



# BANGLADESH RED CRESCENT SOCIETY (BDRCS)

## Population Movement Operation (PMO)

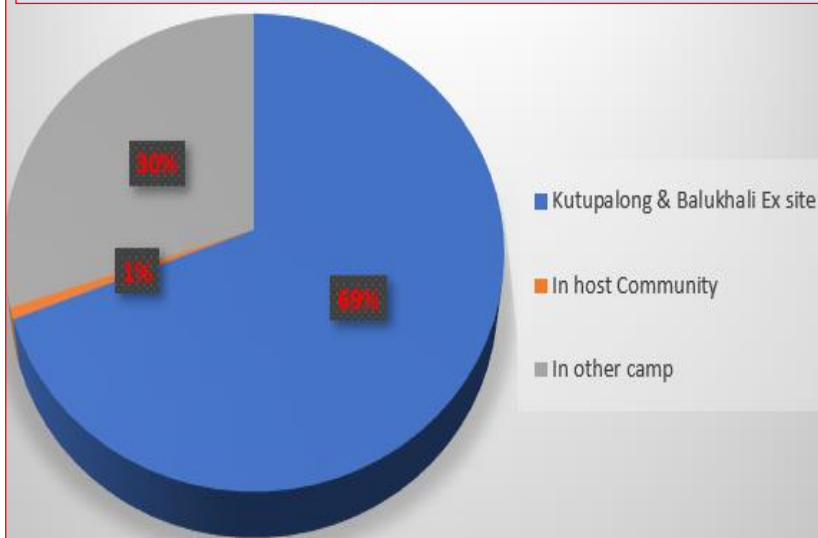
### Cox's Bazar

## Monthly Report Jan 2019



Friendship Villages. A project of 1000 households at Hakimaara. Camp-14 with the support of ORC.

A breakdown of displaced people per site



### Partners Supporting at PMO

- IFRC
- Qatar Red Crescent
- Japan Red Cross
- British Red Cross
- Turkish Red Crescent
- Canadian Red Cross
- American Red Cross
- Danish Red Cross
- German Red Cross
- Swiss Red Cross
- Kuwait Red Crescent

## Population Update



Total Influxed Population

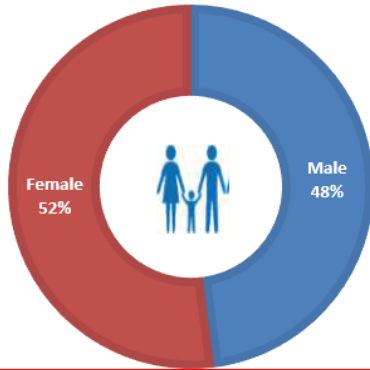
**891,233**



Families/HHs

**205 290**

### RATIO OF MALE AND FEMALE



Male 431,687, Female 459,546. Total=891,233



*The Doctor and Nurse are providing Medicare at Field Hospital*



Elderly

**3 %**



Children

**55 %**



Adult

**42 %**

## JOINT RESPONSE PLAN (JRP)

The Strategic Executive Group has developed a **Joint Response Plan (JRP) for 2019** regarding the displaced people from Myanmar and who are affected specially by this influx. The JRP has included different issues in terms of measuring people who are in need, of support interventions and assistance, types of aid, emphasizing on a coordinated approach among all NGOs and concerned government sectors pointing the below topics:

- Overview of the crisis and needs
- Protection framework for humanitarian response
- Response strategy of 2019
- Coordination and monitoring
- The new way of working
- Cross-cutting issues
- People targeted by sector

Through developing this Plan, the SEG attempted to depicting shared understanding of the crisis, including the most pressing humanitarian needs. It represents a consolidated evidence-base and will help this joint strategic response plan who are working at the same ground.



# Bangladesh: Population Movement Operation

OT-2017-000147-BGD // MDRBD018

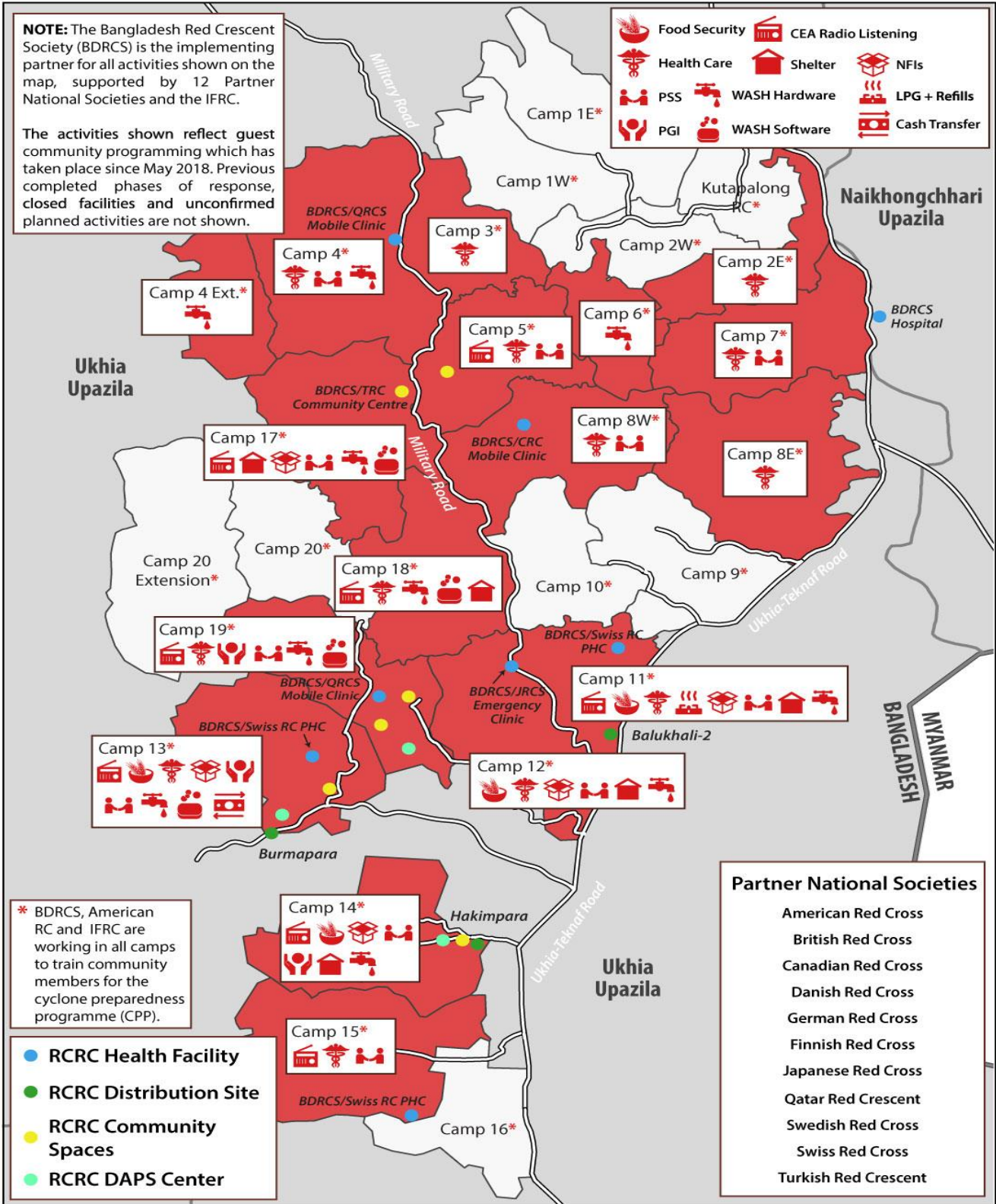
12 FEBRUARY 2019

KUTAPALONG EXPANSION SITE // UKHIA UPAZILA - 4W RESPONSE MAP

**NOTE:** The Bangladesh Red Crescent Society (BDRCS) is the implementing partner for all activities shown on the map, supported by 12 Partner National Societies and the IFRC.

The activities shown reflect guest community programming which has taken place since May 2018. Previous completed phases of response, closed facilities and unconfirmed planned activities are not shown.

	Food Security		CEA Radio Listening
	Health Care		Shelter
	PSS		WASH Hardware
	PGI		WASH Software
			NFIs
			LPG + Refills
			Cash Transfer



\* BDRCS, American RC and IFRC are working in all camps to train community members for the cyclone preparedness programme (CPP).

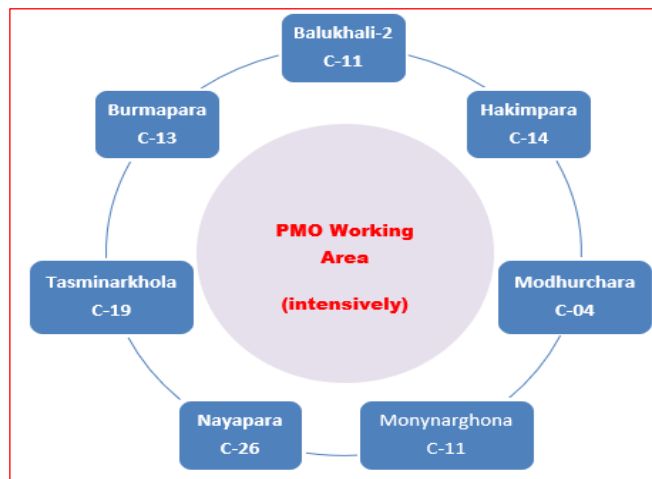
- RCRC Health Facility
- RCRC Distribution Site
- RCRC Community Spaces
- RCRC DAPS Center

- Partner National Societies**
- American Red Cross
  - British Red Cross
  - Canadian Red Cross
  - Danish Red Cross
  - German Red Cross
  - Finnish Red Cross
  - Japanese Red Cross
  - Qatar Red Crescent
  - Swedish Red Cross
  - Swiss Red Cross
  - Turkish Red Crescent

### PMO Working Area

- Balukhali-2, Camp-11
- Burmapara C-13
- Hakimpara, Camp-14
- Tasminarkhola, Camp-19
- Moinarghona, Camp-11
- Nayapara, Camp-26
- Modhuchara, Camp-04

Besides these areas, PMO also has been carrying out its humanitarian assistance at Camp 5, 7 8w, 15, 19 area with a certain aid for the time to time.



## HEALTH & PSS SECTOR

### FIELD HOSPITAL

From 16th October 2017 BDRCS & IFRC have started an Emergency Response Unit (ERU) Field Hospital for the people fleeing from Myanmar to provide health care services and essential medicines for half a million people. The ERU has been ensuring especially NVD, Caesarian (C-section) and Orthopedics related case and general services.

Initially, The Hospital was managed by Norwegian and Finnish Red Cross. BDRCS has taken the management responsibilities from 1<sup>st</sup> January 2019. Currently, the hospital has reformed into 10-bed general hospital and provides 24/7 services by Bangladeshi qualified doctors and nurses.

#### Current staff

One Hospital Manager, 6 (Six) doctors, 7 Nurses, 1 Admin & Finance officer, 1 Pharmacist, 1 NDRT, 1 Electrical Engineer (Diploma), 2 Lab Technicians, 1 X-Ray Technicians, 6 Porters, 8 Cleaners, 4 Tech team members, 6 (six) Cooks and one laundry man are at present in place.

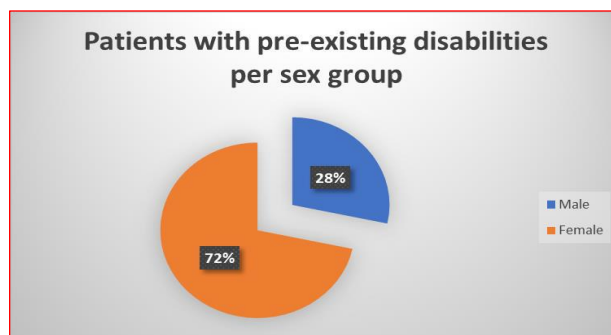
In January 2019, 85 patients had been admitted in the wards of the hospital, where 22 were pediatric, 21 were admitted in the maternity and 42 were general patients. A total of 9 normal vaginal delivery (NVD) occurred with 100% live births in the hospital.

Cases who had visited the BDRCS health facilities during January 2019, 60% of them were female. Distribution of cases per age groups (Figure 4) and gender segregation for the patients with pre-existing disabilities (Figure 5) has shown in the following. In terms of morbidities, respiratory tract infection (RTI), fever (with unknown origin), skin diseases, other diarrhea and helminthiasis were recorded for highest numbers. The proportional prevalence of severely acute malnutrition (SAM) was 0.9% and for moderately acute malnutrition, was reported as 2.6% for all the children aged from 6-59 months in all 6 health facilities.

### HEALTH POSTS

At present, 05 Health Posts are on high functionality supported by IFRC, QRC, JRC, CRC and GRC under PMO.

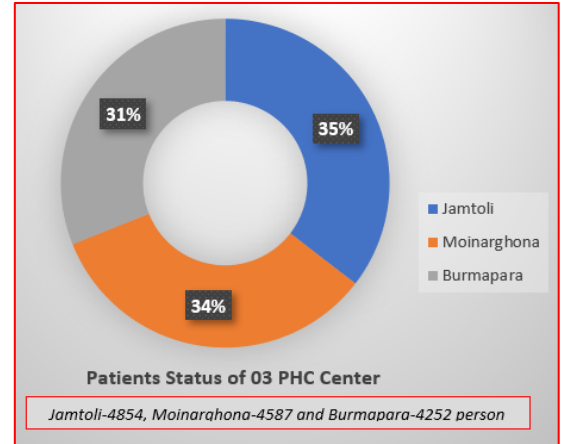
Services Received (Age Segregated) (Health Posts)	Reached People
Male <5	970
Female <5	2635
Male 5>	3180
Female 5>	5450
Refferal (Male + Female)	41
Maternal Health Services	870
Child Health Services	560



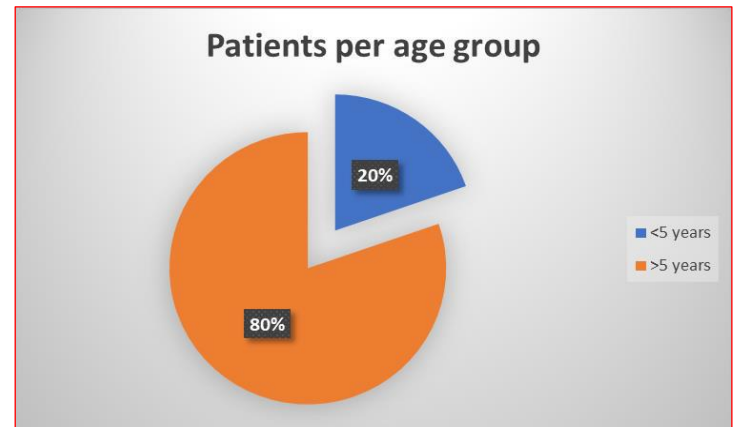
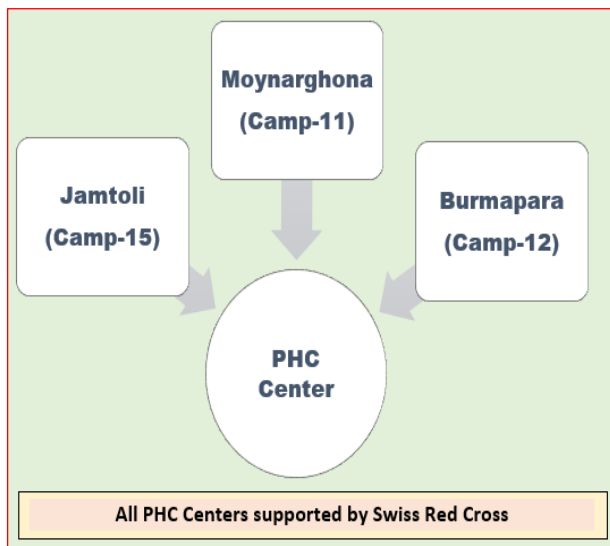
## Primary Health Care (PHC) Center

Besides, a Field Hospital and 05 Health Posts, 03 PHC Center are also in full swing under PMO emergency response.

Services Provided from PHC centers	Service reached
General Patient treatment	11157
Adolescents Counselling (Adolescent, Pg & Lac Mother)	2037
Maternity Health Care (ANC, PNC, MR, PAC & NVD)	1498
Family Planning Materials Support (Inj. IUD, condom & oral pill)	922
Nutrition (Screening- U5, SAM, MAM, Well and PLW MUAC test)	1566
Lab test	2192
Integrated Protection Service (PSS, CEA, PGI & RFL)	3213
Host Community	285
Referred	199
<b>Total Patients+</b>	<b>13693</b>



Jamtoli-4854, Moinaraghona-4587 and Burmapara-4252 person



Reached services from Field Hospital

## Suspected Varicella outbreak Situation update

Responding to an outbreak of chicken pox in the camp settlements, health sector partners led by the BDRCS, IFRC and other partners societies have stepped up surveillance and initiated measures to curtail further spread of the disease and get an attempt to prevent any complications.

As of 13 January, 832 displaced people living in Cox's Bazar camps, have been confirmed with chicken pox, since December 2018. Out of which 51% were reported from Ukhia and 49% from Teknaf, with 39% under the age of 5 and 61% above this age. One three-year-old child with chicken pox has died due to causes not directly related to the disease.

Chicken pox, also known as Varicella, is an acute, highly contagious disease caused by varicella zoster virus, usually during childhood. It's a self-limiting disease, but severe complications may arise such as secondary bacterial infections in children, and pneumonia in adults.

Six healthcare facilities had provided treatment to 423 suspected varicella cases during 16 January – 31 January 2019. On average, 36 cases have been treated per day. There were 134 under 5 years old cases, where 14.2% cases were under 1 year old.

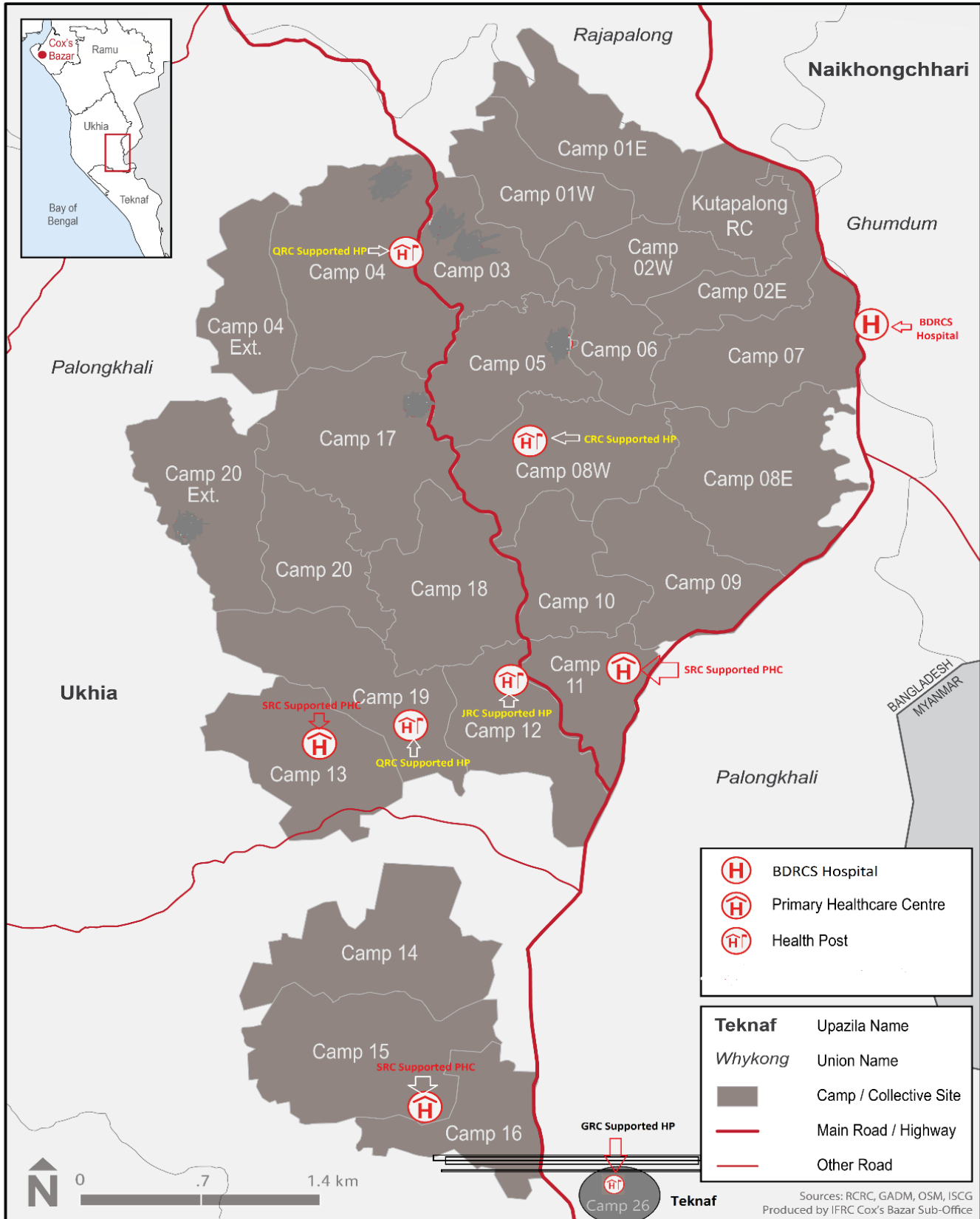


INTERNATIONAL  
  
 FEDERATION

# Red Cross Red Crescent Health Facilities

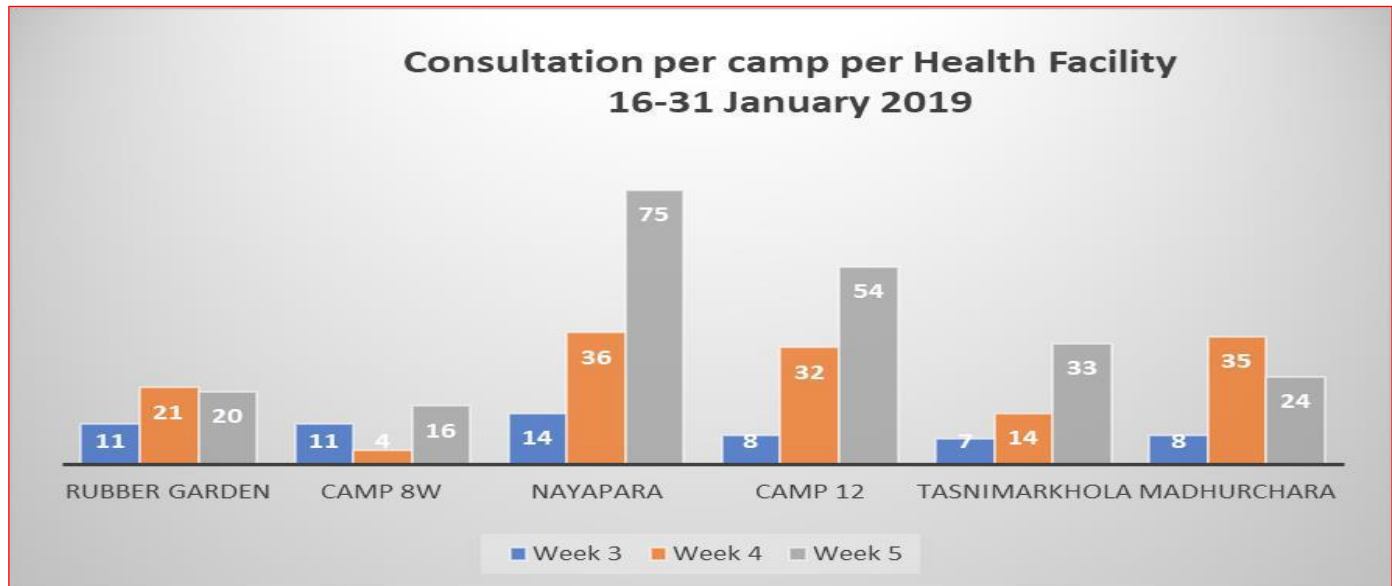
## Population Movement Operation

### Bangladesh Red Crescent Society



The maps used do not imply the expression of any opinion on the part of the International Federation of Red Cross and Red Crescent Societies or National Societies concerning the legal status of a territory or of its authorities.

Activity under ECV	Unit	# of People
Conveying message on Epidemic Control	HHs	9569
Awareness Session on EC including Health Session	Peoples	10317
Recipients Satisfaction Survey on Health Facilities	Interviewer	239
Community Health Outreach Activities on (CBHFA) HHs	HHs	19249
Satellite Clinic	Person (CV)	101



### ECV as Outreach Approach

Community Health Outreach Activities through community-based health & first aid (CBHFA) had been done for 19249 individuals at household level on BDRCS health facility catchment areas. 101 persons had been also reached through satellite clinic in camp 7 (Block B1, E1 and Moddom Para) at Ukha, Cox's Bazar.

### Health Posts

Throughout 2018, BDRCS had 5 health teams. Initially the nature of the health team was mobile but gradually with the settlement of the influx population these transformed as static health post. Each of the team composed of doctor, nurse and or midwife / paramedic. Each of the health post serves 5-6 days in a week and at least 4 consultation hours per day. The service components are

- General health care;
- Ante-natal and Post-natal check-up;
- Family planning methods (emergency and regular pill, condom, injection depo)
- Detection of nutrition status for children and pregnant-lactating women (MUAC);
- Management of communicable diseases like diarrhoea, respiratory infection, measles, diphtheria, chicken pox, skin infections, conjunctivitis,
- Detection and primary care of non-communicable diseases like high blood pressure, diabetes, asthma, arthritis;
- Contact tracing for outbreak diseases;
- ORT (Oral Rehydration Therapy) & hand wash corner for the diarrhoea patients;
- Health education both for the Rohingya people & host communities;
- Psycho-social support;
- Promote awareness of hygiene & sanitation;
- Referral system to the nearest possible field hospital or other hospitals for the patients who need further specialized treatment.
- Community Outreach activities / CBHFA

## Key activities of January 2019

A total of 11,371 consultations had been done in the 5 health posts and 1 field hospital in January 2019. Among the total consultations, 10,895 of the cases visited external consultations and 3.8% cases were related with maternal health. In terms of vulnerability, 4.5% of the cases belonged to pregnant and lactating women (PLW), and 0.7% of the cases had pre-existing disability. Regarding the consultation, an increase of 24% had been seen for the BDRCS health facility in camp 12 than last month, where it was 22% increase in Camp 19, 11% increase in Camp 4 and 6% increase in camp 8W, subsequently for BDRCS health facilities.

Only, the health post from camp 26 had faced a decrease of 4.6% than December 2018.

A half-day seminar was organized for health managers and doctors to gain better understanding of 'Data collection and sharing' from health facility settings. Feedback for homogenization of database had been taken and an improved version of questionnaire would be deployed soon.

- Training on Varicella outbreak awareness were conducted for 191 community health volunteers and 20 community mobilizers in Ukhia and Teknaf.
- 15 doctors had been trained on reporting and coordinating of suspected varicella cases.
- Report had been shared with MOH and health sector in daily basis until the next declaration.
- 2000 leaflets have been printed and disseminated in the service areas.
- Guideline on management of uncomplicated cases of varicella has been shared with the medical doctors & medical assistants.
- In January 2019, CHVs had reached 13,370 household and disseminated key messages to approximately 66,850 community members.
- 4W mapping for IFRC MHPSS had been done with MHPSS working group for January 2019.
- A half day training on nutrition had done for newly recruited community volunteers of GRC on the messages of the nutrition promotion during household visits.
- A session on understanding of Infant and Young Children Feeding (IYCF) had been

## PSYCHOLOGICAL SUPPORT (PSS)

In January 2019, a total number of 18702 children and adults reached with psychosocial activities in all catchment area of BDRCS health centres (camp 4, camp 7, camp 8W, camp 12, camp 19 and camp 26) and additionally in camp 13 and 14. All the activities had been doubled than previous month (Dec 2018) [N=9323]. Psychological first aid (PFA) had been conducted at household level where 1322 households had been visited and PFA provided to 7403 individuals.

Situation analysis on MHPSS (Mental Health and Psychosocial Support) had been done for identifying MHPSS gaps, coping strategies with the situation over time and availability, accessibility and use of services. For that, two focus group discussion (FGD) sessions (one for adolescent girls and boys, another for adult women) had been carried out in Burmapara (Camp 13) community center.

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Activities of PSS	Reached People
Children resilience and recreation activities at the Health Posts	2264
Group session to provide Psycho-education Health Posts	1728
Conducted Psycho-education, through group sessions	1918
Conducted Psychological First Aid (PFA) at HHs level	1110
Group Session and Life Skill Activities	168
Child Resilience Program	238
Youth engagement through recreational activities	922
Family Visit and Psychological First Aid	1031
FGD (3 groups)	39
Community Volunteer Orientation	31



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## NFI Non-Food Items Distribution



Supplementary  
Food Parcel  
**1000**



Soap  
**3,268**



Blanket  
**13,488**



Aqua tab  
**228,760**



Solar  
Lantern  
**17,497**



Rain Coat  
**2000**



**550**

Registration  
**712**  
HHs

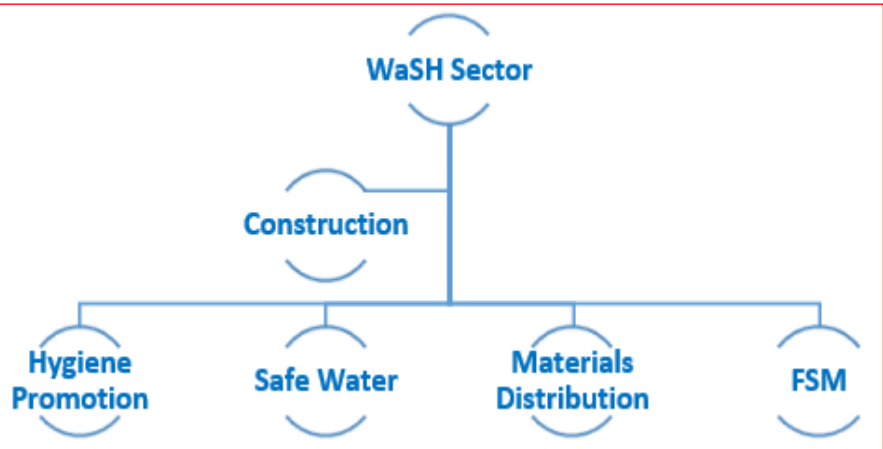
Hygiene Kits  
**8845**  
Package

Tie down Kits  
**2673**  
Package

Vaseline  
**300**  
Pcs

## Water Sanitation & Hygiene Promotion (WaSH) Activities

### WaSH Comprised



### Key WaSH Activities

IFRC	
Construction of production Boreholes	
Camp 11	2
German Red Cross	
Repair of water points	
Camp 06	3
Camp 13	2
Camp 18	1
Construction of Deep tube well	
Host Community	2
Danish Red Cross	
Repair of Water Points	
Camp 19	32



**2**  
Boreholes  
**2**  
DWTs  
**38**  
Repairs

## Water Distribution



Water  
**96,000**  
 Without treatment  
**5,472,500**  
 With treatment

German Red Cross	
Water Distribution with Treatment	
Camp 13	558,000
Camp 18	1,472,500
IFRC	
Water Distribution with Treatment	
Camp 11	107,000
Camp 12	681,000
Camp 18	2,654,000
Water Distribution without Treatment	
Camp 11	26,000
Camp 18	70,000

**3**

Partners

**7**

Camp & Community

**5**

Activities

## WaSH Construction & Renovation Activities

British Red Cross	
Camp 18	
Construction bathing facilities/ Laundry	14
Construction of Latrines	17
Repairing of bathing facilities	23
Repair of Latrines	57
Danish red Cross	
Camp 19	
Construction of Latrines	7
German Red Cross	



**719**  
Cubic feet treated

**277**  
Latrines Dislodged

## Faecal Sludge Management (FSM)

British Red Cross	
Camp 18	
Desludging of Latrines	230
Faecal Sludge Treatment	719
German Red Cross	
Desludging of Latrines	47



**24**  
Latrines

**14**  
Bathing Facilities

**80**  
Repairs

**3**

Partners

**3**

Camps/Communities

**8**

Activities

## Shelter & Construction Activities



**720**  
PASSA  
Training

**01**  
Model  
Shelter

**30**  
Training  
on Shelter

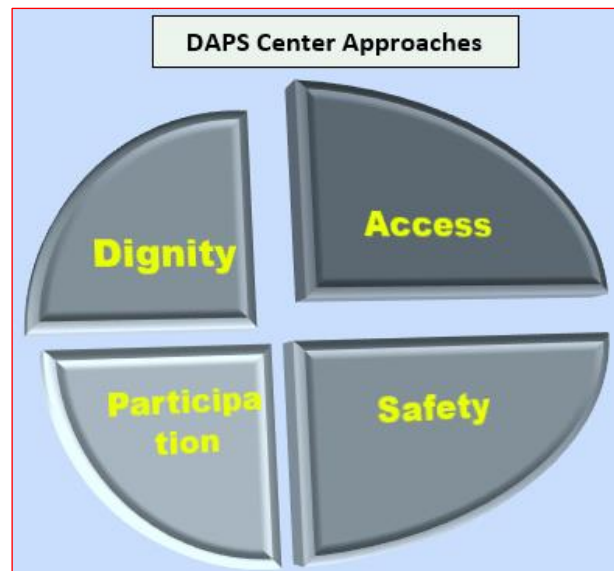
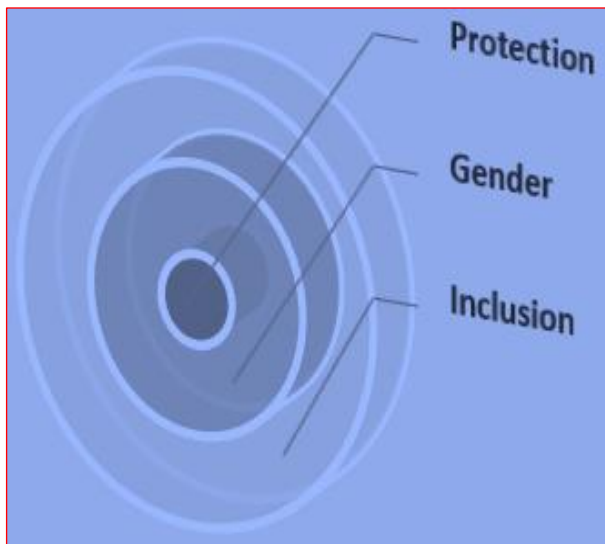
**Construction of Mal Nutrition Treatment Center (MNTC) and Health Center at Tanjimarkhola Camp-19.** About 50% work has been completed supporting QRC.

- Construction of walk way, hand washing point and generator room at Tanjimarkhola, Camp-19 by QRC.
- Construction of walk way at Modhurchara supported by QRC.
- Construction of stair connection at Hakimpara distribution Center and Hand washing Point supported by QRC.
- Construction of walk way to entry Toilet and Stair Connection to the Balukhali-2 Distribution Center funded by QRC.
- Construction of FSM Lab, renovation work successfully completed supported by IFRC.

### Way forward

- Construction of Eco-friendly Latrines under WASH project Construction at Hakimpara Camp-14, supported by QRC.
- Installation of hand pump production wells at Hakimpara Camp-14. Supported by QRC.
- Community Safe Center at Hakimpara Camp-14 supported by DRC.

## Protection Gender & Inclusion (PGI)



*Key Area of PGI*

## PGI activities

SUPPORTED BY IFRC	
Activities	Reached HHs/People
Outreach activities on PGI	50 HHs
Awareness session on fire safety during winter	185 People
Discussion on the importance of learning signature flower	120 People
Awareness on measles outbreak	180 People
Discussion on the importance on Girls' informal education	55 People

## Community Engagement & Accountability (CEA)

Activities of CEA	Male	Female	Total
Community Radio Listening	295	357	652
Focus Group Discussion	68	66	134
Orientation to RCY for LPG distribution	17	8	25
CEA training to PNs and BDRCS staffs	37	9	46

### CEA KEY FINDINGS

The CEA team had shared the new reports from Ground Truth (GTS). They provide a good update on the current perceptions of both host and guest communities on key issues such as **safety, social cohesion** and **the quality of Humanitarian services**.

Staff and volunteers from BDRCS and IFRC have contributed a lot to the data collection for these reports.


#### Some key findings

- **Needs:** Cash distributions were cited most frequently as the factor that would make Myanmar people live in Ukha and Teknaf of Cox's Bazar district better, as well as improved, more permanent shelters.
- **Selling relief items:** 44% of Rohingya report selling the aid items they receive in order to better meet their needs.
  - **Future outlook:** If Rohingya are unable to return to Myanmar, 80% would want to remain in the camps, as opposed to integrating into the host community in the Cox's Bazar area or moving elsewhere in Bangladesh.
- **Livelihoods:** In host communities, only 49% of the respondents say they and their immediate family are able to make a living working in the local economy.
  - **Favouritism:** Most people in host communities feel that their local representatives do not represent their needs, nor do they serve people equally.

Supported Data Source: IFRC, JRP, UNHCR & WHO

### CONTACT PERSONS


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