



# Bangladesh

## Humanitarian Situation report No.45 (Rohingya influx)

REPORTING PERIOD: 27 November to 10 December 2018

SITUATION IN NUMBERS

## Highlights

- UNICEF worked closely with its sector partners to run a ‘Back to Learning’ campaign through which all children in camps were encouraged to undertake a learning competency assessment, ensuring they are placed in the correct level in their learning centres.
- UNICEF and the Government along with partners are conducting the fourth and last round of oral cholera vaccination campaign from 17 November to 13 December targeting 330,000 people over 1 year in the Rohingya and host communities. As of 10 December, 217,652 refugees and 80,671 members of the host community had been vaccinated.
- The Bangladesh 2018 HAC appeal is 76 per cent funded with the generous support of its donors. However, US\$35.7 million is still required to fully deliver UNICEF’s response to meet Rohingya and host community needs.
- UNICEF provides non-formal basic education to 139,920 children with support from 4,125 trained teachers. So far UNICEF has built 1,428 Learning Centres (LCs) with another 153 LCs under construction out of 2,123 planned LCs. The remaining 542 LCs will be constructed once approval is received from the relevant authorities.

## 13 December 2018

**703,000**

Children in need of humanitarian assistance (JRP March to December 2018)

**1.3 million**

People in need - including refugees and host community (JRP March to December 2018)

**392,580**

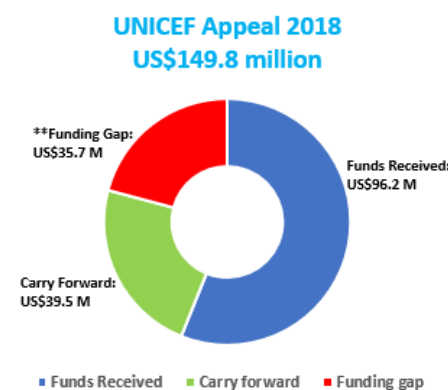
Children (arrived since 25 August 2017) in need of humanitarian assistance (Based on ISCG SitRep 29 November 2018)

**728,000**

New arrivals since 25 August 2017

## UNICEF’s Response with Partners

Key Programme Indicators	Sector		UNICEF and IPs (Refugees and Host Communities)	
	Target	Total Results (2018)	Target*	Total Results (2018)
<b>Nutrition:</b> Children 0-59 months treated for severe acute malnutrition	35,093	30,226	24,546	19,797
<b>Health:</b> People aged 1 year and above who received oral cholera vaccination			950,000	1,177,596
<b>WASH:</b> People with access to safe drinking water	1,052,495	870,676	600,000	369,501
<b>Child Protection:</b> Children who have benefitted from psychosocial activities	400,000	218,765	300,000	164,650
<b>Education:</b> Children (4-14) enrolled in emergency non-formal education	368,000	260,530	151,765	139,920









\*UNICEF aligned its programme targets and results with the JRP. All targets are from January-December 2018 except nutrition which is March-December 2018 to be in line with the sector.

\*\* Funding gap excludes the surplus for overfunded sectors (including Education, C4D and Emergency Preparedness – see funding section for more detail), to ensure funding needs for those sectors that remain underfunded are reflected

General elections will be conducted on the 30 December 2018. UNICEF is ensuring that contingencies are in place for the continuation of lifesaving services in case of any interruptions in the current response.

The 2019 JRP has been validated and in the final stages of completion pending review and approval from Government at National Level. UNICEF is finalizing its Humanitarian Action for Children (HAC) appeal for next year. The 2019 HAC will include the requirements under the JRP along with broader support to the affected host communities, and emergency preparedness and response nationwide.

	Newly arrived Rohingya refugees	728,000
	Newly arrived children	54%
	Newly arrived women and girls	60%
	Newly arrived pregnant and lactating women	10%
	Total affected population	1,300,000
	Total affected children	703,000

*Note: Based on Inter-Sector Coordination Group reports*

Following the attempt to organize an initial repatriation last November, not a single refugee expressed interest to voluntarily return back to Myanmar. It is now clear that the condition is not ready for any repatriation in Myanmar. UNICEF supports UNHCR's stance on repatriation which is, "upon the free and informed decision by refugees, on an individual basis, to return".

## Humanitarian Leadership, Coordination and Strategy

The humanitarian response for the Rohingya refugee crisis is facilitated by the Inter-Sectoral Coordination Group (ISCG) in Cox's Bazar. The ISCG Secretariat is guided by the Strategic Executive Group (SEG) that is designed to be an inclusive decision-making forum consisting of heads of humanitarian organizations.<sup>1</sup> It was agreed by relevant stakeholders that this current coordination structure would be reviewed following after the monsoon season. The review team, composed of UNHCR, IOM and UNDP, visited Bangladesh in October and met with the various stakeholders both in Cox's Bazar and in Dhaka. The mission report is still awaited.

On the government side, a National Task Force, established by the Ministry of Foreign Affairs, leads the coordination of the overall Rohingya crisis. Since the August 2017 influx, the Ministry of Disaster Management and Relief (MoDMR) has been assigned to coordinate the Rohingya response with support from the Bangladesh Army and Border Guard Bangladesh. At the Cox's Bazar level, the Refugee, Relief and Repatriation Commissioner (RRRC) and the Deputy Commissioner are critical for day-to-day coordination. In Cox's Bazar UNICEF leads the nutrition sector and child protection sub-sector, and co-leads the education sector with Save the Children and co-leads the WASH sector with Action Against Hunger.

In Cox's Bazar, UNICEF's actions are focused around four key strategies. Saving lives and protecting children and their families in the refugee camps remains paramount. Secondly, UNICEF is promoting social cohesion and confidence building in the host communities in Ukhiya and Teknaf Sub-districts. Thirdly, systems are being strengthened and programme implementation accelerated in the rest of the district of Cox's Bazar. Finally, UNICEF will apply the lessons learnt from its work in the refugee camps and the district of Cox's Bazar to feed these into national strategies and its work in other parts of the country.

## Summary Analysis of Programme Response

**Nutrition:** During the reporting period, UNICEF partners screened 78,666 Rohingya children (39,636 boys and 39,030 girls) for acute malnutrition, contributing to reduced mortality and morbidity in children under 5. Among these children, community nutrition volunteers (CNVs) identified 683 children (278 boys and 405 girls) aged 6-59 months with severe acute malnutrition (SAM) and referred them to community-based outpatient therapeutic programme (OTP) centres for treatment. A total of 759 children (319 boys and 440 girls) aged 6-59 months were admitted to OTPs, including those referred by UNICEF or other nutrition centres, or self-referred. These children will receive quality therapeutic treatment and regular follow up through a comprehensive package of nutrition services. In November 2018, 1,505 children were treated in 35 UNICEF-supported OTPs, with 97.4 per cent successfully discharged as cured.

Eighty-two children aged 0-6 months (45 boys and 37 girls) were admitted to 7 CMAM-I centres (Community-based Management of At-Risk Mothers and Infants) supported by UNICEF. Seven severely malnourished children with medical complications, the most life-threatening form of malnutrition, were admitted to the two UNICEF-supported Stabilization Centres for in-patient treatment. CNVs also identified 2,095 children (963 boys and 1,132 girls) with moderate acute malnutrition and referred them to nearby Targeted Supplementary Feeding Programme and Blanket Supplementary Feeding Programme centres for treatment, and to prevent their nutritional status from deteriorating to SAM.

<sup>1</sup>The SEG meets weekly, chaired by the Resident Coordinator and co-chaired by IOM and UNHCR. The membership includes UN agencies, INGOs (ACF, MSF and Save the Children), and the Red Cross/Crescent movement (ICRC, IFRC).

**Host Community:** UNICEF's efforts continued to reach the host community of Cox's Bazar district through system strengthening of local government health authorities (Civil Surgeon Office and government hospitals) and extension of nutrition services for Bangladeshi children. Sixty CNVs supported by UNICEF screened 5,122 children (2,692 boys and 2,430 girls) for acute malnutrition, identifying 12 children (8 boys and 4 girls) with SAM. In addition to these patients, 13 children (8 boys and 5 girls) were admitted and treated in the district hospital and Ramu Upazila health complex. Meanwhile, 3,108 pregnant and lactating mothers were supported through counselling on infant and young child feeding to enable mothers to provide essential child and nutrition care practices.

**Health:** During the reporting period, 535 patients (295 male and 240 female), including 377 children under 5, suffering from acute watery diarrhea were treated in the five UNICEF-supported Diarrhoea Treatment Centres (DTCs). No cholera bacteria was detected in the 258 stool samples tested. The fourth Oral Cholera Vaccination (OCV) campaign began on 17 November and will continue until 13 December, targeting 330,000 Rohingya and Bangladeshi community members. As of 10 December, 217,652 refugees and 80,671 host community members have been vaccinated.

The health sector recorded 16 new cases (4 probable and 12 suspected) of diphtheria with no deaths, bringing the total cases since 8 November 2017 to 8,322 cases with 44 recorded deaths. Despite the declining trend, transmission is still ongoing. The trend of Measles-Rubella (MR) cases has also been declining with four new suspected cases in this reporting period and no deaths, bringing the total to 2,986 cases in 2018. The 24 UNICEF-supported health facilities including the five DTCs provided health services to 15,524 people in the reporting period, which included 7,465 children under age 5 (including host communities).

**Host Community:** In this reporting period, 182 pregnant women were tested in Cox's Bazar District Hospital and 94 received HIV counselling and testing in Ukhia Upazila Health Complex as part of the prevention of mother-to-child transmission of HIV infection (PMTCT) services now being offered in these two facilities. PMTCT services have now been expanded to targeted health centres in the camps, with service providers now able to conduct HIV counselling and testing and referrals. Cox's Bazar District Hospital Special Care Newborn Unit (SCANU) cared for 120 sick newborns including 12 from the Rohingya population. Meanwhile, the Newborn Stabilization Units (NSU) in Teknaf and Ukhia cared for 7 and 27 sick newborns respectively. In 2018, 3,503 sick newborns have been cared for in three UNICEF-supported facilities, including 228 Rohingya children.

**WASH:** During this reporting period, 162 tube-wells were repaired as a part of a proactive campaign of preventative maintenance covering the 30 per cent camps under UNICEF responsibility (other sector partners cover other areas). Similarly, along with ten new latrines constructed, proactive maintenance saw 253 latrines rehabilitated and 1,630 latrines desludged. In addition, 5,068 women and girls were reached with menstrual hygiene management messages. To further support hygiene in the camps, 2,980 bars of soap and 5,960 bars of laundry soap were distributed through partners. During this reporting period, 74,443 people (41,878 females and 32,565 males) participated in hygiene sessions, contributing to improving the health situation in the camp.

**Host Community:** In this reporting period, 11 new tube-wells were installed in the host community, for a cumulative total of 184 so far this year, along with 191 handwashing stations. Fifty-nine joint family latrines were constructed to benefit 1,180 members of the host community. A total of 3,269 Bangladeshi community members were reached with hygiene promotion messages and 906 women and girls of reproductive age were reached with messages on menstrual hygiene promotion.

**Child Protection:** UNICEF is working to systematically build the technical capacities of local actors. During this reporting period, 20 staff from 6 national and international NGOs were trained to operate the new Child Protection Information Management System (CPIMS+), a web-based system to improve comprehensive child protection case management, from identification and registration, to assessment, case planning, referrals and transfers, and case closure. The system is expected to go 'live' in early January 2019 and will be used by all Child Protection actors to support case management. Child protection in emergencies (CPIE) training was extended to 20 field staff from 8 national and international NGOs to strengthen their technical capacities, and improve the overall quality of the CPIE response.

Five new Adolescent Friendly Spaces were completed during the reporting period. A Theatre for Development show focusing on international Human Rights Day was performed by 20 adolescents to an audience of 300 people. A rally on international human rights was also organized, with 280 adolescents, Community Based Child Protection Committee members and parents attending.

**Host community:** UNICEF continues to provide support through the existing 10 child friendly spaces and 90 adolescent clubs in host community which reach over 8,000 children and 4,500 adolescents.

**Education:** UNICEF has signed a partnership agreement with Partners to construct the remaining learning centres (LCs) required to reach 100 per cent completion of the 2,123 planned LCs for 2018. So far, 1,428 LCs has been completed, 154 LCs are under construction, and 542 are awaiting government authorization to begin construction. Of those constructed, 1,369 LCs are operational and providing non-formal education to 139,920 children aged 4-14 years through 4,125 trained teachers.

To operationalize the Learning Competency Framework and Approach (LCFA)<sup>2</sup>, UNICEF funded a sector-wide assessment exercise to gauge the learning competencies of all the children between 4 and 14 years of age in the camps as per the LCFA levels. The assessment is underway and will continue until 13 December. Sixty Master Trainers selected by the education sector partners are training 4,000 teachers who are conducting these assessments in every operational LC. Based on the outcomes of the learning assessment, UNICEF in collaboration with the sector partners is supporting “Back to Learning” campaign to ensure all children aged 4-14 are placed appropriately in LCs based on their individual competency levels.

**Host community:** During the reporting period, UNICEF supported the Cox’s Bazar District Primary Education Office and eight sub district primary education offices to develop a comprehensive district-level consolidated primary education plan. The plan also includes emergency preparedness and response activities targeting all primary schools in Cox’s Bazar District. Participation included all key government agencies, including the high-level officials from Ministry of Mass and Primary Education in Dhaka, and all major UN agencies, INGOs and NGOs working to support education in the host communities. The district plan will provide the platform for effective engagement of the district education authorities in support of the education JRP targeting the host communities in Teknaf and Ukhiya Upazillas.

**Communication for Development, Community Engagement and Accountability:** During the reporting period, to support the sector-wide assessment exercise to gauge the learning competencies of all the children between 4 and 14 years of age, a comprehensive Back to Learning campaign was rolled out during which 800 community mobilizers conducted 65,653 household-level sessions while 279 Imams and 568 Majhis were sensitized to further advocate on the importance of the campaign. Megaphone announcements, radio programmes and UNICEF’s network of 12 Information and Feedback Centres (IFC) were also engaged in disseminating the messages.

A total of 162 complaints, 39 pieces of feedback and 1,385 queries were recorded in the 12 IFCs during the reporting period. Key concerns flagged included the lack of firewood or fuel for cooking, while other queries focused on seeking health services, particularly around the OCV campaign and skin diseases, as well as on non-food items such as clothes. Wherever possible, individuals were referred to relevant services. Community Radio Naf continued to broadcast the Magazine Programme “*Shishur Hasi*” on child care in the winter season and skin disease. The programme was also played in 20 Adolescent Radio Listeners Clubs (ARLC) attended by 260 adolescents.

**Host Community:** In four upazilas of Cox’s Bazar (Sadar, Ukhiya, Teknaf and Ramu), 640 upazila and union-level local government functionaries were oriented on developing microplans, and social and behaviour change communication plans, at ward, union and upazila levels. Local Governance for Children Coordinators visited 64 Primary and Secondary Schools and 34 Community Clinics and engaged with 3,500 students on community issues such child marriage, hand-washing, immunization and hygiene.

With the support from UNICEF, Bangladesh Betar organized three orientation trainings for the 60 members of newly formed host community ARLCs in Kutupalong and Palongkhali in Ukhiya aimed at creating awareness among the adolescents on social, cultural and lifesaving issues including child marriage, hand-washing and menstrual hygiene.

## Funding

UNICEF’s 2018 Humanitarian Action for Children (HAC) appeal requires US\$149.8 million to meet the lifesaving and longer-term development needs of Rohingya refugees and affected host communities in 2018; as well as emergency preparedness and response in other parts of the country. The 2018 appeal takes into consideration the US\$25.3 million requirement for the months of January and February in the previous inter-agency HRP (September 2017 to February 2018) and US\$113 million, which is aligned with the 2018 JRP.

UNICEF wishes to express its sincere gratitude to Canada, Denmark, the European Union, Germany, Japan, Portugal, the Republic of Korea, Sweden, Switzerland, the United States, the United Kingdom, King Abdullah Foundation, UN OCHA and various UNICEF National Committees who have contributed generously to the humanitarian response. Continued and timely donor support is critical in order continue to provide essential WASH, Health, Nutrition, Child Protection and Education services to Rohingya refugees and host communities.

---

<sup>2</sup> The LCFA is a guiding document for all stakeholders involved in delivering education for refugee children and will be applicable to various methods of delivery, including the Learning Centre Approach. The Education sector has so far developed LCFA level I to IV.

Appeal Sector	Funding Requirements	Funds available*		Funding gap***	
		Funds Received Current Year	Carry-Over**	\$	%
Nutrition	22,941,376	6,574,536	9,172,697	7,194,143	31%
Health	26,489,600	9,958,185	4,511,379	12,020,037	45%
Water, sanitation and hygiene	41,911,497	17,930,220	9,098,356	14,882,920	36%
Child Protection/GBV	16,366,908	10,778,830	3,939,405	1,648,672	10%
Education	28,203,156	26,432,814	7,625,383	-	0%
Communication for development	4,035,525	3,123,757	1,200,645	-	0%
Emergency preparedness	9,830,125	9,839,534	3,977,635	-	0%
Unallocated		11,513,664			
<b>Total</b>	<b>149,778,187</b>	<b>96,151,541</b>	<b>39,525,500</b>	<b>35,745,772</b>	<b>24%</b>

\*The funds available include funds received against the current appeal year and the carry-forward from the previous year.

\*\*Carry-over includes US\$17.5m which have been used by 30 April 2018 and US\$7.9m envisaged for the response beyond 2018

\*\*\* Funding gap excludes the surplus for Education (US\$5,855,041), C4D (US\$288,877) and Emergency Preparedness (US\$3,987,044)

UNICEF Bangladesh HAC: [https://www.unicef.org/appeals/files/2018-HAC-Bangladesh\\_rev-May\(1\).pdf](https://www.unicef.org/appeals/files/2018-HAC-Bangladesh_rev-May(1).pdf)

UNICEF Bangladesh Facebook: <https://www.facebook.com/unicef.bd/>

Bangladesh Joint Response Plan 2018: <https://www.humanitarianresponse.info/en/operations/bangladesh>

**Who to contact  
for further  
information:**

**Edouard Beigbeder**  
Representative  
UNICEF Bangladesh  
Tel: +880 1730344031  
Email: [ebeigbeder@unicef.org](mailto:ebeigbeder@unicef.org)

**Sheema Sen Gupta**  
Deputy Representative  
UNICEF Bangladesh  
Mob: +880 17 1300 4617  
Email: [ssengupta@unicef.org](mailto:ssengupta@unicef.org)

**Shairose Mawji**  
Chief Field Services  
UNICEF Bangladesh  
Tel: +880 17 300 89085  
Email: [smawji@unicef.org](mailto:smawji@unicef.org)

**Jean-Jacques Simon**  
Chief of Communication  
UNICEF Bangladesh  
Mob: +880 17 1304 3478  
Email: [jsimon@unicef.org](mailto:jsimon@unicef.org)

## Annex A: SUMMARY OF PROGRAMME RESULTS

	UNICEF and IPs					Sector Response		
	2018 Target		Total Results		Change since last report	2018 Target	Total Results	Change since last report
	Refugee	Host Community	Refugee	Host Community				
<b>NUTRITION</b>								
Children aged 0 to 59 months treated for SAM	24,000	546	19,476	321	857	35,093	30,226	1,558
Pregnant and lactating women reached with counselling & messaging on infant & young child feeding practices*	50,780	13,178	88,001	47,055	3,108	85,956	213,331	4,825
Children aged 6-59 months receiving Vitamin A	187,576	48,676	147,167	103,461	-	187,576	195,323	-
<b>HEALTH</b>								
Children aged 0 to 11 months receiving Penta 3 vaccine	26,518	72,298	7,595	45,742	-			
Children under 5, including new born, receiving primary healthcare in UNICEF supported facilities	46,440	40,000	134,449	19,010	7,088			
Sick new-born treated in UNICEF supported new-born stabilization units (NSU) and Special Care New-born Units	360	3,240	228	3,275	154			
People aged 1 year and above who have received oral cholera vaccine*****	815,000	135,000	993,320	184,276	196,621			
Pregnant women who have received HIV testing and counselling	2,000	3,000	24	2,273	276			
<b>WATER, SANITATION &amp; HYGIENE*****</b>								
People who have continued access to safe drinking water of agreed standard	400,000	200,000	346,512	22,989	3,500	1,052,495	870,676	-
People with access to culturally appropriate latrines & washing facilities	400,000	200,000	618,280	24,524	1,180	1,052,495	789,687	786
People receiving key messages on improved hygiene practices*****	400,000	200,000	679,593	9,792	3,269	1,052,495	1,000,406	300
<b>CHILD PROTECTION &amp; GENDER-BASED VIOLENCE</b>								
Children reached with psychosocial support services	210,000	90,000	156,646	8,004	38	400,000	218,765	-
Children at risk, including unaccompanied & separated children, identified & receiving case management services	7,000	3,000	5,176	144	95	22,000	14,665	2,830
People accessing Gender-based Violence (GBV) services	7,000	3,000	60,561	800	8,745			
<b>EDUCATION</b>								
Children aged 4 to 14 years enrolled in emergency non-formal education, including early learning***	151,765	50,514	139,920	23,088	7,407	368,000	260,530	69,487
Teachers trained to support improved learning	3,449	750	4,125	-	-	9,000	5,374	253
<b>C4D/ ACCOUNTABILITY MECHANISM</b>								
People reached with information dissemination, community engagement & accountability mechanisms on life-saving behaviors & available services	300,000		330,000		-			
Adolescent girls & boys engaged to provide life-saving information & referral to services as change agents****	10,000	5,000	9,787	6,000	675			

\*Results for PLW counselled in IVFC and children attended for health care may include recurrence during the response period. Nutrition sector and UNICEF is reviewing this indicator to enhance reporting quality. \*\*The sector is undergoing data validation. \*\*\*The host community result covers children from 47 government schools in Ukhia and Teknaf reached by education supplies e.g., school bags, school-in-a-box kits, ECD kits, EIE kits and/or school improvement grant. The age group for education sector is based on the JRP age disaggregation i.e., 3-5 years and 6-14 years old. \*\*\*\*UNICEF is working with current group of adolescents to strengthen their capacity as agents of change. \*\*\*\*\*May include recurrent during the response period \*\*\*\*\*4<sup>th</sup> round of OCV campaign target includes zero dose earlier and one dose earlier for new arrivals and new eligible people. \*\*\*\*\*Cluster results for WASH are pending final verifications and will be updated in next sitrep