

Situation Report: Influx (August 2017)

Cox's Bazar | 11 Sept 2017

ISCG

INTER SECTOR
COORDINATION
GROUP

Situation Overview

In the early hours of 25 August, violence broke out in Rakhine State. The extent and implications remain uncertain. To date, unverified estimations based on consolidated field reports of the agencies working in Cox's Bazar are that 370,000¹ people are estimated to have crossed the border into Bangladesh.

Key Figures



370,000
Accumulative
arrivals since 25 Aug



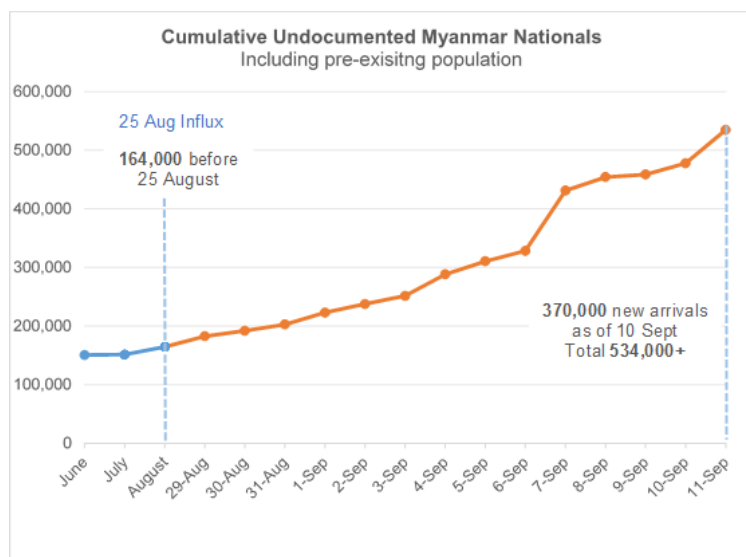
150,000
Arrivals in Makeshift
settlement / camp



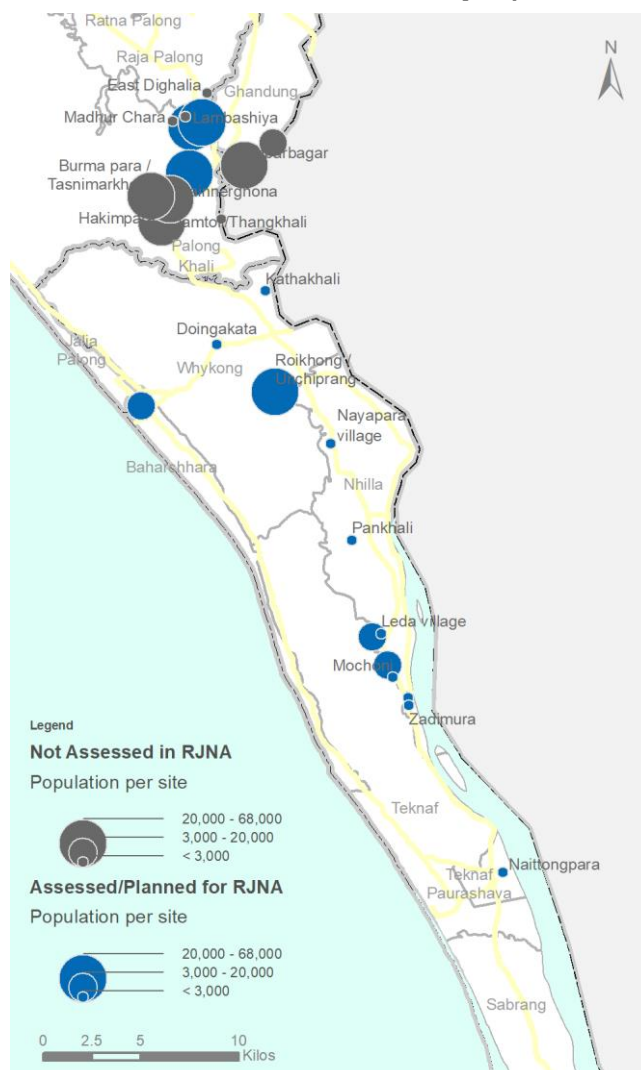
35,000
Arrivals in host
communities



185,000
Arrivals in new
spontaneous sites



Influx Locations Assessed/Planned by Rapid JNA



Data Source: Key informants, field reports (as of 11 Sept).

Key Observations

- The jump in numbers today is accounted for in large part because large numbers of people are now moving from Teknaf and roadsides into the new spontaneous settlements. The number remains unverified and very difficult to track accurately using the current methodology of consolidating and triangulating field reports. IOM NPM will be implementing a more comprehensive strategy for tracking numbers in the coming days.
- Influx continued throughout the day, with movement patterns becoming clearer as more new arrivals flow from transit sites (Shamlapur, Shawporir Dwip, Leda MS), other host community villages and the Teknaf Metropolitan Area towards existing makeshift settlements and the new spontaneous sites. The number of new arrivals seen in host communities decreased, and the new arrivals in spontaneous sites increased sharply.
- As of today, six new spontaneous sites are being identified: Unchiprang, Moiner Gona, Jamtoli, Burmapara/Thangkali, Rubber Garden, and Hakimpara. Note that Moiner Gona, Jamtoli, and Burmapara/Thangkali are close together, to the south of Balukhali; and Rubber Garden and Hakimpara are proximate to Kutupalong Makeshift Settlement.
- Many new arrivals are still on the move and residing on the road sides, and might be left out of the calculations due to the lack of comprehensive tracking mechanism.
- There is intention to allocate 1,500 – 2,000 acres of land for new arrivals to the north of Kutupalong Makeshift. People are already beginning to settle on some parts of the proposed land and some are reporting being charged 500 Taka to do so. In a meeting with the DC on 10 September, WFP, IOM and UNHCR were requested to immediately initiate work on establishing the site.
- Reportedly, Government started biometric documentation for the new arrivals on 11 September in Kutupalong with

¹ Data includes results of the joint inter-agency assessment carried out on 6 and 7 September. Due to high mobility, there is a possibility of double counting. Figures are not verified.

the technical assistance of the Bangladesh Passport and Immigration Department in coordination with local administration.

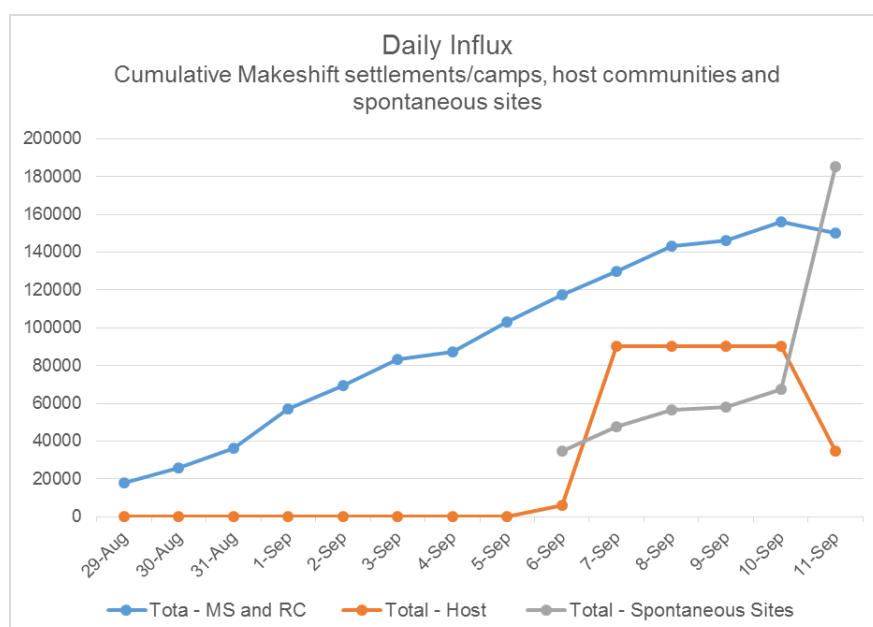
- Local administration started to provide cooked food for 12,000 new arrivals at the Kutupalong expansion area.
- The local administration has been broadcasting messages in Shamlapur, Teknaf and Kutupalong roadsides for people to move on to the proposed camp at Kutupalong.
- The District Administration of Cox's Bazar has opened a control room to provide support from law enforcement agencies and local administration as required. The contact number of the control room is +88 01615700900. There is intention to include a field post at Kutupalong.
- Host communities are absorbing new arrivals, providing them with assistance and sharing shelters in Nhilla, Whykhong, Knajupara, Domdomiya, Nayapara village, Leda village, Unchiprang area.

New Arrivals reported by location, Pre-existing UMN² and Total UMN

| Location | Population prior to Aug Influx | Total Inflow (individual) | Total Population (combined) |
|---|--------------------------------|---------------------------|-----------------------------|
| Makeshift Settlement / Refugee Camps | | | |
| Balukhali MS | 20,016 | 20,241 | 40,257 |
| Kutupalong MS | 79,479 | 68,320 | 147,799 |
| Kutupalong RC | 13,901 | 25,300 | 39,201 |
| Leda MS | 14,240 | 10,625 | 24,865 |
| Nayapara RC | 19,230 | 18,500 | 37,730 |
| Shamlapur | 8,433 | 7,000 | 15,433 |
| Grand Total | 155,299 | 149,986 | 305,285 |
| New Spontaneous Settlements | | | |
| Hakimpara | | 41,645 | 41,645 |
| Jamtoli | | 2,680 | 2,680 |
| Moinar Ghona | | 40,740 | 40,740 |
| Rubber garden (old gundum-2) | | 49,700 | 49,700 |
| Thangkhal / Burma para | | 20,600 | 20,600 |
| Unchiprang | | 30,000 | 30,000 |
| Grand Total | | 185,365 | 185,365 |
| Host Community | | | |
| Teknaf | 33,687 | 30,000 | 63,687 |
| Ukiah | 8,452 | 5,000 | 13,452 |
| Grand Total | 42,139 | 35,000 | 77,139 |
| TOTAL UMN | 197,438 | 370,351 | 567,789 |

Information Gap

- Fluid movement makes the tracking of new arrivals challenging. Figures are triangulated estimates based on the visual observation of key informants: the new arrivals have not been verified at household level. In particular, the number of affected population in host communities remains unclear. Daily data for arrivals in host communities is not available due to limited agency presence.



² Data is sourced from the Need and Population Monitoring (NPM) assessment Round 4, as of July 2017.

Humanitarian Response - Sector Overview



Shelter/NFI and Site Management

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Needs:

- Immediate distribution of emergency shelter (tarps, bamboo, rope) to new arrivals prioritizing the most vulnerable groups
- Management of vulnerable shelter and high risk areas. They are located in very steep and hilly areas where part of the land is eroding quickly.
- New arrivals continue to arrive in settlements and setting-up new sites
- Guidance needed on how to construct shelter properly for those arrivals who started setting up shelters

Response:

- Distribution reached 9,666 new arrival households since the influx.
- Distribution of 1,330 tarpaulins in Kutupalong MS and 150 in Kutupalong behind TV tower.
- Distribution of 100 tarpaulins in Shamlapur.

Distribution Planned:

- Distribution of tarpaulins continues in KMS.

Capacity:

- 15,587 plastic sheets are in stock to cover people in need.
- 1,000 shelter kits, 2,000 NFI kits, 5,000 kg rope and 3,600 sleeping mats are available in stock.

Gap:

- Land allocation for shelter should be identified immediately. Current settlements are full and families with capacity to buy and build are establishing new sites.

Needs:

- Coordination with shelter/NFI sector and scale up distribution of cooking pots, stoves, cooking fuel and water provision alongside with food distribution.



Food Security

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Response:

- Rice distribution reached 2,200 households in Kutupalong and 2,109 households in Nayapara camps
- Mobile hot meal distribution started on 10 Sept, about 1,000 NNA people of different entrance point received hot meal and safe drinking water.
- Mobile distribution team covered Shamlapur, Panbazar of Balukhali and Unchiprang. A total 5,000 NA are provided with hot meal and sufficient safe drinking water.
- Wet Kitchen of Nayapara registered camp starts today, 1,031 new arrival received hot meal packets. From 12 Sept, new arrivals will be provided dining space for feeding. Also 143 families received fortified biscuit.
- From the nutrition centers of EmOp center in Kutupalong Makeshift, Kutupalong registered camp and Leda makeshift, total 6,887 fresh new arrival received hot meal and among them 5,219 people received 400Kcal fortified biscuit.

Distribution Planned:

- Fortified biscuit and rice distribution on 12 Sept is postponed to the next day due to movement restriction
- Mobile distribution team will distribute hot meal in different areas, where NA people are settling or entering to Bangladesh
- Fortified biscuits are planned for 9,500 people through EmOp center in KMS, Leda-EmOp center, KTP registered and Nayapara registered camp.
- 4,000 food packets (from the Turkish trucks) will be distributed.
- Package (food + NFI + 1500 BDT) distribution planned for 5,000 HH in Unchiprang for 2 months
- Food package for 1,500 households are planned



WASH

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- Food package with emergency shelter and wash planned for 4,400 households
- Food assistance planned for 7,000 households by new partners

Capacity:

- Fortified biscuits stock in pipeline.
- In kind donation of 5 MT fortified biscuit and 20 MT rice available
- Rice available for Phase 2 GFD IKD (25kgs) to approximately 26,000 HHs/2017 NAs.
- 10,000 packets of pulses, suji, sugar and salt available.

Gap:

- More partners needed to deliver food and respond to the needs
- Additional funding required for pulses and other ingredients for wet meals.
- Rice for following months October may have to be mobilized.
- Diversified Diet/food basket (beyond rice) is very limited.

Needs:

- Overstretched capacity on existing WASH facilities in all makeshift settlements and refugee camps, in Shamlapur & LMS number of fresh new arrivals are increasing rapidly
- People residing in the border area, Teknaf Shawporir Dwip and Sabrang have no or very limited access to safe water and WaSH facilities which add risks to an outbreak

Response:

- Two 5,000 liters tanks have been installed in Unchiprang and provide water every day.
- New emergency water point solutions in Jadimura and Leda village are under development. On 13 Sept, 130 emergency latrines will be installed in Unchiprang.
- Two ring wells in Roikhong, Unchiprang were disinfected and one tube well repaired. Land excavation is planned, and setting up of a canal treatment for the community to have wider access to potable water.
- Water trucking in Unchiparang is mobilized and ongoing.
- 9,000 liters per day safe water distribution can be provided through mobile team, moving from Ukiah to Teknaf.
- Emergency water supply is ongoing by 9 Sept. 12 water tanks available for immediate response.
- Construction of 400 latrine chambers, 15 new tube well, 100 water tap installation in KMS and BMS continue.

Capacity:

- Stock available to support safe water for 2,500 individuals within 72 hours. Additional stocks/items are also in pipeline.
- Safe sanitation, hygiene can be provided for 500 people, hygiene 500 individuals with current stock. Additional 1,000 hygiene kits available.
- Sector is ready with contingency stock to provide immediate safe water in small concentrated/pocket areas of host community

Gap:

- Limitation of space for the new construction of WaSH facilities is a chronic challenge for expanding WaSH services intervention
- The need of constructing extra facilities might be complexed by the Forestry Department regulation, which requires clarification on government positioning and ongoing advocacy efforts

Needs:

- Needs of emergency and basic health care services are increasing



Health

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- More human resources needed to meet the emergency health needs
- Tents/temporary health posts need to be built immediately in the spontaneous settlements
- Vaccination coverage for new arrival children is crucial to prevent outbreak of communicable disease
- Disease surveillance needs to be strengthened
- More kits are required to meet the needs of the overwhelming number of pregnant women among the new arrivals

Responses:

- OPD services provided to a total of 471 UMNs (new arrivals), IPD services to 1, ANC to 29, PNC to 5, Delivery conducted for 1 mother, Referred 6 cases for higher management. Injury cases were 20, SGBV -6 and AWD-53 and others were respiratory infections, common cold etc.
- Two Mobile Medical Teams (MMT) provided OPD consultation to 187 new arrivals in Unchiprang and Sabrang FWC.
- Leda Health Clinic total consulted 315 new arrivals patients, 15 patients admit in LHC
- Majority cases were LRTI 102, AWD 76, ANC40, 50 injuries and 62 skin diseases 62
- Shamla Pur FWC ,LCC ,AAPCC and RCC provide primary treatment 217 new arrivals patients, 2 patients referred to higher health facility for better management.
- 1 suspected tuberculosis patients referred to Nhilla for sputum test.
- Teknaf Heath Complex provide primary treatment 15 new arrivals patients.
- PFA provided for 10 injured patients, 9 children, 25 ANC/PNC, 18 trauma based counselling and 2 group counselling sessions.
- Total PFA is provided to 511 female and 359 male.
- Total 167 children covered through recreational play session (121 girls and 45 boys).
- Total 284 children covered through therapeutic play session (284 girls and 143 boys).
- Stress management session/trauma counseling provided to 187 female and 105 male.
- In Kutupalong camp, 253 consultations were provided, 1 bullet injury patient referred for further management. 24 diarrhoeal cases and 11 LRTI cases seen. 118 MR and 145 OPV vaccine given among children. 16 ANC and 5 PNC done. 3 normal deliveries conducted. 15 SAM cases identified for management. No death and no measles cases reported.
- In Nayapara refugee camps, a total 684 consultation was done today among them 15 cases were referred to higher facility. 48 diarrheal cases and 202 LRTI cases were treated. 187 MR and 115 OPV vaccines given to the children. 42 ANC and 2 PNC done. 3 deliveries conducted. No death and no measles cases reported.

Capacity:

- Seven Medical teams are mobilized at new spontaneous sites, three new teams will join soon.
- Sufficient number of Midwives to be engaged in emergency services

Gap:

- Some UH & FWCs have service providers but with serious shortage of medicine and thus unable to provide treatment to sick children and women.
- Gap in necessary health human resources is yet to be filled out. In the Cox's Bazar Sadar hospital two more Referral Nurses (RN) are crucially needed to manage and overcome the burden of referral and injured cases, one more RN required for CMCH and in the Innani subcentre there is no support staff.

Needs:



Safety, Dignity and Respect for Individual Rights

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- Emergency shelter and safe places are priority needs. Special arrangements need to be sought for Extreme Vulnerable Individuals (EVIs). Lack of safe space increases the risk of exploitation and abuses.
- More timely and widely information sharing, clear and uniform messaging to influx population on humanitarian assistance through establishment of information hub/center, strengthen communication with communities to include direction on where to access food, shelter aid and other services, particularly for male-heads of house seeking resources for their families.
- Tents to ensure provision of discrete, safe GBV case management services in make-shift settlements
- Establishment of health care response to GBV in spontaneous settlements
- Introduction of GBV first response services in new spontaneous settlements
- Deployment of trained outreach volunteers and staff to conduct psychological first aid and provide GBV/SRH service referral information in spontaneous settlements
- Distribution of dignity kits including plastic sandals, washable menstrual hygiene materials, clothing garments, and torch light
- Improved access, including without fear of arrest, of seriously injured/sick persons to medical facilities, including the stranded people at border area.
- Secure permissions and spaces for protective services targeting women and children in expanding areas of make-shift settlements, including child-friendly spaces and women and girls' safe spaces
- Ensure clear pathways for movement across the make-shift settlements that are accessible to persons with disability
- Stable power supply should be provided to ensure safety at night as well as stable provision of assistances including water and food.
- Strengthened family tracing mechanisms are needed for UASC and other separated families. Follow up and monitoring mechanism for EVI and unaccompanied children needed.
- Specialized services and psychosocial first aid are needed for trauma, survivors of SGBV and affected children. Children need access to safe spaces, psychosocial and recreational support.
- Increasing concerns of child trafficking especially adolescent girls among new arrival children as different child trafficking groups are active in the region.
- Presence of medical staff in CFS where numbers of children were found sick. Children are living under open sky beside the camps, roads and forests, with limited access to clean water and proper sanitation. Young children are suffering from cold, fever staying in wet cloths during intermittent heavy rains. Clothing is needed children.
- Introduction of menstrual regulation services at upazila- level health complexes and selected union family welfare centers to enhance service access
- More CFS needed in new spontaneous settlements in South Balukhali in light of increasing influx.

Responses:

- A cumulative total of 356 reported cases of GBV in make-shift settlements were referred to life-saving care since 25 August
- Approximately 140 women and girls accessed services in Women Friendly Spaces, including 93 new arrivals
- A total of 98 women received information regarding existing GBV-related services in Women Friendly Spaces facilities, while an estimated 164 additional individuals received information and awareness regarding GBV in make-shift settlements through community-based outreach
- Psychological first aid was provided to 37 individuals in make-shift settlements
- In registered refugee camp a total 783 UASC identified till today (362 boys and 421 are girls)
- 8 children are taken in Child Safe Space (4 boys and 4 girls).
- 353 child got support in CFS. Where 184 were boys and 169 were girls.
- 49 children attend in MAPS
- 47 missing children information announced through information point, and 18 children were found and returned to parent/s. RFL team members worked at the

Info Point, and two family tracing request forms were filled. 25 phone call support were also provided by RFL team.

- Total 4 Psychological First aid sessions are conducted in 2 schools of A & B Block. Total participant was 370. Among them 250 Female and 120 Male.
- MFT visited 28 EVIs previously identified by registration team during head counts.
- 19 UASC (boys-9, girls-10) are identified in Nayapara camo today. 1 UASC placed in the child safe shelter. 149 UASC played in child friendly spaces today.
- 62 PSNs are identified.
- 41 Child Friendly Spaces (CFSs) are operating in the four makeshift settlements and host community where children can get psychosocial and recreational support.
- 1,894 children (1028 boys and 866 girls) benefitted from psychosocial support and other child protection services in makeshift settlements and host communities on 8-9 September.
- 5 unaccompanied children (3 boys, 2 girls) and 29 separated children (16 boys, 13 girls) are identified and resisted in makeshift settlements and host communities on 8-9 September.
- 63 most at risk adolescents (46 boys and 79 girls) have received life skill based education and GBV referral services in makeshift settlements and host communities on 8-9 September.
- To date, total 333 UNSCs were identified and registered (188 boys, 145 girls); 285 separated children (165 boys, 121 girls); 47 unaccompanied children (23 boys, 24 girls).

Distribution Planned:

- 1,500 dignity kits distribution planned on 10 Sept in Unchiparang.

Capacity:

- Three CFS were established in both camp.
- Twelve facilitator were appointed for CFS
- Food service and biscuits are available for CSS children.

Gap:

- Union-level community clinic in Kutupalong is overwhelmed with patients, resulting in long lines for waiting and inefficient service provision for GBV survivors seeking emergency health services
- Cost of transport prohibits beneficiaries to access upazila-level health facilities where emergency sexual and reproductive health services are available, including clinical management of rape
- Strong linkages between Women Friendly Spaces and sexual and reproductive health referral for adult women, particularly for pregnant women
- Information to service providers regarding appropriate modalities for referring extremely vulnerable individuals to shelter services
- Service provider awareness regarding available life-saving care for GBV survivors, including access to clinical management of rape, food, and shelter services in make-shift settlements

Needs:

- Access to education for 52,500 new arrival Rohingya children of 4-14 years age.



Education

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Responses:

- 12,521 Undocumented Myanmar National (UMN) children of 4 – 14 years (6,729 girls; 5,792 boys) continued with non-formal basic education in 166 learning centers in 4 UMN settlements: Kutupalong, Balukhali, Leda and Shamlapur.
- 624 children attended in the ECCD in refugee camps.
- Survey for identifying newly arrived 4 – 14 years children started for enrolling them into learning centers.

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- 41 Education in Emergency (EiE, Centre based) Kits have been mobilized to establish temporary learning centers in 41 Child Friendly Spaces (CFSs) – 11 permanent and 30 mobile CFSs in both host community and makeshift settlements – to reach an estimated 1,230 newly arrived children in both the pre-existing and new spontaneous settlements/extension areas. 200 EiE kits mobilized for newly arrival children.
- Teachers are providing referral pathway support to the new arrivals before and after/during school hours (referral information includes primary health care, psychosocial support, safety and legal support, NFI/shelter, WASH, food, women friendly space, Child friendly space, health counselling etc.).
- Teachers are conducting home/shed visit to talk with children and their families to reduce their stress and ensure regular attendance.
- All the teachers and staff are coordinating with parents, Learning Center Management Committee (LCMC) members and Block leaders for ensuring LCs are not occupied for primary shelters and smooth operation of learning is ensured.

Capacity:

- The sector has estimated need of establishing 630 LCs/schools against the current capacity of providing 156 EIE kits.

Gaps:

- The attendance rate in learning centers has fallen from 99% to 70% during the recent influx, particularly in certain overcrowded blocks, due to huge movement of people in the settlement neighborhoods, leading to parental fear of their children going missing.
- 11 LCs are currently used as temporary shelter by the new arrivals, postponing current operations. In Official camp, 23 schools and 6 ECCD Centres are being used as temporary shelter.
- Children and teachers are getting sick from water borne diseases, due to acute shortage of water and sanitation facilities and also from common cold fever.
- Internal movement from settlement to settlement is making it difficult to identify potential learners for a particular area/learning center.
- Planned spaces for establishing new learning centers has been occupied to house the new arrivals..

Needs:

- Referral and Blanket Supplementary Feeding for new arrivals.



Nutrition

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Responses:

- As of today, 1,644 fresh new arrival U5 children were screened in host communities of Ukhia and Teknaf Upazilas under the routine CAMAM program among them 15 were detected as SAM and 67 as MAM. Out of 15 only 3 identified SAM children admitted in the OTP.
- As of today, 2 fresh new arrivals SAM U5 children admitted in the SAM unit at Ukhia UHC for inpatient treatment.
- In total 7,046 under five new arrivals are screened in different makeshift and registered camp areas. Among them 421 children identified as SAM and 1,199 as MAM till date.
- Mobile OTP will be planned to start by this week for ensuring the SAM treatment in different spontaneous settlements
- A total of 1,393 U5 children were screened today under the emergency nutrition response for fresh arrival in host communities among them 27 were detected as SAM. 3,166 children were screened till date, out of them 143 were detected as SAM.
- In total 51 fresh new arrivals were screened at IMCI corner of Teknaf UHC. Among them 2 SAM and 2 MAM were referred to Leda makeshift OTP/SFP program.
- About 15 SAM children are admitted and getting treatment from Balukhali Sub Health center.

- 99 fresh new arrivals identified and admitted in nutrition program in Nayapara camp among them 11 children identified as SAM, 24 children as MAM, 18 pregnant and 46 lactating mother. in Unchiprang settlement.

Capacity:

- Wet kitchen can be continued up to end of this month with the current stock.
- The stock of high-energy biscuits is secure only for two weeks.
- Stock for inpatient SAM management is almost running out.

Inter-Sector Coordination Team

| | | | |
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