

ROHINGYA CRISIS

The limits to history



PUBLIC discussions around Rohingya people currently fleeing violence in Rakhine state, Myanmar, have often involved arguments about history. While critical historical analysis is

useful in offering insights into conflicts, History—if treated as a single, knowable past—is not. This is especially true when dealing with ethnicity. Whatever the past was, no amount of historical research can justify the current violence against Rohingya people.

The debate around Rohingya ethnicity lacks awareness of wider historiography (the history of historical research). On the one side, those denying that this is ethnic cleansing argue that there is no such thing as a Rohingya ethnic group. It is claimed that these people are actually Bengali Muslim migrants. The writings of historians such as Jacques Lieder have been used, by some, to support this position. He argues that the use of the term Rohingya to connote this Muslim population, although noted by eighteenth-century European travellers, is a modern one. For him, Rohingya is primarily a political identity. On the other side, Rohingya activists have resisted this characterisation. They have countered that there is evidence of Muslims living in the Rakhine region for centuries, and that these groups have periodically been called Rohingya.

Writing in *The Diplomat* last year, one commentator attempted to disentangle these debates by arguing that “the Rohingya are not an ethnic, but rather a political construction [emphasis in original]”. This is wrong. Not only wrong in the sense of it being inaccurate, but wrong in two other ways: 1) in that it relies on a false division between the categories “political” and “ethnic”, and then treats the two as if they are mutually exclusive; and 2) in that it assumes that we can definitively know people’s ethnic



Rohingya refugees take shelter under a tarpaulin as it rains at Thaingkhali makeshift refugee camp in Cox’s Bazar, September 14, 2017.

could know how this population self-identified. But can we know this? What records would have been left that could evidence how these populations would have seen themselves? We might even ask, if such records were produced, would we be able to fully understand them on the same terms as those past peoples? The terms used or adopted by ethnic groups are historically fluid. Mandy Sadan’s amazing book (*Being and Becoming Kachin*) on the Kachin captures this process of “being and becoming” in detail. Since we cannot know, or necessarily entirely understand, ethnic self-identification in the past, its recorded absence is no basis for denying current ethnic self-identifications. This is just as true for Burmese nationality as it is for Rohingya ethnicity. As historians such as Alicia Turner have shown (*Narratives of Nation, Questions of Community: Examining Burmese Sources without the Lens of Nation*), nationalism as a primary identity is a modern phenomena in Myanmar (as I would argue it is globally), one that has emerged partly out of anti-colonial politics. Just because there was no Burmese nation in the seventeenth century—at least not as we would understand the term today—does not mean that contemporary Burmese people are not really Burmese.

History has limits. We can only know so much. It can only answer certain questions. The discussion around the history of the Rohingya, at its worst, deflects attention away from the problem of defining citizenship through ethnic indigeneity. Such a definition is premised on bad history and ethnic chauvinism, and it is a problem across the world. More urgently, right now in Myanmar it is contributing to an ongoing ethnic cleansing of a people who today identify as Rohingya, irrespective of what we may or may not know of the past.

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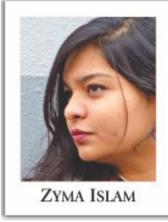
identification in the past. Starting with 1)—there is no ethnic identity that is not also, in part, a political construction. Ethnicity has proved to be a difficult object for historians to pin down. Its definitions and modes of expression have changed over time. As a result, surviving evidence of ethnic identification is often hugely varied across time. However, historians working on a range of different time periods argue that ethnic identification is intimately connected to political arrangements. Victor Lieberman, global

historian of the medieval and early modern periods, argued, specifically on the case of Myanmar, that developments in state structures were intertwined with shifts in ethnic identification. As polities became more bureaucratic, ruling ethnic identities hardened. Historians of the nineteenth century, such as David Scott (*Colonial Governmentality*), have argued that colonial regimes fostered a further hardening of ethnic identity, as it became central to how groups interacted with the state. Anti-colonial nationalism and decolonisation only made

the political import of ethnicity greater, as work on nationalism has shown. It is not only Rohingya ethnicity that is a political construct, so too is Bengali, so too is Rakhine, so too is Bamar. What is more, the use of these different political constructions of ethnicity shapes how people self-identify.

2) Just because there is limited historical evidence of Muslims in this corner of the Bay of Bengal referring to themselves as Rohingya, this does not mean that there was not a form of ethnic identification that could be traced back to earlier periods if (and it’s a big if) we

Early detection of birth defects – a far cry



THIS is the moment in history when Bangladeshi medical science marked a milestone by successfully completing the

remarkable surgery separating the ten-month-old pygopus twins Tofa and Tahura. Twenty-four doctors spent nine hours inside an operating theatre operating on the spine of the twins.

This is also the time period when only 30 percent of mothers completed all four antenatal care hospital visits. The four basic hospital visits that are needed to gauge the viability of a pregnancy against potential health risks to mother and child. In an interview with *The Daily Observer*, their paediatric surgeon Dr Shahnoor Islam said that Tofa-Tahura’s mother has never had any ultrasound or test.

As a result the twins were delivered at their *nanabari*, their maternal grandparent’s village home in Gaibandha, under the supervision of a village midwife. It is a miracle itself that their mother survived such a complicated labour. According to data by Every Preemie-SCALE, a USAID multi-country project, last year when these babies were born, 48 percent of all births were unattended home births.

Praise for the brilliant doctors at Dhaka Medical College Hospital’s Burn and Plastic Surgery Unit who managed this laudable feat should also come with the acknowledgement that Tofa-Tahura’s mother had no idea she was having conjoined twins because she falls out of reach of formal prenatal care.

The same can be said of the toddler Choity Khatun, the girl with three legs who returned home last year after a successful surgery in Australia funded by Children First Foundation. If it was

only a third limb that needed to be separated, it would not have been such a tricky situation for the three-year-old. She had caudal duplication syndrome where her body absorbed her twin’s in the womb, leaving Choity with double organs, and in irregular places. The mother never sought antenatal care.

Just last year DMCH saw two more cases of conjoined twins. One of the

women fell outside the radar of institutional prenatal care.

Late last summer when the waters in the north of the country were on the rise, Moushumi Akhter was living marooned in an island village in a haor. She and her neighbours have to wait for up to two hours for a boat to the shores of the mainland. From there the hospital is approximately another 12km away. A hospital visit is costly, requires a family

took me to the mainland,” said Moushumi. She delivered her son at home afterwards, and even had another one after that at home. Why had she not gone to a hospital for prenatal care, or at least for the delivery, I asked her. Because none of the other women told her to, Moushumi said, shrugging off the question. The mother had dropped out of high school after her wedding because she could not afford

and too impoverished to afford the trip. Add to that the fact that a pregnant teenager would require somebody to take a day off work and accompany her. All of this is assuming her support network thinks it is necessary for her to go to the hospital; in this case, since she had left school, her only support network is her family.

This is not in any way unusual. Several years ago, I spent summer of

reasoning is if the mother was educated.

A University of Rajshahi team did a nationwide survey that got published in *PLOS* journal last year and found that “women who were married after age 18, had secondary or higher level of education, and were from the wealthiest households were more likely to utilise antenatal and delivery care”.

In retrospect, perhaps the entire discussion is doomed to be Sisyphean in nature without equity in health care and policy changes that let women be in charge of their bodies. As Tofa and Tahura go off to lead a happy, normal life, two more girls are queued up to be separated. Rabia and Rukia were brought to Dhaka from Pabna in July and are joined at the head; doctors are now assessing the situation to see if a surgery to separate them will leave them with brain damage.

Here however is the catch: in an interview given to the British newspaper *Daily Mail*, the twins’ mother said that she had gone for late-stage prenatal care. After assessing her ultrasound, taken during the last month of her pregnancy, her doctor told her that the heads of the fetuses were too large, and that it was probably due to fluid accumulation. The doctor prescribed anti-inflammatory medicines. The fact that an upazila level doctor could not identify conjoined fetuses days before labour is distressing. Conjoined twins can be detected as early as the beginning of the second trimester.

Having said all of this, if a mother does find out that she is carrying conjoined twins—which in all likelihood will not be before her second trimester—scoring a termination will be a legal and moral dilemma. And so, we make a full circle back to where we started.

Zyma Islam is a member of *Star Weekend* magazine, *The Daily Star*



Tofa and Tahura, who were joined at the waist, were separated through a pioneering surgery by a 24-member team of doctors in Dhaka Medical College Hospital.

FILE PHOTO

Praise for the brilliant doctors at Dhaka Medical College Hospital’s Burn and Plastic Surgery Unit who managed this laudable feat should also come with the acknowledgement that Tofa-Tahura’s mother had no idea she was having conjoined twins because she falls out of reach of formal prenatal care.

cases was a pair of newborns sharing legs but with two heads, who were abandoned at the hospital to die. The other case hailed from Zibannagar upazila in Chuadanga, where a mother gave birth to two babies joined at the chest. In this case, the ultrasound was only done right before delivery. It is important to ask why these

effort, and is worth a day’s wages. Moushumi is in her late teens now, but was 15 years old only when pregnant with her first child.

“I would not have gone to the hospital for a check-up during my pregnancy but I slipped on the mud and fell into the water. My family members were afraid that I might miscarry, so they

to take a boat to school anymore. Taking a boat to the mainland is a big deal for this woman who lives hand-to-mouth.

Putting it into context, the answer to why Moushumi had not received formal prenatal care is multi-pronged. To begin with, she is too far away from the nearest hospital or health complex,

freshman year asking the mothers of Raozan upazila in Chittagong why they did not go to the hospital for prenatal care. Across all age groups—from new teenage mothers to middle-aged matriarchs—they had one reason: their family did not think it was necessary. The only factor that seemed to make a dent in this

A WORD A DAY

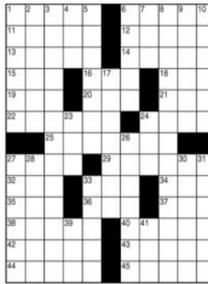


PARRY
verb

Ward off (a weapon or attack), especially with a countermove.

CROSSWORD BY THOMAS JOSEPH

- ACROSS**
- 1 Crime outing
 - 6 Grant’s successor
 - 11 Happened
 - 12 Love to pieces
 - 13 Coarse files
 - 14 Boston airport
 - 15 Museum focus
 - 16 Hot blood
 - 18 Simile center
 - 19 Keg need
 - 20 Calendar box
 - 21 Parrot or puppy
 - 22 clog
 - 24 Went fast
 - 25 Afternoon breaks
 - 27 Revue segment
 - 29 Platitude
 - 32 Sold-out show
- DOWN**
- 33 Avril follower
 - 34 Not to mention
 - 35 Bordeaux buddy
 - 36 Sphere
 - 37 Suffering
 - 38 Emotional states
 - 40 German sub
 - 42 Broadway orphan
 - 43 Time being
 - 44 Attendance count
 - 45 Buddy of “Barnaby Jones”
 - short
 - 5 Dregs
 - 6 “Roots” writer
 - 7 Bustle
 - 8 Crow pose and the like
 - 9 Correcting aid
 - 10 Capitol group
 - 17 Jay Z, for one
 - 23 Trading spot
 - 24 Letter after sigma
 - 26 Roman officer
 - 27 Native healer
 - 28 Geisha garb
 - 30 Comfort
 - 31 Like lava
 - 33 Exodus figure
 - 39 Game cube
 - 41 Short cut



YESTERDAY’S ANSWER

RATES SCOUR
OLIVE HORSE
YEMEN OPTED
ENDOWS
DEL SPY TAN
AVIATE LIRA
LONDONTIMES
EKED POTENT
YES TIP LAY
LATINO
DECAL CORAL
AMAZE ANDRE
DUPES LOSES

BEETLE BAILEY



BY MORT WALKER



BABY BLUES



BY KIRKMAN & SCOTT

