreseeability of such harm strengthens the inference that perpetrators acted with knowledge that their conduct would inflict enduring and severe mental suffering on Rohingya children. The convergence of imminent death, exposure to mass killings, and the psychological aftermath therefore constitutes a core part of the genocidal acts committed during the 2017 "clearance operations."

Appalling flight to Bangladesh and uncertainty of fate

The accounts provided by Rohingya children mirror the categories of suffering that international courts have repeatedly treated as serious mental harm for the purposes of article II(b). Nearly all children interviewed described the journey as a rupture in every dimension of their lives, including personal, familial, and communal. For many, this rupture was experienced as the destruction of the world they had known. Pre-adolescent participants (now aged 12 to 14, who were 5 to 7 years old in 2017), consistently drew a stark line between a peaceful early childhood in Myanmar and a sudden descent into violence, panic, and dispersal. The abrupt disappearance or killing of caregivers such as mothers, fathers, and older siblings, produced intense grief, anxiety, and a profound loss of orientation. Children in this age range depend critically on a stable caregiving structure to form secure attachments and develop emotional regulation. Its destruction constitutes a severe developmental shock with long-term impacts recognised in both clinical and legal assessments.

The journey itself was often accompanied by acute physical danger and despair. Children reported stepping over bodies, crossing rivers in which several nearly drowned, and witnessing neighbours and relatives collapse from injuries, exhaustion, or hunger. Many described the flight in terms associated with extreme fear, sensory overload, and total loss of control, which are hallmarks of complex trauma in child psychology. These are consistent with

how the ICTR in *Kayibema and Ruzindana* and *Akayesu* assessed the psychological consequences of mass terror and forced flight on Tutsi children, recognising such experiences as falling within the ambit of article II(b).

The violence did not end upon arrival in Bangladesh. Instead, Rohingya children experienced displacement as a continuing condition of insecurity. Psychologists in this study observed patterns of emotional dysregulation, hypervigilance, panic, nightmares, and dissociation among these children – all symptoms aligning with those identified as the "Srebrenica Syndrome,"¹⁹⁰ where failure to undergo a normal grieving process produces persistent and debilitating trauma. Many participants described their current lives as "without freedom," "trapped," or "living in fear or horror." Their testimonies – "It destroyed my life and future" and "I feel hopeless...I wish we could go back to our country" – convey feelings of entrapment, meaninglessness, and annihilation of future possibility. Such despair is a direct consequence of deliberate deportation and continues to impede their psychological and cognitive development.

This inability to envisage any future is further deepened by the intergenerational transmission of trauma. Children spoke of absorbing the silent grief, anger, and resignation of their parents, internalising their family's sense of loss, humiliation, and displacement. Clinical research on intergenerational trauma demonstrates that such internalisation is not a mere emotional response but a disruption of identity formation and self-concept, with long-term implications for functioning. Here, it manifests in recurrent nightmares, panic attacks, withdrawal, and chronic anxiety, all of which significantly impair daily life. The ICTY's findings in *Blagojević, Krstić, and Popović* emphasise that these kinds of psychological injuries – when sustained, foreseeable, and directly linked to acts of forced displacement – meet the seriousness threshold under article II(b).

Taken together, the conditions of flight and displacement, the destruction of caregiving structures, the collapse of social and communal networks, and the pervasive and enduring uncertainty surrounding the future satisfy the legal threshold for serious mental harm. The cumulative effect on Rohingya children is a profound disruption of development, identity, and psychological stability. As reflected consistently across villages and age groups in this study, these impacts align closely with criteria articulated by the ICJ and international criminal tribunals for assessing serious mental harm as an underlying genocidal act.

The combined psychological and developmental findings presented in this research, when assessed in light of the children's vulnerability and the foreseeability of these consequences by the perpetrators, clearly meet multiple jurisprudential thresholds for serious mental harm under article II(b).

Rape and other forms of sexual and gender-based violence

Rape and other forms of sexual and gender-based violence (SGBV) formed an integral part of the Myanmar military's coordinated attack on Rohingya civilians during the 2017 "clearance operations." As documented by the UN FFM and confirmed by LAW's research, these violations were committed not only against adult women and men, including in detention settings, but also against children. Girls as young as eight described rapes, mutilation, and detention in military sites where they were subjected to repeated assaults amounting to sexualised enslavement. Such conduct included multiple perpetrator ("gang") rape, sexual assault, forced nudity, and forms of sexualised torture.

Following *Akayesu*, international jurisprudence firmly recognises rape and sexual violence as underlying genocidal acts capable of causing "serious bodily or mental harm." The ICTR has described such violence as attacking the "spirit," "will to live," and "life itself,"¹⁹¹ and accepted that sexual violence may serve as a method of group destruction while inflicting acute suffering on individual members. This line of authority has been applied consistently in later cases, including in *Musema*,¹⁹² *Gacumbitsi*,¹⁹³ and *Foča*,¹⁹⁴ where chambers emphasised the cumulative physical, reproductive, psychological, and social injuries caused by sexual violence, particularly in situations of mass ethnic persecution.

LAW's prior research demonstrates that SGBV during the 2017 "clearance operations" resulted in long-term harm that falls squarely within this framework. Survivors sustained permanent physical injury, including damage to reproductive organs that directly affects the ability to procreate. They also suffered severe psychological harm, including chronic trauma, persistent intrusive thoughts, and profound emotional distress that destabilised familial, parental, and intimate relationships.

These harms align with the ad hoc tribunals' understanding that the impact of rape extends beyond the incident itself to a continuing state of psychological destruction.

The systematic nature of rape and other forms of SGBV also targeted the Rohingya community's social fabric. Female survivors reported ostracisation by spouses, families, and kinship groups, leading to the erosion of social belonging and cultural identity. This mirrors findings in past conflicts where sexual violence functioned as a method of group degradation and social fragmentation.¹⁹⁵

The patterns described by child participants mirror the adult accounts but with heightened vulnerability and longer-term developmental consequence. Children who survived SGBV – primarily girls and *hijra* adolescents interviewed in this study – displayed symptom profiles that strongly correlate the sexual violence with severe and enduring physical and psychological consequences. Several witnessed the killing of family members during or immediately after these assaults. The combination of physical injury, forced penetration, threats of death, and prolonged captivity produced enduring trauma evident in clinical assessments documenting dissociation, intrusive memories, and disrupted cognitive development. Clinicians documented shame, moral injury, disrupted attachment patterns, and deterioration of family relationships. These consequences manifest across individual, interpersonal, and community levels and are consistent with the jurisprudential thresholds for "serious bodily or mental harm" under article II(b).

Taken together, the evidence establishes that rape and sexual violence perpetrated against Rohingya children and adolescents formed part of a broader attack aimed at inflicting profound physical, reproductive, psychological, and social harm on them. This harm directly contributes to the destruction of the group and therefore constitutes an underlying genocidal act.



Discriminatory intent

Rohingya children, adolescents, and youth were subjected to severe and sustained deprivation of their fundamental rights solely on the basis of their identity as members of the Rohingya group. The pattern of violations, including restrictions on liberty, killings, deportation, sexual violence, and the permanent exclusion from basic civil, political, social, and economic rights, all formed part of a discriminatory state policy articulated through Myanmar's laws, administrative practices, and security operations. Participants in this study are among nearly 600,000 Rohingya children who remain displaced in Bangladesh and who continue to be denied the ability to return, together with the rights necessary to live with dignity and security. For Rohingya children, that deprivation will remain on-going until they are able to return safely, their citizenship is fully restored, and their bodily integrity and basic rights are protected.

Consistent with the findings of the psychologists, children and youth have internalised this discrimination as an existential threat and as a profound form of dehumanisation. Their expressions (e.g. *"We don't have citizenship, we have no education, no rights. I had to keep dreams inside. Dreaming big has become nightmares"*¹⁹⁶ and *"I describe myself as imprisoned, voiceless, persecuted"*¹⁹⁷), reflect not only subjective distress but a level of psychological injury that meets the threshold of serious mental harm under article II(b). These statements reflect chronic fear, dislocation from social identity, and the internalisation of group-targeted hostility, all of which the ICJ and ad hoc tribunal jurisprudence regard as probative of the gravity of harm.

Longstanding restrictions on education, first within Myanmar and then throughout years of forced displacement, have further compounded the effects of persecution. Educational exclusion has stifled leadership development, impeded cognitive and social growth, and contributed to social deterioration in the camps, manifested through increased child marriage, exploitative labour, criminality, kidnappings, substance abuse, and pervasive hopelessness. In a digital age in which Rohingya youth can see global progress yet remain structurally excluded from it, these deprivations have taken on a cumulative and intergenerational character. The resulting psychological environment marked by stagnation and disempowerment, exemplifies the "long-term disadvantage" recognised in *Krstić* and *Kayishema* as indicative of serious mental harm.¹⁹⁸

Taken together, these findings demonstrate that the Myanmar military's violations and attacks against Rohingya children during the 2017 "clearance operations" satisfy the threshold of serious bodily or mental harm under the Genocide Convention. The perpetrators inflicted lasting, dehumanising physical and psychological injuries on child survivors. Long-term physical consequences include chronic pain, untreated injuries, and disabilities; lasting psychological

consequences include dissociation, depression, intrusive thoughts, and cognitive impairments that severely diminish the ability to live a normal and constructive life. Across villages, and despite semi-randomised sampling, children consistently described parallel patterns of harm across the emotional, cognitive, social, and identity-formation dimensions of their development. This organised violence occurred within a broader historical pattern of discrimination and state-sponsored hostility against the Rohingya. The effects on children must therefore be understood not as isolated harms but as part of a long-term strategy of exclusion and destruction, in which the Myanmar military targeted the Rohingya group's youngest and most vulnerable members in ways that are clinically and evidentially consistent with the genocidal act of causing serious bodily or mental harm.

Evidence of intent to destroy in whole or in part as such

International jurisprudence has consistently treated the existence of a State or organisational plan or policy as a highly probative indicator of genocidal intent (*dolus specialis*),¹⁹⁹ even though it is not a formal legal requirement of the offence. Courts have inferred specific intent from a combination of factors, including the scale and organised nature of the atrocities; the perpetrators' conduct before, during, and after the violence; and the pattern of statements directed at the targeted group to the exclusion of others.²⁰⁰ International case law confirms that genocidal intent can be deduced from the broader context in which a series of culpable acts is systematically directed against a protected group. Relevant forms of conduct include the physical targeting of the group, the use of dehumanising or exhortatory language, and the methodical preparation or planning that makes mass harm to the group foreseeable and, in practice, inevitable.

In the Rohingya situation, any analysis of genocidal intent must consider the totality of the Myanmar military's conduct, including its sustained repression, the systematic nature of the 2016 and 2017 "clearance operations," and the consistent direction of the violence exclusively targeting the Rohingya as a protected ethnic and religious group. International case law makes clear that genocidal intent need not be attached to each individual act; intent may be inferred from the existence of a broader plan or design, including an ideological project or institutional practice.²⁰¹ For years preceding the "clearance operations," Myanmar cultivated an escalating environment of targeted fear and hostility. These included State-sanctioned incitement; discriminatory laws pressuring Rohingya to identify as "Bengali;" restrictions on marriage, reproductive autonomy,²⁰² movement, and access to health and education; and administrative policies designed to progressively segregate and isolate the Rohingya. This long-term persecution demonstrates a systematic effort to weaken the group's physical, social, and cultural capacity for survival. During the operations themselves, the military and associated forces killed

Rohingya civilians, including children, and committed other forms of widespread and systematic violence, such as mass executions, torture, enforced disappearance, arbitrary detention, and the burning of homes and entire villages.²⁰³

Rohingya children and genocidal intent

The targeting of vulnerable members of the Rohingya group is particularly probative of the genocidal intent. Acts committed against children, including deliberate killings, reveal a desire to inflict severe suffering that contributes to the group's destruction. The UK, France, Germany, Denmark, the Netherlands and Canada, in their joint declaration of intervention, and Ireland in its separate declaration, have each submitted that conduct directed at children can be highly significant when assessing specific intent.

The underlying acts against Rohingya children, together with their long-term effects, can support an inference that the intent to destroy the group existed. The physical elimination of children, the removal of the next generation, the long-term incapacity and trauma inflicted on survivors and the disruption of family and community structures speak directly to the continued existence of the group. International case law has repeatedly recognised that targeting children affects the biological and social continuity of a protected group and is therefore relevant evidence of genocidal intent.

Systematic targeting of children: The killings of the Rohingya children are relevant to the determination of the specific intent to destroy the group in several ways:

Rohingya children were “not spared”: As the first-ever international ruling on the crime of genocide, the *Akayesu* judgment was significant in defining genocidal intent and demonstrating the proof that may be used to establish it. The Trial Chamber referred to the killing of Tutsi babies, foetuses, and pregnant women as a way to emphasise the systemic nature of these killings and as an indicator of genocidal intent. Specifically, the Chamber noted the fact that the perpetrators “did not spare children,” and that even “newborns” and pregnant women were killed,²⁰⁴ underscored the perpetrators’ intent of “extermination” and, more so, the “complete disappearance of the Tutsi.”²⁰⁵

Furthermore, the targeting of children precludes a defence that members of a protected group were targeted solely for certain other reasons, such as posing a security threat.

- The ICTY Appeals Chamber in *Krstić* observed that the Bosnian Serb Army’s decision to kill all males of “military age” in Srebrenica, a category that in practice encompassed unarmed boys and adult men without distinction between combatants and civilians, could not be explained only by an intention to neutralise a potential military threat. The Chamber held that the scale and nature of these killings pointed to an intention to destroy the Bosnian Muslim community of Srebrenica as such, rather than a purely security-driven rationale.²⁰⁶

- The ICTR in *Akayesu* noted that the fact the genocide occurred during an armed conflict could not mitigate the criminal responsibility of the perpetrators. The Chamber stressed that the overwhelming majority of Tutsi victims were civilians, including large numbers of women and children, and in some cases even unborn children, which underscored the nature of the violence as directed at the group itself rather than at opposing forces.²⁰⁷

In the Rohingya context, children and infants were not spared. Military and security forces inflicted lethal violence on them either through indiscriminate attacks or through deliberate acts that caused death. This includes shootings of children during house searches, killings during flight, and beatings that resulted in fatal injuries. These accounts are consistent across multiple locations and demonstrate that the violence against children occurred on a significant scale.

The methodical nature of these killings undermines any claim that the “clearance operations” served a counter-terrorism purpose. Across several villages, boys who were unarmed and presented no threat were rounded up with adult men and summarily executed. This pattern appeared repeatedly and shows a practice that was not linked to the neutralisation of specific hostile actors. When killings of children occur in a consistent and organised manner, and when there is no rational connection to any asserted security objective, the conduct takes on evidentiary weight for intent.

Taken together, the scale, consistency, and character of the killings indicate a systematic pattern rather than isolated acts. This precludes the argument that Rohingya children died as incidental casualties of a legitimate security operation. As noted, in the jurisprudence on genocide, patterns of violence directed at the group’s youngest members have been treated as probative of specific intent because they affect the group’s biological and social continuity. The elimination of children, and the knowledge that such violence would diminish the survival of the group as a group, supports an inference that the perpetrators intended the destruction of the Rohingya community, in whole or in part.

Rohingya children as a “substantial” part of the group: In *Krstić*,²⁰⁸ the ICTY held that the selective killings of “military-aged” Bosnian Muslim men in Srebrenica (which effectively included boys and elderly men normally considered to be outside that range) evidenced genocidal intent because it “would result in the annihilation of the entire Bosnian Muslim community” by preventing biological regeneration. The ICTY emphasised that destroying a “substantial part” of the group satisfies the intent requirement, even if not all members are killed.²⁰⁹ What counts as a “substantial part of the particular group” depends on all circumstances, including whether a specific part of the “group is emblematic of the overall group, or is essential to its survival.”

Children form part of the protected group for the purposes of the Genocide Convention, and international jurisprudence has consistently recognised that violence directed at them is probative of genocidal intent. Tribunals have treated the targeting of children as significant because it affects the future continuity of the group and reflects an attack on its existence rather than on any purported security threat. In the Rohingya case, the consistent killing of children supports an inference that the perpetrators intended the destruction of the group, at least in part.

Hate speech against Rohingya premised on uncontrollable birth rates

Myanmar's hateful rhetoric toward the Rohingya, together with the discriminatory laws and administrative measures imposed on them, was part of a broader strategy to deny their identity and depict them as an alien and degraded group. The UN FFM has recorded repeated claims that Rohingya had uncontrollable population growth and high birth rates, which featured prominently in official and local messaging. When considered alongside the consistent pattern of lethal violence against Rohingya children, this demographic rhetoric supports an inference that the perpetrators understood and accepted that such violence would damage the group's long-term continuity. International case law treats this type of evidence as relevant to determining genocidal intent, since intent may be inferred from both the wider campaign of dehumanisation and the targeted destruction of the group's future generations.

Dehumanisation of the Rohingya including children:

In determining the specific intent for genocide, the international criminal tribunals²¹⁰ have given weight to print and electronic media, radio, songs, slogans as well as statements of political leaders, which framed the targeted group including its children as the enemy.²¹¹

The Myanmar military's social media campaign on Facebook disseminated material designed to instil fear and hatred of the Rohingya, including children, through derogatory and violent rhetoric. In 2024, the UN Independent Investigative Mechanism for Myanmar (IIMM) found that the military created a clandestine network of pages capable of reaching millions.²¹² This activity coincided with the burning of Rohingya villages and with the widespread beating, sexual assault and killing of Rohingya men, women and children, and continued as hundreds of thousands were forced to flee.

A review of the IIMM report and other investigative reports on this topic²¹³ shows that the campaign justified and promoted violence against the Rohingya population, including children. During 2017, the hate speech content presented Rohingya as "unscrupulously breeding like rabbits" who had "drawn up plans to increase their population size."²¹⁴ It spread fear of Rohingya children by

claiming that "it is common to see Muslim kids in any Muslim country, with real weaponry, posing, training, shooting, or threatening," and asserted that Rohingya children had previously participated in attacks against Buddhists. Videos of Myanmar military soldiers inciting ethnic Rakhine urged communities to "sharpen their knives," told them to ensure that both children and older people confront these "animals," and declared, "we will do our best to completely destroy [them]."

Other posts encouraged Myanmar to imitate India's supposed shoot-to-kill policy against "the Bengalis, including children, dogs, and women, who sneak into the country," and described Rohingya as dogs, maggots and rapists who should be fed to pigs or exterminated.²¹⁵ Prominent figures contributed to this rhetoric; Wirathu used the slur "*Kalar*" and warned that if a Buddhist woman married a Rohingya man, "the children born to you will become *Kalar*," and that such descendants would not be regarded as belonging to the "good race" but would instead follow "murderous, rapists who will root out the entire Buddhism." This pattern reflects the way extremist ideology functioned in Rwanda, where propaganda encouraged violence against children as part of the destruction of the targeted group, exemplified by the broadcast urging that "he who kills a serpent should not spare its eggs."²¹⁶ Taken together, the content and scale of the hate speech campaign, its explicit focus on Rohingya children and its overlap with contemporaneous attacks provide substantial contextual evidence from which genocidal intent to destroy a significant part of the Rohingya group can be inferred.

Extreme brutality against children and foreseeability of the probable consequences

Inferring genocidal intent from the perpetrators' extreme brutality falls squarely within the jurisprudence of the ICJ and international criminal tribunals.²¹⁷ Rohingya children were not spared during the killings, which already illustrates the severity of the conduct. Further evidence of extreme brutality appears in the specific methods of violence used against Rohingya children and adolescents. These methods recurred across locations in ways that allow a clear assessment of pattern.

The Myanmar military is well documented as operating through bureaucratic command structure in which senior officers maintain detailed oversight of subordinate behaviour and operational decision-making. Within this structure, units employed consistent methods to attack and harm children. These included the use of sharp weapons and brute force against children, attacks on parents in the presence of their children, rapes of children, including the deliberate targeting of young girls for rape, forcing children to witness the rapes of their mothers, sisters, and other relatives, and the separation of children from their families during operations. The recurrence of these practices across at least 42 villages shows that they were not the product of improvisation.

Survivor accounts describe the physical injuries and psychological consequences of these acts in strikingly similar terms, reinforcing the conclusion that the harm inflicted on children followed recognisable and repeated patterns. The consistency of these experiences across survivors demonstrates that the methods used, and the harms produced, were predictable features of the way the military carried out its operations. These facts collectively establish both the pattern and the scale of the targeting of Rohingya children. They also indicate that the perpetrators knew that severe physical and mental harm would occur to child victims and witnesses in the ordinary course of events, given the nature and repetition of the acts carried out.²¹⁸ The Myanmar military's conduct was directed at Rohingya children in ways that predictably damaged their physical and psychological integrity and, in turn, their ability to participate in the future life of the group,²¹⁹ which can be said to be an underlying strategy of physical and biological destruction.

Cultural Destruction

It is accepted that simultaneous cultural destruction or targeting, when occurring alongside other acts directed against a protected group such as physical attacks, can provide evidence of genocidal intent.²²⁰ The ICC Policy on Cultural Heritage recognises cultural property as one component of cultural heritage, which also encompasses the practices and attributes of a group that are inherited, maintained in the present and passed to future generations.²²¹ The ICJ in *Bosnia v. Serbia* endorsed the view that coordinated attacks on cultural and religious property and symbols, when assessed together with acts involving physical or biological destruction, may support an inference of an intent to destroy the group in its physical sense.²²²

In the Rohingya context, LAW's findings demonstrate the destruction of communal sites essential to children's cultural formation, including places of worship, homes, and schools, as well as the deliberate targeting of intangible symbols of Rohingya communal life. Psychologists working with Rohingya children and adolescents noted that the loss of these sites, practices and symbols disrupts cultural memory, interrupts religious and linguistic learning and undermines the formation of a stable sense of self. For children, the destruction of these sites and practices breaks the transmission of cultural continuity across generations through which group identity is inherited. This form of cultural destruction is relevant to assessing the broader genocidal intent directed at eliminating the group's future generations.

Deliberate infliction on the group of conditions of life calculated to bring about its physical destruction in whole or in part

Article II(c) captures methods of group destruction that do not involve immediate killing but that are designed to, or foreseeably will, bring about the group's physical destruction. The ICTY has held that article II(c) encompasses "the methods of destruction by which

the perpetrator does not immediately kill the members of the group, but which, ultimately, seek their physical destruction."²²³ Other judgments have echoed this interpretation, recognising that the deliberate imposition of subsistence diets, systematic forced displacement, and reducing essential medical services below a minimal level may constitute conditions of life calculated to destroy a protected group.²²⁴

The jurisprudence emphasises two core components. First, the conduct must create living conditions that are incompatible with the group's physical survival. Second, the harm must be inflicted deliberately – meaning the perpetrators either intended these conditions or knew that such conditions would inevitably bring about the group's destruction in whole or in part. This analysis is fact-specific and requires a close examination of the cumulative effects of violence, deprivation, displacement, and the dismantling of the conditions necessary for life.

In the Rohingya context, the evidence demonstrates that Myanmar's military operations imposed precisely the kinds of destructive conditions contemplated by article II(c). The killings, widespread sexual violence, destruction of villages, burning of homes, forced displacement, and obstruction of food, water, shelter, medical care, and safety produced conditions of existence that were incompatible with survival. Children were particularly affected. Many died during flight from untreated injuries, hunger, dehydration, or exposure. Others survived but with severe and on-going physical and psychological trauma that substantially reduced their capacity to develop, function, and contribute to the future of the group. The destruction of family structures, disruption of caregiving networks, and the collapse of community institutions – including religious spaces, schools, and social support mechanisms – compounded these effects.

The systematic nature of the attacks, the destruction of essential civilian infrastructure, and the predictable consequences of mass displacement demonstrate that the Myanmar military knew these operations would impose conditions of life that would destroy significant parts of the Rohingya population. When applied to children, the impact of these conditions is even more pronounced: the loss of caregivers, deprivation of food and health services, exposure to violence, and developmental trauma all undermine the group's biological and social continuity. The foreseeability and scale of these consequences bring the conduct squarely within the meaning of article II(c).

Membership in a national, ethnic, racial, or religious group

It has been well documented that the persons targeted during the 2017 "clearance operations" were members of an (Rohingya) ethnic and (Muslim) religious group, and targeted for their intersectional identity.²²⁵ The evidence collected from survivors in this research clearly shows that survivors were part of this group, and that the Myanmar military targeted them because of their membership to this group.

7

Conclusion and Recommendations

"IN MY NIGHTMARES I SEE THEM RETURNING TO SLAUGHTER US"

The findings in this report demonstrate that the acts perpetrated by the Myanmar military against, and impacting, children in the context of the 2017 “clearance operations” constitute underlying genocidal acts of causing serious bodily and mental harm and, in conjunction with the killings, the deliberate infliction of conditions of life calculated to bring about the physical destruction of the Rohingya group in part. These acts fall squarely within article II(a), (b), and (c) of the Genocide Convention as interpreted by international courts and tribunals.

In addition, Rohingya children were direct victims of murder, enslavement, imprisonment, rape and other forms of sexual violence such as sexualised enslavement, and torture. Children were also seriously affected by the enforced disappearance of their parents and other relatives and continue to suffer from the on-going denial of information about the fate and whereabouts of their family members.

There are reasonable grounds to believe that the Myanmar military’s conduct against children during the 2017 operations contributes significantly to establishing genocidal intent. The clear evidence that Rohingya children were not spared, and were instead deliberately killed and gravely harmed during military operations in the villages and during their flight across northern Rakhine State into Bangladesh, combined with hate speech that dehumanised Rohingya children in particular as an existential threat to Myanmar and called for their killing and erasure, accords with well-established indicators used to infer genocidal intent.

The extreme brutality and intensity of the methods of direct violence against children, as well as the deliberate exposure of children to the murder and rape of their family and community members, make it foreseeable that such conduct would inflict severe harm on children who are emblematic of the group and essential to its survival and continuity. The psychologists engaged in this research conclude that severe psychological and developmental harm did in fact occur. Child survivors and witnesses from twenty villages in Myanmar consistently show deep and persistent impairments across key domains of development – cognitive, social, and emotional – and display symptoms of trauma, including intrusive

thoughts linked to the loss and uprooting experienced during the “clearance operations,” which continue to prevent them from leading normal and constructive lives. Comparative analysis between Rohingya children born in the camps and those who survived the 2017 atrocities indicates that witnessing and surviving the 2017 violence is associated with more severe psychological impact, thereby weakening any argument that maladjustment among Rohingya children can be attributed solely to camp conditions in displacement.

Moreover, the psychologists found that Rohingya children’s consistent narratives of an absence of trust in caregivers, an inability to feel secure, and a complete incapacity to envisage any future reveal a pattern that is not commonly observed in other children and armed conflict contexts. The destruction of family and community bonds and social networks has led to a fragmented sense of belonging among children and youth. The disrupted sense of self and the loss of cultural continuity indicate the dismantling of the psychological foundations of Rohingya society and can be traced to deliberate attacks on the Rohingya’s collective psyche and social fabric. Cumulative non-lethal harms that undermine a group’s psychological and social continuity may form part of a genocidal pattern when viewed together with physical and biological harms documented in this report.

Taken together, the factual and psychosocial findings in this research provide strong evidence that the Myanmar military’s conduct against Rohingya children was directed at the group’s continuity and at impairing the children’s capacity to contribute to the group’s future survival. This pattern of conduct is consistent with an intent to bring about the physical and biological destruction of the Rohingya, at least in part.

It is therefore essential that the profound, non-lethal harms inflicted on Rohingya children and on future generations of Rohingya society be fully integrated into the assessment of Myanmar’s responsibility for genocide at the merits stage in *The Gambia v. Myanmar* before the ICJ. Any evaluation of genocidal intent and of the scope of the underlying acts would be incomplete if it failed to account for the systematic targeting of children documented in this report.



Photo: LAW/ Dust ©

Recommendations

1. Prioritise effective methods to end impunity and hold perpetrators accountable

Initiate new and enforce existing sanctions

- Considering Myanmar is a persistent violator engaged in grave violations against children, the Working Group on Children and Armed Conflict should: (i) adopt the conclusions of the Secretary General's report on Myanmar; (ii) recommend a comprehensive sanctions regime against the Myanmar junta to the UN Security Council, including against entities supporting Myanmar military's access to military equipment and funds.
- A UN sanctions committee on Myanmar should be established for monitoring and reporting to take consistent and strong action.
- States should continue to enforce existing, and initiate new sanctions against identified perpetrators, and individuals and entities supporting the Myanmar military, among others for the purpose of discouraging actions which violate the rights of children.

Initiate structural investigations within domestic jurisdictions

- Where possible, States should initiate structural investigations in their domestic jurisdictions to prosecute crimes by the Myanmar junta under the principle of universal or extraterritorial jurisdiction, following Argentina's lead.
- Where and when necessary, States should amend or instate national legislation that allows for the prosecution of international crimes.
- Legal action to halt arms exports to Myanmar must be upheld in domestic jurisdictions in line with States' foreign policies based on human rights and respect for international law, following South Africa's lead.

- Relevant States must create an exception to the immunity for third-party content enjoyed by social media companies such as Meta in relation to their role in amplifying hate speech linked to genocidal violence.²²⁶ Where necessary, states must assume jurisdiction over Meta's operations and transnational human rights impacts, following Kenya's lead. States should also explore regulatory avenues under business and human rights frameworks, including mandatory human rights due diligence requirements, to hold social media companies accountable for amplifying child-targeted hate speech that contributes to atrocity crimes.

Support and advocate for progress regarding on-going international investigations and accountability processes

- States must call upon Myanmar to immediately fulfil all provisional measures issued by the ICJ in *The Gambia v. Myanmar* case on Application of the Convention on the Prevention and Punishment of the Crime of Genocide, including preventing acts that may inflict conditions of life depriving of access to food and medicine to Rohingya population that significantly impacts children. Interim reporting by Myanmar on compliance with provisional measures should be made public and available to survivors, and an ad-hoc committee should be created by the ICJ to monitor the implementation of the provisional measures by Myanmar, until the merits decision is delivered.
- States should initiate a resolution for the UN Security Council to immediately refer Myanmar to the ICC for investigation.
- States should support and advocate for the ICC Office of the Prosecutor to formally accept NUG's article 12(3) declaration, which would allow the ICC to expand the current investigation to crimes against Rohingya within Myanmar beyond crime of deportation and persecution and other inhumane acts, and include international crimes since the 2021 coup.

- States should enforce all arrest warrants issued for perpetrators of international crimes committed in Myanmar, including against perpetrators residing in or traveling through their domestic territories.

2. Recognise Rohingya children as stakeholders in the on-going international justice and accountability processes

- Child-sensitive and child-competent approach must be adopted in investigations to effectively and safely engage with children. Investigations must be resourced with trained investigators, interpreters, psychosocial experts, analysts and lawyers, and engage with the local knowledge to adapt to child's lived experience, abilities and vulnerabilities.
- Evidence of grave violations or crimes against and affecting Rohingya children must be mainstreamed in legal proceedings and not reduced to marginal references. Such evidence must be considered as determinative factor in establishing serious international crimes including state responsibility for genocide, particularly with respect to demonstrating prohibited acts and specific intent.
- Considering the Myanmar military's dehumanisation of Rohingya children, extreme brutality against them during 2017 "clearance operations", and the long-term physical and psychological consequences on those who survived, such conduct should be key part of any prosecutorial strategy to hold the Myanmar military and individual officials accountable for the crime of genocide against Rohingya.
- Children and youth who engage contribute to international justice and accountability efforts whether as witnesses or in other capacities otherwise must be provided access to protection avenues by host states or humanitarian response. Their engagement should and be formally recognised under as human rights defender frameworks profile to ensuring they receive support in case of protection risks.

3. Fund and establish comprehensive, long-term rehabilitation support for Rohingya children to address the multifaceted impacts of atrocities committed by Myanmar military

- Exposure to violent death, forced separation from caregivers, and vulnerability among Rohingya children, in Myanmar and now in forced displacement require specialised professional services beyond the psychosocial support available in camps. Healing requires systemic, culturally informed psychosocial interventions aimed at restoring belonging, and intergenerational dignity.

- Donors, humanitarian agencies, and service providers must prioritise and adequately fund rehabilitation services for Rohingya child-survivors, at the very least for highly vulnerable children including but not limited to those who faced physical injuries, orphans who are not socially integrated, and psychological support for children suffering mental health disorders, in order to tackle the lack of comprehensive care available for Rohingya children.
- Member States must adopt amendments to UN General Assembly and Human Rights Council resolutions to promote reparations including through creation of a Victims' Trust Fund.
- International justice mechanisms must pursue reparations within judicial processes for Rohingya and particularly, children. Survivor-centred and age-informed approach to the design and implementation of reparations programmes should be ensured, including but not limited to: access to appropriately trained child-competent medical staff, and instituting psychological therapy programmes for child survivors. (See Box D for more discussion on reparations.)

4. Urgently advance the right to education for Rohingya children and youth in refugee camps, recognising that denial of education perpetuates genocidal destruction and persecution originating in Myanmar

- Donors must immediately increase funding for humanitarian agencies to reopen closed learning centres, affecting over 230,000 to 300,000 children, and the host government must lift restrictions on accreditation and formal education pathways. Learning centres should be recognised and resourced as safe spaces for psychosocial stabilisation and protection from recruitment, trafficking, and gender-based violence.
- Aid organizations should collaborate with existing community-led initiatives, including the Rohingya community school board, recognising the crucial role of community teachers in ensuring structured academic learning.
- Educational access must be expanded to include secondary, university-level, and vocational training programs that are inclusive across genders, including the *bijra* community, to enable youth to emerge as educated leaders capable of engaging with their traditional knowledge, thereby breaking cycles of intergenerational trauma, inherited despair and cultural disconnection.
- States should collaborate with UNHCR to provide complementary pathways to Rohingya students to pursue higher education, following Philippines's lead.

Rohingya Children deserve urgent reparations: Case for a Victims Trust Fund

The dire state of over half a million children in the camps in Cox's Bazar is perhaps one of the most visible on-going consequences of Myanmar's internationally wrongful acts committed against Rohingya.

Children who survived the "clearance operations" live a life that is lacking in nearly all fundamental aspects including their right to nationality, right to a healthy environment and to be nurtured and protected from violence, abuse, exploitation and neglect, and right to education. Nearly eight years have passed since 2017 "clearance operations", yet these children show signs of the trauma due to the extreme violence that was inflicted on them and that they witnessed. Reparations for Rohingya survivors, especially children, is an immediate priority.

The proceedings in *The Gambia v. Myanmar* before the International Court of Justice (ICJ) represents a crucial avenue for the Rohingya community to secure their right to reparations especially for children who face an unconscionable physical and psychological burden of Myanmar's wrongful acts.

In addition to asking the Court to order Myanmar to cease its on-going internationally wrongful acts and to prosecute perpetrators in competent tribunals, The Gambia has sought an order for reparations to Rohingya victims.²²⁷ The reparations have been claimed in the form of restitution and rehabilitation requiring: safe and dignified return of Rohingya refugees, respect for their citizenship, reunification of families, facilitation of search for missing, return of individual and collective properties and place of worship and communal life, or to replace them in kind, and medical, psychosocial, and legal support services for the victims. Where restitution cannot be achieved, Gambia has requested court to order Myanmar to provide compensation. The Gambia has further requested that if the parties fail to agree on the amount, the question of compensation should be settled in subsequent phase of the proceedings.

The ICJ has followed the full reparations principle when determining remedies for internationally wrongful acts, as first articulated by the Permanent Court of International Justice in *Factory at Chorzow* (1928).²²⁸ The Court in *Chorzow* held that the responsible state must make full reparation for the injury caused, which entails "wip[ing] out all the consequences of the illegal act and re-establish[ing] the situation which would in all probability, have existed if that act had not been committed."²²⁹ This foundational principle has become the cornerstone of international law on reparations.

The ICJ has never awarded reparations directly to victims so far in any case, though it indicated in its reparations judgment in *Democratic Republic of the Congo v. Uganda* (2022) that the 325 million USD

compensation awarded to DRC should be fairly and effectively distributed to victims, under the supervision of civil society organizations with participation from victim representatives and international experts, and should be used to fund measures for the benefit of the affected communities. While this case is an important precedent with regards to acknowledging the victims as the beneficiaries for the reparations awarded, notably the Court's "global sum" approach, and the lack of clarity and reasoning in the methodology used for valuation of the loss of life and injuries to persons was critiqued.²³⁰ *The Gambia v. Myanmar* case is a vital moment for the jurisprudence on reparations to progress further towards being more reasoned and equitable outcomes for victims and survivors.

The ICJ has increasingly referred to the ICC's jurisprudence on reparations in recent years;²³¹ particularly the approach adopted in cases like *Prosecutor v. Thomas Lubanga Dyilo* (2015),²³² where the ICC established the procedural and substantive frameworks for reparations. In Lubanga, the Trial Chamber took account of the age-related harm experienced by the victims and noted the need to take all appropriate measures to promote physical and psychological recovery and social reintegration of a child victim. In terms of evidentiary guidance,²³³ the ICC has also taken note of "transgenerational harm," requiring that the harm "shall be personally suffered by the victim." The standard of causation is a but-for relationship between the harm and the crime. There is a further requirement that the crimes of which the person was convicted were the "proximate cause" of the harm for which reparations are sought.

LAW's findings in this report contributes to the scientific evidence for establishing the causal link between the grave physical and psychological consequences as well as the intergenerational harm suffered by child survivors, and the acts of the Myanmar military during the 2017 operations. Clinical evidence shows that Myanmar's action is the proximate cause of the on-going harm to the children and youth who fled as minors, and that their rehabilitation and access to reparations therefore are vital.

Besides the substantive considerations on the question of reparations, procedurally, the ICJ in *The Gambia v. Myanmar* will not be expected to provide a detailed reparations order in its merits judgment anticipated by end of next year – the judgment will only rule on the question of reparations should the decision be in favour of The Gambia. For instance, in the *Armed Activities* case, the ICJ had ruled in 2005 that Uganda must pay reparation for its military activities in DRC. However, since the parties could not agree on an amount, the DRC was forced to return to Court in 2015.²³⁴ It was only in 2022 - more than fifteen years after its original judgement – that the ICJ finally order Uganda to pay.²³⁵

Considering the gravity of on-going harm that the children in the camps face, prolonged deliberations would only deepen the injustice, and therefore a Victims' Trust Fund is important to facilitate creative funding pathways for the benefit of the most vulnerable survivors including children for their rehabilitation in the interim.

Victims Trust Fund: In a progressive step earlier this year, the 59th HRC resolution on Rohingya and other minorities in Myanmar in July 2025, now emphasises that victims must be afforded “justice, truth, reparations, and guarantees for non-repetition” as part of the accountability processes, including before the International Court of Justice (ICJ) and International Criminal Court (ICC).

However, for tangible progress it is important that the international community builds on this resolution and practical measures.

- Member States which can support, influence and cooperate, or with access to assets of persons or entities involved in human rights violations should consider financially supporting the reparations through appropriated funds or voluntary contributions, without diluting the primary responsibility of Myanmar as the primary duty bearer.²³⁶ Entities that profited from dispossession of Rohingya land and property, could be used to facilitate asset freezes and monetary penalties to support reparative justice.
- Member states must support amendments to the UN General Assembly resolution on Myanmar to establish a victims' trust fund to channel potential sources of financing for the benefit of survivors, victims' families and affected communities.²³⁷
- Such a mechanism would help operationalise interim reparations, particularly for children and survivors of conflict related sexual violence and ensure access to specialised health, psychosocial, and legal services.



Annex I

Summary of Long-Term Impacts on Physical Health

TYPE	DESCRIPTION
Gunshot injury	<ul style="list-style-type: none"> • Gunshot wounds to limbs, joints, hand, eye • Severe bone damage, loss of digits/eye • Chronic pain, neuropathy, burning/tingling • Limb-length discrepancy, gait abnormalities • Reduced mobility and hand function • Multiple surgeries; complications from infection
Sexual & Gender-Based Violence (SGBV)	<ul style="list-style-type: none"> • Anal rape with multiple objects + torture • Chronic anal pain, bleeding, constipation • Possible STIs, proctitis, fissures • Difficulty sitting/standing; pelvic discomfort
Blunt Trauma (Head & Body Injuries)	<ul style="list-style-type: none"> • Head injuries from beating with sticks • Delayed treatment with infection • Long-term headaches, vertigo, dizziness • Sensitivity to heat, noise, stress • Difficulty standing/walking for prolonged periods
Penetrating Injuries (Knife, Sharp Objects, Torture)	<ul style="list-style-type: none"> • Knife wounds, deep lacerations, hot rod injuries • Chronic soft-tissue pain; nerve involvement • Reduced grip strength; inability to lift or write • Scarring, stiffness, long-term weakness
Displacement related injuries	<ul style="list-style-type: none"> • Falls, injuries from fleeing on foot • Chronic ankle/foot pain; weakness/numbness • Difficulty climbing stairs, long-distance walking
Delayed treatment and infection	<ul style="list-style-type: none"> • Late access to care (days-weeks delay) • High infection rates at injury sites • Poor healing, chronic pain, functional loss • Need for repeat procedures and long recovery
Functional Disability (Across cases) (Major outcomes across all themes)	<ul style="list-style-type: none"> • Difficulty walking, running, lifting, writing or using hands • Sleep disturbance, chronic fatigue, headaches, vertigo • Reduced ability to work or maintain employment • Long term limitations in daily activities

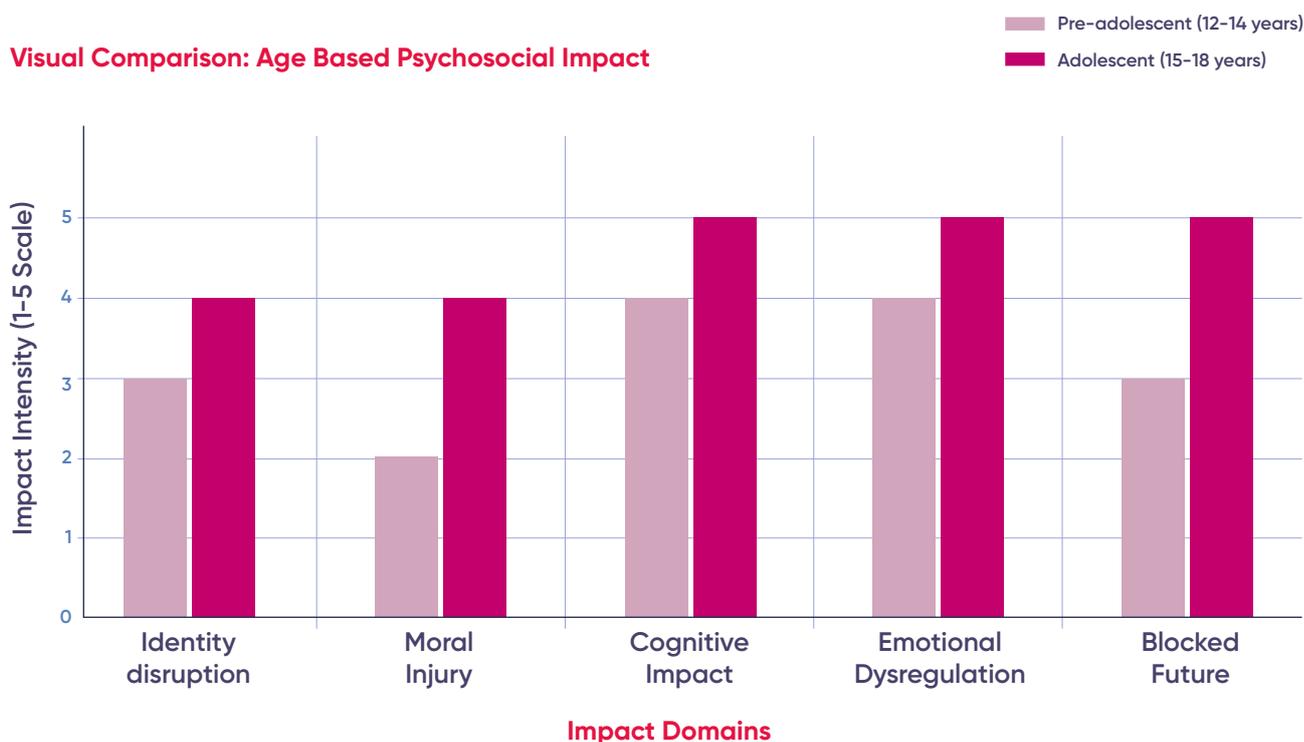
Annex II

Differential Impacts in Early and Middle Childhood: Comparative Clinical Analysis for participants aged 5-7 v. 7-10 during the 2017 “clearance operations”

The exposure to violence during sensitive developmental stages has life-altering effects, and the extent to which developmental trajectories are disrupted is significantly shaped by the age-at-trauma.

The psychologists’ clinical analysis examined the key differences between the early childhood cohort (aged 5–7 during the 2017 atrocities, now 12–14) and the middle childhood cohort (aged 7–10 during the events, now 15–18), based on the five key indicators visualised in Figure 1 below.

Visual Comparison: Age Based Psychosocial Impact



Pre-adolescent participants (currently between 12 to 14), i.e., aged 5-7 years old in 2017 often described a sharp break between a peaceful past and violent upheaval. They spoke of joyful early memories when they were “little” that abruptly ended with the mass atrocities of 2017. Their narratives show not only how they survived the violence, but how their childhood was dismantled by it. One child who was five years old when he left Myanmar alludes to losing normal childhood in that their play and learning stopped. Another participant said: *“When we were little, we used to dream...now it is impossible for us to get proper education.”*

These participants represent a unique cohort whose developmental trajectories were ruptured during a critical period of foundational learning, emotional growth and identity formation. This age group displayed signs of cognitive impairment such as memory loss, concentration difficulties, and learning challenges, rooted in foundational developmental disruptions, emotional dysregulation often tied to immediate sensory memories leading to withdrawal. They often describe a truncated future, *“I thought I could be a doctor... now I know I can’t be anything.”*

The sudden loss of caregivers (due to death or disappearance) among this age group resulted in deep grief and anxiety, and abrupt change to their daily lives. These children often do not fully grasp why events happened, but sense that everything “has changed” for the worse.

Adolescent participants (currently between 15-18), i.e., aged between 7-10 years in 2017 by contrast, expressed a more reflective awareness of injustice and responsibility. As one adolescent puts it, “I understood what freedom is when I lost it”, indicating a new self-awareness born of conflict and forced reconstruction of their worldview. They articulated a more fractured concept of self.

These participants were old enough to remember the events vividly but too young to protect themselves or others, fostering sophisticated appraisals of loss and injustice, yet suffer widespread attention deficits and cognitive setbacks like school dropout. They demonstrate more complex moral injury, characterised by severe guilt over perceived inaction or failure to protect others.

This cohort showed consistent presence of behavioural issues and emotional regulation aspects including aggressive outbursts and self-harm; low frustration tolerance and explosive reactions; and chronic emotional numbing as a defence mechanism: “I feel dead inside.” The overlap between behavioural problems and emotional dysregulation is a hallmark of complex trauma from mid-childhood exposure, compounded by the inability to process feelings in a safe or validating environment.

Adolescents have been frequently forced into adult roles – protecting family members or becoming breadwinners – and this limits normal development. Many spoke about early burdens, “If my parents were alive, my life would be much better”, showing an acute sense of lost potential. Adolescents also display coping strategies such as emotional suppression or immersion in work to avoid trauma, however both boys and girls voice that their life plans (education, careers) are “blocked” now.

In summary, younger children’s trauma centres around lost security and innocence, whereas adolescents, compared to the younger cohort, retain more detailed memories, fostering sophisticated appraisals of loss and injustice, alongside intensified guilt and moral injury from perceived inaction. They exhibit greater meaning-making of their adverse experiences through aspirations to support their community but also a deeper existential despair amid loss of future.

Annex III

Differential Impact between survivors of “clearance operations” and camp-born children

The present research delineated the psychosocial disparities between Rohingya children who survived the 2017 “clearance operations” in Myanmar (recent arrivals) and those born in Bangladesh refugee camps (longstanding refugees). Drawing on participant narratives, the analysis reveals if and to what extent the direct exposure to atrocities in Myanmar eight years back in 2017 distinctly shapes the developmental trajectories of the two separate groups of Rohingya refugee children.

Pre-2017 Perceptions of Normalcy Among Camp-Born Children

Rohingya children born in Bangladesh camps prior to 2017 often described a sense of normalcy in their early childhood. Many perceived themselves as integrated into Bangladeshi society, speaking Bengali fluently, attending schools alongside local children, and forming diverse social networks of Rohingya and Bangladeshi peers. Parents, having emigrated earlier and found relative safety, contributed to this stability by providing attentive care, free from the acute trauma of recent displacement. Participants recounted childhoods marked by freedom to explore, play, and build routines: *“Before 2017, I never thought it was a camp. It was very different, there were still*

quiet places where I could go and read, even outside, I would sit under a tree, and it was quiet”.²³⁸

For many, until 2017, Bangladesh was viewed as home, with family histories from Myanmar either unknown or abstracted to shield children from past persecution.

This detachment from ancestral trauma was notable in their perception of the situation of the Rohingya. Camp-born children frequently offered structured, book-derived rationales invoking international laws or placated narratives on the Myanmar military lacking emotional depth – a “disembodied” quality contrasting sharply with survivors’ visceral attributions of intent to annihilate: “They wanted to destroy us.” Such responses indicate incomplete integration of family history into personal narratives, preserving a buffer against inherited pain, unlike the survivors of 2017 atrocities who have inherited unresolved grief that compounds their trauma and vulnerabilities.

The 2017 Rupture: Re-Actualised Trauma and Degraded Conditions

The forced displacement of over 700,000 Rohingya survivors into Bangladesh between August and September 2017 transformed the lives of camp-born children, introducing secondary trauma through horrific stories, images, and videos of massacres.

“I have a lot of friends at school, who are new refugees. I know their stories, first-hand. They shared with me. It’s been and still is so hard for them. It is so different, their stories compared to ours. For example, a friend of mine witnessed her brother being killed in front of her. Now as a girl, she is responsible for her family. She misses him so much. There are so many tragic stories.”²³⁹

For the first time, parents disclosed their own histories of persecution in Myanmar, re-actualising familial trauma and instilling fear of repatriation to a country perceived as synonymous with death and unknown horrors.

Concurrently, living conditions deteriorated drastically. Freedom of movement was curtailed, school access revoked, and camps became overcrowded with degraded security, resource scarcity, and violence. Pre-2017 stability gave way to hardship: *“Before we could go in and out... But now everything changed. The host community... now treats us differently”*²⁴⁰; *“The space that we had is now occupied by new arrivals from Myanmar and some NGOs have put up their offices... we have nowhere to meet and play with my friends”*.²⁴¹ Educational curricula shifted from Bangladeshi standards to restricted programs: *“Before 2017, we had access to a good curriculum, it was the same curriculum as in Bangladeshi schools. But not anymore”*.²⁴²

These changes compounded the psychological shock, forcing rapid adaptation to a refugee identity amid communal upheaval.

Identity Construct: Abrupt Fragmentation and Dual Reactions

The 2017 events precipitated a brutal rupture in identity formation for camp-born children. Relationships with the host community soured overnight, shifting from near-assimilation to resentment and discrimination. Gratitude toward Bangladesh clashed with disbelief at rejection for the camp-born children. Simultaneously, recent arrivals often segregated them due to linguistic and cultural differences: camp-born children spoke a hybridised Bengali-Rohingya dialect and adopted local dress, marking them as “different.” *“We dress differently also. They still wear more traditional clothes from Myanmar. In a way, we live differently, we dream differently”*;²⁴³ *“The Rohingya from 2017 say that we’re nobody. We’re neither Bangladeshi, nor Rohingya. They say, “You’re no one”*”.²⁴⁴

Participants articulated a stark before/after divide, with trauma rooted in identity conflict: *“I am not a Rohingya, people who came here from Myanmar are Rohingya, me I was born here, I am just a refugee but not a Rohingya”*.²⁴⁵ These dynamics underscore the psychosocial toll of sudden re-identification amid communal divisions.

Psychological Development: Preserved Vitality and Future Projection

Despite these challenges, camp-born children often retained preserved psychological foundations compared to survivors. Trauma symptoms among the camp-born children such as pain, secondary traumatisation, and emotional dysregulation, coexisted with underlying resilience. Pre-2017 stability, including parental support and school access, bolstered cognitive abilities and individuality, enabling vitality absent in direct survivors.

Participants demonstrated capacity to articulate future and steps toward them, even when community oriented such as becoming doctors to heal their people or pursuing education for collective aid. This integration of personal desires into broader goals reflects a sustained sense of self. In other words, even when the end goal is to serve the community as a whole, they can include their personal desires, as individuals.

Comparative Developmental Impacts Across Groups

Across both groups, the 2017 events induced trauma symptoms, yet developmental outcomes diverged. Survivors of the massacres appeared most psychologically collapsed, with stunted growth from societal fabric erosion and familial care loss, hindering recovery. Camp-born children, benefiting from pre-2017 solid foundations (e.g., safer parental upbringings and education), exhibited emotional and intellectual vitality, aiding resilience despite identity struggles and degraded conditions.

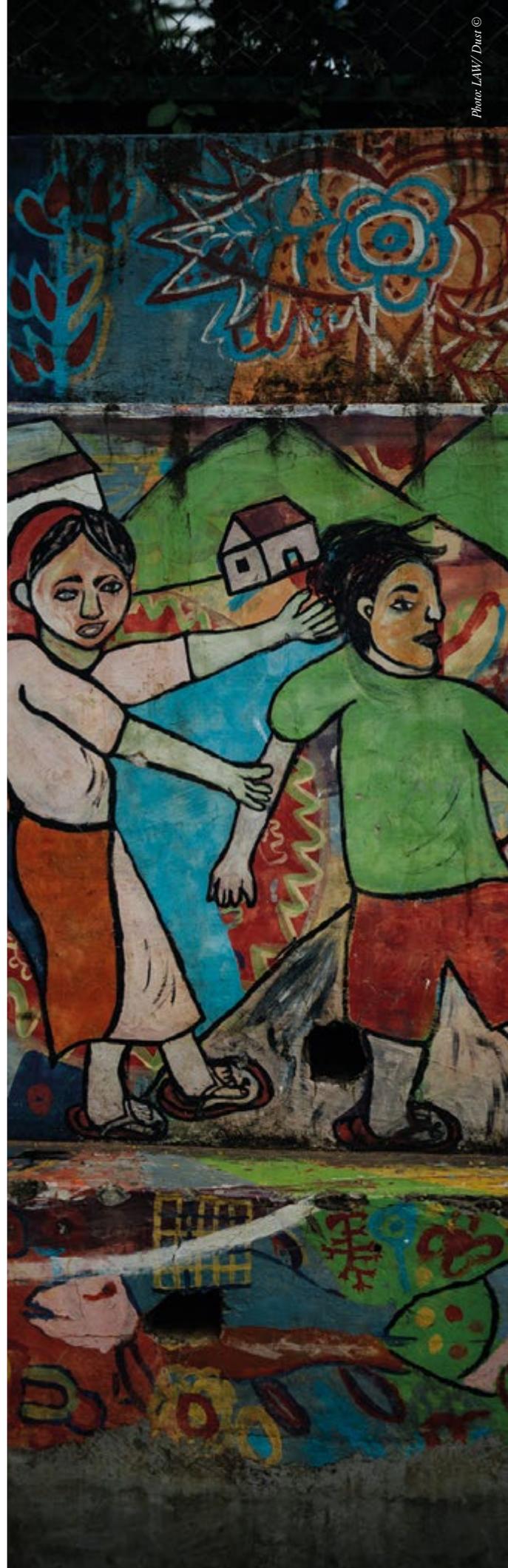


Photo: LAW/ Dinar ©

End notes

- 1 Clinical assessment/findings in this report refers to the analysis by the psychologists and psychiatrists. See Sec. V below.
- 2 Legal action brought by Rohingya particularly youth in this regard, should be allowed to proceed.
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- 95 Office of the Prosecutor, 'Policy on Children' (International Criminal Court, December 2023) <<https://www.icc-cpi.int/sites/default/files/2023-12/2023-policy-children-en-web.pdf>> accessed 25 November 2025.
- 96 For orphaned participants whose guardians could not attend the centre in person due to illness, daily-wage work, or other constraints, the LAW team obtained the guardian's consent by telephone. Once the in-house MHPSS expert confirmed that the child was able to provide informed consent and respond safely to questions, the participant was included in the research.
- 97 MSF, 'Myanmar/Bangladesh: MSF Surveys Estimate That at Least 6,700 Rohingya Were Killed during the Attacks in Myanmar' (MSF, 12 November 2017) <<https://www.msf.org/myanmarbangladesh-msf-surveys-estimate-least-6700-rohingya-were-killed-during-attacks-myanmar>> accessed 24 November 2025
- 98 O'Connor K and Seager J, 'Displacement, Violence, and Mental Health: Evidence from Rohingya Adolescents in Cox's Bazar, Bangladesh' (2021) 18 International Journal of Environmental Research and Public Health 5318 (this study in particular surveyed PTSD and depression outcomes of Rohingya and Bangladeshi adolescents in Cox's Bazar); Riley A and others, 'Systematic Human Rights Violations, Traumatic Events, Daily Stressors and Mental Health of Rohingya Refugees in Bangladesh' (2020) 14 Conflict and Health; Ritsema H and Armstrong-Hough M, 'Associations among Past Trauma, Post-Displacement Stressors, and Mental Health Outcomes in Rohingya Refugees in Bangladesh: A Secondary Cross-Sectional Analysis' (2023) 10 Frontiers in Public Health; Tay AK and others, 'Functional Impairment as a Proxy Measure Indicating High Rates of Trauma Exposure, Post-Migration Living Difficulties, Common Mental Disorders, and Poor Health among Rohingya Refugees in Malaysia' (2019) 9 Translational Psychiatry.
- 99 Aptel C, *Atrocity Crimes, Children, and International Criminal Courts: Killing Childhood* (Routledge, Taylor & Francis Group 2023), p. 219.
- 100 See Beckmann-Hamzei H, 'The Child in ICC Proceedings' (thesis, Intersentia 2015) pp. 77-78 <<https://hdl.handle.net/1887/34974>> accessed 25 November 2025. See also "Age should not be a barrier to a child's right to participate fully in the justice process. Every child should be treated as a capable witness, subject to examination, and his or her testimony should not be presumed invalid or untrustworthy by reason of the child's age alone as long as his or her age and maturity allow the giving of intelligible and credible testimony, with or without communication aids and other assistance." in UN Economic and Social Council, 'Guidelines on Justice in Matters Involving Child Victims and Witnesses of Crime' (22 July 2005) ECOSOC Res/2005/20, para 18.
- 101 See below, Sec. Sec 5.2.2 on the severity of psychological impact observed in all orphans across gender who took part in the research.
- 102 L1_16_F.
- 103 C8_14_F.
- 104 As noted in Sec 5.1 below, there is deep guilt, regret, and self-blame involved across these participants.
- 105 P10_25_F.
- 106 L2_23_H.
- 107 C11_21_H.
- 108 C2_24_F.
- 109 For those who were between 5 and 10 at the time, i.e., currently still minors, their accounts of having witnessed SGBV were corroborated by the guardians who were also screened.
- 110 C5_20_M.
- 111 Legal Action Worldwide, "Every Day, I Remember They Destroyed My Life": Long-term Physical and Psychosocial Consequences of Genocidal Sexual and Gender-Based Violence the Myanmar Military Committed against the Rohingya in Its 2017 "Clearance Operations" (LAW, December 2023) <<https://legalactionworldwide.org/gender-equality-gbv/research-report-every-day-i-remember-they-destroyed-my-life/>> accessed 25 November 2025.
- 112 L2_23_H.
- 113 P10_25_F.
- 114 C6_20_M.
- 115 C12_19_H.
- 116 See Sec. 5.5, below, on collective psychosocial destruction.
- 117 Erikson EH, *Childhood and Society* (WW Norton & Company 1993); Fowler JW, *Stages of Faith: The Psychology of Human Development and the Quest for Meaning* (HarperSanFrancisco 1995).
- 118 Brown J and others, 'Childhood Abuse and Neglect: Specificity of Effects on Adolescent and Young Adult Depression and Suicidality' (1999) 38 Journal of the American Academy of Child & Adolescent Psychiatry 1490, pp. 1490-1496.
- 119 P9_19_M.
- 120 P5_17_M.
- 121 P4_15_M.
- 122 P4_15_M.
- 123 P13_16_M.
- 124 P5_17_M.
- 125 P6_19_F.
- 126 L1_16_F. "My parents were killed. With no reason. They just wanted to kill us. They wanted to destroy our community. I don't understand why"
- 127 Sherin JE and Nemeroff CB, 'Post-Traumatic Stress Disorder: The Neurobiological Impact of Psychological Trauma' (2011) 13 Dialogues in Clinical Neuroscience 263.
- 128 P12_18_F.
- 129 P3_14_F.
- 130 P5_17_M.
- 131 C2_24_F.
- 132 P1_19_M.
- 133 P9_19_M.
- 134 P4_15_M.
- 135 C10_14_M.
- 136 L2_23_H.
- 137 In Rohingya, an Eastern Indo-Aryan language, the word "Ashanti" (or "Ashanti," "Osbanti") is used to refer to a variety of negative emotions such as sadness, anxiety, grief, suffering, and other types of emotional pain. It is used to describe a feeling of mental distress or discomfort.

- 138 P3_14_F.
- 139 L2_23_H.
- 140 L3_25_H.
- 141 P13_16_M.
- 142 C4_16_M.
- 143 Zolnikov TR and Yamada-Mitsuuchi SH, 'The Cambodian Khmer Rouge Child Survivor and Effective Mental Health Treatments' (2022) 6 *American Journal of Qualitative Research* 123; Rieder H and Elbert T, 'Rwanda – Lasting Imprints of a Genocide: Trauma, Mental Health and Psychosocial Conditions in Survivors, Former Prisoners and Their Children' (2013) 7 *Conflict and Health*.
- 144 C2_24_F.
- 145 P4_15_M.
- 146 L9_17_F.
- 147 Spirituality and religious practices are common coping strategy in many populations that have been exposed to crime and war. Beliefs and faith are a powerful tool to face adversity and maintain a positive perspective on the future, which allows survival amid life's tragedies. Participants reported that they turned to prayer as a source of strength, emphasizing that faith helped them endure hardships and find hope. Fayaz I, 'Role of Religion in Posttraumatic Growth among Population Exposed to Armed Conflict: A Systematic Review' (2023) 26 *Mental Health, Religion & Culture* 455; Srinivasa Murthy R and Lakshminarayana R, 'Mental health consequences of war: a brief review of research findings' 2006 (5) *World Psychiatry* 25.
- 148 In cases of "more ordinary" violence, the clinical signs of trauma are sometimes the same as those seen in cases of mass violence (nightmares, anxiety, startle response, etc.), but the coping mechanisms are very different and do not resemble those observed by the technical team for Rohingya children. See Drieu C and Rechtman R, 'Enquête auprès de victimes de violences extrêmes' (*Silence(s)*, October 2025) <<https://revues.mshparisnord.fr/Sciences/index.php?id=436>> accessed 25 November 2025.
- 149 L4_15_F.
- 150 P7_16_F.
- 151 L6_17_M.
- 152 L7_15_F.
- 153 This assessment finds ground, among others in Tajfel's social identity theory. Tajfel proposed that individuals derive part of their self-concept from perceived group membership. When that group is degraded, children internalise inferiority and stigma. See Tajfel H and Turner JC, 'An Integrative Theory of Intergroup Conflict' in WG Austin and S Worchel (eds), *The social psychology of intergroup relations* (Brooks/Cole).
- 154 P5_17_M.
- 155 L8_16_F.
- 156 Notably, the terms intergenerational and transgenerational trauma are used similarly within the life course theory. However, they differ in that the former is more specific, while the latter has a broader focus. Transgenerational trauma can also refer to the impact of collective trauma on communities, such as the lasting effects of slavery or historical oppression on subsequent generations. The clinical analysis by the psychologists in this research focus on intergenerational impact.
- 157 L4_15_F.
- 158 C4_14_M.
- 159 P4_15_M.
- 160 P6_19_F.
- 161 P7_16_F.
- 162 Zolnikov TR and Yamada-Mitsuuchi SH, 'The Cambodian Khmer Rouge Child Survivor and Effective Mental Health Treatments' (2022) 6 *American Journal of Qualitative Research* 123; Rieder H and Elbert T, 'Rwanda – Lasting Imprints of a Genocide: Trauma, Mental Health and Psychosocial Conditions in Survivors, Former Prisoners and Their Children' (2013) 7 *Conflict and Health*.
- 163 Mbembe A, *Necropolitics* (Duke University Press 2019); Sémelin J, *Purify and Destroy: The Political Uses of Massacre and Genocide* (Hurst & Company 2013).
- 164 Fassin D and Rechtman R, *The Empire of Trauma: An Inquiry into the Condition of Victimhood* (Princeton University Press 2009).
- 165 P11_17_M.
- 166 Convention on the Prevention and Punishment of the Crime of Genocide (adopted 9 December 1948, entered into force 12 January 1951), article II.
- 167 Rome Statute of the International Criminal Court Rome Statute (adopted 17 July 1998, entered into force 1 July 2002), article 6.
- 168 See for instance UN Treaty Collection, 'Status of Treaties, Convention on the Prevention and Punishment of the Crime of Genocide' (UN) <https://treaties.un.org/Pages/ViewDetails.aspx?src=IND&mtdsg_no=IV-1&chapter=4&clang=en> accessed 25 November 2025.
- 169 ICJ, Order on Provisional Measures, 2020 (n 7).
- 170 *ibid* para. 86 (1).
- 171 A health survey produced by Médecins Sans Frontiers observed that, after 25 August 2017, 57.5 per cent of child deaths under the age of five resulted from violence and, of those deaths, 56.5 per cent of children died from gunshot wounds.
- 172 *Prosecutor v. Seromba* (Judgment) ICTR-2001-66-A (12 March 2008), para. 46 ("*Seromba* Appeal Judgment").
- 173 See for e.g. *Prosecutor v. Akayesu* (Judgment) ICTR-96-4-T (2 September 1998), para. 503 ("*Akayesu* Trial Judgment") (noting that serious bodily harm includes inhumane treatment); *Prosecutor v. Blagojević* (Judgment) ICTY-02-60-T Judgment (17 January 2005), para. 646 ("*Blagojević* Trial Judgment") (stating that inhuman[e] treatment may cause serious bodily injury); *Prosecutor v. Popović* (Judgment) ICTY-05-88-T (10 June 2010), para. 812 ("*Popović* Trial Judgment") (holding examples of acts causing serious bodily or mental harm include inhumane treatment); *Prosecutor v. Rutaganda* (Judgment and Sentence) ICTR-96-3-T (6 December 1999), para. 51 ("*Rutaganda* Trial Judgment") (interpreting serious bodily harm to include acts of inhumane treatment).
- 174 See for e.g. *Akayesu* Trial Judgment (n 173), para. 504 (highlighting that acts of degrading treatment may cause serious bodily harm); *Prosecutor v. Brdanin* (Judgment) ICTY-99-36-T (1 September 2004), para. 690 (explaining that causing serious bodily harm includes acts of degrading treatment); *Popović* Trial Judgment (n 173), para. 812 (including degrading treatment in acts that may cause serious bodily harm); *Rutaganda* Trial Judgment (n 173), para. 51 (interpreting serious bodily harm to include acts of degrading treatment); *Prosecutor v. Stakić* (Judgment) ICTY-97-24-T (31 July 2003), para. 516 ("*Stakić* Trial Judgment") (interpreting causing serious bodily harm to include acts of degrading treatment); See also *Prosecutor v. Karadžić* (Review of the Indictments Pursuant to Rule 61 of the Rules of Procedure and Evidence) ICTY-95-5-R61, ICTY-95-18-R61 (11 July 1996), para. 25 (citing evidence of degrading treatment causing serious bodily harm in genocide trial).
- 175 See *Blagojević* Trial Judgment (n 173), para. 646 (citing decisions that hold deportation to be among the acts that could cause serious bodily harm); *Attorney General v. Eichmann*, 36 I.L.R. 277, p. 340 (D.C. Jem. 1961) ("*Eichmann* Judgment") (holding that acts of genocide include acts of deportation that caused serious bodily harm).
- 176 See *Eichmann* Judgment (n 175) (citing acts of persecution causing serious bodily harm as evidence of the crime of genocide); *Akayesu* Trial Judgment (n 173), para. 504 (holding serious bodily harm to mean acts of persecution); *Prosecutor v. Musema* (Judgment and Sentence) ICTR-96-13-T (27 January 2000), para. 156 ("*Musema* Trial Judgment") (holding serious bodily harm to include acts of persecution); *Rutaganda* Trial Judgment (n 173), para. 51 (understanding serious bodily harm to include acts of persecution).
- 177 *Akayesu* Trial Judgment (n 173), para. 732.
- 178 *Prosecutor v. Kayishema and Ruzindana* (Judgment) ICTR-95-1-T (21 May 1999), para. 108 ("*Kayishema and Ruzindana* Trial Judgment"); *Seromba* Appeal Judgment (n 172), para. 46; *Prosecutor v. Tolimir* (Judgment) ICTY-05-88/2-T (12 December 2012), para. 738 ("*Tolimir* Trial Judgment").
- 179 *Tolimir* Trial Judgment (n 178), para. 502.
- 180 *Prosecutor v. Krstić* (Judgment) ICTY-98-33-T (2 August 2001), para. 513 ("*Krstić* Trial Judgment").
- 181 Although some judgments have used language suggesting that the harm must "tend to contribute to the destruction of the group" when assessing seriousness under article II(b), this phrasing has occasionally blurred the boundary between the *actus reus* of causing serious bodily or mental harm and the *mens rea* of genocidal intent. Such conflation is not supported by the wording of the Genocide Convention or by the way the jurisprudence has been applied in those very cases. Article II(b) does not require proof that the harm itself produced, or was capable of producing, the destruction of the group. The underlying act is complete once serious bodily or mental harm is inflicted on members of the group. Requiring

- proof of destruction at the *actus reus* stage would collapse the distinction between article II(b) and the specific intent requirement, effectively rendering the *mens rea* element redundant. Courts have therefore treated the “tendency to contribute to destruction” language as descriptive context rather than a legal threshold, and have repeatedly affirmed that the seriousness of the harm is assessed with reference to its gravity and impact on victims, not its independent capacity to destroy the group.
- 182 *Application of the Convention on the Prevention and Punishment of the Crime of Genocide (The Gambia v Myanmar)* (Joint declaration of intervention of Canada, Denmark, France, Germany, the Netherlands and the United Kingdom) ICJ (15 November 2023), para. 39 <<https://www.icj-cij.org/sites/default/files/case-related/178/178-20231115-wri-01-00-en.pdf>> accessed 25 November 2025.
- 183 *Application of the Convention on the Prevention and Punishment of the Crime of Genocide (The Gambia v Myanmar)* (Declaration of intervention by Ireland) ICJ (20 December 2024), para. 41 <<https://www.icj-cij.org/sites/default/files/case-related/178/178-20241220-int-01-00-en.pdf>> accessed 25 November 2025 (“ICJ, Irish Declaration, 2024”).
- 184 *Kayishema and Ruzindana* Trial Judgment (n 178), para. 109.
- 185 L1_16_F.
- 186 *ibid.*
- 187 *Tolimir* Trial Judgment (n 178), para. 755.
- 188 *Blagojević* Trial Judgment (n 175), para. 647.
- 189 The psychological trauma of the survivors who were unable to go through the normal process of grief, has been previously recognised as the ‘Srebrenica Syndrome’. See ‘Srebrenica Syndrome’ (*Sense Transitional Justice Centre*, 18 July 2013) <<https://archive.sensecenter.org/vijesti.php?aid=15188>> accessed 25 November 2025.
- 190 *Blagojević* Trial Judgment (n 175), para. 845 (citing *Prosecutor v. Nikolić* (Sentencing Judgment) ICTY-02-60/1-S (2 December 2003), para. 113 referring to the testimony of Teufika Ibrahimović, KT. 5817-18).
- 191 *Akayesu* Trial Judgment (n 173), paras 731-733.
- 192 *Musema* Trial Judgment (n 176), paras 158, 933.
- 193 *Prosecutor v. Gacumbitsi* (Judgment) ICTR-2001-64-T (17 June 2004), paras 291-292.
- 194 *Prosecutor v. Zelenović* (Sentencing Judgment) ICTY-96-23/2-S (4 April 2007), para. 36.
- 195 UN HRC, “‘They came to destroy’: ISIS Crimes Against the Yazidis – Report of the Independent International Commission of Inquiry on the Syrian Arab Republic”, (15 June 2016) A/HRC/32/CRP.2 <https://www.securitycouncilreport.org/atf/cf/%7B65BFC9B-6D27-4E9C-8CD3-CF6E4FF96FF9%7D/A_HRC_32_CRP.2_en.pdf> accessed 25 November 2025.
- 196 L4_15_F.
- 197 L6_17_M.
- 198 *Krstić* Trial Judgment (n 180), para. 513; *Kayishema and Ruzindana* Trial Judgment (n 178), para. 107.
- 199 *Prosecutor v. Jelisić* (Judgment) ICTY-95-10-A (5 July 2001), para. 48; *Kayishema and Ruzindana* Trial Judgment (n 178), para. 94.
- 200 *Akayesu* Trial Judgment (n 173), para. 699.
- 201 *Kayishema and Ruzindana* Trial Judgment (n 178), para. 93.
- 202 UN FMM, Detailed Findings, 2018 (n 28), para. 1409.
- 203 See generally UN FMM, Detailed Findings, 2018 (n 28).
- 204 *Akayesu* Trial Judgment (n 173), paras 121, 125.
- 205 *ibid* paras 118, 125.
- 206 *Krstić* Trial Judgment (n 180), para. 156; *Prosecutor v. Krstić* (Judgment) ICTY-98-33-A (19 April 2004), para. 26 (“*Krstić* Appeal Judgment”).
- 207 *Prosecutor v. Akayesu* (Judgment) ICTR-96-4-A (23 November 2001), para. 444. See also *Akayesu* Trial Judgment (n 173), para. 128.
- 208 *Krstić* Trial Judgment (n 180), para. 634.
- 209 *Krstić* Appeal Judgment (n 206), paras 19-21. The offence of genocide does not require proof that the perpetrator chose the most efficient method to accomplish his objective of destroying the targeted part. Even where the method selected will not implement the perpetrator’s intent to the fullest, leaving that destruction incomplete, this ineffectiveness alone does not preclude a finding of genocidal intent.
- 210 In *Akayesu*, the Trial Chamber relied on popular media and political leaders’ statements which among others pointed that children must not know what a Tutsi looked like unless they referred to history books. *Akayesu* Trial Judgment (n 173), paras 123, 127, 173. *Prosecutor v. Nabimana, Barayagwiza and Ngeze* (Judgment) IC-TR-99-52-A (28 November 2007) (Media Case), paras 515, 740, 744.
- 211 *Akayesu* Trial Judgment (n 173), paras 123, 127, 173.
- 212 Independent Investigative Mechanism for Myanmar, ‘Anti-Rohingya Hate Speech on Facebook: Content and Network Analysis’ (*IIMM*, 2024) <https://iimm.un.org/sites/default/files/2024/11/Hate-Speech-Report_EN.pdf> accessed 25 November 2025 (“IIMM Hate speech Report”).
- 213 Stecklow S, ‘Hatebook: Why Facebook is losing the war on hate speech in Myanmar’ (*Reuters*, 15 August 2018) <<https://www.reuters.com/investigates/special-report/myanmar-facebook-hate/>> accessed 25 November 2025 (“Reuters Hatebook”); Amnesty International, ‘Myanmar: Facebook’s Systems Promoted Violence Against Rohingya; Meta Owes Reparations’ (29 September 2022) <<https://www.amnesty.org/en/latest/news/2022/09/myanmar-facebooks-systems-promoted-violence-against-rohingya-meta-owes-reparations-new-report/>> accessed 25 November 2025.
- 214 Myawady Daily Post (17 September 2017) as cited in IIMM Hate speech Report (n 212).
- 215 Reuters Hatebook (n 213).
- 216 Ruvugiro ES, ‘Rwanda: The Gruesome Plight of Children during the Tutsi Genocide’ (*JusticeInfo.net*, 11 October 2017) <<https://www.justiceinfo.net/en/34925-online-exhibition-pays-gruesome-tribute-to-child-suffering-in-rwandan-genocide.html>> accessed 25 November 2025.
- 217 *Application of the Convention on the Prevention and Punishment of the Crime of Genocide (Croatia v. Serbia)* (Judgment) ICJ (3 February 2015), paras 408 and 413 <<https://www.icj-cij.org/sites/default/files/case-related/118/118-20150203-JUD-01-00-EN.pdf>> accessed 25 November 2025; *Prosecutor v. Tolimir* (Judgment) ICTY-05-88/2-A (8 April 2015), paras 246-259; *Kayishema and Ruzindana* Trial Judgment (n 178), para. 93; *Akayesu* Trial Judgment (n 173), para. 523; *Musema* Trial Judgment (n 176), para. 932.
- 218 *Akayesu* Trial Judgment (n 173), para. 520 “The offender is culpable because he knew or should have known that the act committed would destroy, in whole or in part, a group.”; See also ICJ, Irish Declaration, 2024 (n 183), para. 41.
- 219 ICJ, Irish Declaration, 2024 (n 183), para. 41.
- 220 *Krstić* Appeal Judgment (n 206), para. 20. See also for e.g. *Eichmann* Judgment (n 175), para. 25 (under the Convention, a special intention is requisite for its commission, an intention that is not required for the commission of a ‘crime against humanity’); *Akayesu* Trial Judgment (n 173), paras 497, 516; UN HRC, ‘Report of the Special Rapporteur in the field of cultural rights’ (3 February 2016) A/HRC/31/59, para. 64 (“[t]he intentional destruction of cultural and religious property and symbols can also be considered as evidence of intent to destroy a group within the meaning of the Convention on the Prevention and Punishment of the Crime of Genocide”).
- 221 Office of the Prosecutor, ‘Policy on Cultural Heritage’ (ICC, June 2021), paras 15-16 <<https://www.icc-cpi.int/sites/default/files/itemsDocuments/20210614-otp-policy-cultural-heritage-eng.pdf>> accessed 25 November 2025.
- 222 *Application of the Convention on the Prevention and Punishment of the Crime of Genocide (Bosnia and Herzegovina v Serbia and Montenegro)* (Judgment) ICJ (26 February 2007), para. 344 <<https://www.icj-cij.org/sites/default/files/case-related/91/091-20070226-JUD-01-00-EN.pdf>> accessed 25 November (endorsing the observation in *Krstić* Trial Judgment (n 180), para. 580).
- 223 *Prosecutor v. Karadžić* (Judgment) ICTY-95-5/18-T (24 March 2016), para. 546.
- 224 *Kayishema and Ruzindana* Trial Judgment (n 178), paras 115-116; *Krstić* Trial Judgment (n 180), paras 521-532; *Blagojević* Trial Judgment (n 175), para. 653; *Stakić* Trial Judgment (n 174), para. 519.
- 225 ICC, Request for Authorisation, 2019 (n 29); ICC, Authorisation of Investigation, 2019 (n 3).
- 226 Legal action brought by Rohingya particularly youth in this regard, should be allowed to proceed.
- 227 ICJ, Application for Provisional Measures, 2019 (n 6).
- 228 See *Factory at Chorzów (Germany v. Poland)*, 1927, P.C.I.J., Series A, No. 9 (July 26), p. 21 <<https://www.ilsa.org/Jessup/Jessup17/Batch%201/FactoryAtChorzow.pdf>> accessed 25 November 2025.

- 229 *ibid.*
- 230 The “global sum approach” refers to ICJ’s method of awarding a single lump sum amount of compensation where precise quantification of damages is not feasible. See *Armed Activities on the Territory of the Congo (Democratic Republic of the Congo v. Uganda)* (Reparations) ICJ (9 February 2022) <<https://www.icj-cij.org/sites/default/files/case-related/116/116-20220209-jud-01-00-en.pdf>> accessed 25 November 2025 (“ICJ, *DRC v. Uganda* Reparations, 2022”); Jaber S, ‘Case Note: The International Court of Justice’s 2022 Reparations Judgement in *DRC v Uganda*’ (June 2025) *International Review of the Red Cross* No 928 <<https://international-review.icrc.org/articles/case-note-the-international-court-of-justices-2022-reparations-judgment-in-drc-v-uganda-928>> accessed 25 November 2025.
- 231 Pérez-León-Acevedo J-P, ‘Compensation in Cases of Mass Atrocities at the International Court of Justice and the International Criminal Court’ (2023) 22 *The Law & Practice of International Courts and Tribunals* 30; See also *Armed Activities on the Territory of the Congo (Democratic Republic of the Congo v. Uganda)* (Judgment) ICJ (19 December 2005), paras 109-110 <<https://www.icj-cij.org/sites/default/files/case-related/116/116-20051219-JUD-01-00-EN.pdf>> accessed 25 November 2025 (“ICJ, *DRC v. Uganda* Judgment, 2005”).
- 232 See *Prosecutor v. Thomas Lubanga Dyilo* (Order for Reparations) ICC-01/04-01/06 (3 March 2015), paras 23-25 <https://www.icc-cpi.int/sites/default/files/RelatedRecords/CR2015_02633.PDF> accessed 25 November 2025.
- 233 *Prosecutor v. Ntaganda* (Addendum to the Reparations Order of 8 March 2021) ICC-01/04-02/06 (14 July 2023), para. 105 <https://www.icc-cpi.int/sites/default/files/CourtRecords/CR2023_01595.PDF> accessed 25 November 2025.
- 234 ICJ, *DRC v. Uganda* Judgment, 2005 (n 231), p. 280.
- 235 ICJ, *DRC v. Uganda* Reparations, 2022 (n 230), Separate Opinion of Judge Robinson, para. 4. Judge Robinson’s referring to the global sum as a “brave new world” can be interpreted further to mean that the Court is navigating through mysterious territory and is taking an undefined approach that would not be the mainstay of the Court’s jurisprudence.
- 236 This suggestion is based on the Report of the Special Rapporteur on the promotion of truth, justice, reparation and guarantees of non-recurrence, Fabián Salvioli. UNGA, ‘Report of the Special Rapporteur on the promotion of truth, justice, reparation and guarantees of non-recurrence, Fabián Salvioli - Financing of reparation for victims of serious violations of human rights and humanitarian law’ (14 July 2023) A/78/181, paras 95, 103.
- 237 cf UNGA, ‘Resolution on Furtherance of Remedy and Reparation for Aggression Against Ukraine’ (November 2022) A/ES-11/5, paras 3 & 4; UNGA, ‘Resolution on the Advisory opinion of the International Court of Justice on the legal consequences arising from Israel’s policies and practices in the Occupied Palestinian Territory, including East Jerusalem, and from the illegality of Israel’s continued presence in the Occupied Palestinian Territory’ (September 2024) A/RES/ES-10/24, para. 10. See ‘Rabat Report: The Concept and Challenges of Collective Reparations’ (*ICTJ*, February 2009), Section 3.4.4.
- 238 L4_15_F.
- 239 *ibid.*
- 240 L7_15_F.
- 241 P16_14_M.
- 242 L8_16_F.
- 243 L9_17_F.
- 244 L8_16_F.
- 245 P11_17_M.



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**"ALTHOUGH THE
MILITARY BURNED
OUR HOUSES IN
MYANMAR, I STILL
THINK THAT IS
MY HOME"**

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