



# Bangladesh

## Humanitarian Situation report No.43 (Rohingya influx)

REPORTING PERIOD: 30 October to 13 November 2018

SITUATION IN NUMBERS

### Highlights

- UNICEF provides non-formal basic education to 132,205 children with support of 4,125 trained teachers. UNICEF has built so far 1,390 Learning Centers, 53 are under construction out of 1,925 contracted and 2,053 planned.
- To date, more than 40,000 women and girls have accessed Gender Based Violence (GBV) prevention and response services including psychosocial support in the 12 Safe Spaces that UNICEF has constructed.
- UNICEF in partnership with Department of Social Services (DSS), has provided cash assistance to 3,000 foster care givers, benefitting around 4,200 children
- The Bangladesh 2018 HAC appeal is 78 per cent funded with the generous support of its donors. However, an additional US\$33 million is required to fully deliver UNICEF’s commitments to meet Rohingya and host community needs this year. Continued funding support will be critical going forward to ensure uninterrupted and timely delivery of services in 2019.

### 15 November 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**

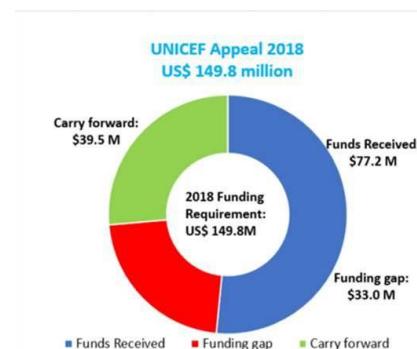
Children (arrived since 25 August 2017) in need of humanitarian assistance (Based on ISCG SitRep 11 October 2018)

**728,000**

New arrivals since 25 August 2017 (ISCG SitRep, as of 01 November 2018)

### 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	27,400	24,546	18,039
<b>Health:</b> People aged 1 year and above who received oral cholera vaccine			950,000	879,273
<b>WASH:</b> People with access to safe drinking water	1,052,495	834,237	600,000	335,400
<b>Child Protection:</b> Children benefitted from psychosocial activities	400,000	217,057	300,000	163,717
<b>Education:</b> Children (4-14) enrolled in emergency non-formal education	368,000	250,044	151,765	132,205



\*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.

The cyclone season continues into November. If Bangladesh was to experience a cyclone there would be significant impact on many parts of the country, including Cox’s Bazaar and the Rohingya refugees. Living in temporary bamboo-frame and tarpaulin shelters, the refugees will be highly vulnerable to any strong winds. The development of the 2019 JRP is well underway and expected to be completed by end November. In parallel, UNICEF has started to develop its Humanitarian Action for Children (HAC) appeal for next year to include key components of the upcoming JRP. Additional aspects that may be included in the HAC appeal will be the preparedness and response related programmes to other humanitarian situations nationwide.

During the reporting period, anxieties and concerns have risen across all camps, in response to the news about the start of the two Government’s repatriation plan. UNICEF supports UNHCR’s stances on the repatriation that “upon the free and informed decision by refugees, on an individual basis, to return”.

	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
<i>Note: Based on Inter-Sector Coordination Group reports</i>		

## 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 the conclusion of the monsoon season in Cox’s Bazar. The review mission report is still awaited. The 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. 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. (1) Firstly on saving lives and protecting children and their families in the refugee camps. (2) Secondly promoting social cohesion and confidence building in the host communities in Ukhiya and Teknaf Sub-districts; and (3) thirdly contributing to system strengthening and accelerating programme implementation to the rest of the district of Cox’s Bazar. Lastly, (4) UNICEF will apply the lessons learnt from the 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, community outreach volunteers screened 72,440 Rohingya children, including 36,462 boys and 35,978 girls aged 6 to 59 months, in active case finding screening for acute malnutrition. Among these children, 632 children (263 boys and 369 girls) were identified as experiencing Severe Acute Malnutrition (SAM) and referred to community-based nutrition centres operated by UNICEF partners. A total of 734 children 0-59 months were newly admitted to facilities for Severe Acute Malnutrition (SAM). This total includes children admitted for SAM treatment found via (a) active case finding – 632 children, (b) community referral and self-admitting – 31 children, and (c) infants and new-borns ages 0-6 months for specialized treatment – 69 infants. All 734 children were supported at facilities operated by UNICEF partners.

Among the children that were referred from community outreach screening, 4 children were identified in OTP as experiencing SAM with complications and were referred to Stabilization Centres (SC) in the camp. Among new-borns and infants 0-6 months, 69 infants, including 37 boys and 32 girls with SAM were admitted for Community-based Management of Acute Malnutrition for Infants (CMAM-I) for malnutrition treatment and challenges in breastfeeding. In the identification and referral of children with Moderate Acute Malnutrition (MAM), a total of 1,860 children were referred to Targeted Supplementary Feeding Program (TSFP) and Blanket Supplementary Feeding Program (BSFP) for treatment and prevention of their nutritional status progressing to SAM. 221 adolescent girls aged 10-19 years old and 1,537 pregnant and lactating women (PLW) were provided with Iron Folic Acid supplementation.

During the reporting period, support for 2,551 Rohingya caregivers, including pregnant and lactating women, of children 0-23 months were provided critical messaging and counselling with skilled Infant and Young Child feeding counsellors.

<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 seeks to ensure the prevention and treatment of malnutrition for all children throughout Cox's Bazar district. During the reporting period, 5,437 children (2,763 boys and 2,674 girls) ages 6-59 months were screened for acute malnutrition by skilled Community Nutrition Volunteers (CNVs). Among these children, 21 children, including 3 boys and 18 girls, were identified with SAM and referred to community nutrition centres, with 6 of these children, ages 6-59 months, newly admitted for treatment (3 boys and 3 girls). In addition to treating children with acute malnutrition, UNICEF supports Government of Bangladesh Cox's Bazar Civil Surgeon's Office to provide comprehensive, life-cycle based programming, including infant and young child feeding. During the reporting period, Community Nutrition Volunteers (CNVs) delivered key messages on Infant and Young Child Feeding and care practices (IYCF) to 4,355 Bangladeshi pregnant and lactating mothers at the Upazila level in Ramu and Cox's Bazar Sadar.

**Health:** During the reporting period, 428 patients (208 male and 220 female), including 255 children under five, suffering from acute watery diarrhoea were treated in the five UNICEF-supported Diarrhoea Treatment Centres (DTCs). The laboratory tests conducted on 167 stool samples in the last reporting period showed no cholera bacteria. The health sector recorded 6 new cases (all suspected) of diphtheria with no deaths, bringing the total cases since 8 November 2017 to 8,271 cases with 44 recorded deaths. Despite the declining trend, transmission is still ongoing. The trend of Measles-Rubella (MR) has been declining with 3 new suspected cases in this reporting period with no deaths, bringing the total number to 1,540 cases in 2018. The 24 UNICEF supported health facilities including the five DTCs provided health services to 21,958 people in the reporting period, which included 7,557 children under age five (this includes host communities).

The second Oral Cholera Vaccination (OCV) campaign this year will be conducted from 17 November to 13 December 2018, targeting around 330,000 Rohingya and host communities. This will be the fourth campaign conducted by Government of Bangladesh supported by WHO, UNICEF and other partners since October 2017. 70 outreach mobile teams alongside 46 fixed sites will provide OCV with routine immunization over the period of 4 weeks.

**Host Community:** In this reporting period, 298 pregnant women were tested in Cox's Bazar district hospital and 172 received HIV counselling and testing in Ukhiya 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 will be gradually expanded to selected health centres in the camps in the next three months. Cox's Bazar District Hospital Special Care New-born Unit (SCANU) cared for 141 sick new-borns in this reporting period including 7 Rohingya children (2 boys and 5 girls). Meanwhile, the New-born Stabilization Units (NSU) in Teknaf cared for 3 sick new-borns and Ukhiya cared for 2 sick new-born. A total of 3,180 sick new-borns were cared for in three UNICEF-supported facilities in 2018. Comprehensive PMTCT Trainings were conducted in the first week of November. 22 Clinicians in Cox's Bazar District Hospital and 22 service providers in Ukhiya Health Complex completed the training.

**WASH:** During this reporting period, 18 new tube wells were installed and 281 tube wells were repaired in the UNICEF area of camp responsibility with 25 new latrines constructed and a total of 75 handwashing stations installed. A total of 1,624 latrines were rehabilitated during this period and latrine desludging activities continued with 318 latrines being emptied. In addition, 56 new solid waste disposal sites have been established in the camps. During the reporting period, 8,328 hygiene kits were distributed in the camps reaching 41,640 people, together with 104,086 aqua tabs and 142,929 bars of hand soap. 6,125 women and girls reached with Menstrual Hygiene Management messages. In addition, 3,410 buckets with lids, taps and stands for safe household water storage have been distributed during this reporting period. WASH has focused on improvements to the quality of hygiene promotion interventions through different activities and planned to conduct Camp Clean Up campaigns. During this reporting period, 18 WASH committees have been established, with the objective of ensuring appropriate, effective and harmonised hygiene promotion interventions using community engagement approaches. This activity reinforces the capacities of implementing partners and the WASH Sector.

**Host Community:** A total of 974 Bangladeshi people were reached with hygiene promotion messages and 537 women and girls of reproductive age were reached with messages on menstrual hygiene promotion. 9,195 Bangladeshi people were reached with the distribution of 1,839 hygiene kits. For ensuring safe sanitation, 85 latrines were constructed in the Host Community.

**Child Protection:** UNICEF, working with the Child Protection Sub-Sector (CPSS) continued to work on the full deployment of the Case Management Information System (CPIMS). During this reporting period, the roll out of the CPIMS focused on the contextualization of the Inter-Agency Case Management Supervision and Coaching package (2018). The Inter-Agency Case Management Supervision and Coaching will be used to ensure improved the quality of the case management supervision when the roll out takes place. As part of the CPMIS+ roll-out process, UNICEF working with the CPSS is conducting the Data Protection Impact Assessments (DPIA) exercises. DPIA will allow for the finalization of the Data Protection and Information Sharing Protocol (DPISP) to facilitate the CPIMS to become live. So far around 4,200 children out of the planned 9,000 children are benefitting from UNICEF's cash assistance programme in partnership with Department of Social Services. In this reporting period 12 Safe Spaces for Women & Girls were completely operational from where 141 girls have been benefited from psycho-social activities. A total of 29 indoor sessions were carried out which were attended by 121 adolescent females and 356 women participants. 118 male participants have been included in the GBV Prevention &

Response Program within this time-span. So far UNICEF and its implementing partners established 64 Adolescent Friendly Spaces providing life-skills based education to over 40,000 adolescents in camps.

**Host community:** UNICEF and Department of Social Services (DSS) is jointly working on preparation for Child Protection response in the host communities. The Child welfare Board (CWD), Ukhiya Upazilla approved locations for establishing additional Child Friendly spaces within proximity of Bangladeshi primary schools. These child protection facilities will support children with access to structured psychosocial support and recreational support as well social workers with case management of children at risk for child protection responses including strengthen referral mechanism between the CFS and schools. UNICEF continues to provide support to children through the existing ten child friendly spaces and ninety adolescent clubs in host community reaching 7,000 children and over 4,000 adolescents. In total, 83 members from Community based child protection committees (CBCPC) are also supporting to create a protective environment for children and adolescents.

**Education:** UNICEF has planned for 2,053 Learning Centers in 2018. To date, with its partners, UNICEF has constructed 1,390 Learning Centres (LCs) and 53 LCs are under construction. Contracts have been issued for 482 additional learning centers with work yet to start on the ground. For the balance, 128 LCs, discussions are underway for contracting this work. Out of the 1,390 LCs constructed, 1,198 LCs are operational providing non-formal education to 132,205 children (aged 4-14 years) with 4,125 trained teachers. In relation to Learning Competency Framework and Approach (LCFA)<sup>2</sup>, UNICEF is currently providing support to the Education Sector in Cox's Bazar to prepare for the upcoming Student Assessment (ASER Plus) study which is due in early December 2018. This includes organizing two batches of Master Trainer Training on ASER Plus for the sector in collaboration with technical partner, providing support in planning and executing teachers' training by the sector partners and designing and running a 'Back to Learning' campaign jointly with C4D to ensure students' participation during the assessment.

**Host community:** During the reporting period, UNICEF has started the dialogue with the Cox's Bazar district primary education office and 8 sub district primary education offices to develop the district level consolidated primary education plan. The main workshop is planned during the first week of December, 2018.

**Communication for Development, Community Engagement and Accountability:** During the reporting period, 800 Community Mobilizers conducted 39,830 Interpersonal Communication (IPC) sessions with 38,732 families on OCV messages in preparation of upcoming OCV campaign. In addition to this, UNICEF, co-lead of Risk Communication Taskforce, a taskforce in combination of government, UN agencies, CSOs and NGOs in Cox's Bazar, has designed, developed and being disseminated key lifesaving messages on cholera and acute watery diarrhoea diseases. UNICEF has also led the facilitation of two Training of Trainers (ToT) sessions for 70 managers of the community volunteers to engage and mobilize communities on oral cholera vaccination campaign. A total of 135 complaints 69 feedback and 1,506 queries were recorded in the 12 information and feedback centres (IFC) during the reporting period. Most of the complaints were on not getting fuel for cooking, queries were on seeking health services particularly on the upcoming OCV campaigns and non-food items. The queries were all responded to by referring them to the respective service providers. In addition, UNICEF's community volunteers conducted a winter need assessment through an In-Depth Interview (IDI) with 238 families and Key Informant interview (KII) with 39 Imams and Majhis in 28 camps. According to the assessment it was found that 56% families need to repair their Shelter, 21% of HH do not have any blanket, 65% of families need winter clothes specially for Children and Women, 63% families are afraid of being affected by cold fever thus looking for medicine.

**Host Community:** In four Upazilas-Cox's Bazar Sadar, Ukhiya, Teknaf and Ramu, the Local Governance for Children (LGC) Coordinators visited 135 Primary and Secondary Schools and 57 Community Clinics and engaged with an estimated 11,500 students on community issues such child marriage, hand-washing, immunization and hygiene.

Supported by UNICEF, Bangladesh Betar, Cox's Bazar recorded 9th episode of Betar Sanglap (Dialogue with Host Community) titled "The Rohingya Crisis: A dialogue with the host community on their challenges, worries and solutions". The dialogue brought together 120 host community people and local administrations to bring harmony, social harmony and ensure accountability to the affected people.

## Funding

UNICEF's 2018 Humanitarian Action for Children (HAC) appeal requires US\$149.8 million to meet the life-saving 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.

<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.

## UNICEF Humanitarian Situation Report (Rohingya Influx)

November 2018

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 will be critical in 2018 in order to scale up the response and continue to provide essential WASH, Health, Nutrition, Child Protection and Education services to Rohingya refugees and host communities.

Appeal Sector	Funding Requirements	Funds available*		Funding gap	
		Funds Received Current Year	Carry-Over	\$	%
Nutrition	22,941,376	5,816,576	9,172,697	7,952,103	35%
Health	26,489,600	8,236,538	4,511,379	13,741,684	52%
Water, sanitation and hygiene	41,911,497	17,812,247	9,098,356	15,000,893	36%
Child Protection/GBV	16,366,908	10,608,519	3,939,405	1,818,984	11%
Education	28,203,156	8,515,845	7,625,383	12,061,928	43%
Communication for development	4,035,525	2,493,611	1,200,645	341,269	8%
Emergency preparedness	9,830,125	5,937,172	3,977,635	-	0%
Unallocated		17,782,943			
<b>Total</b>	<b>149,778,187</b>	<b>77,203,451</b>	<b>39,525,500</b>	<b>33,049,236</b>	<b>22%</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

### Next SitRep: 29 November 2018

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>

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	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	17,828	211	740	35,093	27,400	1,239
Pregnant and lactating women reached with counselling & messaging on infant & young child feeding practices*	50,780	13,178	88,001	39,676	4,355	85,956	201,630	4,691
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	123,246	19,010	7,302			
Sick new-born treated in UNICEF supported new-born stabilization units (NSU) and Special Care New-born Units	360	3,240	202	2,978	146			
People aged 1 year and above who have received oral cholera vaccine	815,000	135,000	775,668	103,605	-			
Pregnant women who have received HIV testing and counselling	2,000	3,000	15	1,634	470			
<b>WATER, SANITATION &amp; HYGIENE</b>								
People who have continued access to safe drinking water of agreed standard	400,000	200,000	327,150	8,250	750	1,052,495	834,237	-
People with access to culturally appropriate latrines & washing facilities	400,000	200,000	618,280	21,925	2,075	1,052,495	783,719	-
People receiving key messages on improved hygiene practices*****	400,000	200,000	679,593	4,174	974	1,052,495	985,579	-
<b>CHILD PROTECTION &amp; GENDER-BASED VIOLENCE</b>								
Children reached with psychosocial support services	210,000	90,000	155,786	7,931	4,982	400,000	217,057	2,670
Children at risk, including unaccompanied & separated children, identified & receiving case management services	7,000	3,000	4,983	119	102	22,000	11,567	164
People accessing Gender-based Violence (GBV) services	7,000	3,000	41,447	777	-			
<b>EDUCATION</b>								
Children aged 4 to 14 years enrolled in emergency non-formal education, including early learning***	151,765	50,514	132,205	23,088	7,735	368,000	191,043	7,596
Teachers trained to support improved learning	3,449	750	4,125	-	167	9,000	5,100	171
<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	9,112	5,500	992			

\*Results for PLW counselled in IYFC 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 Ukhaia 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 recurrence during the response period.