

OVERVIEW

Since 25 August 2017, over 711,000* refugees fled Myanmar into Bangladesh. Over the past eight months, UNHCR and partners have been scaling up their response and preparedness efforts in the area of health, including strengthening support to medical and healthcare facilities in refugee-hosting areas with equipment and other immediate needs such as ambulances, hospital tents, medicines, medical supplies, resources, and training. In addition, UNHCR and partners have expanded their response to host communities through supporting government hospitals.

UNHCR and the Bangladesh Directorate-General of Health Services (DGHS) signed a Memorandum of Understanding (MoU) to work together to improve the routine Expanded Programme of Immunization (EPI) through the extension of services to new areas where UNHCR's partners are working. This will ensure that children will get the necessary immunizations and reduce the overall risk of vaccine preventable outbreaks. The MoU will help improve access to basic health care services through the construction of 5 prefabricated primary health posts.

Communicable diseases and in particular respiratory tract infections and diarrhoeal diseases are most common causes of illnesses. Vaccine preventable diseases are of particular concern because of low immunization coverage (approximately 3%) among refugees arriving from Myanmar. There is also increased risk of other diseases with outbreak potential for cholera, measles and hepatitis E.

PREPAREDNESS, RESPONSE AND WAY FORWARD

In the past eight months, UNHCR participated with the health actors to conduct mass immunization campaigns for refugees and host communities in Ukhia and Teknaf upazilas in the Cox's Bazar district, which included measles, rubella, cholera, and polio.

As of 14 April 2018, there were 6687 diphtheria case-patients reported through Early Warnin, Alert and Alert Response System (based on last data available from WHO). The majority of cases aged 5-14 years, with a total of 42 deaths. Diphtheria cases amongst the refugee population have declined since January 2018 according to the WHO, but on average 163 case-patients are reported per week. Investigation is underway by WHO to further reduce transmission in the community. Since 1 December 2017, 57 diphtheria case-patients have been reported in the host community, including 34 probable and 9 suspected cases. No deaths have been reported. A third round of diphtheria vaccination campaign was completed covering 431,448 children between the ages of 6-15 years in Ukhiya, Teknaf and Naikhyongchari Upazilas.

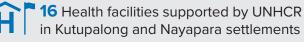
In addition, UNHCR and partners have stepped up efforts to identify affected persons, mostly children, through training volunteer community health workers and Community Outreach Members to identify and refer suspected cases to the health facilities, where both suspected and confirmed cases are being treated.

Contact-tracing is also being conducted by UNHCR and partners through trained volunteer community health workers, whereby persons who are in close contact with an affected individual are also provided with medication to prevent them from getting sick.

Today, approximately 250,000 Individuals have access to primary healthcare at UNHCR-supported health facilities and community outreach activities.

In preparation for the monsoon and cyclone season, UNHCR and partners are prepositioning medical supplies in strategic locations in the north and south of Kutupalong and Nayapara settlements. In addition, plans are underway to set up and train mobile medical teams to respond to likely medical needs if health facilities in some areas become inaccessible due to damage from flooding, landslides, or cyclones.

Key figures





250,000 have access to primary healthcare through UNHCR-supported facilities



261 Community health workers in Kutupalong and Nayapara settlements



Oral cholera vaccines are distributed with the help of volunteers, NGOs and the UN at Balukhali refugee camp. © UNHCR/Roger Arnold



UNHCR supported Teknaf Health Complex (Gov Hospital) to expand their inpatient bed capacity with 16 beds by renovating. $\ensuremath{\mathbb{C}}$ UNHCR/Taimur Hasan

*Based on UNHCR family counting exercise as of 09 April 2018



Working in partnership

In Bangladesh, UNHCR works in close collaboration with the government and humanitarian actors to coordinate the response. The Ministry of Disaster Management and Relief (MoDMR) and the Refugee Relief and Repatriation Commissioner (RRRC) are UNHCR's main government counterparts, in addition to Camp-in-Charge officials (CiCs) overseeing refugee settlements in the Cox's Bazar District.

UNHCR coordinates its interventions with humanitarian actors under the Inter-Sector Coordination Group (ISCG), of which UNHCR co-chairs the Strategic Executive Group (SEG) with the UN Resident Coordinator and IOM. UNHCR leads on the protection response for all refugees, and heads the Protection Working Group of the ISCG, together with the RRRC.

To implement its response, UNHCR works closely with a 26 partners, both international and national actors:

ACF (Action Contre la Faim) | ACTED (Agency for Technical Cooperation and Development) | ADRA (Adventist Development and Relief Agency) | BDRCS (Bangladesh Red Crescent Society) | BNWLA (Bangladesh National Women Lawyers Association) | BRAC (Bangladesh Rehabilitation Assistance Committee) | CARITAS BANGLADESH | CODEC (Community Development Centre) | DRC (Danish Refugee Council) | FH (Food For the Hungry) | GK (Gonoshasthaya Kendra) | HELVETAS Swiss Intercooperation | HI (Handicap International) | IUCN (International Union for Conservation of Nature and Natural Resources) | MDMR (Ministry of Disaster Management) | NGOF (Ngo Forum) | OXFAM | PUI (Première Urgence Internationale) | REACH | RI (Relief International) | RTMI (Research Training and Management International) | SCI (Save the Children) | SI (Solidarités International) | TAI (Technical Assistance Incorporated) | TDH (Terre Des Hommes Foundation) | WFP (World Food Programme)

Local sourcing of goods and services is a priority for UNHCR.

Supporting the response

The response of the Government and people of Bangladesh is extraordinarily generous, and continuous support from the international community is critical to assist Bangladesh in the humanitarian response to the refugee situation. UNHCR has called for support for refugees and host communities, as well as sustained political efforts to work towards a solution for the situation. A Joint Response Plan (JRP) for the Rohingya Humanitarian Crisis was launched in March 2018 calling for USD 951 million for humanitarian actors to continue delivering lifesaving assistance until the end of the year. UNHCR is appealing for USD 238.8 million as part of its Supplementary Appeal for 2018 to enable the organization to respond to the needs of hundreds of thousands of refugees as they prepare to face a harsh monsoon and cyclone season.

Acknowledgement

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