



# Bangladesh

## Humanitarian Situation report No.24 (Rohingya influx)

REPORTING PERIOD: 16 - 22 FEBRUARY 2018

SITUATION IN NUMBERS

### Highlights

- UNICEF has released a [Child Alert](#) to commemorate the six-month mark of the beginning of the crisis on 25 August 2017.
- During the past seven days, 219 suspected diphtheria cases were reported indicating a declining and stable trend. The third round of diphtheria vaccination will start from 10 March.
- 290,700 people now have access to safe drinking water and 391,090 people have access to sanitation facilities.
- UNICEF is providing non-formal education to 82,006 children and psychosocial support to 141,227 children.
- Monsoon preparedness continues: UNICEF has signed an agreement with the Ministry of Disaster Management and Relief (MoDMR) to construct 5,000 latrines, 5,000 bathing cubicles and to decommission 2,000 unserviceable latrines in flood-prone areas; 1,000 volunteers have been mobilized to inform refugees and host communities on monsoon and cyclone seasons preparedness.
- The UNICEF appeal is currently 28 per cent funded. An additional US\$103.4 million is required to fully deliver on the Rohingya response in 2018.

25 February 2018

**720,000**

Children in need of humanitarian assistance

**1.2 million**

People in need (HRP 2017-18)

**399,040**

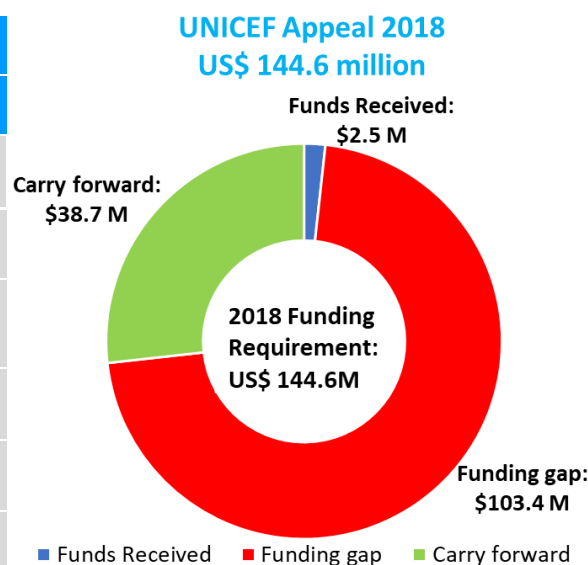
Children (arrived since 25 August 2017) in need of humanitarian assistance (Based on ISCG SitRep February 11, 2018)

**688,000**

New arrivals since 25 August (ISCG SitRep, as of February 11, 2018)

Summary of programme results 2017-2018	Sector		UNICEF and IPs	
	Target	Total Results	Target	Total Results*
Children 0-59 months treated for Severe Acute Malnutrition (SAM)	11,876	27,570	7,500	14,724
Children 6 months–15 years who received MR vaccine			237,500	475,299
Number of doses of Oral Cholera Vaccines (OCV) administered to population			900,000	899,959
People with access to safe drinking water	887,000	739,394	450,000	290,700
Children who received psychosocial support	200,000	173,815	180,000	141,227
Children (4-14) enrolled in emergency non-formal education	370,000	118,090	201,765	82,006

\*Results since 25 August 2017



## Situation Overview and Humanitarian Needs

As of 11 February 2018, the Inter-Sector Coordination Group (ISCG) reported that almost 688,000<sup>1</sup> Rohingya refugees have entered Bangladesh since the attacks. ISCG's rapid needs assessment indicated that 58 per cent of new arrivals are children and 60 per cent are girls and women, including a high number of pregnant (3 per cent) and lactating women (7 per cent). The estimated total affected population of existing refugees, new arrivals and host communities is 1.2 million people.<sup>2</sup> This includes 720,000 affected children in need of urgent humanitarian assistance, including critical life-saving interventions.

Existing basic services for refugees and host communities have been overwhelmed due to the sudden and massive increase in population. The high population density in the settlements has increased the risk of disease outbreaks and 1.2 million people urgently require water and sanitation services. More than 17 million litres of clean water are needed daily and approximately 50,000 latrines with semi-permanent structures need to be constructed or maintained. Vaccination coverage amongst new arrivals is very low and deadly outbreaks of communicable diseases such as measles and diphtheria have already occurred. Risks of cholera outbreaks or acute watery diarrhoea (AWD) are high during monsoon season. These risks are being addressed in the flood and cyclone season preparedness plan. Urgent nutrition needs have been prioritized for children under five (including infants), pregnant and lactating women (PLW) and adolescent girls, with 3 per cent of children suffering from life-threatening severe acute malnutrition (SAM) in the biggest settlement (Kutupalong). An estimated 400,000 Rohingya children are also in need of psychosocial support and other protection and education services.

Following the inter-agency Humanitarian Response Plan (HRP), covering the period from September 2017 to February 2018, the Joint Response Plan (JRP) for March-December 2018, coordinated by the ISCG is under finalization for an expected total amount of US\$ 940 million. UNICEF's 2018 Humanitarian Action for Children (HAC) was developed prior to the development of the upcoming JRP and is being revisited to ensure full alignment with the JRP.

## Humanitarian Leadership and Coordination

The overall humanitarian response for the Rohingya refugee crisis is facilitated by a sector-based coordination mechanism, the Inter-Sectoral Coordination Group (ISCG), established for refugee response 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 international humanitarian organizations to ensure an effective humanitarian response to the crisis.<sup>3</sup> On the government side, a National Task Force (NTF), established by the Ministry of Foreign Affairs (MoFA) 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 (BGB). In this structure, the roles of the Refugee, Relief and Repatriation (RRRC) Commissioner and the Deputy Commissioner (DC) of Cox's Bazar district are critical for daily coordination and information sharing. At the sub-national level, UNICEF continues to lead coordination in the nutrition sector and child protection sub-sector and co-lead the education sector with Save the Children. UNICEF also co-leads the WASH sector along with Action against Hunger (ACF). It is important to note that the cluster system has not been officially activated.

## Humanitarian Strategy

UNICEF's overall strategy is to strengthen government systems to provide basic social services to refugees and host communities, using a district-specific approach. The most urgent priorities are the prevention of an increase in mortality and morbidity as well as communicable disease outbreaks among refugees and host communities. These objectives will be achieved through the provision of safe water, sanitation and washing facilities, SAM treatment, vaccination against preventable diseases and preparedness for acute watery diarrhoea and cholera outbreaks. UNICEF is addressing the protection needs of the most vulnerable groups, children and women, through prevention of abuse and gender-based violence and by supporting case management, psychosocial support and the provision of basic education. UNICEF will strengthen its adolescent programming by providing a minimum package for adolescent health and by focusing on providing tailored services for pregnancy in adolescent girls. Voucher systems will be used to further strengthen nutrition, water, sanitation and hygiene (WASH), child protection and gender-based violence interventions. UNICEF will continue to work closely with local government departments and will co-lead the WASH, Education and Nutrition sectors and the child protection sub-sector with the government. UNICEF will also strengthen its own and partners' capacities for emergency preparedness for both epidemics and natural hazards.

<sup>1</sup> Situation Update: Rohingya Crisis, Inter Sector Coordination Group (ISCG), 27 January 2018

<sup>2</sup> The 1.2 million also includes 200,000 Rohingya before the new influx, 12,000 for contingency and 300,000 affected host communities. Prior to August this year, around 33,000 registered Rohingya refugees lived in two camps officially recognised by the Government located in Kutupalong and Nayapara in Ukhiya and Teknaf upazilas respectively, which have been functioning since 1992 under the care of UNHCR. In addition, more than 60,000 undocumented Rohingya resided in makeshift settlements (Leda, Kutupalong, Shamlapur and Balukhali) and an estimated 300,000-500,000 lived scattered within the host communities through the district and across the country.

<sup>3</sup> The SEG is chaired by the Resident Coordinator with the IOM Head of Mission and UNHCR Representative as co-chairs. At this stage of the crisis, the SEG is meeting on a weekly basis. The membership includes UN agencies, INGOs (ACF, MSF and Save the Children), and the Red Cross/Crescent movement (ICRC, IFRC). The SEG is a flexible coordination structure which will be adjusted as the situation evolves.

## Summary Analysis of Programme Response

### Nutrition

UNICEF aims to treat 50,119 children under 59 months of age for Severe Acute Malnutrition (SAM); provide counselling on Infant and Young Child Feeding Practices (IYFP) to 50,780 pregnant and lactating women (PLW); and deliver Vitamin A supplementation to 198,868 children aged 6-59 months.

Since 1 January 2018, 374,429 children aged 6-59 months have been screened for acute malnutrition, including 33,662 who were screened during the reporting period. 4,532 children were identified with SAM, including 248 during the reporting period. 3,999 children were admitted for treatment, including 241 during the reporting period. 51 children with severe acute malnutrition and medical complications were admitted to UNICEF-supported stabilization centres, including one in the last week. Additionally, 2,628 children under 5 years of age were detected with Moderate Acute Malnutrition (MAM) and referred for treatment in last week.

Since 1 January 2018, 71,596 pregnant and lactating women and care givers of children aged 0-24 months have received Infant and Young Child Feeding (IYCF) counselling, along with communication to improve hygiene practices. Among them, 8,548 reached in the last week.

UNICEF's partners conducted several on-job trainings to improve knowledge and skills of the staff who are providing nutrition services. A UNICEF partner also delivered ten courtyard awareness raising sessions, reaching a total of 112 pregnant women, lactating mothers and adolescent girls in Unchprang, Hakimpara and Shamlapur camps.

### Health

The total number of suspected measles cases is now 713. During the reporting period, 68 suspected measles cases were reported. 75 per cent of the identified cases are children under 5 years of age.

The number of new Acute Jaundice Syndrome (AJS) cases has increased as 152 cases were reported this week, compared to 92 cases in the previous week. The total number of AJS cases is now 815. Among the tested 29 cases, ten were found to have Hepatitis A, one has Hepatitis E and two cases have Hepatitis B. A larger laboratory testing is being scaled up in next two weeks to analyze 400 AJS cases for enhanced surveillance and better understand and monitoring of the current trends.

As of 17 February 2018, a total of 5,764 suspected diphtheria cases were reported, with 38 deaths. The number of reported suspected cases has remained stable – 219 new cases were reported. Around 75 per cent of affected people are children below the age of 15 years and 14 per cent are under five years of age. The final report, including mop-up survey of the second round of diphtheria vaccination shows that 397,375 children were vaccinated with a coverage 25 per cent higher than the first round. 171,382 children aged between 6 weeks and 7 years were vaccinated with Pentavalent and bOPV (93 per cent coverage) while 225,993 children aged 7-15 years received Tetanus and Diphtheria (Td) vaccines (128 per cent coverage). The third round of diphtheria vaccination will start on 10 March. Routine immunization has started in 19 fixed health posts.

Last week, 2,182 children under five years of age received healthcare and 620 pregnant women received at least one antenatal care consultation in ten UNICEF-supported health facilities. 42 newborns received care in Cox's Bazar District Hospital's Special Care Newborn Unit (SCANU), reaching a total of 370 babies in 2018. In Teknaf Newborn Stabilization Unit (NSU), two newborns also received care, reaching a total of 65 newborns. The facilities are receiving referral cases from both host and refugee communities.

### WASH

In 2018, UNICEF is planning to reach 600,000 people with safe water and adequate sanitation, representing approximately 50 per cent of the estimated people in need; with 450,000 people targeted to receive information on key hygiene practices and supplies.

290,700 people now have access to safe water through the treatment of surface water and the construction of 603 tube wells, of which five were installed during the reporting period, in addition to the delivery of water by trucks to areas where water systems and groundwater are severely limited. Elephants damaged several pipelines for water treatment plant at Uchprang camp last week. UNICEF has taken an immediate action by providing additional water trucking through the Department of Public Health Engineering (DPHE) while the pipes are being repaired.

391,090 have benefitted from the construction of 27 faecal sludge management (FSM) sites and 14,597 latrines, with an additional 102 latrines constructed during the reporting period. To date, at least 2,732 latrines have been de-sludged, including 408 during the reporting period. The volume of sludge collected and treated continue to increase. However, there is an urgent need to further increase this activity prior to the beginning of the monsoon season. A new contract has been signed with the Ministry of Disaster Management and Relief (MoDMR) to construct additional 5,000 latrines and 5,000 new bathing cubicles, and to decommission 2,000 unserviceable latrines to reduce risks at flood prone areas during monsoon season.

The dissemination of key hygiene messages continued, reaching 92,308 people since 1 January. During the reporting week, 1,001 hygiene kits were distributed, benefitting 5,005 people.

## Child Protection

UNICEF is aiming to provide psychosocial support to 350,000 children in 2018, to support case management for 10,000 unaccompanied and separated children (UASCs) and to deliver life skills support to 90,000 adolescents. The needs of adolescents, especially girls, are unique and require specific targeted activities to support them in building their resilience.

During the reporting period, UNICEF and its partners have reached 1,344 children. 1,190 of these children benefited from psychosocial support group activities mainly at child-friendly spaces (CFS). Life skills activities were provided to 107 adolescents and 47 separated and unaccompanied children were identified and registered for case management.

To strengthen the accountability of humanitarian workers on Preventing Sexual Exploitation and Abuse (PSEA) in the Rohingya refugee response, UNICEF co-facilitated a one-day PSEA network workshop which brought together UNHCR, UNDP, UNICEF, UN Women, IRC, Oxfam, BRAC, Prottiyashi, Relief International, WFP and Internews to draft a plan of activities and recommendations on PSEA.

## Education

In 2018, UNICEF aims to reach 305,315 children aged 4-14 years with education opportunities, including 67,350 children in the host community. In addition, non-formal education opportunities will be expanded to cover adolescents with life skills training, basic literacy and numeracy and technical/vocational components. 120,000 adolescents are targeted by these activities in 2018.

UNICEF has reached 82,006 children (aged 4-14) with non-formal education including early learning. In total, 1,330 teachers have been trained on early learning and non-formal education and are conducting learning activities in the 697 learning centres across the makeshift camps. Last week, 69 new children aged 4-14 years were enrolled in the learning centres.

## Communication for Development (C4D), Community Engagement and Accountability

UNICEF aims to reach 300,000 people with critical life-saving information and promote a range of behaviours and practices especially targeting the parents and caretakers of children. This will be reached through the expansion of Information and Feedback Centres (IFCs), model mothers and adolescents and a network of 800 community volunteers responsible for 50 households each. Information shared with these 50 households is expected to reach beyond the targeted families.

So far UNICEF has established 12 IFCs. Around 20,135 queries, feedback and complaints (QFC), 1,240 were from the reporting period, have been recorded and responded at functional 10 IFCs. Over 70 per cent of the visitors to the IFCs were women.

Last week, 145,097 refugees were reached with information on handwashing, maternal and child health, antenatal and postnatal care, child marriage and other protection issues through door-to-door visits, 65 interactive popular theatre performances and mobile film shows. UNICEF's partners deployed around 1,000 community mobilizing volunteers to disseminate information on preparedness for monsoon and cyclone seasons. Eight public service announcements (PSAs), radio shows and phone-in programmes on Sexually Transmitted Diseases (STD), AIDS, skin diseases, mother and child care reached the host and refugee community population in Ukha and Teknaf through Bangladesh Betar, Cox's Bazar and Radio NAF. Also, 315 adolescents and youths engaged with their peers in community mobilization efforts.

## Supply and Logistics

Last week, four metric tons of supplies were dispatched, including water purification tablets, chlorine, four water pumps, banners, tarpaulins, and squatting plates for latrines. . Currently, the stock value is around US\$ 1.3 million. Five containers with critical supplies for cyclone preparedness are being delivered to Bangladesh.

## Media and External Communication

UNICEF continued to provide support to local and international media outlets covering the Rohingya issue. Communication team worked with programme colleagues to support various donor missions, along with continued collection of regular communication assets, generation of social media contents and press briefings. UNICEF has released a Child Alert to commemorate the six-months mark since the beginning of the crisis in August 2017. The report "LIVES IN LIMBO: No End in Sight to the threats facing Rohingya children" highlights ongoing risks and urgent needs of the Rohingya children, can be downloaded from this link: [https://www.unicef.org/publications/index\\_102681.html](https://www.unicef.org/publications/index_102681.html)

## Security

The security situation continues to be stable in Cox's Bazar, though hazards of fatal road accidents are reported frequently. The host government law enforcement agencies are currently highly active to ensure security for international staff. Security agencies are also checking of visa of all foreigners in the camps and this has been intensified. So far, no UNICEF staff has been affected.

## Funding

UNICEF's 2018 Humanitarian Action for Children (HAC) appeal for the Rohingya refugees requires US\$ 144.6 million to provide, in partnership with the government, life-saving and basic social services to over 700,000 children, which include the existing Rohingya population, new influx and the vulnerable children in the host community. The 2018 HAC supersedes the 2017 HAC covering the period September 2017 to February 2018. The 2018 HAC takes into consideration the US\$25.3 million requirement for the first two months of 2018 from the 2017 HAC appeal.

UNICEF wishes to express its sincere gratitude to Canada, Denmark, 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 to scaling up the response 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	22,200,000	0	8,973,969	13,226,031	60%
Health	25,600,000	466,800	4,368,494	20,764,706	81%
WASH	39,000,000	0	8,336,089	30,663,911	79%
Child Protection	18,400,000	137,013	3,711,425	14,551,562	79%
Education	28,500,000	0	7,386,742	21,113,258	74%
Communication for development	3,900,000	52,500	1,178,877	2,668,623	68%
Emergency Preparedness and Sector Coordination	7,000,000	911,629	4,726,219	1,362,152	19%
Unallocated		931,501			
<b>Total</b>	<b>144,600,000</b>	<b>2,499,443</b>	<b>38,681,816</b>	<b>103,418,741</b>	<b>72%</b>

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

\*\*Carry-over includes \$ 7.9m envisaged for the response beyond 2018.

## Next SitRep: 4 March 2018

**UNICEF Bangladesh HAC:** <https://www.unicef.org/appeals/bangladesh.html>

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

**Bangladesh Humanitarian Response Plan 2017:** <https://www.humanitarianresponse.info/en/operations/bangladesh>

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## Annex A

SUMMARY OF PROGRAMME RESULTS 2018<sup>4</sup>

	UNICEF and IPs Response		
	2018 Targets	Total Results	Change since last report ▲▼
<b>NUTRITION:</b>			
Number of children (under 5 years) treated for Severe Acute Malnutrition (SAM)	50,119	3,999	241
Number of pregnant and lactating women who received infant and young child feeding counselling	50,780	71,596	8,548
Number of children (6-59 months) reached with vitamin A supplementation	198,868	-	-
<b>HEALTH:</b>			
Number of children (0-23 months) who received all the childhood vaccines	112,132	-	-
Number of people (1 year and above) who received oral cholera vaccine	1,100,000	-	-
Number of pregnant women who received HIV testing and counselling	26,400	-	-
<b>WATER, SANITATION &amp; HYGIENE:</b>			
Number of people who have access to safe drinking water	600,000	290,700 *	3,500
Number of people who have access to culturally appropriate sanitation facilities	600,000	391,090 *	2,040
Number of people who received key hygiene messages and supplies	450,000	92,308	7,685
<b>CHILD PROTECTION:</b>			
Number of children who received psychosocial support	350,000	141,227*	1,190
Number of unaccompanied and separated children who received case management services	10,000	1,900*	47
Number of adolescents who received life-skills Support	90,000	40,231*	107
<b>EDUCATION:</b>			
Number of children (4-14 years) enrolled in non-formal/formal education, including early learning	305,315	82,006*	69
Number of adolescents (14-18 years) enrolled in non-formal/formal education including life skills and technical and vocational education training	120,000	-	-
<b>C4D/ ACCOUNTABILITY MECHANISM:</b>			
Number of people reached through information dissemination and community engagement efforts on life saving behaviours and available services**	600,000	145,097**	19,370

\*This figure includes carried over result from 2017 because the 2018 HAC targets supersede targets of the 2017 UNICEF HAC from September 2017 to February 2018.

\*\* This indicator is a point-in-time estimate, i.e., the total result is not cumulative of weekly progress rather is estimated maximum coverage reported during any reporting period throughout the response.

<sup>4</sup> During January and February 2018, two sets of results will be presented: [Annex A](#) for UNICEF results against 2018 HAC targets; and [Annex B](#) reporting on results both for sectors and UNICEF against 2017-18 HRP targets. Reporting will be harmonised into a single annex when the current HRP is superseded by a new inter-agency Joint Response Plan for 2018 in March 2018.

## SUMMARY OF PROGRAMME RESULTS: September 2017-February 2018

	Overall needs	Sector/Cluster Response (2017-18)			UNICEF and IPs Response (2017-18)		
		Target	Total Results	Change since last report ▲▼	Target	Total Results	Change since last report ▲▼
<b>NUTRITION:</b>							
Number of children (0-59 months) treated for Severe Acute Malnutrition (SAM)	16,965	11,876	27,570	678	7,500	14,724	241
Number of Pregnant and lactating women (PLW) reached with counselling on infant and young child feeding (IYCF) practices	120,000	84,000	187,293	13,811	43,000	119,111	8,548
Number of children 6-59 months, adolescents and PLW in the affected areas receiving multi-micronutrient supplementation.	564,000	335,000	285,225	315	335,000	236,456	1,575
<b>HEALTH:</b>							
Number of children (6 months- 15 years) who received MR vaccine	250,000				237,500	475,299	.*
Number of doses of OCV administered to population (reaching 650,000 people over 1 year)	900,000				900,000	899,959	.*
Number of children under five accessing healthcare	348,000				79,800	50,457	2,182
Number of pregnant women received at least 1 ANC consultation	42,000				7,000	18,023	620
<b>WATER, SANITATION &amp; HYGIENE:</b>							
Number of people with access to safe drinking water	1,200,000	887,000	739,394	7,268	450,000	290,700	3,500
Number of people provided access to cultural and gender appropriate latrines and washing facilities	1,200,000	950,000	795,385	-.***	450,000	391,090	2,040
Number of people received key messages on improved hygiene practices	1,200,000	1,200,000	637,361	-.***	450,000	302,979	7,685
<b>CHILD PROTECTION:</b>							

	Overall needs	Sector/Cluster Response (2017-18)			UNICEF and IPs Response (2017-18)		
		Target	Total Results	Change since last report ▲ ▼	Target	Total Results	Change since last report ▲ ▼
Number of children receiving psychosocial support and community based child protection services	720,000	200,000	173,815	5,793	180,000	141,227	1,190
Number of unaccompanied and separated children identified and receiving case management services	5,000	5,000	5,575	377	3,500	1,900	47
Number of adolescent boys and girls receiving life skills including information on GBV	144,000	40,000	44,552 <sup>i</sup>	-	35,000	40,231	107
Number of GBV cases receiving referral services			13	-	2,500	13	-
<b>EDUCATION:</b>							
Number of Children (4-14 years) enrolled in emergency non-formal education including early learning	453,000	370,000	118,090	4,733	201,765	82,006	69
Number of teachers recruited and trained		6,000	2,150	220	3,500	1,330	-
<b>C4D/ ACCOUNTABILITY MECHANISMS:</b>							
Number of people reached through information dissemination and community engagement efforts on life saving behaviours and available services**					180,000	145,097	19,370
Number of community/ opinion leaders sensitized to provide life-saving information and referral**					3,000	2,187	-

\*These indicators are discontinued as the campaign is closed

\*\* The C4D indicators are point-in-time estimates, i.e., the total results are not cumulative of weekly progress rather are estimated maximum coverage reported during any reporting period throughout the response.

\*\*\*The sector reported cumulative progress of 621,261 which is less than the last week's total and therefore no change is reported.

\*\*\*\*Sector has not been reporting on this- this is the number reporting by UNICEF.

<sup>i</sup> The sector total as reported in the ISCG SitRep is less than this figure because some of the partners' reports were not included