

OPERATION UPDATE

Bangladesh| Population Movement Operation, Cox's Bazar



Camp volunteers participate in emergency response training in which they practice how to apply first aid knowledge and skills at the time of emergency response. (Photo: IFRC)

<p>Emergency appeal №: MDRBD018 Emergency appeal launched: 18/03/2017 Revised appeal published: 20/11/2021 (7th revision) Operational Strategy published: 25/11/2021</p>	<p>Glide №: OT-2017-00003-BGD</p>
<p>Operation update #15 Date of issue: 10/10/2022</p>	<p>Timeframe covered by this update: From 01/05/2022 to 31/08/2022</p>
<p>Operation timeframe: 18/03/2017 - 31/12/2024 (Revised Emergency Appeal no. 7 period: 1/1/2022 – 31/12/2024)</p>	<p>Number of people being assisted: 1 million people (Camp: 884,000; Host community: 100,000; Bhashan Char: 18,000)</p>
<p>Funding requirements (CHF): CHF 79 million for 2022 – 2024 through the IFRC Emergency Appeal (including CHF 6 million for Bhashan Char); CHF 135 million Federation-wide</p>	<p>DREF amount initially allocated: CHF 1.4 million</p>

To date, this Emergency Appeal which seeks CHF 79,000,000 for the 2022 - 2024 period, is 14 per cent funded. Further funding contributions are needed to enable the **Bangladesh Red Crescent Society (BDRCS)**, with the support of IFRC, to continue to help meet the humanitarian needs of displaced people from Rakhine, as well as the local community affected by the influx of displaced people.

A. SITUATION ANALYSIS

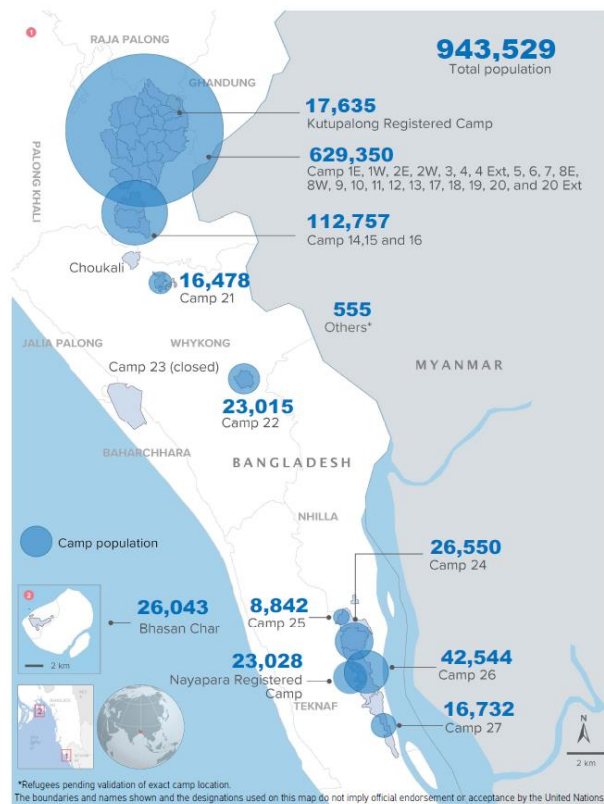
Description of the crisis

The population movement crisis that unfolded in 2016 resulted in the displacement of people from Rakhine, Myanmar, who crossed the border into Bangladesh. The situation currently continues as a protracted crisis because of the colossal number of displaced people – 943,529 people¹ – who are completely reliant on humanitarian assistance to meet their everyday needs amidst a backdrop of uncertainty about their future including the possibility of repatriation.

These needs span food and basic needs, access to health services and safe water, shelter, protection services, and preparedness for seasonal cyclones and monsoon rains, and health disasters such as pandemics, as well as protection against the impacts of environmental and ecosystem degradation.

The evolving crisis is also manifested in the continuing challenges faced by the local community in terms of livelihoods and the local economy, among other factors, brought about by the presence of the huge number of displaced people from Rakhine (hereafter referred to as ‘displaced people’ or ‘camp community’).²

The Government of Bangladesh called on BDRCS to respond to the emergency in December 2016, in line with the National Society’s mandate to provide humanitarian services as auxiliary to the public authorities. Accordingly, an international operation was launched through IFRC’s Disaster Response Emergency Fund (DREF) support, followed by an Emergency Appeal launched in March 2017. The appeal has been revised on seven occasions, with the last revision covering the period from 1 January 2022 to 31 December 2024. The seventh revision marks a new phase of IFRC support to BDRCS in its continued response to the protracted crisis, and in compliance with the request of the Government of Bangladesh to BDRCS to continue providing humanitarian services as auxiliary.



Source: Fact sheet of the Government of Bangladesh and UNCHR, as of 31 August 2022

Summary of response

Overview of the host National Society and ongoing response

The BDRCS Population Movement Operation (PMO) office in Cox’s Bazar was established in 2017 and today has a staff strength of 278, while the Cox’s Bazar unit³ of BDRCS has been supporting the operation from the beginning of the

¹ Figure referenced in the [Govt of Bangladesh-UNHCR population factsheet issued 31 August 2022](#), and includes displaced people relocated from Cox’s Bazar to Bhashan Char island. Note that the camp population figures are updated periodically.

² Joint Multi-Sector Needs Assessment of Bangladesh Humanitarian Response for Refugees, 2020, UN OCHA (J-MSNA, OCHA, 2020); Joint Response Plan, 2021, UN OCHA (JRP, OCHA, 2021); ACAPS, Covid-19 and secondary Impacts, 2020 (ACAPS, 2020)

³ Unit is a term equivalent to a BDRCS branch at district or city level. The Cox’s Bazar unit is one of 68 BDRCS units across the country in 64 districts and four city corporation.

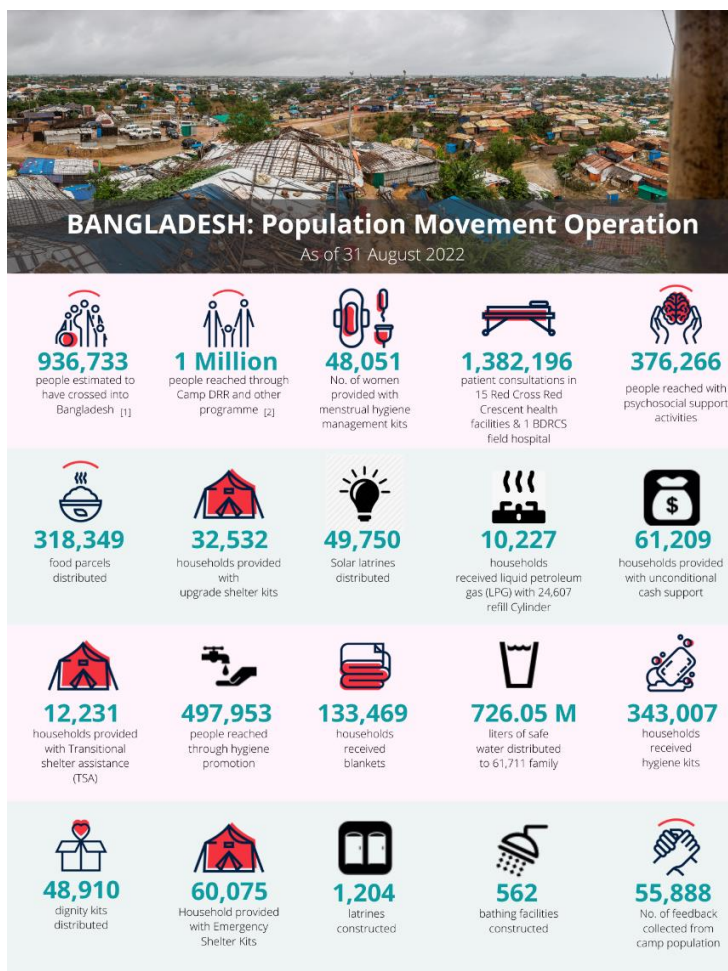
crisis, particularly through its Red Crescent Youth (RCY) volunteers, numbering some 300. The BDRCS headquarters in Dhaka has been providing oversight support and has also deployed staff and resources during this operation.

As auxiliary to the public authorities in the provision of humanitarian services, BDRCS serves as a key partner in this response and engages with various authorities at both the national and local levels. Since the 1978 movement of people from Myanmar, BDRCS' relationship with the Bangladesh authorities has been steadfast. BDRCS enjoys access to all operational areas in the population movement crisis, in coordination with the authorities and the UN-led Inter-Sector Coordination Group (ISCG).

Apart from the PMO office and unit office (branch) located in Cox's Bazar town, key facilities of BDRCS utilized for this response include two distribution centres in the camps, three warehouses and a field office (known as hub office) in the host community area.

There is also a longstanding collaboration between BDRCS and the UNHCR to jointly undertake the Myanmar Refugee Relief Operation (MRRO) - this extensive initiative has been in place since 1992.

The PMO completed its fifth year in early 2022, with the **new phase of the PMO starting on 1 January 2022 and ending on 31 December 2024**. Accordingly, from May and August 2022, through the Cyclone Preparedness Programme (CPP) alone, BDRCS supported around 1 million people in both camp and host communities under the new phase of the PMO's strategic operation of Emergency Appeal.



Cumulative Period is from 2017 to 31 August 2022
 [1] Population Fact sheet as of 30 June 2022; Counting Exercise jointly conducted by GoB and UNHCR
 [2] Operation Update no. 14, 2022



In reference to other types of programmatic support extended, comprising health; water, sanitation and hygiene (WASH); shelter, basic needs; and protection, gender and inclusion (PGI), approximately 256,923 people in the camp community and 18,603 people in the host community were reached. While IFRC support for PMO continues, the Federation-wide⁴ PMO operation (supported by IFRC and 10 in-country IFRC Member Societies) reached 643,541 people comprising 524,412 people in 17 camps and 119,123 people in 11 host communities (please see the federation-wide infographic above and 4W map- detailing the 4Ws: Who is *Doing What, Where and When* - in Annex 1). Details on this reach against IFRC-supported Emergency Appeal's latest [Operational Strategy](#) can be found in Section C below.

Needs analysis

The emergency needs of the displaced community at the start of the crisis in 2017, evolved in later years to longer-term needs given the fact that the community has continued to live amidst a backdrop of uncertainty about their future, including the possibility of repatriation. Children make up almost 51 per cent of the camp population; women and girls represent almost 52 per cent of the population, and one in three displaced families have at least one easily

4 <https://go.ifrc.org/emergencies/2>

identifiable protection vulnerability, such as human trafficking, underage marriage, sexual exploitation and abuse.⁵ While some interventions provided today have certain elements of durability and sustainability such as mid-term shelters (also known as more durable housing), solar-powered water supply networks, and disaster mitigation activities, the fact remains that five years on from the start of the crisis, the displaced community remains completely reliant on humanitarian assistance to meet their every day and longer-term needs in different sectors. This crisis is further compounded by the seasonal flood, cyclones and heavy rainfall causing landslides, water logging, shelter damages; frequent fire incident; outbreaks of cholera, diphtheria, and the COVID-19 pandemic.

Accordingly, the response to the various needs of the vulnerable displaced population, as well as the affected host population, is a well-thought-out effort undertaken over the past years by a multitude of humanitarian actors including the BDRCS and its partners. This effort is done following existing and agreed-on geographical areas and sectoral responsibilities per area allocated to BDRCS and the wider IFRC membership and other humanitarian actors.

Furthermore, PMO programming under the IFRC Emergency Appeal is guided by ISCG assessment data and complemented by findings of sector-specific assessments undertaken by BDRCS/IFRC. Requests are also made by relevant sectoral lead organizations at the camp level to BDRCS to take on the responsibility for meeting the needs of the community in a particular camp or a block within a camp.

Gaps in humanitarian support continue to exist, particularly due to funding challenges faced by some humanitarian actors. Specific healthcare service improvements are required to match the needs identified in assessments, notably related to mother and child health, mental health and psychosocial support, as well as sexual and gender-based violence (SGBV).

Moreover, enhancements are needed in shelter construction and WASH services. Considering the displaced people have already been living in the camps for five years, structural strengthening is necessary with particular attention to more environmentally sustainable solutions. It is in this context that BDRCS as auxiliary to the public authorities, will exert its efforts to fill gaps, based on context and as and when such gaps materialize. To this end, the latest revised Emergency Appeal and its [Operational Strategy](#) aim to support BDRCS in addressing the gaps. In addition to its auxiliary status, it is envisaged that the advantage that BDRCS will provide to the donor community is cost-efficiency, as it is a leading local organization with a wealth of technical expertise provided by its international IFRC-network partners.

Operational risk assessment

Operational risks remained unchanged from May to August 2022. For the operation, the PMO Risk Register is a crucial management tool. It was last updated in early 2022 and outlines six main risks as well as mitigating measures. The risks include the COVID-19 pandemic, seasonal cyclones and monsoons, as well as other hazards like fire and floods, clashes or violence in the camps, social discord between the displaced and host communities, crime (particularly theft in camp facilities), and militant attacks.

The IFRC's PMO Business Continuity Plan and the COVID-19 Contingency Plan complement the risk register with a focus on readiness for a dramatic deterioration of the COVID-19 situation. Regular revisions are also made to both plans.

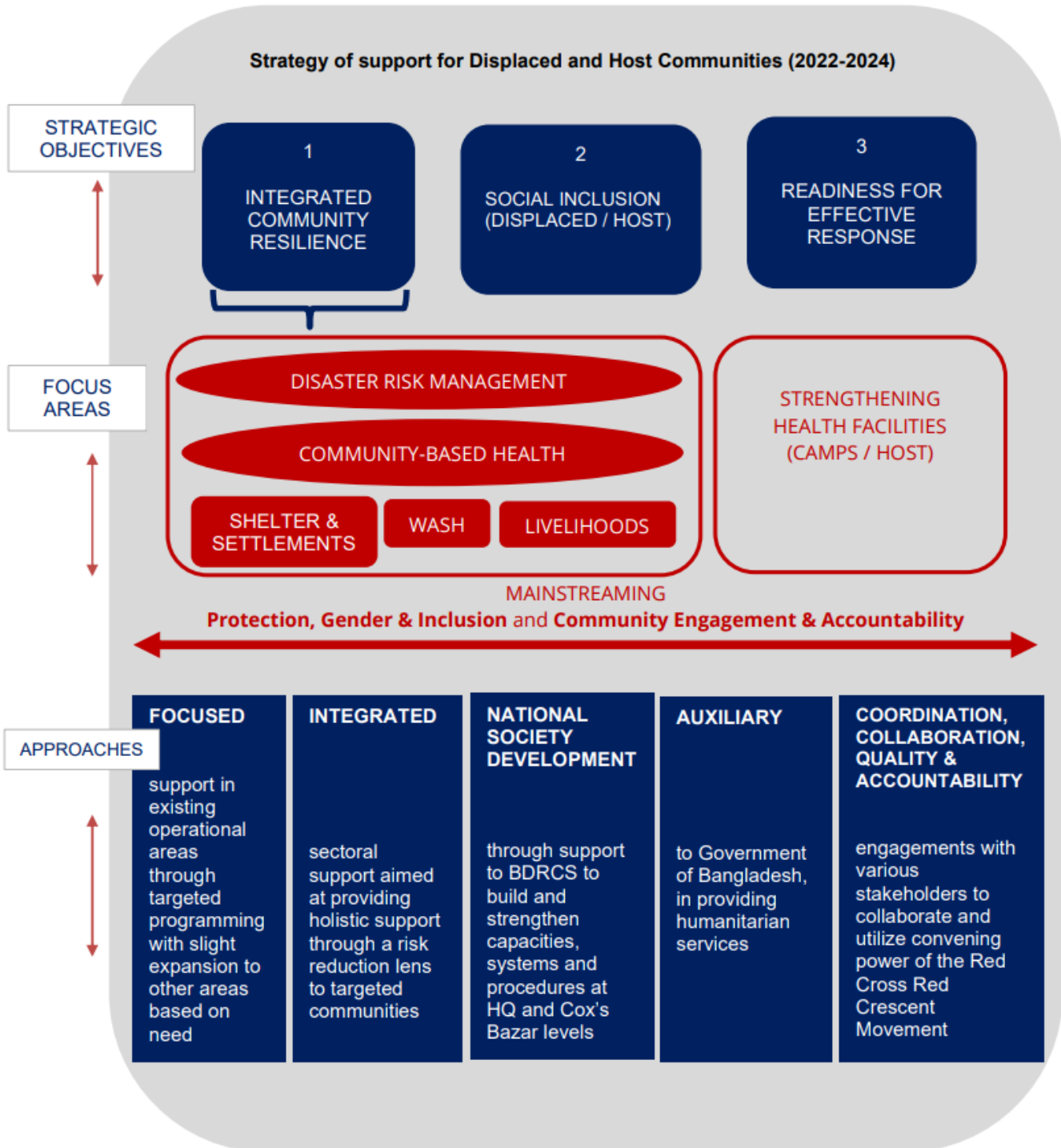
The IFRC Security Manager specifically serves as the civil-military liaison concerning security in the camps, a crucial role for keeping abreast of developments in the operational environment in the camp settlement and adjoining host community areas, as well as maintaining good relations with law enforcement actors.

⁵ Joint Multi Sector Needs Assessment, OCHA, 2021

B. OPERATIONAL STRATEGY

Update on the strategy

The [Operational Strategy](#) published on 25 November 2021 remains the same, in complement to the Revised Emergency Appeal of 20 November 2021. An illustration of the strategy can be found below.



Through the revised Emergency Appeal, published in November 2021 and complemented by an Operational Strategy, IFRC aims to continue supporting the BDRCS in its response to the population movement crisis. This will be in line with the shared vision of BDRCS, IFRC and in-country IFRC member societies, in coordination with ICRC, to consolidate and improve on existing services to affected communities, in continued alignment with the three-pronged strategy adopted at the start of this operation i.e., the strategy to achieve **integrated community resilience, social inclusion, and readiness for effective response**.


Moving forward in 2022, the three hallmarks of the PMO comprise:

- Integrated community resilience;
- Strengthening of health facilities in the camp settlement and host community areas; and
- Mainstreaming of PGI and CEA approaches.

Additionally, and to complement the above, the difference and added benefits that this new phase of support to the BDRCS PMO intends to bring about, are encompassed in five main and overarching approaches comprising Focus; Integration; National Society Development; Auxiliary to the public authorities of Bangladesh, in providing demand-driven humanitarian support; and Coordination, Collaboration, Quality & Accountability.

C. DETAILED OPERATIONAL REPORT

STRATEGIC SECTORS OF INTERVENTION

	Risk Reduction, Climate Adaptation and Recovery	People target	984,000
		People reached	51,206
Objective:	<i>The disaster readiness and resilience of communities are strengthened</i>		
Key indicators:	Indicator	Actual	Target
	<i># of displaced people living in camp settlements reached with Disaster Risk Management intervention within the intervention period</i>	24,548	100,000
	<i># of host community people reached with Disaster Risk Management intervention within the intervention period</i>	26,658	100,000
	<i># people camp and host communities reached through Cyclone Preparedness Programme</i>	Camp: 20,198 Host: 2,461	884,000
	<i># of Disaster Management Committees established in camps</i>	6	33

Note: People reached from March 2017 to December 2021: **993,199** (camp & host communities)

A total of 14,151 people in 33 camps and host (Cox's Bazar Sadar, Ramu and Ukhiya) communities were reached during this reporting period with specific disaster readiness and community resilience building interventions by

BDRCS with support from IFRC. This makes that 51,206 people were cumulatively reached between January and August 2022. Highlights of this progress comprise:

- **Support for implementation of approved guidelines for Disaster Management Committee (DMC) in camp settlements:** BDRCS with support from IFRC, has initiated institutionalizing the disaster risk management structure across all 33 camps to facilitate harmonized and integrated multi-hazard preparedness/response. In this effort, collaboration and engagement have been undertaken with respective government agencies/ministries, together with IOM, UNHCR and the Emergency Preparedness and Response Working Group (EPRWG) of Inter Sector Coordination Group (ISCG).

A guideline on Disaster Management Committees (DMC) for each camp has been developed and approved in June 2022. The guideline has been rolled out with the endorsement of the Office of the Refugee Relief and Repatriation Commissioner (RRRC). By August 2022, it has been reported that with the support from BDRCS/IFRC, the reformation of DMC happened following the approved guideline in six camps (11, 12, 13, 14, 15 and 19) in coordination with respective Site Management Support Agency under the leadership of Camp in Charge (CiC) of respective camps.

- **Support to implement Standing Orders on Disaster (SOD)-2019 in host communities:** Within the reporting period, BDRCS with the support from IFRC supported Ukhiya Upazila Disaster Management Committee (UzDMC) and Ramu UzDMC to re-form 63 Ward Level Disaster Management Committee (WDMC) in 7 Unions of Ukhiya and Ramu followed by reforming Union Disaster Management Committee (UDMC) of respective unions. Team also supported each of the DMCs to orient DMC members on their roles and responsibilities following SOD-2019 to make them aware of their roles and responsibilities within the institutional framework of the respective DMCs. Besides, the team also reached 158 DMC members through Disaster Risk Management (DRM) training aiming to scale up their capacity to facilitate effective disaster preparedness and response in their community.
- **Local capacity enhancement with life-saving skills (Disaster Preparedness and First Aid) in camp settlements:** BDRCS with the support from IFRC continuing camp volunteers' capacity on relevant aspects of multi-hazard preparedness and response across the 33 camps since 2018. Within the reporting period, **the** team reached out to 365 camp volunteers with basic First Aid training through the BDRCS training department which has made the cumulative number of First Aid-trained volunteers 2,995 in 33 camps who have also been provided with First Aid kits to serve people when it is needed. Besides, the team also kicked off Disaster Preparedness (DP) training for the newly recruited camp volunteers in 2022 after addressing the need in camps. Within this period, a total of 149 volunteers received disaster preparedness training focused on multi-hazard aspects, different aspects of community and family level preparedness and, cascading cyclone Early Warning (EW) and Anticipatory Actions (AA) in camps 11, 12, 13, 14, 15 and 19.
- **Support to enhance Cyclone Preparedness Programme's (CPP) volunteers' capacity in Cox's Bazar:** During this reporting period, BDRCS/IFRC supported CPP to scale up unit volunteers' capacity on disaster preparedness and response through Disaster Preparedness training and reached out to 720 Unit volunteers from different Units of Cox's Bazar Sadar Upazila.
- **Mass awareness raising on Cyclone Early Warning and Anticipatory Action (EW-AA) in camp settlements:** 8,994 displaced people in camps settlement were reached through awareness messages on Cyclone Preparedness focusing on cyclone Early Warning (EW) and Anticipatory Action (AA). Trained camp volunteers have been deployed to raise awareness at the household level across 33 camps and conducted six three drills focused on cyclone EW-AA.

- **Household-level disaster risk mitigation with Cash for Work (CfW):** As part of ongoing small-scale disaster risk mitigation efforts in camps 5, 13 and 19, the PMO team mobilized resources to renovate three facilities - Community Based Health and First Aid (CBHFA) in Camp 5, a Child-Friendly Space (CFS) centre in Camp 13 and slop stabilization in Camp 19. In addition, the team has also completed preparatory works like assessment, and finalization of the design for household-level mitigation projects in BDRCS DRR working camps (Camp 11, 12, 13, 14, 15 and 19) and expects kick-off mitigation works by early September.
- **DRR linked livelihood assistance in host:** In coordination with the Livelihood team, the DRM team has finalized around 1,000 households in Ramu sub-district host community (Gorgonia and Kochchopia), primarily selected based on a set vulnerability criterion (including financial condition, disability, women headed household etc.) determined through community consultation. Within the reporting period, BDRCS's NDRT members and RCYs from the local branch are working to orient primarily selected beneficiaries on business plan development. The team is also expecting to disburse the first phase's conditional cash grants by mid-October 2022. As for Emergency Response capacity enhancement and institutional readiness to respond to disasters, BDRCS with IFRC support trained 130 staff/volunteers (87 males and 43 females) on tent installation including 90 in camps 11 and 12. Besides, part of institutional readiness, pre-disaster consultation workshops were also organized both at the PMO and sub-district levels to discuss and decide need-based actions for effective preparedness and response.
- **Institutional Capacity Strengthening on Multi-Hazard Preparedness and Response.** As part of the overall efforts in strengthening the capacity of BDRCS to effectively respond to multi-hazards both in camps and host communities, a total of 131 individuals composed of BDRCS staff and volunteers have been selected as part of Emergency Response Teams (ERTs), trained on various capacities and skills, particularly on emergency shelter tent installation and emergency needs assessment. These ERTs are divided into three (3) groups (Camp-based Quick Disaster Response Team, Ukhiya-based Rapid Response Team, and Unit Disaster Response Team). Additionally, the emergency contingency stocks have been periodically maintained to ensure that BDRCS/IFRC can immediately respond to any emergencies both in camps and host communities.

Collaboration with various actors

With Red Cross Red Crescent partners: IFRC-supported programming continues to be coordinated with the German Red Cross. As and when needed, technical support is also provided to the ICRC and the Myanmar Refugee Relief Operation (MRRO) - the MRRO is a joint programme of the UNHCR and BDRCS via the BDRCS Cox's Bazar unit office.

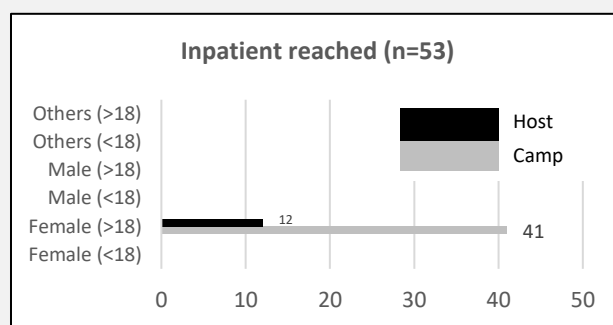
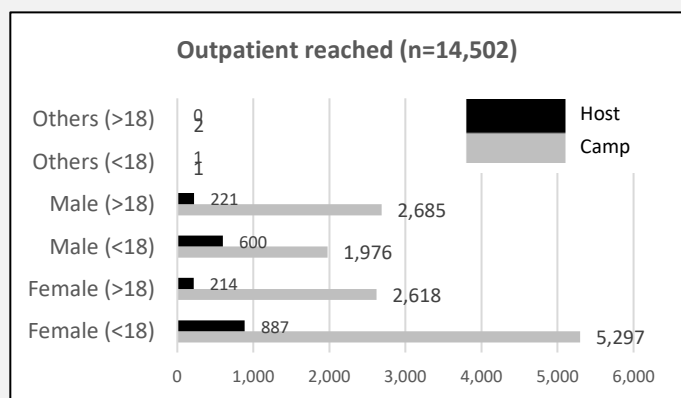
With external actors: BDRCS serves as chair of the Technical Working Group on Cyclone Preparedness - this committee sits under the umbrella of the ISCG CwC (Communications with Communities) working group. In addition, IFRC/BDRCS continue to collaborate with various actors such as IOM, UNHCR and UNDP on various initiatives. The most significant collaboration has been undertaken during the development of guidelines for DMC for camp settlement. In this regard, BDRCS/IFRC worked jointly with EPRWG-ISCG, IOM, UNHCR and RRRC office.

Social media link: [Disaster Risk Reduction in Camp Settlement](#)

 Health & Care <i>(Mental Health and psychosocial support / Community Health / Medical Services)</i>	People targeted	400,000
	People reached	186,487
Objective: <i>Health risks of targeted communities are reduced, and communities enjoy improved health and wellbeing</i>		

Key indicators:	Indicator	Actual	Target
	<i># of people in camps and host communities reduced health risk receiving medical management of injuries and diseases, and health messages</i>	Camp: 183,072 Host: 3,415	Camp: 300,000 Host: 100,000
	<i># of people who have accessed medical services at BDRCS healthcare facilities in camp and host communities</i>	Camp: 28,003 Host: 3,415	Camp: 12,000 Host: 1,200
	<i># of people in camp and host communities who have accessed Community-Based Health and First Aid services</i>	Camp: 155,069	Camp: 10,000 Host: 200

Note: People reached from March 2017 to Dec 2021: **370,035** (camp & host communities)



A total of 169,624 people were reached through field hospital operations and Community Based Health and First Aid (CBHFA) outreach activities. This includes 14,555 patients, majority from the camp community, and treated at outpatient and inpatient facilities of the BDRCS Field Hospital, supported by IFRC. The hospital continues its services on a 24-hour basis, seven days a week – this includes emergency patient care, outpatient department, 10-bed inpatient, sexual and reproductive health service (including delivery), blood services, laboratory, and X-ray. During this period, 101 patients were admitted to the hospital with various conditions – this included 62 women who were admitted to the maternity ward for normal delivery.

According to a recent internal assessment result, the Field Hospital has been complying with the Minimum Package of Essential Health Service set by the Ministry of Health and Family Welfare (MoHFW), and WHO rationalization exercise was also conducted with the same result (final report is pending). This assessment is a joint initiative of Red Cross and Red Crescent partners led by IFRC to assess the service quality of 14 health facilities (1 Field Hospital, 6 Primary Health Care services and 7 Health Posts) of BDRCS supported by IFRC and five in-country IFRC Member Societies. Key areas of improvement recommended for the Field Hospital include having an alternative power supply source to sustain services, reducing dependency on generators and having sufficient pharmacy storage.

To complement the healthcare service provided at the Field Hospital and general health awareness for the affected people, Community-Based Health and First Aid (CBHFA) service has been provided through regular household visits in nine camps (5, 6, 7, 8E, 12, 14, 17, 19 and 20E). As of 31 August 2022, 155,069 people representing around 31,000 households were reached through this service. CBHFA intervention includes mainly general health education, recreational activities and Psychological First Aid (PFA) for the camp people.

Expansion of health service

In line with the need among the vulnerable population in Cox's Bazar for more institutional health services, two more health facilities mainly for the benefit of the host community, have been constructed with IFRC support. They comprise a Mother and Child Health Centre (MCHC) in the Teknaf sub-district, and a Primary Healthcare Centre (PHC) in the Ukhiya sub-district – the centres will benefit a host community population of 105,000 people in total, and some 20,000 people in nearby camps.

Main construction works on the MCHC have been completed. Additional works such as walkway, generator shed, incinerator, ambulance garage, guard room and generator setup, and solar panel have also been completed during this reporting period. Upon completion of the ongoing hiring and induction training for human resources, BDRCS has already inaugurated the MCHC operation on 12 September 2022.

Meanwhile, the construction of the PHC facility was completed during this reporting period. A shortlist of human resources has been by a committee appointed by the Directorate General of Health Services (DGHS), led by the Civil Surgeon, as the facility will be handed over to the Director General of Health Service of the government. Fire Security items and non-medical items have been received while medical items and laboratory items have completed technical inspection. Some additional items, such as CCTV or IT equipment, were purchased in August 2022. It is anticipated that some 80,000 people in the catchment area of PHC in Ghumdhum Border area with Myanmar and Balukhali host community will have access to PHC service provisions.

Health facilities supported by IFRC member societies: It should be noted that apart from the BDRCS Field Hospital, jointly supported by IFRC and Qatar Red Crescent at present, there are 13 other health facilities in the camp run by BDRCS with the support of IFRC member societies, comprising six PHC centres supported by the Swiss Red Cross (in camps 2E, 6, 11, 13 and 15) and Turkish Red Crescent (in Camp 20 Ext), while seven Health Posts supported by the Canadian Red Cross (in Camp 6), Japanese Red Cross (in Camp 12), Qatar Red Crescent (in camps 8E & 19) and Turkish Red Crescent (in camps 5, 17 and 22)

Collaboration with various actors

With IFRC member societies: Within PMO, there is a health-sector coordination group comprising BDRCS, IFRC and IFRC member societies (Canadian Red Cross, Japanese Red Cross, Qatar Red Crescent, Swiss Red Cross and Turkish Red Crescent). The role of this group is to improve health services in alignment with government and WHO standards and find ways to coordinate health services within the Red Cross Red Crescent.

Recent joint assessment to monitor 14 BDRCS health facilities is an example of such coordination, while regular sector meeting on agenda of common interest is undertaken to resolve issues like share funding, handover process, ongoing staff development and attending WHO/Government requirement of collective health service data sharing on WHO Early Warning, Alert and Response System (EWARS) and Government' DHIS2 database.

With external actors: A significant level of external coordination continues to be undertaken with the Government healthcare service authority (the Office of the Civil Surgeon), WHO Cox's Bazar unit and several humanitarian actors. In addition, collaboration has been undertaken with the Christian Blind Mission (CBM) and the Centre for Disability in Development (CDD) to establish a rehabilitation service at the Field Hospital. Partners for Reproductive Justice (IPAS) have also been consulted to improve referrals for sexual and reproductive health services at the BDRCS Field Hospital in Camp 7.

A social media link: [Inauguration of MCHC in Teknaf](#)



Shelter, Housing and Settlements

People targeted	155,000
People reached	27,000

Objective: *The safety and well-being of communities are strengthened through shelter and settlement solutions*

Key indicators:	Indicator	Actual	Target
	<i># of people in the camp and host communities provided with shelter and settlement solutions and strengthen their safety and well-being</i>	Camp: 27,000	Camp: 120,000 Host: 35,000
	<i># of shelter and settlement solutions (such as alternative construction materials, transitional shelter materials, mid-term shelters etc.) provided for the camp people</i>	Camp: Host:	Camp: 3,400 Host: 300
	<i># of community structures (such as health centres, distribution points, community safe spaces, roads, bridges etc.) constructed (new) and improved (existing) in the camp settlement</i>	Camp: Host: 3	To be confirmed
	<i># of people in the camp increased knowledge and awareness on safe shelter</i>	Camp: 1,000 Host:	To be confirmed

Note: People reached from March 2017 to Dec 2021: **372,802** (camp & host communities)

A total of 1,000 people in the camp community were reached between May and August 2022 through the Participatory Approach for Safe Shelter Awareness (PASSA) training provided by BDRCS with IFRC support. The trained camp community individuals will further transfer the knowledge and skills to 2,500 households in Camp 12, which will benefit 7,500 people.

The PASSA training was also attended by the Site Management and Site Development (SMS) staff and representatives from CiC, as part of their awareness of safe shelter and guidance to the camp households. Also ongoing during the reporting period were the following shelter and construction support activities.

Care and Maintenance: In Camp 12, an assessment has been undertaken with the identification of sites and necessary maintenance works required for 2,500 shelters in Camp 12. Application for approval from CiC is processed for the identified care and maintenance works as well as IEC (Information Education and Communication) materials for the same target households.

Mid-term Shelter (MTS): MTS support for 900 households in Camp 11 has been underway subject to approval from the IFRC secretariat in Geneva and approval from the camp CiC. The targeted households will be supported with a more durable shelter solution, which mainly includes concrete floor, metal footing, treated bamboo, and tarpaulin. It is noted that the Government only allows temporary shelter structures for the camp population.

Durable shelter support for host community: The vulnerability of more than 300 houses in Baharchara in Teknaf and Cox's Bazar Sadar has been assessed. Collaboration with the local authority is underway to obtain approval for the selected vulnerable households to receive durable shelters in the month ahead.

Construction support: Significant construction support has been provided for several facilities. The construction of a DAPS (Dignity, Access, Participation and Safety) centre is in the tender process, while the construction of a

Primary Health Care Centre (PHCC) and Mother and a Child Health Care Centre (MCHCC) have been completed. In the coming months, the construction of two distribution centres in camps 11 and 13, and the renovation of a meeting hall in Camp 18 will be undertaken.

Collaboration with various actors

With IFRC member societies: Coordination with the German Red Cross, Qatar Red Crescent and Turkish Red Crescent continues, to align or complement the support extended to BDRCS.

With external actors: The camp authority, such as the Refuge, Relief and Repatriation Commissioner (RRRC) including the CiCs, ISCG and SMSAs of the camps (11, 12, 14 and 18), have been major actors with whom BDRCS/IFRC continues to coordinate and collaborate with for its shelter programme. On the other hand, in the host communities, the local administration and Union Parishad leaders (public representatives) are the key actors with whom collaboration is undertaken. A partnership with IOM for a bamboo treatment facility has been under negotiation - this would strengthen the sector's coordination and quality benchmark.



Water, Sanitation and Hygiene

People targeted	150,000
People reached	78,429

Objective:

Communities experience reduced risk of waterborne and water-related diseases, and as such, enjoy improved wellbeing

Key indicators:

Indicator	Actual	Target
<i># of people reached in the camp and host communities who experience reduced risk of waterborne and water-related diseases</i>	Camp: 47,981 Host: 30,448	Camp: 115,000 Host: 35,000
<i># of households with access to safe water sourced through climate-smart, nature-based solutions</i>	Camp: 27,261 Host: 690	Camp: 36,000 Host: 10,750
<i># of households benefiting from environment-friendly, innovative sanitation services</i>	Camp: 19,900 Host: 980	Camp: 23,500 Host: 25,000
<i># of households practicing improved hygiene</i>	Camp: 31,272 Host: 30,448	Camp: 55,500 Host: 30,000

Note: People reached from March 2017 to Dec 2021: **156,025** (camp community); **37,016** (host community)

A total of 52,035 people in the camps (11, 13, 18 and 19) and host communities (Ukhiya and Teknaf) were supported during this reporting period. Highlights as follows:

- **Water supply system:** 27,261 people in camps 11, 18 and 19 continue to have access to safe chlorinated water for drinking and household consumption – the water is supplied through eight solar-powered water network systems in camps 11 and 18, while 121 average monthly repairs of tube wells in Camp 19. On the other hand, 138 households (690 people) in the Ratna Palong host community continue to use safe water at their household-level tube wells which were constructed in 2020. The facilities in camps can supply approximately 10,913 cubic meters of water per month. Regular water quality monitoring for the camps is conducted to ensure that people consume safe water free from E. Coli. Samples were collected from the water chain regularly, such

as sources, distribution points, and household storage. Critical parameters under monitoring include pH, total dissolved solids, E. Coli, iron, turbidity, nitrates, fluoride, arsenic etc.

- **Sanitation:** Various sanitation services continue to benefit 20,880 people in camps 18 and 19, as well as the host community (Ratna Palong). These services comprise the faecal sludge management (FSM) plant in Camp 19 where households are also benefiting from the repair of 150 latrines and bathing facilities. In camps 18 and 19, a total of 11 solid waste management (SWM) plants at the sub-block level, constructed in 2021, continue to benefit the people in the camps. Meanwhile, in the Ratna Palong host community in the sub-district of Ukhiya, 58 households (290 people) were provided with *biofil latrines* (one latrine per household). These latrines operate on the principle of aerobic decomposition; creating a living filter where natural organisms thrive in order to break down solid waste into useful end products from the management of liquid and solid fecal waste.
- **Hygiene promotion:** 10,407 households (52,035 people) in camps 11, 13, 18 and 19 and the Ratna Palong host community have been made aware of proper hygiene practice through hygiene promotion sessions, provision of hygiene top-up kits and other hygiene kits. This has helped improve their knowledge of the importance of hand washing with soap and other aspects of personal and household hygiene. In addition, 7,416 adolescent women were provided with MHM kits in camps 13, 18 and 19. Furthermore, 17,186 soaps were distributed to students in host community schools and 1,402 bins were distributed to households in Camp 18.

Collaboration with various actors

With IFRC member societies: Coordination continues with the German Red Cross, Swedish Red Cross and Turkish Red Crescent to ensure alignment and complementarity in the support provided to BDRCS. Under the sanitation programme in Camp 18, the German Red Cross and Swedish Red Cross have been jointly supporting IFRC to continue the SWM in 11 block-level plants. IFRC continues to support the water quality testing lab and all Red Cross and Red Crescent WASH partners make use of it. IFRC also continues to support hygiene promotion sessions, and the distribution of hygiene and MHM kits in camps 13, 17, 18 and 19 where other partners bilaterally support BDRCS.

With external actors: Coordination and collaboration continue with stakeholders such as the Department of Public Health and Engineering (DPHE), local authorities, and humanitarian actors on the ground.



(Left) A biofil latrine in host community featured with onsite faecal waste management utilising earthworms for decomposition of faecal matter. Households using this latrine have better cleanliness and privacy. **(Right)** 5,500 displaced people living in Camp 19 (Block D) have access to supply of chlorinated safe drinking water from this Water Supply Network powered by solar system. Camp volunteers have been trained and mobilised to provide care and maintenance support **(Photos: IFRC)**



Livelihoods

People targeted	70,000
People reached	18,455

Objective: *The livelihoods of communities are restored and strengthened*

Key indicators:	Indicator	Actual	Target
	<i># of people in the camp and host communities reached by restoring and strengthening their livelihoods</i>	Camp: 7,665 Host: 10,790	Camp: 20,000 Host: 50,000
	<i># of people in camp and host communities provided with cash and voucher assistance (CVA)</i>	Camp: 7665 Host: 10,790	To be confirmed
	<i># of people in camp and host communities provided with skills development opportunities</i>	-	To be confirmed

Note: People reached from March 2017 to Dec 2021: **205,755** (camp & host communities)

A total of 6,110 people in Cox's Bazar host communities were reached during this period, with cash serving as the major intervention. Highlights as follows:

A total of 1,222 households or 6,110 individuals in the following targeted host communities were provided with a cash grant of BDT 4,500 (CHF 43) per household:

Areas	# of Beneficiary Households Reached
Cox's Bazar Sadar	510 Households
Garjonia	712 Households

As the communities' source of livelihood has been impacted by the COVID-19 pandemic since 2020, the people have been supported to access basic household needs, including food and medicine. The following actions were taken as part of the overall process to ensure that Red Cross Red Crescent assistance is reaching the most vulnerable:

- Community consultations through Focus Group Discussions (FGDs) within the targeted communities.
- Creation of final inclusion and exclusion criteria in selecting beneficiaries.
- Community household assessments/interviews.
- Generation of a primary beneficiary list using the beneficiary selection criteria.
- Activation of the community response and feedback mechanism (in coordination with the CEA team).
- Beneficiary orientation.
- Cash Distribution (1-time).
- Post-distribution Monitoring.

Conditional cash grants for host community: 1,494 households (932 in Gargonia and 562 in Kochopia) from the host communities of Ramu Sub-district have been identified based on the communities' definition of vulnerability in terms of economic status, demographic factors (widow, separated, divorced, women headed household etc.), including those that require specific needs (disability, long-term diseases and elderly). To select the most

vulnerable households, inclusion and exclusion criteria have been developed based on consultations with community people, wealth groups, government authorities, and relevant agencies (Agriculture, Livestock, etc.). A Community Livelihoods Committee have also been formed to ensure that communities are guided and included in the overall process. In this process, 14 FGDs and 5 Key-Informant Interviews (KIIs) were conducted by deploying 10 Red Crescent volunteers, two National Disaster Response Team (NDRT) members, five DRR officers, and three CEA staff members. By September 2022, their business plans will be reviewed and approved for further action. BDT 30,000 (CHF 286) will be distributed per household, and the first tranche will be distributed in October 2022 upon the application of the approved business plan.


Collaboration with various actors

With IFRC member societies: For effective implementation, the BDRCS/IFRC cash team coordinates with relevant member societies. The American Red Cross (on behalf of IFRC as part of the Shared Leadership arrangement) and the German Red Cross (on the e-voucher modality of meeting household needs in the camp) are the major collaborating partners in identifying host community areas most affected by the influx of displaced people from Rakhine, Myanmar.

With external actors: To harmonise the livelihood programming with the government and other humanitarian actors, the team works closely with the local Union Parisad, Union Nirbahi Officer (a responsible officer within the local administration) and community leaders in the host community. As for camp programming, consultation continues with the ISCG Cash Transfers Working Group and Shelter/NFI Sectors of humanitarian actors, the Camp-in-Charge of individual camps, and Site Management Support agencies, for direct or indirect livelihood opportunities.



(left) A woman, head of household living in Cox's Bazar Sadar host community, receives unconditional cash grant; (right) Red Crescent Youth volunteers assisted in the beneficiary identification process during cash distribution. (Photos: BDRCS)

	Protection, Gender and Inclusion	People targeted	115,000
		People reached	37,573
Objective:	Vulnerable and marginalised individuals and groups are supported and empowered		
	Indicator	Actual	Target

Key indicators:	# of people provided with essential PGI services (camp community)	Camp: 37,573	Camp: 115,000
	# of referrals made to protection case management actors (camp community)	156	As necessary
	% of PGI mainstreaming checklist updated for each programme sector	-	75% Annually

Note: People reached from March 2017 to Dec 2021: **142,231** (camp community)

During this reporting period, 20,244 people in camps 13, 14, and 19 were reached through several PGI interventions, with the following highlights :

Skills training: A total of 1,133 people from camps 13, 14 and 19 attended life skills training at the DAPS centres located in the camps. The training included origami work, fish net making, making ornaments, hand embroidery, and informal education; 780 people with disabilities actively participated in these skills training activities.

Awareness on PGI: In total, 7,290 camp people were reached with various types of awareness initiatives. These included sessions on PGI topics (sexual and gender-based violence (SGBV), empowerment, child marriage, and people trafficking), outreach visits to households, observance of International Women’s Day, and PGI basic training for community volunteers.

Protection item support: 7,069 people in Camp 14 (including 22 persons with disabilities) were provided with rechargeable solar lamps and umbrellas

Referrals: 104 people in these three camps were referred to various protection case management actors. Among this number were 52 adolescent girls, boys, and children (*see the table below*).

Referral types	May to August 2022			January 2017 – August 2022		
	Female	Male	Total	Female	Male	Total
SGBV	22	0	22	378	0	378
Child Protection	16	9	25	141	115	256
Trafficking	0	3	03	29	24	53
Restoring Family Links	25	29	54	56	70	126
Total	63	41	104	604	209	813

Note: **Major protection case management organisations are Technical Assistance Inc. (TAI), Save the Children Bangladesh, IOM, Ministry of Women and Child Affairs (MoWCA) and Care Bangladesh.**

- **PGI mainstreaming:**

One example of PGI mainstreaming is providing easier access for particularly vulnerable individuals (such as the elderly, pregnant and lactating women, persons with disabilities, and women and children) at the BDRCS distribution centre in the camp settlement. Easier access facilities include separate waiting places and queues. As a result, 1,507 particularly vulnerable people were reached during this reporting period. In addition, the following table shows some examples of PGI mainstreaming efforts undertaken in recent times.

Sector	Support provided by PGI team to programme sector	Mainstreaming initiatives undertaken by programme sector
Shelter	<ul style="list-style-type: none"> ○ Workshops for programme team ○ Consultation to develop assessment checklist ○ Technical guidance on needs of persons with disabilities when accessing their shelters 	<ul style="list-style-type: none"> ○ Construction of ramp at the entrance of shelters of two households with family members who have disabilities (host community area). ○ Assistance in carrying shelter items from the distribution centre to shelters – this assistance was provided to the elderly and persons with disabilities.
WASH	<ul style="list-style-type: none"> ○ Consultation to develop assessment checklist ○ Technical guidance on making WASH facilities more accessible ○ Training for community volunteers 	<ul style="list-style-type: none"> ○ Construction of low ramps and stairs at tap stands and latrines, to improve accessibility. ○ Hand-held solar lights were provided to households in the camps, particularly for the use of women and girls when making their way from shelters to latrines or tap stands in the dark.
Health	<ul style="list-style-type: none"> ○ Consultation to develop assessment checklist ○ Technical guidance and basic PGI training provided to BDRCS Field Hospital staff ○ Collaboration with disability organizations on services needed by persons with disabilities 	<ul style="list-style-type: none"> ○ Health staff have identified and referred cases of gender-based violence ○ The BDRCS health team has collaborated with the Christian Blind Mission (CBM) and the Centre for Disability in Development (CDD) in providing rehabilitation services for persons with disabilities and the elderly at the BDRCS Field Hospital in Camp 7.
Livelihoods and basic needs (including relief distributions)	<ul style="list-style-type: none"> ○ Workshops for programme team ○ Consultation to develop assessment checklist ○ Orientation for camp volunteers (comprising trained camp residents) to support persons with disabilities ○ Technical guidance and basic PGI training for BDRCS staff involved in relief distributions and livelihood support 	<ul style="list-style-type: none"> ○ Separate queues for persons with disabilities/the elderly, women, and men, have been established and maintained at distribution centres. ○ The relief team introduced a designated waiting or rest area for priority individuals such as the elderly, lactating women, and persons with disabilities. ○ Establishment and maintenance of breastfeeding corners at distribution centres. ○ Provision of ramps at entrances to distribution centres, to improve access. ○ Provision of desks at distribution centres for the collection of feedback on protection, safety and security during the distribution process.
Disaster risk reduction (DRR)/disaster management	<ul style="list-style-type: none"> ○ Consultation to develop assessment checklist ○ Technical guidance and basic PGI training for BDRCS DRR staff 	<ul style="list-style-type: none"> ○ PGI session incorporated into disaster management training package ○ Maintain contingency stock of protection items (solar lights and dignity kits) for use in emergency response

Collaboration with various actors

With IFRC member societies: Coordination continues with the Canadian Red Cross, Swedish Red Cross, Turkish Red Crescent and ICRC. Trainings and workshops are conducted on a regular interval for staff and volunteers of sectors supported by Red Cross Red Crescent partners to increase awareness on PGI mainstreaming maintaining the minimum standard of Dignity, Access, Participation and Safety approach.

With external actors: The BDRCS PGI team has continued its coordination with relevant government agencies and humanitarian actors working in the camp settlement, particularly case management actors including CARE

Bangladesh, IOM and Save the Children. Collaboration has also been undertaken with disability case management actors the Christian Blind Mission (CBM), Handicap International and the Centre for Rehabilitation of the Paralysed (CRP). The BDRCS team regularly participates in various working group meetings – these include the protection working group, age and disability working group, GBV working group and child protection working group. These groups are sources of technical support and training.

Enabling approaches

	Community Engagement and Accountability	People targeted	400,000
		People reached	82,746

Objective: *Targeted communities are consulted and are able to share their views about assistance received or planned, and programmes and operations are planned and adapted accordingly*

Key indicators:	Indicator	Actual	Target
	<i># of people (from the camp and host communities) reached through community consultations/outreach</i>	Camp: 65,038 Host: 17,708	Camp: 300,000 Host: 100,000
	<i># of pieces of feedback received from the camp and host communities</i>	Camp: 4,785 Host: 162	As received
	<i>% of received feedback acted upon</i>	40% ⁶ (within 48 hrs.) 60% ⁷ (1-week minimum)	To be confirmed

Note: People reached from March 2017 to Dec 2021: **170,400** (camp community); **13,745** (host community)

A total of 40,368 people in camps and host communities were reached during this reporting period. Highlights as follows:

- **Consultation with Majhi and religious leaders:** 173 Muslim religious leaders (*imam*) and Majhi (community Leaders) in the camps were engaged in the dissemination of key messages and collection of feedback among the wider camp population.
- **Radio listening programme:** 260 community radio listening programmes were conducted, reaching 3,653 people in various camps. At the same sessions, key messages were shared with participants who also provided feedback and concerns on services and the overall situation of the camp settlement.

⁶ Sensitive feedback and provide answer for frequently asked question on COVID-19 and service-related information also.


⁷ Service related to non-sensitive feedback.

- **Capturing feedback, complaints, and response:** 5,410⁸ pieces of non-sensitive feedback were collected during this reporting period from 14 camps as well as from field hospital through various feedback collection channels such as feedback box, desk, hub, hotline, and outreach activities (where BDRCS services are available). Among them, 3,787 pieces of non-sensitive feedback related to programming, such as shelter, health, WASH, and relief distributions have been responded to through the sectors. Nevertheless, 580 community feedback were collected on COVID-19 which were responded to on the spot using Frequently Asked Questions (FAQ) and answer methods. In the host community, 162 community feedbacks were collected and acted upon during the beneficiary selection and implementation process using a hotline number while some feedback was responded to through feedback boxes during the service period.

- **Collaboration with various actors**

With IFRC member societies: The CEA team has continued to share community feedback reports with in-country IFRC member societies so that matters are addressed promptly, and community consultation is arranged to provide sectorial information. Additional technical support is provided to IFRC member societies, along with collaborative efforts, are based on needs articulated at a coordination and planning meeting in 2021.

With external actors: IFRC and BDRCS continue to consult with CiC, attend the ISCG Communications with Communities (CwC) working group, share monthly updates, and take support from BBC Media Action providing Key informative messages through Audio recording, and Translation with Broader (TWB) for translation in the Burmese language on banner, community booklet, leaflet for Livelihoods, WASH and Shelter sector for developing IEC materials as a tool of social behavioral change communication.

 National Society Strengthening	People targeted	1,500	
	People reached	352	
Objective:	BDRCS has strengthened capacities, systems and procedures at central and Cox's Bazar levels		
Key indicators:	Indicator	Actual	Target
	<i># of staff and volunteers trained on search and rescue, first aid, disaster preparedness, early warning and anticipatory actions</i>	352 volunteers	1,500 volunteers and staff

As part of National Society development efforts, renovation works were accomplished at the office of the BDRCS Cox's Bazar unit (equivalent to a branch) during this reporting period with support from IFRC and the British Red Cross. This building has been utilised as a multi-purpose facility including a training or workshop venue.

A think tank meeting was held on unit office development in July while a Red Cross Red Crescent stakeholder meeting was held in August having one of the agenda as National Society Development. Major recommendations from both events include:

- Maintain transparent and accountable Governance of the BDRCS Cox's Bazar branch.
- Secure long-term lease or ownership of the existing land of the branch.
- Capacity development of Executive Committee, general members and volunteers of the branch.
- Develop two potential income-generating projects for the branch.
- Improve BDRCS capacity on leadership, resource mobilisation, and linkage with the funding mechanism.

⁸ <https://go.ifrc.org/emergencies/2#additional-information>

- Develop new partnerships and funding niche.
- Maximize the advantage of BDRCS status as auxiliary to the government.



Coordination and Partnerships

Objective:	<i>To better articulate the auxiliary role of BDRCS and its convening power among a plurality of stakeholders, and accordingly strengthen the IFRC network's footprint in the response to the population movement crisis.</i>		
Key indicators:	Indicator	Actual	Target
	<i>The One Window Framework (OWF) Plan of Action is updated regularly</i>	0	Updated

This reporting period saw a high-level meeting with Red Cross Red Crescent Movement Partners held on 4 August 2022, where future strategies of the PMO were discussed, worked out and recommended. This includes service rationalization as per the standard of the UN-led ISCG and Government of Bangladesh, sustainability, maintaining compliance, transparency and accountability and PMO Resource Mobilisation for future. During this period, a number of high-level leaderships visited PMO, including the IFRC Regional Director, BDRCS Secretary General, and Swedish Embassy. These visits also played a key role in existing coordination and future partnerships.



Secretariat Services

Objective:	<i>To provide a high range of quality support services to in-country IFRC member societies with the aim of saving costs and improving efficiency</i>		
Key indicators:	Indicator	Actual	Target
	<i># of existing integrated and service agreements with respective in-country IFRC member societies are renewed</i>	8	10

Among the 10 in-country Partner National Societies with a presence in Cox's Bazar, eight have entered into integrated agreements or service agreements with IFRC. It should be noted that the Swiss Red Cross entered into an Integrated Agreement with IFRC for Cox's Bazar operations with effect from 2022 - its Dhaka-based office is part of a pre-existing Integrated Agreement entered into in previous years. During this period, several training and workshops were conducted with the integrated IFRC member societies to enhance capacity on finance, security and Protection from Sexual Exploitation and Abuse (PSEA).



Support for the displaced community on Bhashan Char Island

People targeted	17,994
People reached	2,031

Objective:	<i>To enable the displaced community on the island to be disaster-ready and benefit from improved health</i>		
Key indicators:	Indicator	Actual	Target
	<i># of displaced community people relocated to the island are enabled to be disaster-ready and benefit from improved health</i>	2,031	17,994

Note: People reached up to Dec 2021: **N/A**

Bhashan Char (island) is located on the Bay of Bengal, in Hatiya sub-district of Noakhali district in Bangladesh. The Government of Bangladesh decided to relocate 100,000 people displaced from Rakhine state in Myanmar into Cox's Bazar camp settlement to Bhashan Char. Subsequently, in different batches, 26,043 people (12,761 males and 13,282 females) have been relocated to the island (out of them, 14,324 are children, and 260 people with disability), as of 31 August 2022, according to the latest registration and verification exercise carried out by UNHCR. On 9 October 2021, the Government of Bangladesh and UNHCR (on behalf of the UN agencies working in Cox's Bazar) signed a Memorandum of Understanding (MOU) that established a common protection and policy framework for the response on the island.



In May 2022, BDRCS with the support of the IFRC organised cyclone preparedness activities in Bhashan Char. (Photo: BDRCS)

BDRCS, as auxiliary to and at the request of the Government, has been providing humanitarian assistance for the displaced people since the first phase of their relocation to Bhashan Char Island in December 2020. The IFRC extends the necessary technical support to BDRCS it needs to operate on the island. Currently, BDRCS is working in partnership with UNHCR for (a) Site Management, (b) Emergency Preparedness and Response (EPR), (c) Shelter, (d) Non-Food Items (NFIs) distribution and (e) Registration. Support for the displaced community on the island is included in the IFRC's revised appeal with a specific funding ask of CHF 6 million for Bhashan Char – so far, no fund has been raised. During this reporting period, 1,071 displaced and further relocated people were supported. Highlights follow:

DRR: Cyclone preparedness activity

In May 2022, when the cyclone “ASHANI” formed at the Bay of Bengal, BDRCS with the support of the IFRC organized training, orientations and awareness sessions among the relocated community through CPP and Emergency Preparedness and Response (EPR). Refreshers and training on CPP activity, information/signal dissemination, flag hoisting, and prioritization in the evacuation during cyclone were conducted for the CPP volunteers in all 54 clusters on the island which were allocated for the people to live in that time of May 2022, reaching 1,071 community volunteers (642 male and 429 female). Emergency preparedness and response plan, as well as Standing Operating

Procedure (SOP)⁹ for emergency response at the island, were prepared by BDRCS in coordination with CiC and UNHCR. BDRCS led emergency preparedness coordination meeting which was chaired by the Additional RRRC at Bhashan Char to ensure a proper response in case the cyclone hit the island. Moreover, a DMC was established to ensure proper response and assistance.

COVID-19 vaccination

In August 2022, the Government of Bangladesh, UNHCR and WHO organized third phase of COVID-19 vaccination for the relocated community at Bhashan Char. Being the implementing partner of UNHCR, BDRCS facilitated the verification process in the vaccination program. 4,174 people vaccinated in this phase where 2,697 (12 to 17 years old) people received second dose, 226 (12 to 17 years old) people received first dose and 1,251 (18+ old) received second dose.

WASH support

BDRCS implements WASH activities which include drainage management, household-level solid waste management, wash infrastructure maintenance and disinfection activity for mosquitos. These are supported by the IFRC and German Red Cross. The trained community WASH volunteers collect household-level solid wastage from the pre-placed waste management bin and managing them till central waste management zone. BDRSC team also conduct service monitoring activity to assess the functionality of tube wells, reserve tanks and boreholes of the clusters where relocated community live.

Community engagement

In August, BDRCS received an approval to establish two complaints and feedback response mechanism (CFRM) at Bhashan Char. One desk established in CiC office in September. BDRCS providing technical and management support for this.

Coordination and others

Currently around 40 staff of BDRCS are now based on the island and engage in different activities and keeping close coordination with the government authorities, including RRRC, Bangladesh Navy, UN and other organizations. Based on the operational needs or the engagement on the ground, BDRCS deploys RCY volunteers, NDRT members from Chattogram, Noakhali branches and from NHQ.

In August 2022, BDRCS provided training on data Collection through mobile for 110 EPR and Site Management Support volunteers to collect data using the KoBo toolbox.

D. FUNDING

Up to 31 August 2022, the latest Revised Emergency Appeal is 14 per cent funded for Cox's Bazar operations while Bhashan Char operations have yet to be funded. Please also see the financial report attached at the end of this report.

⁹ This SOP approved by the BDRCS higher authority in August 2022.

Contact information

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- Juliene de Bernard, Strategic Engagement and Partnership in Emergencies – Surge; email: PartnershipsEA.AP@ifrc.org

For Performance and Accountability support (planning, monitoring, evaluation and reporting enquiries)

- Mursidi Unir, interim PMER Coordinator in Emergencies; email: mursidi.unir@ifrc.org

Reference documents



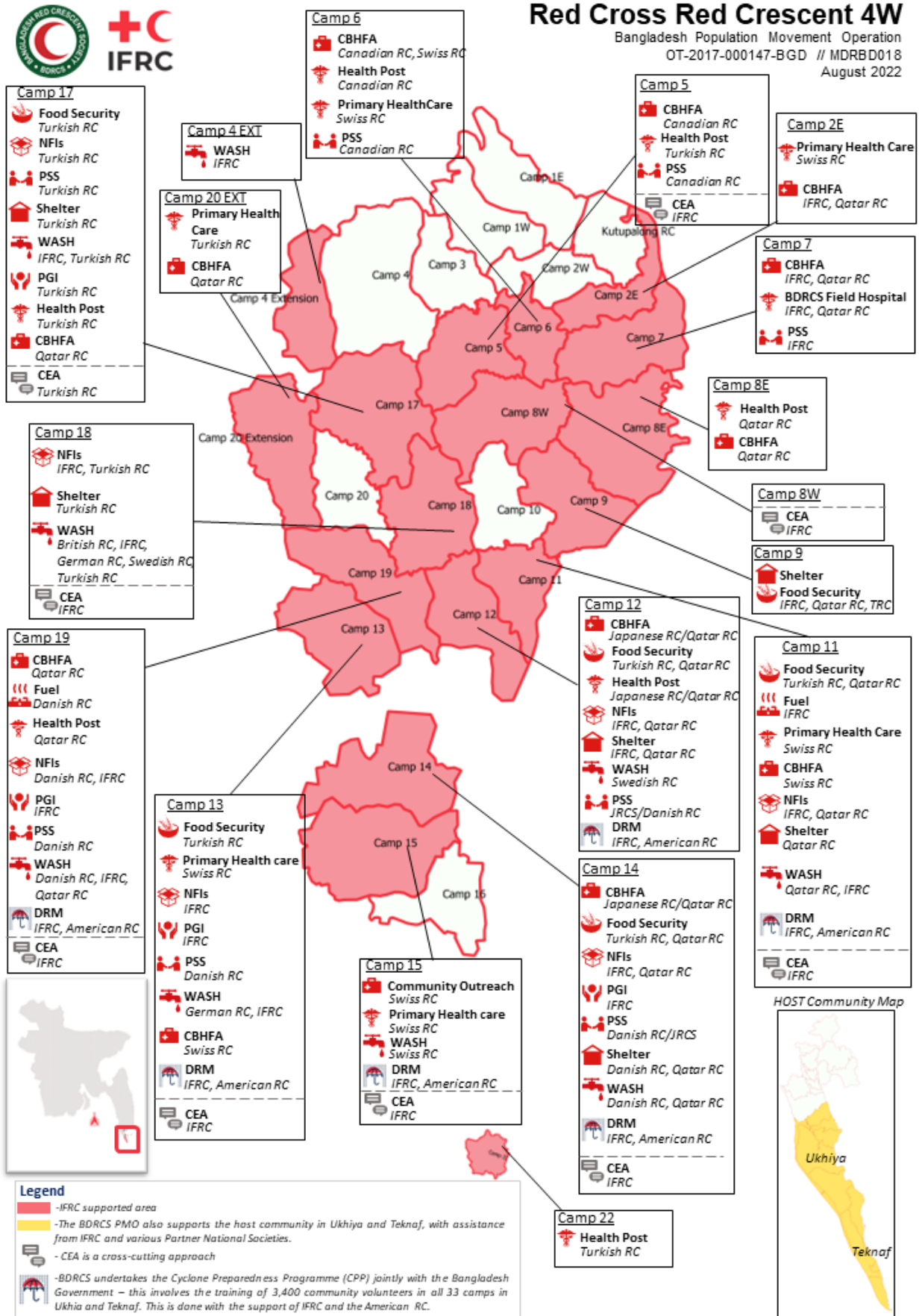
Click here for:

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How we work

All IFRC assistance seeks to adhere the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief, the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable, to **Principles of Humanitarian Action** and **IFRC policies and procedures**. The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

Annex 1: 4W Map of PMO



Emergency Appeal

INTERIM FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2017/1-2022/8	Operation	MDRBD018
Budget Timeframe	2017-2022	Budget	APPROVED

Prepared on 10 Oct 2022

All figures are in Swiss Francs (CHF)

MDRBD018 - Bangladesh - Population Movement

Operating Timeframe: 13 Jan 2017 to 31 Dec 2024; appeal launch date: 18 Mar 2017

I. Emergency Appeal Funding Requirements

Thematic Area Code	Requirements CHF
AOF1 - Disaster risk reduction	28,748,000
AOF2 - Shelter	36,803,000
AOF3 - Livelihoods and basic needs	6,375,000
AOF4 - Health	18,065,000
AOF5 - Water, sanitation and hygiene	22,201,000
AOF6 - Protection, Gender & Inclusion	5,054,000
AOF7 - Migration	0
SFI1 - Strengthen National Societies	1,734,000
SFI2 - Effective international disaster management	14,252,000
SFI3 - Influence others as leading strategic partners	0
SFI4 - Ensure a strong IFRC	0
Total Funding Requirements	133,232,000
Donor Response* as per 10 Oct 2022	68,374,469
Appeal Coverage	51.32%

II. IFRC Operating Budget Implementation

Thematic Area Code	Budget	Expenditure	Variance
AOF1 - Disaster risk reduction	621,414	1,025,796	-404,382
AOF2 - Shelter	14,250,851	12,436,373	1,814,478
AOF3 - Livelihoods and basic needs	2,141,956	1,945,777	196,179
AOF4 - Health	6,141,130	4,449,493	1,691,637
AOF5 - Water, sanitation and hygiene	8,920,308	6,921,581	1,998,728
AOF6 - Protection, Gender & Inclusion	2,984,029	2,831,662	152,367
AOF7 - Migration	8,064,598	7,255,812	808,787
SFI1 - Strengthen National Societies	17,502,717	13,168,614	4,334,103
SFI2 - Effective international disaster management	1,385,157	1,378,710	6,446
SFI3 - Influence others as leading strategic partners	11,679	12,536	-857
SFI4 - Ensure a strong IFRC	1,204,039	1,159,868	44,171
Grand Total	63,227,877	52,586,221	10,641,656

III. Operating Movement & Closing Balance per 2022/08

Opening Balance	0
Income (includes outstanding DREF Loan per IV.)	58,030,815
Expenditure	-52,586,221
Closing Balance	5,444,594
Deferred Income	10,398,149
Funds Available	15,842,742

IV. DREF Loan

* not included in Donor Response	Loan :	1,385,104	Reimbursed :	1,063,858	Outstanding :	321,246
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Emergency Appeal

INTERIM FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2017/1-2022/8	Operation	MDRBD018
Budget Timeframe	2017-2022	Budget	APPROVED

Prepared on 10 Oct 2022

All figures are in Swiss Francs (CHF)

MDRBD018 - Bangladesh - Population Movement

Operating Timeframe: 13 Jan 2017 to 31 Dec 2024; appeal launch date: 18 Mar 2017

V. Contributions by Donor and Other Income

Income Type	Cash	InKind Goods	InKind Personnel	Other Income	TOTAL	Deferred Income
Opening Balance					0	
American Red Cross	179,521	77,691	0		257,212	
Australian Red Cross	939,693		377,515		1,317,207	
Australian Red Cross (from Australian Government*)	1,194,930				1,194,930	
Australian Red Cross (from Swedish Red Cross*)	24,644				24,644	
Austrian Red Cross (from Austrian Government*)	399,617				399,617	
Bahrain Red Crescent Society	88,672				88,672	
British Red Cross	2,443,596	235,324	154,847		2,833,767	
British Red Cross (from British Government*)	2,565,312				2,565,312	
British Red Cross (from DEC (Disasters Emergency Cc	269,459				269,459	
China Red Cross, Hong Kong branch	228,313	131,521			359,833	
China Red Cross, Macau Branch	250				250	
Danish Red Cross (from Danish Government*)	147,500				147,500	
DREF Allocations				321,246	321,246	
European Commission - DG ECHO	165,896				165,896	
Finnish Red Cross (from Finnish Government*)	120,678				120,678	
German Red Cross	23,908				23,908	
IFRC at the UN Inc	977				977	
Irish Red Cross Society	16,304				16,304	
Islamic Development Bank IsDB	4,509,163				4,509,163	3,511,290
Italian Red Cross	117,332				117,332	
Japanese Red Cross Society	333,131				333,131	
Malaysia - Private Donors	276,153				276,153	
Maldives Government (from Maldives Private Donors*)	1,095,470				1,095,470	
Maldivian Red Crescent (from Maldives Private Donors	491,095				491,095	
New Zealand Government	525,525				525,525	
New Zealand Red Cross	99,585				99,585	
Norwegian Red Cross	60,116		14,465		74,581	
On Line donations	540				540	
Other	100,784		191,329		292,113	
Red Crescent Society of the Islamic Republic of Iran	63,380				63,380	
Red Cross of Monaco	16,280				16,280	
Republic of Korea Government	2,127,181				2,127,181	
Services Fees				48,368	48,368	
Shell	121,183				121,183	
Singapore Red Cross Society	29,613				29,613	
Spanish Government	115,803				115,803	
Swedish Red Cross	865,528		31,086		896,615	
Swedish Red Cross (from Swedish Government*)	1,730,924				1,730,924	
Swiss Government	525,000				525,000	
Swiss Red Cross	521,873		30,874		552,747	
Taiwan Red Cross Organisation	33,051				33,051	
The Canadian Red Cross Society	201,183	210,382	9,929		421,494	
The Canadian Red Cross Society (from Canadian Gov	587,103				587,103	
The Netherlands Red Cross	901,966				901,966	
The Netherlands Red Cross (from Netherlands Govern	3,773,439				3,773,439	
The OPEC Fund for International Development	498,906				498,906	
The Prince Albert II of Monaco Foundation	331,679				331,679	
The Republic of Korea National Red Cross	102,033	32,573			134,606	
The Republic of the Philippines	150,530				150,530	
Turkish Red Crescent Society	496,993				496,993	

Emergency Appeal

INTERIM FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2017/1-2022/8	Operation	MDRBD018
Budget Timeframe	2017-2022	Budget	APPROVED

Prepared on 10 Oct 2022

All figures are in Swiss Francs (CHF)

MDRBD018 - Bangladesh - Population Movement

Operating Timeframe: 13 Jan 2017 to 31 Dec 2024; appeal launch date: 18 Mar 2017

Income Type	Cash	InKind Goods	InKind Personnel	Other Income	TOTAL	Deferred Income
United States Government - PRM	26,553,790				26,553,790	6,886,859
United States - Private Donors	95				95	
Write off & provisions				-2,033	-2,033	
Total Contributions and Other Income	56,165,698	687,491	810,045	367,581	58,030,815	10,398,149
Total Income and Deferred Income					58,030,815	10,398,149