Support a clinic for Rohingya women and children

About 1,400 Rohingya children arrive without parents

"It was Friday! I took my sister's hand and ran away to the mountain near my house. When the Myanmar soldiers left and came home, I found parents' bodies. I didn't have time to be sad. I found out some neighbors near the mountain and had to follow them. I walked three days to the border of Bangladesh. I crossed the border of Bangladesh across the Naf River. I heard that besides Rashida, my six-year-old sister who is now taking care of, the other four brothers are dead." This is the story of Rashid, who is 10 years old.

1. Background

○ Myanmar's Rohingya, a Muslim minority and in conflict with the government, began a major sweep of the country's armed forces on August 25 when Rohingya rebels stormed police posts.

○ According to the UNHCR and the International Organization for Migration (IOM), the number of these Rohingya refugees has been tallied at more than 1 million since August 25, 2017.
○ The official refugee camps have already gone far beyond the maximum capacity, and the refugees are living in temporary tents along the main road, National Road No. 1, and all aid supplies, including housing, food, drinking water, medicine, and tents, are absolutely lacking despite the activities of aid groups. In particular, support for women (including pregnant women) and children, which account for 60 percent of refugees, is urgently needed.

○ The number of Rohingya women patients who have been sexually assaulted is growing. Even though they need physical and mental treatment such as sexual assault and aftereffects, but there is a lack of female doctors to treat it and a clinic. Doctors and women's supplies that can continuously treat women including pregnant women are needed.

○ According to the U.N. refugee agency, 320,000, or 58 percent of all refugees, are children, and one in four child refugees is severely malnourished. Not only that, but also the state of being on the street all day because of lack of daily educational activities. It is also in dire need of support for children, such as nutrition and educational activities.
2. Business Plan

- **Supporting the Clinic in Rohingya refugee camp**
  - Medical support, such as medical treatment and basic medicine
  - Basic health education and nutrition provision
  - Feeding, childbirth and postpartum care programs for pregnant women
  - Support female doctor's in the clinic

3. Budget

- **Budget: $5,000**

<table>
<thead>
<tr>
<th>Content</th>
<th>Calculation details</th>
<th>Amount</th>
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</thead>
<tbody>
<tr>
<td>Nutrition provision</td>
<td>200 families × USD 10</td>
<td>USD 2,000</td>
</tr>
<tr>
<td>Childbirth Kit</td>
<td>40 women × USD 25</td>
<td>USD 1,000</td>
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<tr>
<td>Vaccination for newborn babies and incubator operation</td>
<td>40 babies × USD 50</td>
<td>USD 2,000</td>
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4. about Asia Pacific Alliance for Disaster Management Korea

The Asia Pacific Alliance for Disaster Management (A-PAD) is a trans-national disaster aid alliance that works to facilitate cooperation and understanding between governments, private companies and NGOs in the Asia Pacific region.
Over 70,000 People Were Killed Annually by Natural Disasters in Asia

Asia Pacific region has the greatest numbers of people killed and affected by natural disasters in the world. The frequency of disasters is increasing over the years.

**People Killed by Disasters**

73,000 in Asia

**People Affected by Disasters**

90% in Asia

**People killed by natural disasters (2002-2011)**

- Asia Pacific: 73,000
- LAC
- Europe
- Africa
- North America

Source: Statistical Yearbook for Asia and the Pacific 2013, United Nations ESCAP

**Current Situation**

Asia Pacific is the world’s most disaster-prone region, observing 90% of world’s disasters in the region

**Challenges**

Limited cross-border and cross-sector cooperation for disaster relief and recovery activities in Asia Pacific

**A-PAD’s Approach**

Asia Pacific Alliance for Disaster Management (A-PAD) develops a platform to mutually support across nations and across sectors
A pre-agreement among stakeholders about possible cooperation for a natural disaster allows us to implement effective and efficient relief and recovery activities.

A-PAD develops national platforms that facilitate cooperation among public, private and civil society sectors for natural disasters in Asia Pacific nations.

When a large-scale disaster hits Asia, each national platform, the members of A-PAD, collaborate internationally to undertake disaster relief activities.

Established in 2012, A-PAD now has 6 member countries.

This collaboration mechanism did function effectively for the disasters in the Philippines and Sri Lanka in 2013 and 2014.

Typhoon Haiyan, one of the most powerful storms ever, hit the central Philippines in November 2013. Indonesia, Japan and Korea provided emergency funds and supplies in response to the request from Citizens’ Disaster Response Center (CDRC), a member of A-PAD. In collaboration with local governments and civil society organizations, CDRC offered emergency assistance to affected areas.

Anticipating specific cooperation among the public, private and civil society sectors prior to a disaster is the most crucial for disaster management.
Develop Cross-Border Collaboration Network
Maintain collaboration network in order to promptly start emergency relief

6 Member Countries Aim for 10 members in 2017

From Business Sector over 800 companies From Civil Society 108 organizations
Leveraging financial, logistic and human resources, each country collaborates across sectors to carry out effective disaster relief activities.

Asia Pacific Alliance for Disaster Management KOREA(A-PAD KOREA)
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