**Current situation**

* According to the United Nations the Rohingya are the most persecuted minority in the world.
* They are a primarily Muslim ethnic group who despite having lived in the primarily Buddhist Myanmar for centuries, were denied citizenship in 1982 as they are regarded as illegal immigrants. This has rendered them stateless and without protection of their human rights.
* The Rohingya are mainly residing in the northern Rakhine State of western Myanmar, where they face oppression by the Myanmar authorities as well as the Rakhine Buddhists
* Due to their statelessness the Rohingya live in constant insecurity and have no access to commercial markets, healthcare facilities nor education. They also have no political representation, are denied freedom of movement, endure forced labour and are expulsed from their land
* Since the 1970 the Myanmar army has launched several crackdowns on the Rohingya, forcing them to flee to neighboring countries such as Bangladesh to escape army brutality, rape and murder
* Since the 1970s almost one million Rohingya have fled Myanmar due to their persecution
* Violence has most recently erupted following an attack in August 2017 by Rohingya militants on Myanmar security posts. In response the military launched what the UN called a “textbook example of ethnic cleansing”,burning down entire villages and committing unlawful killings and rape
* Since August some 626 000 mainly Muslim Rohingya have fled to Bangladesh, where now approximately 1 million Rohingya live in overcrowded refugee camps and makeshift shelters, without clean water or sanitation, making the outbreak of disease imminent
* After visiting the overflowing camps in Bangladesh’s border district Cox’s Bazar, where Global One operates, the UN High Commissioner for Refugees commented that challenges in Bangladesh are immense and health conditions are dire
* The international rescue committee has found that 95% of refugees living in Cox’s Bazar are drinking contaminated water, which leads to a high risk of Cholera and acute water diarrhoea
* Three quarters of refugees lack food. Particularly alarming are malnutrition rates amongst refugee children, which have doubled since May and increased tenfold since last year. Currently 7.5% of refugee children in Cox’s Bazar face life-threatening severe acute malnutrition, and are in urgent need of life-saving medical help.
* On top of that measles, a childhood killer disease which can be particularly dangerous among unimmunized and malnourished children, is one of the major health risks among the Rohingya living in insanitary conditions in Cox’s Bazar district

**Global One efforts**

* Global One is among the few agencies working with government permission to provide relief to the Rohingya in Cox’s Bazaar
* Our Country Office in Bangladesh has thus far been coordinating emergency relief with the International Organization for Migration and other humanitarian actors on the ground
* To maximize its impact and effectiveness Global One team is attending meetings with other actors such as UN bodies, political leaders and NGOs to coordinate efforts and discuss needs
* As a result of these meetings Global One is focusing on Health Interventions, which have been identified as an area of most urgent priority
* Our goal is to build 12 semi-permanent health clinics on pieces of land in Cox’s Bazaar, provided by the Government of Bangladesh and allocated by UN High Commission for Refugees and the International Organization for Migration for the Rohingya (Teknaf and Ukhya upazila perhabs)
* Therefore, Global One is fundraising to build the clinics and equip them with the necessary medical equipment, which will provide vital health services such as:

- emergency care treatment

- immunizations

- ante natal and postnatal care, stabilization of obstetric emergencies

- detection and treatment of nutrition deficiency

- treatment of malaria, diarrheal and other communicable diseases

- diagnoses and management of chronic diseases

- referrals, emergency referrals and ambulance

* We want to build the clinics, allocate pharmacy storage space, purchase equipment and medicines, train staff and secure the fees for doctors and nurses
* In order to reach the clinics an ambulance will be available to transport the doctors from and to Cox’s Bazaar and the Rohingya sites