



© UNICEF/Karen Reidy

REPORTING PERIOD: 09 October to 29 October 2018

Bangladesh

Humanitarian Situation report No.42 (Rohingya influx)

SITUATION IN NUMBERS

Highlights

- On 29 October, the Government of Bangladesh and UNICEF jointly celebrated the National Sanitation Month (October) and Global Handwashing Day 2018 in Cox’s Bazar. Over 500 school children took part and learned best handwashing practices.
- UNICEF in collaboration with partners conducted trainings focused on improving the capacity of frontline actors in the provision of quality Child Protection in Emergencies (CPIE) and Gender Based Violence in Emergencies (GBViE) services to the Rohingya community residing in Cox’s Bazar.
- UNICEF has built so far 1,306 Learning Centres (LCs), 108 are under construction out of 1,785 contracted and 2,053 planned. UNICEF provides non-formal basic education to 124,470 children with 3,958 trained teachers.
- During the reporting period, UNICEF’s water, sanitation and hygiene teams focused on further improving the quality of hygiene promotion interventions through the establishment and training of a cadre of Core Facilitator Trainers (CFT). They ensure appropriate, effective and harmonized hygiene promotion interventions using community engagement approaches.
- The Bangladesh 2018 HAC appeal is 78 per cent funded with the generous support of its donors. An additional US\$22 million is required to fully deliver

01 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

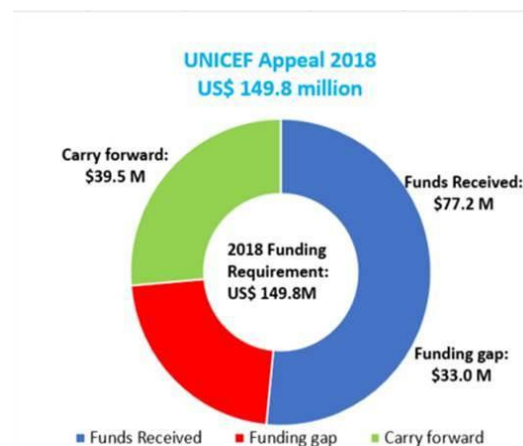
Children (arrived since 25 August 2017) in need of humanitarian assistance (Based on ISCG SitRep 11 October 2018)

728,000

New arrivals since 25 August 2017 (ISCG SitRep, as of 11 October 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)
Nutrition: Children 0-59 months treated for severe acute malnutrition	35,093	26,161	24,546	17,299
Health: People aged 1 year and above who received oral cholera vaccine			950,000	879,273
WASH: People with access to safe drinking water	1,052,495	834,237	600,000	334,650
Child Protection: Children benefitted from psychosocial activities	400,000	214,387	300,000	158,707
Education: Children (4-14) enrolled in emergency non-formal education	368,000	242,448	151,765	124,470



*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.

Situation Overview and Humanitarian Needs

With there has been occasional rains in October 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. Based on the mid-term review of the Joint Response Plan (JRP) and consultation with the Government, the development of the 2019 JRP is ongoing 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 expanding support to the Bangladeshi community in Cox's Bazar district as well as with preparedness and response related programmes to other humanitarian situations nationwide.

	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

Note: Based on Inter-Sector Coordination Group reports

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.¹ 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, composed of UNHCR, IOM and UNDP, visited Bangladesh in October and met with the various stakeholders both in Cox's Bazar and in Dhaka. Recommendations are awaited in an effort that is expected to reinforce the common goals in the areas of protection, humanitarian assistance, development, resilience and support to the host communities. 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 166,161 children, including 83,130 boys and 83,031 girls aged 6 to 59 months, in active case finding for acute malnutrition. Among these children, 2,104 children (887 boys and 1,217 girls) were identified as experiencing Severe Acute Malnutrition (SAM) and referred to community-based nutrition centres, including outpatient therapeutic programmes and in-patient stabilization centres. A total of 2,140 children, including 933 boys and 1,207 girls aged 6 to 59 months, were treated in Outpatient Therapeutic Programme (OTP) centres operated by UNICEF partners. Among the children that were referred from the community outreach screening, 32 children aged 6-59 months were identified in OTP as experiencing SAM with complications and were admitted to Stabilization Centres (SC) in the camp. Among infants 0-6 months, 179 infants, including 103 boys and 76 girls with SAM were admitted to Community-based Management of Acute Malnutrition for Infants (CMAM-I) sites for treatment and challenges in breastfeeding. Identification and referral of children with Moderate Acute Malnutrition (MAM) through active case finding was undertaken, total of 6,325 children who 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. Targeting children ages 6-59 months, 1,233 children, including 567 boys and 666 girls were provided with Micro Nutrient Powders (MNP) through household visits conducted by community nutrition promoters. Additionally, 1,059 adolescent girls and 5,119 pregnant and lactating women (PLW) were provided with Iron Folic Acid supplementation.

Host Community:

¹The 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).

UNICEF seeks to ensure the prevention and treatment of malnutrition for all children throughout Cox's Bazar district. During the reporting period, 15,381 children (8,178 boys and 7,203 girls) aged 6-59 months were screened for acute malnutrition by community nutrition volunteers. Among these children, 114, including 52 boys and 62 girls were identified with SAM and referred to community nutrition centres. Among the children identified with SAM, 54 children were found to experience SAM with complications and were admitted for treatment to in-patient SAM units in health facilities. In addition to treating children with acute malnutrition, UNICEF is supporting the government to provide comprehensive, life-cycle based programming, including infant and young child feeding. During the reporting period, Community Nutrition Volunteers (CNVs) delivered messages and provided critical counselling on Infant and Young Child Feeding and care practices (IYCF) to 9,418 Bangladeshi pregnant and lactating mothers at the Upazila level in Ramu and Cox's Bazar Sadar.

Health: During the reporting period, 769 patients (388 male and 381 female), including 435 children under five, suffering from acute watery diarrhea were treated in the five UNICEF-supported Diarrhoea Treatment Centres (DTCs). The laboratory tests conducted on 375 stool samples in the last reporting period showed no cholera bacteria. The health sector recorded 16 new cases (3 probable and 13 suspected) of diphtheria with no deaths, bringing the total cases since 8 November 2017 to 8,251 cases with 44-recorded deaths. Despite the declining trend, transmission is still ongoing. The trend of Measles-Rubella (MR) has been declining with 8 new suspected cases in this reporting period with no deaths, bringing the total number to 1,522 cases in 2018. The 24 UNICEF-supported health facilities including the five DTCs provided health services to 54,509 people in the reporting period, which included 19,066 children under age five (this includes host communities).

Host Community: In this reporting period, 893 pregnant women were tested in Cox's Bazar district hospital and 201 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. Since 16 September total 1,179 pregnant women have received HIV counselling and testing. The two positive cases have been referred to the Antiretroviral Therapy (ART) corner in Cox's Bazar district hospital for further treatment. PMTCT services will be gradually expanded to selected health centers in the camps in the next three months. Cox's Bazar District Hospital Special Care New-born Unit (SCANU) cared for 515 sick new-borns. Meanwhile, the New-born Stabilization Units (NSU) in Teknaf cared for 39 sick new-borns and Ukhiya cared for 51 sick new-borns. A total of 3,034 sick new-borns were cared for in three UNICEF-supported facilities in 2018.

WASH: During this reporting period, 140 water points and 44 latrines have been renovated in four camps and 28 new latrines constructed in two camps. So far over 320,000 people are accessing safe, treated drinking water through bucket chlorination across camps. 467,360 aquatabs and 34,100 bars of hand soap have been distributed in two camps. Desludging continued in all camps with 1,943 latrines being cleaned out. A total of 15,140 people have been reached with hygiene messages dissemination along with an additional 3,200 women and girls 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 the establishment and training of a cadre of Core Facilitator Trainers (CFT) during the reporting period. Their objective is to ensure appropriate, effective and harmonized hygiene promotion interventions using community engagement approaches. This activity reinforces the capacities of implementing partners and the WASH Sector.

Host Community: WASH in collaboration with C4D and the Government partners marked the National Sanitation Month October and Global Handwashing Day 2018. 500 students participated in the event and demonstrated best handwashing practices. A total of 180 Bangladeshi people were reached with hygiene promotion messages and 100 women and girls of reproductive age were reached with messages on menstrual hygiene promotion.

Child Protection: Strengthening and expansion of frontline workers in Child Protection (CP) and Gender Based Violence (GBV) response across targeted camps remains a key priority. UNICEF in collaboration its partners conducted trainings focusing on improving the capacity of frontline actors in the provision of quality Child Protection in Emergencies (CPiE) and Gender Based Violence in Emergencies (GBViE) services to the Rohingya community residing in Cox's Bazar. A total of 23 participants (14 female, 9 male) were trained from 11 agencies on the foundation training whilst 21 participants (13 female, 8 male) from 12 agencies were trained as Training of Trainers. In addition to this, Training on Caring for Child Survivors of Sexual Abuse was conducted for 28 participants (19 female and 9 male). UNICEF together with its partners conducted a Child Protection Information Management System (CPIMS) and Case Management Refresher Training to a total of 104 (45 female, 59 male) participants over a period of 4 days. The focus of the training was to build capacity of partners (case workers, supervisors and information management officers) on how to use the CPIMS in the case management processes and steps. So far UNICEF and its implementing partners established 60 Adolescent-Friendly Spaces and 211 Adolescent Clubs providing life-skills based education to over 53,000 adolescents in camps.

In partnership with Women's Refugee Commission and Columbia University, a field research was conducted on how best Adolescent Sexual and Reproductive Health (ASRH) information and services can be integrated in the programming of Safe Spaces for Women and Girls (SSWGs). The aim of the research was to understand the SRH needs and priorities of adolescent girls, as well as the associated barriers to accessing SRH information and services. To improve the dissemination of GBV information across the camps, 3 Interactive Popular Drama (IPD) groups consisting of 20 members were formed.

Host community: UNICEF continues to provide support to Child Friendly Spaces (CFS) in host communities. Through the existing ten CFS and ninety adolescent clubs, UNICEF provided child protection response for children and adolescents in the host community to over 7,000 children including 3,640 boys and 3,360 girls and over 4,000 adolescents including 1040 boys and 2960 girls. In total, 83 members from Community Based Child Protection Committees (CBCPC) participated in six meetings which were conducted to create a protective environment for children and adolescents. Fifty parents were oriented on child rights and child protection sessions and 225 members from adolescents and youth groups participated in child rights and child protection sessions.

Education: In total, UNICEF and its partners have to date constructed 1,306 Learning Centres (LCs), 108 are under construction out of 1,785 contracted and 2,053 planned. Out of the 1,306 LCs constructed, 1,110 LCs are operational providing non-formal education to 124,470 children (aged 4-14 years) with 3,958 trained teachers. UNICEF aims to achieve the target of constructing 2,053 LCs in the refugee camps by the end of 2018. With regards to the roll-out of new Learning Competency Framework and Approach (LCFA)² intermediary materials, the Master Trainers' training was completed and the first instalment of the materials has been printed and distributed in the LCs. Partners are currently planning the teacher training on the use of improved teaching and learning content. A new set of core LCFA teaching and learning materials are planned to be developed for next year covering levels I to IV (equivalent to pre-primary to grade 8). For this, new partnerships were established with technical partners and the inception meeting was held to operationalise the plans.

Host community: During the reporting period, UNICEF continued to provide support in the eight sub-districts of Cox's Bazar through teacher training to strengthen teaching and classroom management practices.

Communication for Development, Community Engagement and Accountability: During the reporting period, a total of 1,040 Community mobilizers (including community volunteers, model mothers and youth volunteers) conducted 177,313 Inter personal communication household sessions with 50,000 families. The households during this reporting period have been contacted three times. The key messages have been disseminated on Gender-Based Violence (GBV), protection and emergency preparedness. 679 Majhis and 472 Imams were sensitized on early marriage and GBV messages through advocacy meetings, and a total number of nine community consultation meetings were conducted on early marriage, safe latrine uses and emergency preparedness. A total of 5,883 complaints, feedback and queries were recorded (827 complaints, 215 feedbacks and 4,841 queries) in the 12 information and feedback centers (IFC) during the reporting period. Most of the complaints were on not getting fuel for cooking, and the queries were on seeking health services for diarrhea and related to non-food items. The queries were all responded to by referring them to the respective service providers

Host Community: In four Upazilas-Cox's Bazar Sadar, Ukhiya, Teknaf and Ramu, the Local Governance for Children (LGC) Coordinators visited 64 Primary and Secondary Schools and 40 Community Clinics and engaged with an estimated 5,000 student (cumulative) on community issues such child marriage, hand-washing, immunization and hygiene. They mobilized and engaged 400 community members on Expanded Programme (EPI) activities as well. The LGC programme was expanded in two more Upazilas-Cox's Bazar Sadar and Ramu-with recruitment of 2 more Upazila Coordinators and 21 Union Coordinators.

UNICEF supported Bangladesh Betar, Cox's Bazar to record and broadcast the 8th episode of Betar Sanglap (Dialogue with Host Community) titled "The Rohingya Crisis: A dialogue with the host community on their challenges, worries and solutions". Around 70 host community people including indigenous community were present as an audience and to answer their queries and to address their issues.

Cyclone Preparedness

Cyclone preparedness is one of the top priorities at the moment. In coordination with Government partners, response planning and risk mitigation activities are ongoing. During the reporting period, some limited rain was recorded in Cox's Bazar without any significant impact. From the 246,600 refugees at risk of landslides and floods, 44,144 refugees have been relocated into safer places in newly developed sites or within their camps.

² 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.

Communication for Development, Community Engagement and Accountability: UNICEF, being an active member of Emergency (Cyclone) Communications Taskforce, is instrumental in refining and finalizing the cyclone preparedness information and message along with the government and development partners. UNICEF is working to engage community volunteers, information hubs and radio partners to get people prepared for any potential cyclone. During this reporting period, 50,000 households were engaged on emergency preparedness, by 1040 community mobilizers.

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.

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			
Total	149,778,187	77,203,451	39,525,500	33,049,236	22%

*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: 15 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>

Who to contact for further information:

Edouard Beigbeder
Representative
UNICEF Bangladesh
Tel: +880 1730344031
Email: ebeigbeder@unicef.org

Sheema Sen Gupta
Deputy Representative
UNICEF Bangladesh
Mob: +880 17 1300 4617
Email: ssengupta@unicef.org

Shairose Mawji
Chief Field Services
UNICEF Bangladesh
Tel: +880 17 300 89085
Email: smawji@unicef.org

Jean-Jacques Simon
Chief of Communication
UNICEF Bangladesh
Mob: +880 17 1304 3478
Email: jjsimon@unicef.org

	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				
NUTRITION								
Children aged 0 to 59 months treated for SAM	24,000	546	17,094	205	2,373	35,093	26,161	2,280
Pregnant and lactating women reached with counselling & messaging on infant & young child feeding practices*	50,780	13,178	88,001	35,321	9,418	85,956	196,939	3,847
Children aged 6-59 months receiving Vitamin A	187,576	48,676	147,167	103,461	-	187,576	195,323	-
HEALTH								
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	115,944	19,010	19,066			
Sick new-born treated in UNICEF supported new-born stabilization units (NSU) and Special Care New-born Units	360	3,240	195	2,839	605			
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	9	1,170	827			
WATER, SANITATION & HYGIENE								
People who have continued access to safe drinking water of agreed standard	400,000	200,000	327,150	7,500	-	1,052,495	834,237	32,500
People with access to culturally appropriate latrines & washing facilities	400,000	200,000	618,280	19,850	820	1,052,495	783,719	9,120
People receiving key messages on improved hygiene practices*****	400,000	200,000	679,593	3,200	15,140	1,052,495	985,579	330
CHILD PROTECTION & GENDER-BASED VIOLENCE								
Children reached with psychosocial support services	210,000	90,000	150,804	7,903	3,572	400,000	214,387	5,546
Children at risk, including unaccompanied & separated children, identified & receiving case management services	7,000	3,000	4,888	112	292	22,000	11,403	327
People accessing Gender-based Violence (GBV) services	7,000	3,000	41,447	777	12,697			
EDUCATION								
Children aged 4 to 14 years enrolled in emergency non-formal education, including early learning***	151,765	50,514	124,470	23,088	13,783	368,000	242,448	80,435
Teachers trained to support improved learning	3,449	750	3,958	-	1,042	9,000	4,929	1,721
C4D/ ACCOUNTABILITY MECHANISM								
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	8,630	5,000	3,000			

*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.