

Background

Bangladesh has received about 300,000 - 500,000 Rohingyas¹ over many years, according to the National Strategy on Myanmar Refugees and Undocumented Myanmar Nationals (UMN). Following an outbreak of violence on 9 October 2016 in the Rakhine State of Myanmar, an estimated 74,000 UMN fled into Bangladesh over four months. The influx slowed at the end of February 2017.

Kuthupalong and Nayapara refugee camps are sheltering 32,000 registered refugees. An estimated 100,000 UMN are living in Kuthupalong, Leda and Balukhali makeshift settlements, and the majority of rest are living with the host communities in Ukiyah and Teknaf Upazila of the Cox's Bazar District.

¹ The largest Muslim group within Rakhine State self-identify under the term "Rohingya", a designation that is not accepted by the majority of the ethnic Rakhine population, and is not recognized by the central Government of Myanmar as one of the 135 official nationalities in the country. In order to preserve neutrality on the issue, this group is alternatively referred as "Muslim minority of Rakhine State". In line with the National Strategy of the Government of Bangladesh, ISCG refers to unregistered members of this minority group as "Undocumented Myanmar Nationals (UMN)".



Disclaimer: The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.

Highlights



Makeshift settlements need a clear strategy to meet the current challenge-



Movements at the border remain stable



Preparedness plans for the forthcoming rainy season are included in response activities

Total UMN



Over **300,000**

UMN New Arrivals



Over **74,000**

UMN in Makeshift Settlements



Over **100,000**

Refugees in Registered Camps



33,148

Situation Update

A delegation from Myanmar comprising 9 members (9 men, 2 women) visited Kuthupalong, Balukhali and Leda Makeshift settlements from 19 – 20 March 2017. The objective of the mission was to interview the victims of violence in Myanmar. The community and the identified interviewees for the group discussions were informed in advance of the objectives of the mission. Measures were taken to protect the identities of the interviewees during and after the interviews.

Full, proper and timely individual and group counseling took place in advance of the mission in order to identify potential volunteers for interview. The ToRs, objectives and expected outcome/consequences of the Myanmar delegation were shared with the individuals beforehand to facilitate their informed decisions. Maximum effort was made to protect confidentiality and privacy of the individuals. For identified interviewees, sheets were provided for separation so that the interviewees feel comfortable. No report of the mission has been produced or shared as of date.

Makeshift Settlements

Over 100,000 people are hosted in the 3 major makeshift settlements: Kuthupalong and Balukhali in Ukiyah and Leda in Teknaf.

The makeshift settlements urgently need site planning to ensure the efficient utilization of the limited land available for the shelter, roads, drainage and other service delivery.



Humanitarian Response - Sector Update



Shelter/NFI

ACF, BDRCS,
UNHCR, IOM, SI, HI



1,862

Tarps distributed in
Balukhali settlement



185

NFI Kits distributed

Needs:

- Provision of roof tarps to residents of Kuthupalong settlement to protect against pending monsoon rains
- Expansion of emergency shelter upgrades outside of Balukhali and Kuthupalong to other locations in Cox's Bazar District
- Provision of NFIs to residents of Balukhali and Kuthupalong settlements
- Assistance to residents of Balukhali and Kuthupalong settlements on relocating vulnerable shelters and improving layout of shelters in camps

Response:

- 1,862 tarps were distributed in Balukhali Settlement
- SI distributed 185 NFI kits
- UNHCR is covering shelter and NFI needs at Kutupalong and Nayapara refugee camps
- 6,000 replacement tarps were ordered for Kuthupalong settlement, shelter Kit, Ropes (3000 kg) for 6000 tarps, 880 NFI kits and 400 Hygiene Kits were ordered by IOM, expected delivery 30 March
- Additional tarps for Kuthupalong are being procured by IOM pending successful delivery of initial purchase
- ACF has ordered 1000 plastic tarps and associated rope for shelter upgrades
- BDRCS has ordered 5000 mosquito nets and 4000 tarpaulins in Kuthupalong and Balukhali, expected delivery 4-10 April. Will provide maintenance for shelter in the Kutupalong and Nayapara Registered Camps



Food Security and Livelihood

WFP, ACF, BDRCS, IOM, UNICEF, SI, Mukti, YPSA, Agrajatra, SHED, SARPV, SC, WVI, BRAC, Coast BD



60,000

Individuals received 25 kg of rice



506

Households received unconditional cash grants

ECHO visited WFP and sector partners on Blanket Supplementary Feeding Program in Leda, Kuthupalong and Balukhali Community Clinics, it was observed that:

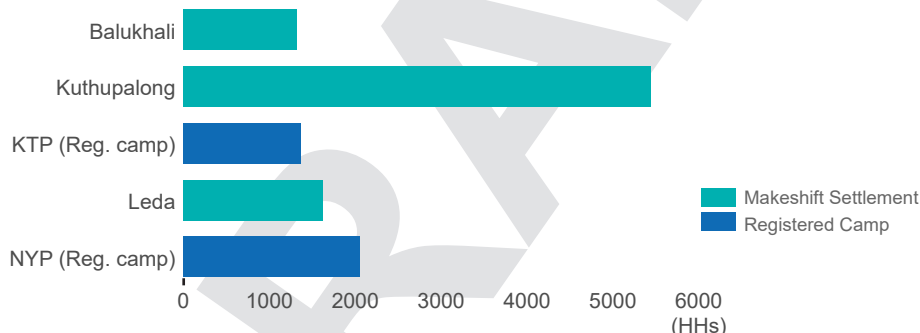
- New arrivals (NA) receiving WFP's rice are able to meet their food needs, pay off their debts, however quantity is insufficient for large families.
- During interaction with UMN camp leaders in Leda, food for UMN was stated as one of their crucial needs.
- WFP started Vulnerability Listing/Data collection from 28 March for NAs and UMN. Over 100 enumerators and WFP staffs are engaged in this exercise, which will go until 10 April. This is to identify topmost vulnerable families' food assistance needs, based on vulnerable criteria like large family size, single female headed-households, elderly members, etc. Data collection takes place in KTP registered camp, Kuthupalong, Balukhali, NYP registered camp and Teknaf host communities (villages where previous verification showed most concentrated locations of NA).
- Overall, it was observed that the influx of UMN from Rakhine State seeking refuge in the coastal district of Cox's Bazar has stabilized since last month. The humanitarian community has access for emergency/lifesaving assistance only.

Needs:

- Food is one of the topmost crucial needs of the NA.
- Preliminary findings of rapid assessment show that only 18% of new arrivals have an acceptable Food Consumption Score. This indicates dire need of food assistance.

Response:

- WFP's General Food Distribution delivers 25kg rice every 2-3 weeks to each verified NA Household. In March, WFP completed its 5th round of General Food Distribution in/from various locations as below to total of 11,819 households ~ 60,000 individuals.



- Supplementary Feeding Programme is ongoing in KMS, LMS and host communities to complement the GFD, together with ACF, for pregnant and lactating women (PLW) and children under 5.
- ACF is providing wet meals (nutritious local meal) with rice supported from WFP. Additionally, unconditional cash transfer was also provided to targeted beneficiaries of SAM, MAM and NA with BDT 500 per week from emergency feeding programme. A total 1,422 persons consumed wet meals and 506 households received the unconditional cash grants from the project during reporting period. Cumulatively ACF has distributed cash BDT 1,156,500 during the reporting period.

Gaps and Constraints:

- A more diversified food assistance approach beyond rice is needed. WFP seeks to mobilize additional resources to provide diversified diet, using a similar modality existing in camps (food with dignity/foodshops, with 18 core commodities).
- Livelihood activities are needed for sustainable development
- All partners should be well informed and coordinated with FSL leads and co-leads prior to any distribution of food assistance. Small scale and independently carried out food assistance could cause overlapping, potential duplications, invites social tensions, raises questions on quality, targeting, and increases the chances of manipulation and misappropriation



Health

GoB-CSO, BGS,
BDRCS, ICRC, Mukti,
IOM, MSF, UNFPA,
UNHCR, WHO



1

Strategic Planning
Workshop held on 2
April to develop a joint
action framework



15

EPI centers initiated
immunization
sessions in 2 MS
settlements and
4 unions of host
communities



4,842 (6%)
Children age 0-11
months vaccinated

The Health/WASH Outbreak Taskforce continued to monitor the response between the health and WASH sectors during the last two weeks. Acute Watery Diarrhea (AWD) cases in general are declining across most sites, however Kuthupalong and by extension Balukhali remain an area of concern as partners have only seen a 30% reduction in reported cases. The top morbidities of concern over the last two weeks remain AWD, lower respiratory tract infections and measles. However, measles cases are declining given efforts by partners and the government to strengthen routine EPI coverage, specifically targeting the NAs.

Needs:

- Continued strengthening of routine EPI among NA and detection of suspected measles cases
- Increase of water, sanitation and hygiene services, particularly in Kuthupalong and Balukhali to combat the continued high number of AWD cases.
- Continued monitoring of the nutritional status of the population and increase of nutritional food distributions, particularly for the most vulnerable (children under five, pregnant and lactating women, elderly and persons with a chronic disease or immune compromised)
- Increased sensitization to Kuthupalong/Balukhali/Host community on GBV, particularly sexual violence and the services that are available for survivors such as emergency medical care.
- Refresher trainings for health care providers on CMR, MISP and management of STIs
- Sensitization in Kuthupalong/Balukhali regarding importance of delivery in a hospital setting
- Inadequate shelter for new arrivals leading to overcrowding and exposure to the elements
- Lighting near latrines and around the perimeter of the settlement sites

Response:

- MSF, BDRCS and IOM are providing life-saving primary and reproductive health care services and referrals through static and mobile clinics
- MSF is supporting the MOH with strengthened routine EPI activities, including logistical support
- UNICEF has initiated special immunization sessions in 15 EPI centres in Kutupalong, the Balukhali makeshift settlements and in four unions of host communities and four centres in Teknaf where UMN's concentration is high.
- 4,842 children (6%) age 0-11 months have been vaccinated against different vaccines (BCG, Polio, PENTA, PCV Measles Rubella) as per national immunization standard.
- Partners provided outbreak response through collaboration with MOH to conduct emergency measles vaccination campaigns and establishment of a measles ward
- MSF enhanced their capacity for facility based skilled deliveries through increased pre/post labor bed capacity and delivery rooms
- UNFPA and IOM are working jointly to provide capacity building of HRH (e.g. MISP, CMR, PFA, etc.)
- UNFPA is distributing emergency RH kits, including RH KITS 2A, 11 A & 11B to referral facilities (Hope Foundation & Cox's Bazar District Hospital) to support CMoNC activities providing comprehensive emergency obstetric and newborn care (CEmONC) free of charge for all registered refugees (RTMI) and UMN's when services are not available within the government facilities through a sub-contracting NGO.
- UNFPA has deployed 16 midwives to Upazila Health Complexes and Union level health facilities and one (1) obstetrician to Ukhiya Health Complex to offer 24/7 emergency obstetric services
- MSF and IOM are providing comprehensive medical and mental health and psychosocial support services for Sexual Violence survivors; linkage with Protection referral pathway; refresher trainings in Clinical Management of Rape (CMR).
- IOM is supporting the scaling up of MOH run services through support of HRH (for

primary care, reproductive health care and specialized services) and medicines and medical supplies to primary and secondary health care services across Cox's Bazar

- Handicap International is integrating rehabilitation therapy in certain clinics as well as provision of therapeutic devices to vulnerable individuals.
- UNICEF jointly with Upazila Health managers conducted facility assessments in Teknaf and Ukhiya Upazila Health Complexes to establish Neonatal stabilizing unit in those facilities. The establishment of a stabilizing unit in Ukhiya is scheduled by May 2017 in Teknaf.

Gaps and Constraints:

- Retaining skilled human resources for health remains a challenge
- Limited sharing of health information by partners, health service mapping and population baseline remain a gap
- Lack of common messaging around GBV, hygiene, etc.
- Improving WASH Facilities in Kuthupalong and Balukhali
- Low uptake of facility based deliveries attended to by a skilled birth attendant
- Keeping pace with the increased demand for services due to the influx
- Lack of confidence in referral services received at secondary or tertiary care facilities
- Poor communication and coordination among health actors; weak linkages/ communication/coordination with actors in other sectors.

Needs:

- Safe water sources (consider the test of fecal coliform) for the new arrivals in the makeshift and host community
- Safe sanitation access
- Hygiene promotion initiatives i.e. personal hygiene and environmental hygiene especially to stop open defecation, water safety and menstrual hygiene management in the HC and makeshift camp/settlement
- Latrine lighting system for easy access to latrine at night
- NFI items such as Pitchers/container to collect and preserve water
- Immediate need of Hygiene kits to maintain the personal hygiene including menstrual hygiene management

Response:

- Daily distribution of average 11,000 liters of safe drinking water to an average 910 households (Host community and UMN) in 3 villages with high concentrations of new arrivals: Jadimura, Leda and Mochoni. 180,000L of chlorinated water distributed to community in Balukhali
- In Leda treated water supplied ± 15 lpcd through tap stands, in other makeshifts DTWs are safe water sources and are free access, but people have limited capacity to store water
- Repairing and maintenance of 132 DTWs in Shamlapur & Kuthupalong, ensuring functionality and access to safe water
- Installation of new water points is ongoing in Balukhali, Shamlapur and Kuthupalong extended area (15 DTW in Balukhali, 5 in Shamlapur and 25 in Kuthupalong)
- Repairing, maintenance, cleaning and desludging of 156 blocks of existing latrines in Leda, Kuthupalong and Shamlapur; maintenance of 40 emergency latrines
- Construction of 3 chamber block latrines ongoing in Kuthupalong and Balukhali, 81 blocks and 40 blocks respectively and 81 household latrines in Shamlapur are ongoing. Construction of 77 blocks of 3 chamber latrines for 576 households ongoing in Leda
- Construction of 280 (150 bathing cubicles for women and adolescent girls) bathing cubical for the UMN families in the makeshift and host communities
- Hygiene promotion session with the new arrival in the Kuthupalong is ongoing.
- More than 500
- 9,396 hygiene kits distributed for UMN families in the makeshift and host communities
- 1,500 household water ceramic filters distributed in the Kuthupalong extension by



WASH

ACF, IOM, UNHCR, UNICEF, SHED, WSP, SI, BDRCS, MSF, VERC, Mukti, SARPV, SHED, YPSA, Care, BRAC, PHALS, Experoul



11,000

Liters of safe water to an average 910 households in host communities and UMN



55

New water points installed in three makeshift settlements



3

Chamber block latrines constructing in two makeshift settlements

 **9,396**
Hygiene kits distributed in makeshift settlements and host communities



Nutrition

UNICEF, ACF, SHED, PV, WFP, IOM, UNHCR

 **8,038**
Under 5 children screened and referred to nutrition programmes

 **2,614**
Pregnant and Lactating Women received IYCF counseling in makeshift settlements and host communities

 **75**
Government Health and Family planning workers and

- joint outbreak response team including SI
- 5,000 Water Purifying tabs provided to the UMN families in the settlements
- Provision of 800 hand washing devices.
- Construction of 150 bathing cubicles for women and adolescent girls.
- Carrying out of 500+19 hygiene promotion sessions
- WASH sector Assessment for Ukhiya and Teknaf was conducted

- The nutritional situation has become stable but the beneficiary caseload keeps increasing on a daily basis. Morbidity rate is higher than previous months.
- TWG meeting was held on 30 March 2017, participated by UNICEF, WFP, IOM, ACF, SHED and ACF.
- WFP reported the reduction of food ration size into half (50%) for their all ongoing programme due to the breakdown in the supply pipeline
- De-worming for adolescents and MNP supplementation started in Balukhali settlement.
- An extended TWG for nutrition will be organized on 6 April with key partners of nutrition and food security at UNICEF office on nutrition cluster indicators and targets, CMAM advocacy, SAM inpatient management including referral mechanism & cash transfer and engagement of government for reporting nutrition activities etc.

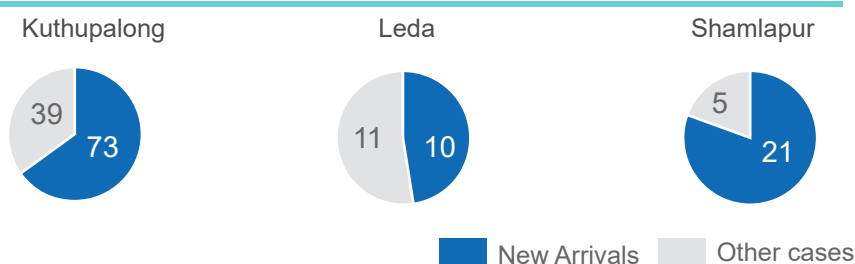
Needs:

- UNICEF identified 41,072 children under 5; 12,400 PLW; 8,676 adolescent girls in makeshift settlements, host communities of Teknaf, Ukhiya, Ramu and Sadar Upazila
- WFP identified 43,708 children under 5 for MAM treatment & prevention and 108,295 for screening
- ACF identified 77,488 children under 5, 3,150 PLW and 3,525 adolescents in makeshifts and host communities of Teknaf and Ukhiya including two slums in CXB municipality.

Responses:

- A total of 8,038 children under 5 have been screened by implementing partners supported by UNICEF, identified 102 SAM children and 80 admitted & managed at Upazila Health Complexes, District Hospital, OTP and EMOP.
- 3,119 children of 6-23 months supplemented with MNP and IYCF counseling provided to 2,614 PLWs and 432 children from 2-5 and adolescent girls in makeshifts, host communities Teknaf, Ukhiya Ramu and Sadar Upazila including two targeted slums of Cox's Bazar municipality through UNICEF partnership with the Government of Bangladesh and implementing partners (ACF and SHED).
- 59,983 children under 5 and 13,969 PLW screened at the community level in Teknaf, Ukhiya & Moheshkhali upazila for active case finding by WFP.
- Total 50 PLWs and 209 under 5 children enrolled in Balukhali Union Health Sub Center for nutritional assistance.
- With the support of UNICEF, 75 Government of Bangladesh Health and Family Planning workers and supervisors in Teknaf received Competency Based Training for Nutrition, organized by Upazila Health Authority and facilitated by Institute of Child & Mother Health (ICMH), Dhaka.
- 6,964 PLW and 16,710 under five children received supplementary food support from WFP, including 1,107 PLW and 2,178 under five children newly admitted.
- Total of 131.586 MT fortified supplementary food distributed by WFP.
- 1,171 PLWs and 3,628 U5 children of new arrivals provided with nutritional assistance through malnutrition prevention and treatment program in Kuthupalong, Leda and community clinics in host communities.
- Regular treatment for acute malnutrition management as well as wet hot-meal provided by ACF for all new MAM/SAM, new arrivals, Children and PLW.
- According to the cumulative figures reported by Nutrition partners:

Total cases of MAM/SAM admitted in

**Gap and Constraints:**

- Identification of new arrivals and old UMN is difficult.
- Difficulties in tracking of new arrival and increased number of absent and defaulter cases.
- Delayed MNP supplementation due to short fall of supplies in Cox's Bazar district;
- Low cure rate for SAM patients during inpatient management in govt. hospitals;
- Lack of functional/effective referral linkage for SAM children between government hospitals and communities
- Recruiting appropriate skilled and experienced people against the new positions of staff & volunteers
- Volunteers dropout rate is high

**Education**

GoB (DPEO, DSEO), SC, IOM, Mukti, CODEC, UNHCR

**43**

Learning centers operating in 4 makeshift settlements

20

Learning centers constructed

**35**

Teachers and supervisors trained

- An estimated 28.5% of primary school age children and 36.1% of secondary school age children are out of school in Cox's Bazar compared to national figures of 23% and 24% respectively
- Access to educational services in Cox's Bazar is particularly challenging for Rohingya children as they are not entitled to enroll in Government accredited schools
- 7,509 registered refugee children aged 4 – 17 years have been receiving non-formal basic education supported by UNHCR in official camps. However, these children are unable to take the official primary cycle completion exam. The UMN children living in makeshift settlement have not had access to education until recently.
- In March 2015, the National Task Force on 'Implementation of the National Strategy on Myanmar Refugees and Undocumented Myanmar Nationals' agreed to provide non-formal education for Rohingya children in makeshift settlements. Following this decision UNICEF and IOM started providing early learning and non-formal basic education, initially aiming 3,000 children aged 4-14 years, currently reaching 2,632 of them.

Needs:

- The initial needs assessment identified that there are 34,787 children of 4 – 14 years living inside makeshift settlements; 13,684 children of 4 – 17 years living inside registered refugee camps
- Access to education in safe, resilient and enabling environments for Rohingya children in the registered camp and makeshift settlements

Responses:

- An estimated 10,141 children are receiving non-formal basic education through sector members and partners. Among them 7,509 are registered refugee children and 2,632 are UMN children living in makeshift settlements.
- UNHCR is supporting 24 Play Group centers, 21 primary and 2 junior secondary schools reaching 7,509 registered refugee children of 4 – 17 years living inside 2 official camps.
- Basic education programme for UMN children by UNICEF in partnership with IOM has reached 2,632 UMN children through 43 learning centers operated in 4



10,141

Children estimated receiving non-formal basic education through sector partners

makeshift settlements offering pre-primary and basic education. Construction of 20 learning centers has been completed.

- A total of 30 teachers and 5 supervisors have been trained on pre-primary education by UNICEF. Teachers' training on Ability Based Accelerated Learning (ABAL) for 28 participants are also completed and ongoing for more.
- WFP is implementing School Feeding Programme for children in UNHCR-supported schools and have reached 7,509 children. SFP will also be rolled out in UNICEF-supported learning centres inside makeshift settlements.
- Operationalization of Education in Emergencies (EiE) Sub cluster is underway.

Gap and Constraints:

- The legal environment on Education in Emergencies (EiE) limits the scope of humanitarian support in education for the Rohingya children;
- In-depth sectoral information is lacking at the current stage;
- Reaching UMN children living in host communities is not currently possible due to absence of reliable data;
- Reaching New Arrivals inside registered camps is also a challenge;
- Space problem for establishing learning centers inside makeshift settlements
- Shortage of government textbooks for running education programmes in makeshift settlements;
- High student and teacher dropout rates, and accreditation of completers for registered refugee children;
- Lack of inter-sectoral coordination and collaboration.



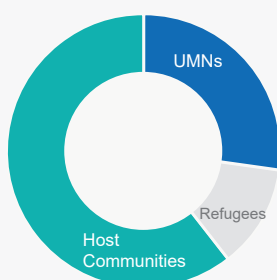
Child Protection

UNICEF, BRAC, CODEC



97,863

Children identified in need of child protection services



55,000

Children targeted for intervention

- Overall 97,863 children (consisting 26,885 UMN, 11,868 registered refugees, and 59,110 host community children) have been identified in need of child protection services. This number may change when detailed assessments become available
- Children and adolescents, regardless of their legal status (registered, UMN), are vulnerable and are at a greater risk of abuse, violence and exploitation.
- The Unaccompanied and Separated (UASC) Children are exposed to greater risk of violence, abuse and trafficking due to their undocumented status.
- The UMN children and UASC have limited access to essential child protection services.
- The vulnerable children from the host communities are equally in need of the child protection services in the areas where the UMN and registered refugee populations are residing.
- The protracted presence of the UMN in large numbers continues to strain the services and resources available in the district and host communities.
- Child Protection remains one of the least funded and least addressed sectors in humanitarian responses, even though it offers both life-saving and protective elements to restore the safety and dignity of the most vulnerable children.
- Child Protection sub-cluster has been established at Cox's Bazaar. ToRs for the sub-cluster have been drafted and reviewed by the CP members. For the information management, 4W matrix has been introduced to the members. The Child Protection technical working group has also been established to ensure collaboration on quality child protection programming and advocacy.

Needs:

- Identification of UASC, including their family tracing and possible reunification or re-establishments of family links
- Social protection support for unaccompanied and separated children with care givers or foster families in the makeshift settlement and host communities
- Improve the protection activities at the community level including referral of children to services and strengthening the capacity of Community Based Child Protection Committees (CBCPC).
- Case management of vulnerable and children at risk, including referral to services for Gender Based Violence (GBV), psychosocial support and recreational activities is another important area of intervention.



4,633

Children received recreational and psychosocial support through Child Friendly Space

Responses:

- The Child Protection sub-sector, given its capacity, has planned to target over 55,000 children consisting around 23,800 UMN, 3,900 registered refugee children and 28,100 host community children
- UNICEF and its partners (BRAC and CODEC) are working in the makeshift settlements and host community to provide recreational and psychosocial support including life skills education to both UMN and host community children
- UNHCR and Save the Children International are working in two registered camp to provide life skills to refugee's children
- 4,633 children have been receiving recreational and psychosocial support through Child Friendly Space (CFS) (3 in makeshift settlement and 5 in host communities) in Teknaf and Ukhiya upaizlla, established by UNICEF and partners
- 400 registered refugee children have been benefiting from 6 children clubs established by UNHCR and partners
- 724 UMN adolescents girls and boys from both makeshift settlements and host community are benefiting from 41 adolescents clubs. 360 sessions on life skills based education have been conducted
- 400 UMN adolescents have attended group meetings in the makeshift settlements on clubs functions and on their roles and responsibilities as potential members in the clubs
- 375 parents of the affected children have attended at least on session on the child rights and their responsibilities as leaders in makeshift settlement
- 41 community based child protection committees in the host community have facilitated participation of UMN children and adolescents (specially girls) in the CFS and clubs based activities

Gap and Constraints:

- Limited capacities among partner staff and stakeholders on child protection issues in emergencies, i.e. case management including identification, referral and follow up
- Lack of information or comprehensive assessment to identify current needs of the targeted population
- Lack of specialized services for children at risk especially GBV survivors and UASC.
- SoPs and minimum standards on separated and unaccompanied children have not been adapted/agreed upon for the Cox's Bazar response
- Service mapping and referral pathways are not available yet
- Absence of an agreed legal status of the UMN children creates a major challenge in their access to services

This working group (WG) seeks to make two-way communication and community feedback mechanisms available to all. The group will also work on establishing referral mechanisms to promptly address feedback. CwC working group is calling on interested organizations to join.

Needs (identified through Community Response Mapping according to the affected population):

- Emergency shelter particularly for new arrivals as rainy season is coming
- NFI for new arrivals
- Health & WASH service for new arrivals
- Food support

Response:

- Monthly Open Air Meeting were conducted on 19 and 23 March at three makeshift settlements where representative from partner NGOs (BGS, HELP, SHED, MUKTI) were present. Feedback from the communities received through the CRM were discussed.
- Coordination Meeting with Baharchara Union Parishad (UP) was conducted on 23 March to share information on CwC activities and get UP's views on how



Communication with Communities (CwC)

IOM

2



CwC Coordination meetings conducted in Leda and Shamalapr makeshift settlements

2



CwC Coordination Meetings to be held in April and one open air meeting to be held in Kuthupalong, Leda and Shamlapur each.



Inter Sector Information Management Group (ISIMG)

ACF, IOM, UNHCR, UNICEF, WFP



1

Inter Sector Information Management Group Meeting (ISIMG) took place on 27 March

- humanitarian assistance is progressing.
- Coordination Meeting with CMC & BMC were conducted at three makeshift settlements (Leda, Shamlapur and Kuthupalong) to share information on humanitarian interventions, get news and updates.

The information management focal points from each sector will form the ISIMG and coordinate information management activities for the humanitarian response across all sectors. ISIMG will support the ISCG by providing information and analysis for informed/evidenced based decision making/recommendations. The ToR will be developed and endorsed by ISIMG.

Needs:

- NNeed for a consolidation data collection matrix and analysis of 4W (who does what, where and when) was identified. No sector IM activities were active as of date, therefore no gap analysis or operational presence mapping are available. Standards of assistance such as typology of kits and distribution verification mechanisms need to be established as well.
- Rationale of 4W: The sectoral 4W datasets maintained by sectors have not been consolidated to provide an overview the humanitarian response systematically in order to analyze the overall needs/gaps. The sectors formed recently are still formulating their sector-specific 4W dataset format from which to monitor the sectoral response. Therefore, it is important to work with all sectors to ensure a standardized 4W template that allows for data consolidation at the inter sector level and which will provide opportunities for analysis of the overall response in terms of who does what, where and when (4W).
- Scope: The proposed inter sector level 4W shall focus on the humanitarian response to the Undocumented Myanmar Nationals (UMN) crisis. However, the format shall be flexible to serve any current and future humanitarian response activities and to avoid redundant tools of similar nature. For instance, the beneficiary type shall provide a different combination of UMN, host community, IDPs, Refugees to serve all purposes if needed.

Response:

- 4W template drafted and circulated for inputs and will be finalized by 5 April
- Situation Report is being developed with collective inputs from sectors
- Sectoral Factsheets are being developed
- Meeting calendar, contact lists update regularly