

Humanitarian programme for forcibly displaced Myanmar nationals in Cox's Bazar, Bangladesh

Situation report:

27 November 2017

WHAT YOU NEED TO KNOW

624,000

people have arrived since 25 August

3,000

crossed the border in the past week

1.2 million

require immediate humanitarian

assistance, including earlier arriving Myanmar nationals and vulnerable members of host communities



As of 21 November, an estimated 624,000 forcibly displaced Myanmar nationals fled Myanmar to Bangladesh, according to the [ISCG report published 26 November 2017](#). The influx began on 25 August, after the Myanmar Army launched security operations in northern Rakhine state. In September, an average of 14,500 people approximately arrived daily. This dropped to an approximate average of 3,100 arrivals per day in October. In total, the estimated number of people in need was 1.2 million in the latest Humanitarian Response Plan (HRP) of October 2017, comprising of existing caseload of displaced Myanmar nationals in Bangladesh, new arrivals and host community.



Since the number of people that have arrived stands at around 624,000, the current number of people in need is likely to be higher than the previous estimate. A high population density in the settlements means limited land is available to build facilities and accommodate FDMNs, threatening health and overwhelming the current existing facilities.

Multiple families are sharing shelters, building them against the hills. Planning and safety matters were not taken into consideration while these shelters were built. Better planning with site management, contingency response, and improving quality of shelters are priorities for the GoB ratifies as well.

The host communities are impacted given the increased population in their hometowns. No large-scale response efforts were in place from the beginning taking host community into consideration, which has left a significant gap. An estimated 471,800 people live in in Ukhia (207,400) and Teknaf (264,400) upazilas (Government Census 2011), meaning that since the influx, the refugee population has nearly doubled than that of the host community.

Access to fuel is a key concern. Not only have the prices soared, the FDMN have been reported of selling food rations to obtain firewood. When collecting firewood in the forests, they are exposed to a wide range of protection concerns. Cooking with firewood inside shelters continues to be a significant fire hazard.

The crowded, unsafe, and unsanitary conditions in the settlements give way to numerous protection concerns, especially for women and children. Women and girls tend to stay inside very hot shelters for cultural, religious and safety concerns. They have also indicated not feeling safe using WaSH facilities as latrines are sometimes undesignated, and lack lighting. To avoid open bathing and defaecation, they wash inside their shelters, restrict food and water intake, and restrict movement during the menstrual period. Moreover, adolescent girls and women are at risk of trafficking, domestic violence, assault, or other abuse. Increasing access to healthcare, gender-appropriated latrines, and psychosocial support are therefore priorities.

For children, being out of school increases the risk child marriage, abuse, sexual exploitation, trafficking, and child labour. There are high malnutrition rates among these children. Humanitarian actors are expanding operations in education, nutrition, gender-based support, and community mobilisation through volunteer network at the camps and makeshift settlements.

The hope is, integrated approaches and scaled-up services with increased coordination mechanisms are high priorities for all implementers. Providing each individual with dignity, respect and essential services remain in the forefront for all.



HEALTH, NUTRITION, AND FOOD SECURITY



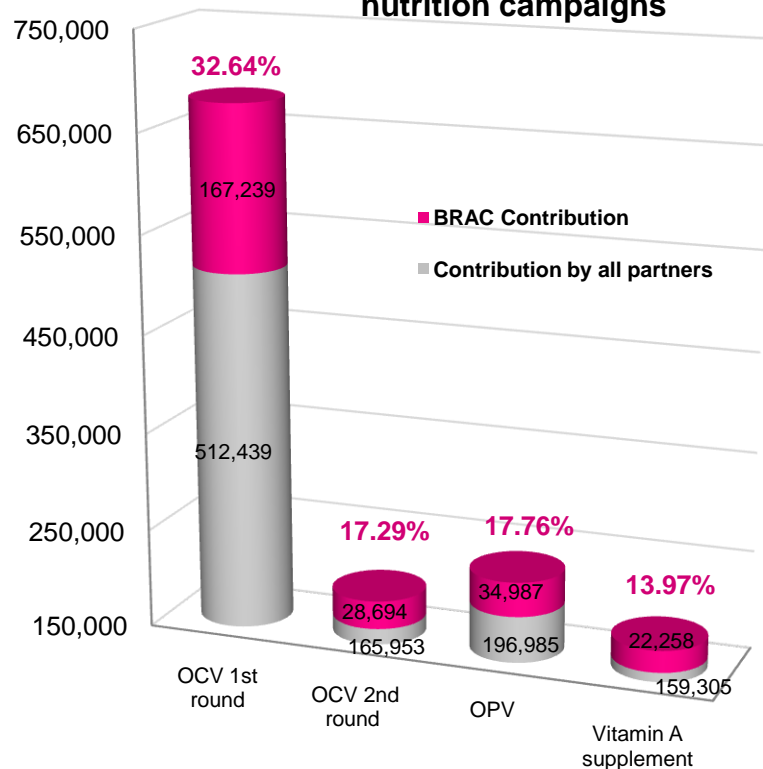
Needs

Over the past few weeks, a high number of diarrhoea and dysentery cases has been reported at campsites and makeshift settlements. This requires urgent attention and collaboration with partners who are delivering preventive measures. WASH and Health interventions have expanded, but needs to accommodate the risk of increased cases.

Response to date

- Over 830,414 people received health care support through various agencies' medical support.
- 186,929 children under 15 years old have been vaccinated against measles.
- To ensure safety during births, over 3,000 emergency reproductive health kits have been distributed.
- 11,993 pregnant and lactating mothers and 25,848 children of 6-59 months have been enrolled to blanket supplementary feed programme. 102,315 children under five have been screened for acute malnutrition. Among them, 13,136 children have severe acute malnutrition.
- 181,563 children (6-59 months) received vitamin A supplements. 20,017 pregnant and lactating mothers and 3,122 adolescent girls have received iron folic acid supplements.
- BRAC participated in several vaccination and nutrition campaigns; oral cholera vaccination 1st and 2nd rounds, oral polio vaccination, and vitamin A supplement campaigns.

BRAC's contribution to vaccination and nutrition campaigns



See more at:

[On the hunt for tuberculosis and malaria in Cox's Bazar](#)

Campaign name	Campaign period
Oral Cholera Vaccination (OCV) 1st Round	6 days(10 Oct-16 Oct)
Oral Cholera Vaccination (OCV) 2nd Round	6 Days(4 Nov-10 Nov)
Oral Polio Vaccination (OPV)	6 Days(4 Nov-10 Nov)
Vitamin A Supplementation (6-59 months years old)	7 days(15 Nov-20 Nov)

Other partners: Ministry of Health and Family Welfare (MoHFW), World Health Organisation (WHO), United Nations High Commissioner for Refugees (UNHCR), United Nations International Children's Emergency Fund (UNICEF), International Centre for Diarrhoeal Disease Research (ICDDR,B), International Organization for Migration (IOM)



Gaps/constraints:

- Referral service for complicated delivery cases is a significant concern for new settlements without road access; especially after dark. The patients with needs of emergency support, suffer due to lack of strong referral services. A strong network of referral services is essential to address the critical needs of the pregnant mothers and newborn children.
- Health workers need thorough understanding of nutrition needs and health complication that result due to malnutrition. At the moment, they are unable to refer or suggest appropriate solution for nutrition related diseases.
- The identified rate of malnutrition among FDMNs does not differ between boys and girls. However, the presence of girls is higher in feeding programmes. Perception of boys being stronger than girls could be detrimental for these nutrition programme.
- Many FDMNs still have strong faith in superstitions. Sometimes they believe someone's mental disorders or distress issues occurs as a result of *Jinn*, i.e. paranormal possession. These issues should be addressed through proper message dissemination among FDMNs. During these communication initiatives, pharmacists and religious leaders should also be engaged.



PROTECTION

Needs

For newly established child friendly spaces, more manpower is needed.

Additional recreational kits are required to meet children's needs.

Social workers are able to identify that significant number of newly arrived children are in need of urgent psychosocial support to overcome their mental distress. They take time to open up and share their awful past and the hardship of their life in the settlements.

See more at:

[What do safe spaces in a humanitarian crisis look like?](#)

Response to date

- 84,741 children reached with psychosocial support.
- 19,924 dignity kits have been distributed.
- BRAC is currently running 200 child friendly spaces. Over 30,408 children are being supported with recreational and psychosocial services in these spaces.

Gaps/constraints:

The identification of vulnerable children, unaccompanied and separated children, needs to be scaled up so as to assure that they are provided with appropriate support. Capacities for family tracing and the system for reunification must be strengthened.

Children are constantly traveling back-and-forth to water or firewood collection points which can be far from home. With growing concerns trafficking, their security during these travels should be in check.



WATER, SANITATION, AND HYGIENE

Needs

The new influx continues to arrive in some sites which are already overloaded with existing WASH constraints.

545,938 people are still in need of immediate WaSH support.

A large number of non functional latrines are need of being either repaired or decommissioned.

Bathing cubes need to be gender segregated and built in spots which are gender friendly.

See more at:

[Safe drinking water for more than 1 lac people in Ukhia and Teknaf](#)

Response to date

- 620,062 people have been provided WaSH assistance
- 5,321 tube wells are installed by different agencies and of them 3,548 are functional (67%).
- 33,211 temporary emergency latrines have been built, of them 20,185 are functional (61%).
- BRAC has de-sludged 53 latrines in different location for its own latrines and other organisations.

Gaps/constraints:

There are organisation who, after building latrines, have discontinued their assistance activities in the makeshift settlement. In many cases, these organisations have not properly handed over their responsibilities to volunteers or other organisation for monitoring and maintenance.

The position of the latrines, from religious point of view, should be placed on north-south axis as defaecating facing the west is not acceptable. The FDMNs should be engaged while placing the latrines to determine the appropriate position and location of latrine.



Needs

Additional needs include kitchen sets, bucket with lid, cooking stoves and alternative fuel sources.

- 197,000 households received emergency shelter assistance since 25 August.
- 62,000 households received kitchen sets and children clothes.
- 25,000 households received solar lamps.
- Over 200,000 emergency shelter kits (tarpaulins and rope) have been distributed.
- BRAC distributed about 183,027 blankets for protection against cold.

In the second phase of the response, the availability of usable land is a major challenge in meeting the international standards for shelters in makeshift settlement homes.

Collection of firewood has been the source of conflicts between host community and FDMNs.

A \$52 care package



EDUCATION

Needs

Around 453,000 people are in need of education in emergency support. Engaging in educational activities helps to reset a sense of normalcy in the children's lives.

There's a growing demand from parents side to incorporate reading practices both in English and Burmese language within the CFS activities.

See more at:

[Holding on to childhood through child friendly spaces](#)

Response to date

- 372 teachers have been trained so far to improve the education quality.
- Over 55,000 girls and boys have access to educational services.
- A total of 31,587 children received education supplies since 25 August.
- A five-day basic training has been provided to 25 teachers of BRAC to improve the quality of education service at learning centres.

Gaps/constraints:

With the increasing numbers of newly arrived children in the settlements additional learning centres are needs to be constructed.

At least, 5,601 teachers are required to be recruited for the existing learning centres.



KEY CHALLENGES

Local agricultural production:

A significant number of people from host community lost their farming land for cultivation as these lands have been occupied by FDMNs. Irrigation sources are being contaminated with waste and become unusable. Due to the depletion of irrigation sources, the rate of local agricultural production is now vulnerable.

School and college attendance:

Absenteeism increased in the Ukhia and Teknaf upazilla educational institutions. Due to increased trafficking in the area, some parents fear sending their children to school. Additionally, some of the schools and college are closed as their buildings are occupied to store and distribute relief materials.

Avoiding household duplication:

Some people are still receiving similar item as aid from several agencies and some households are not receiving any relief at all. To avoid such duplication, a strong verification exercise is needed. In addition, it has to be ensured that the people who are living in remote areas of the settlements are getting essential assistance.

Unwillingness to registration:

The registration process was not preceded by any awareness campaign. Many FDMNs are frightened by assuming that registering may lead to their forced repatriation to Myanmar. Some women are not willing to register with men as their facilitator. The trauma of having to endure prolonged army violence made a permanent negative imprint in their mind about the security forces.

Endangered wildlife around the settlements:

Many cases of injuries and deaths of elephants were reported, caused by landmine installed along the border by Myanmar. The usual elephant routes are being disrupted. This is causing behavioural changes among the elephants causing them to destroying people's food sources and habitats in encroached lands.

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WORKING WITH OTHERS

UNICEF and BRAC are teaming up to train over 200 staffs and teachers for facilitating semi temporary classrooms.

Last week, BRAC participated in a workshop arranged by UNODC on preventing violent extremism. Discussions on increased chances radicalisation taking place among the vulnerable FDMN population took place. BRAC's preventive and awareness building initiatives through women groups of the host community were shared during this workshop.

BRAC along with other organisations like Save the Children, UNHCR, UNICEF and Plan International are coordianting rapid needs assessments on education and livelihood.

PARTNERS

- Government of Bangladesh
- UN Refugee Agency (UNHCR)
- Global Fund to fight AIDS, Tuberculosis and Malaria
- The United Nations Children's Fund (UNICEF)
- International Organization for Migration (IOM)
- World Food Programme (WFP)



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