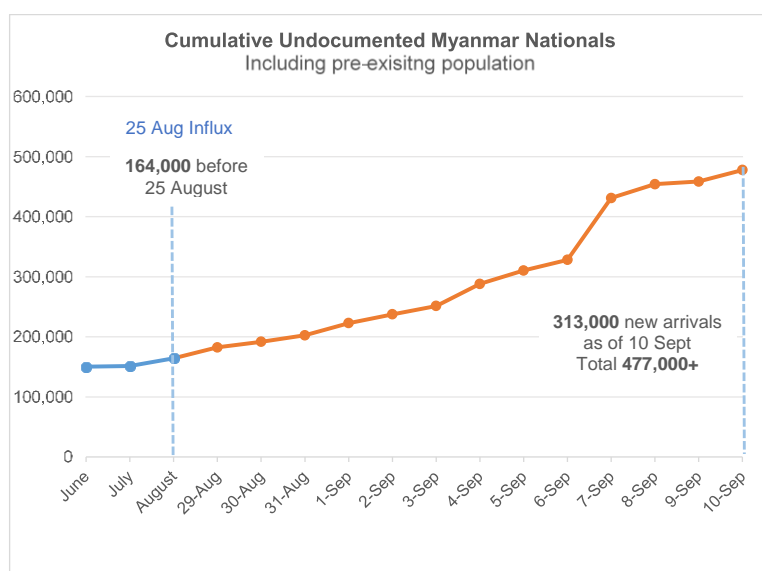


Situation Overview

In the early hours of 25 August, violence broke out in Rakhine State. The extent and implications remain uncertain. To date, unverified estimations based on consolidated field reports of the agencies working in Cox's Bazar are that 313,000¹ people are estimated to have crossed the border into Bangladesh.

Key Figures

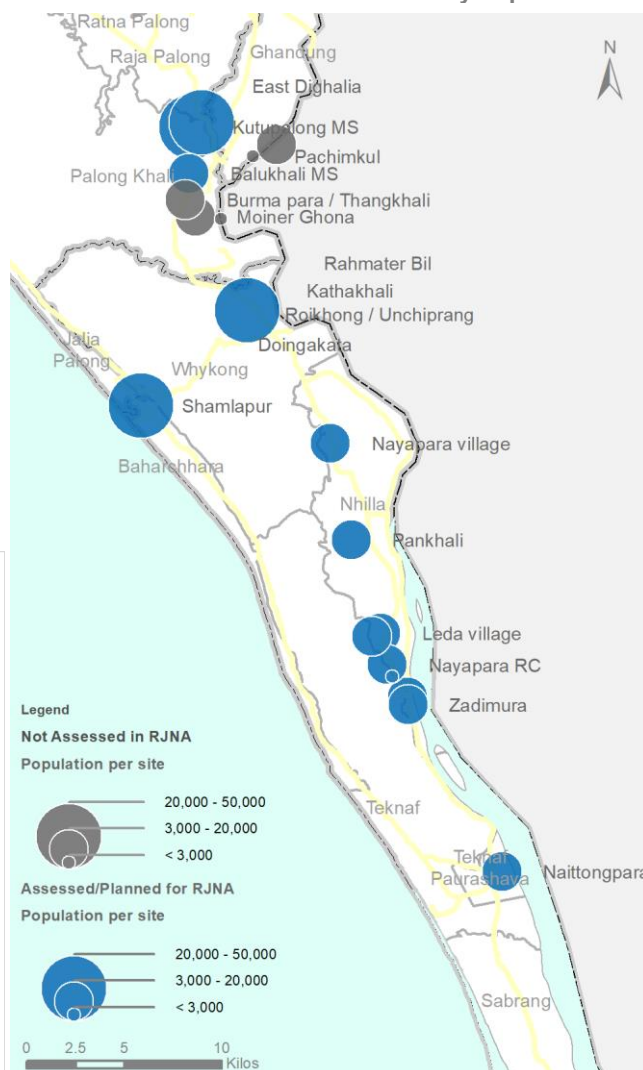
313,000 Accumulative arrivals since 25 Aug	156,000 Arrivals in Makeshift settlement / camp
90,000 Arrivals in host communities	67,000 Arrivals in new spontaneous sites



Key Observations

- Influx continued throughout the day, though was observed to be slower than previous days. Many new arrivals are still on the move and residing on the road sides, and are left out of the calculations due to the lack of comprehensive tracking mechanism.
- Discussions continue on allocation of land to accommodate new arrivals in the Kutupalong/Balukhali area. 1,500 acres are under consideration adjacent to Kutupalong Makeshift. The District Administration conducted a site visit today. People are already beginning to settle on some parts of the proposed land.
- Discussions also continue with MoDMR, Bangladesh Passport and Immigration department and the District Administration on biometric registration for security purposes.
- The Teknaf Metropolitan Area and Shamlapur are becoming overnight transit hubs. The local mosque committee, political leaders, and community leaders are providing basic assistance and then providing transport to move on to nearby settlements including Unchirprang, Balukhali, and Kutupalong.
- The local administration has been broadcasting messages in Shamlapur, Teknaf and Kutupalong roadsides for people to move on to the proposed camp at Kutupalong.
- A new spontaneous site is establishing at Rubber Bagan (old Gundun-2) and Jamtoli.
- The Local administration provided cooked food for 12,000 new arrivals at Kutupalong Makeshift.
- Reportedly the Local administration intends to start biometric registration of the new arrivals from tomorrow.
- The District Administration of Cox's Bazar has opened a control room to provide support from law enforcement agencies and local administration as required. The contact number of the control room is +88 01615700900. There

Influx Locations Assessed/Planned by Rapid JNA



Data Source: Rapid Joint Needs Assessment (as of 8 Sept).

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

is intention to include a field post at Kutupalong.

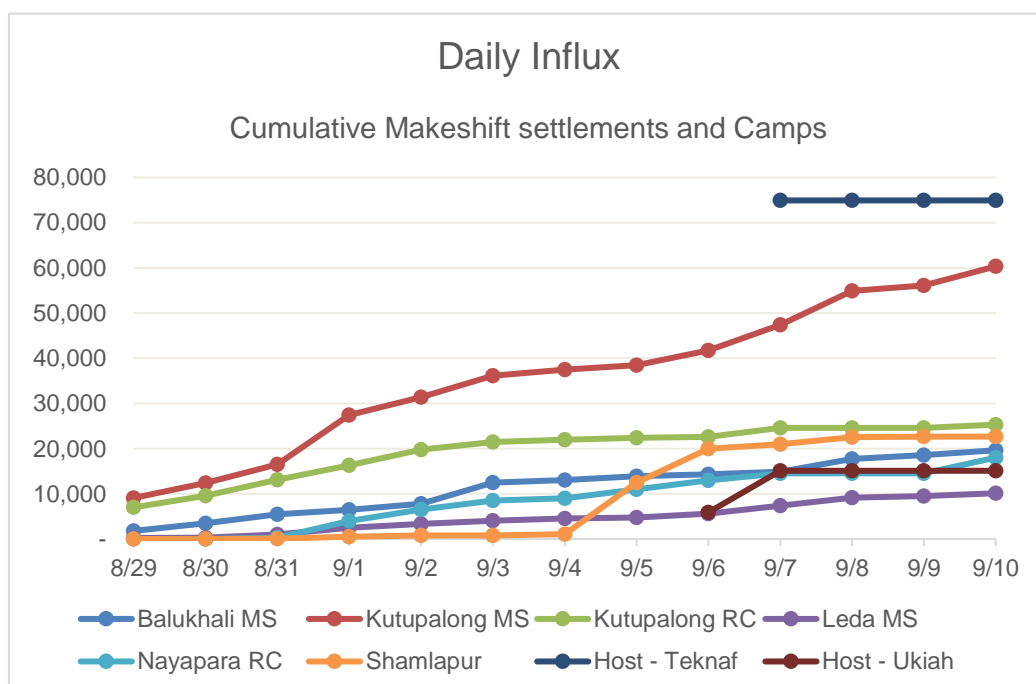
- Host communities are absorbing new arrivals, providing them with assistance and sharing shelters in Nhilla, Whykhong, Knajupara, Domdomiya, Nayapara village, Leda village, Unchirang area.

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

Location	Population prior to Aug Influx	Total Inflow (individual)	Total Population (combined)
Makeshift Settlement / Refugee Camps			
Balukhali MS	20,016	19,641	39,657
Kutupalong MS	79,479	60,320	139,799
Kutupalong RC	13,901	25,300	39,201
Leda MS	14,240	10,125	24,365
Nayapara RC	19,230	18,000	37,230
Shamlapur	8,433	22,650	31,083
Grand Total	155,299	156,036	311,335
New Spontaneous Settlements			
Moinar Ghona		16,740	16,740
Thangkhal / Burma para		11,600	11,600
Unchirang		27,000	27,000
Hakimpara		7,645	7,645
Jamtoli		1,680	1,680
Rubber garden(old gundum-2)		2,700	2,700
Grand Total		67,365	67,365
Host Community			
Teknaf	33,687	74,912	108,599
Ukiah	8,452	15,100	23,552
Grand Total	42,139	90,012	132,151
TOTAL UMN	197,438	313,413	510,851

Information Gap

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



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

Humanitarian Response - Sector Overview



Shelter/NFI and Site Management

Sector Coordinator
Charis Galaraga
cgalara@iom.int

ISCG Dhaka
Abdussator Esoev
aesoev@iom.int

Needs:

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

Response:

- Distribution reached 8,186 new arrival households since the influx.
- Distribution of 500 tarpaulins in Kutupalong MS for building 200 temporary sheds, which accommodated 1,600 families.
- Distribution of 100 tarpaulins in Shamlapur.

Distribution Planned:

- Distribution of tarpaulins continues in KMS.

Capacity:

- 17,066 plastic sheets are in stock to cover people in need.
- 1,000 shelter kits, 2,000 NFI kits, 5,000 kg rope and 3,600 sleeping mats are available in stock.

Gap:

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



Food Security

Sector Coordinator
Sunee Singh
sunee.singh@wfp.org

ISCG Dhaka
Damien Joud
damien.joud@wfp.org

Needs:

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

Response:

- 1,165 packet of biscuits have been distributed to the new arrivals from Shamlapur Women Friendly Spaces (WFS). A total stock of 3,000 fortified biscuits are pre-positioned in WFS.
- Second day of GFD (rice) reached a total 3,989 households, including 1,490 in Nayapara and 2,499 in Kutupalong camp.
- 2,000 food packets were distributed in Balukhali.

Distribution Planned:

- Fortified biscuits are planned for new spontaneous sites Moinar Ghona, Burma para and Hakimpara from 12 to 14 Sept.
- Rice distribution is planned for 2,200 households in Kutupalong camp and 2,180 in Nayapara camp on 11 Sept.
- Rice distribution is planned for 2,250 households in Kutupalong camp and 2,063 in Unchiparang on 12 Sept.
- Mobile distribution with cooked food is planned for 3,000 households
- Cooked food planned for 2,300 individuals in Kutupalong and 6,000
- 4,000 food packets (from the Turkish trucks) will be distributed by BDRCS
- Package (food + NFI + 1500 BDT) distribution for 5,000 HH in Unchiprang for 2 months, no start date
- Food packages of 1,500 households are planned.
- Package distribution of food, emergency shelter and WASH is planned for 4,400 households, starting this week pending clarity on approval.

Capacity:

- Fortified biscuits stock in pipeline.
- Rice available for Phase 2 GFD IKD (25kgs) to approximately 26,000 HHs/2017 NAs.
- 10,000 packets of pulses, suji, sugar and salt available.

Gap:

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

Needs:

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

Response:

- Two ring wells in Roikhong, Unchiprang were disinfected and one tube well repaired. Land excavation is planned, and setting up of a canal treatment for the community to have wider access to potable water.
- Water trucking in Unchiparang is mobilized and ongoing.
- 9,000 liters per day safe water distribution can be provided through mobile team, moving from Ukiah to Teknaf.
- Emergency water supply is ongoing by 9 Sept. 12 water tanks available for immediate response.
- Construction of 400 latrine chambers, 15 new tube well, 100 water tap installation in KMS and BMS continue.

Capacity:

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

Gap:

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

Needs:

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



WASH

Sector Coordinator

Naim Md. Shafiullah
Talukder

wash-cox@bd.missions-acf.org

ISCG Dhaka

Kawsar Alome

washhod@bd.missions-acf.org



Health

Sector Coordinator

Dr. Samir Kumar
HOWLADER

skhowlader@iom.int

Responses:

- Total number of new arrivals at facilities was 1,251, a total 141 ANC provided to new arrivals, 8 deliveries conducted for new arrival women, and 8 deliveries are conducted, and total 2 new arrivals are referred for OB emergencies.
- In Ukhia, OPD service is provided to a total of 464 UMN (new arrivals), IPD services to 7, ANC to 25, Delivery conducted for 3 mothers, Referred 8 cases for higher management, Injury cases were, SGBV -6 and AWD-64.
- Two Mobile Medical Teams (MMT) provided OPD consultation to 209 new arrivals in Unchiprang and Sabrang FWC.
- Leda Health Clinic, Leda Community Clinic (LCC), Rongikhali CC, Ali Akbar Para CC, Shamlapur FWC teams provided primary health care to at least 551 new arrivals patients.
- 2 patients referred to Cox's Bazar Sadar Hospital and 2 at Chittagong Medical College (CMCH) and 1 at Hnila centre.
- Majority of the referred cases were Lower Respiratory Tract Infection (83), Skin diseases 83, AWD 72, Injury 50, ANC 56, PNC 10.
- 4 normal delivery conducted by MMT (2 in LCC & 2 LHC).
- Teknaf Health complex received 15 new arrivals.
- Vaccination & screening on going at LMS.
- Medicine are provided to Border Guard Bangladesh (BGB) medical team to replenish their stock.
- PFA is provide to 883 new arrivals, 15 gun-shot injured patients, 11 children, 28 ANC/PNC, 15 trauma based counselling and 4 psychosis patients provided with treatment.
- 405 stress management session conducted.
- Total 1,062 new arrivals screened by midwives or SRH workers.
- Total 190 ANC provided to new arrivals by midwives
- Total 12 deliveries for new arrivals by midwives
- One obstetric emergencies referred by midwives
- 137 clean delivery kits distributed by midwives to new arrivals
- In Kutupalong camp: Total 320 consultations provided, 1 injury and 20 diarrhoeal cases were treated. 36 ANC, 4 PNC conducted by the midwives in the facility. No death and measles cases reported. 164 children were vaccinated for MR and 140 for OPV. 16 SAM cases were identified and treated.
- In Nayapara camp: Total consultation were 588 and among them 40 diarrheal cases. 12 cases were referred to secondary facility. 42 pregnant were received ANC services and 2 deliveries were conducted. 7 PNC services were given to lactating mothers. No death and no measles cases were reported.
- 118 Children have been vaccinated with bOPV and MR in Teknaf and 140 children vaccinated with OPV and 164 with MR in Ukhiya upazila.
- Line Director of EPI from DGHS sent a letter with a guiding principle of vaccinating the new arrival UMN children (all children below 15 years to be vaccinated)

Capacity:

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

Gap:

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

Needs:

- Emergency shelter and safe places are priority needs. Special arrangements need to be sought for Extreme Vulnerable Individuals (EVIs). Lack of safe space



Safety, Dignity and Respect for Individual Rights

Sector Coordinator

Yuko Doi
doi@unhcr.org

ISCG Dhaka

Showfik Tamal
tamal@unhcr.org

Child Centred Care Sub-sector Coordinator

Jannatul Ruma
jruma@unicef.org

ISCG Dhaka

Shabnaaz Zahereen
szahereen@unicef.org

GBV sub-sector Coordinator

Saba Zariv
zariv@unfpa.org

ISCG Dhaka

Saba Zariv
zariv@unfpa.org

increases the risk of exploitation and abuses.

- More timely and widely information sharing, clear and uniform messaging to influx population on humanitarian assistance through establishment of information hub/center, strengthen communication with communities to include direction on where to access food, shelter aid and other services, particularly for male-heads of house seeking resources for their families.
- Increased humanitarian assistance for Shamlapur which is experiencing pressure on Women Friendly Spaces since 27 August (1,157 total seeking assistance as of 4 Sept).
- Identify emergency safe shelter/alternative temporary shelter for survivors for violence who are in imminent danger, particularly unaccompanied child survivors of sexual assault
- Improved access, including without fear of arrest, of seriously injured/sick persons to medical facilities, including the stranded people at border area.
- Secure permissions and spaces for protective services targeting women and children in expanding areas of make-shift settlements, including child-friendly spaces and women and girls' safe spaces
- Ensure clear pathways for movement across the make-shift settlements that are accessible to persons with disability
- Establishment of safe, confidential spaces for case management services in entry points for GBV services available in make-shift settlements
- Distribution of safety and dignity items to women and girls including torch, clothing, soap, washable menstrual hygiene products, plastic sandals
- Stable power supply should be provided to ensure safety at night as well as stable provision of assistances including water and food.
- Strengthened family tracing mechanisms are needed for UASC and other separated families. Follow up and monitoring mechanism for EVI and unaccompanied children needed.
- Specialized services and psychosocial first aid are needed for trauma, survivors of SGBV and affected children. Children need access to safe spaces, psychosocial and recreational support.
- Increasing concerns of child trafficking especially adolescent girls among new arrival children as different child trafficking groups are active in the region.
- Presence of medical staff in CFS where numbers of children were found sick. Children are living under open sky beside the camps, roads and forests, with limited access to clean water and proper sanitation. Young children are suffering from cold, fever staying in wet cloths during intermittent heavy rains. Clothing is needed children.
- Distribution of safety and dignity items to women and girls including torch, clothing, soap, washable menstrual hygiene products, plastic sandals
- Introduction of menstrual regulation services at upazila- level health complexes and selected union family welfare centers to enhance service access
- 280 Emergency Recreational kits are required for new mobile CFS in new spontaneous settlements
- More CFS needed in new spontaneous settlements in South Balukhali in light of increasing influx.
- Identify UASC and adolescent girls are seen to be quiet & silent and not engaged

Responses:

- A total of 7 reported cases of GBV in make-shift settlements were referred to life-saving care
- An estimated 883 individuals (342 male, 541 female) received psychological first aid and 98 women received information regarding existing GBV-related services
- A total of 405 individuals (149 male, 256 female) engaged in stress management sessions
- Approximately 191 women and girls accessed services in Women Friendly Spaces, including 132 new arrivals.
- In registered refugee camps a total 925 UASC are identified till today (430 boys and 495 girls).

- 26 UASC identified (10 boys and 16 girls) in Kutupalong camp and 10 in Nayapara camp, 77 children received clothes, 3 mattresses, 2 mosquito nets and 2 pillows added to the save room. 11 UAC (5 boys and 6 girls) are in the child save room
- 54 individuals referred for services in Kutupalong camp (3 UASC were referred for medical services, 35 pregnant women were referred to RTMI and 10 EVI to medical services, 6 UNHCR support). 284 PSNs are identified to date.
- Information Point established in Kutupalong camp: from yesterday 4:30 to today 4:30- 36 missing and found children, and 18 reports of missing children by parents still missing
- 2 schools, 2 community kitchen and 5 community based shelters were monitored in block C of Kutupalong camp.
- 15 children are accommodated in Child Safe Space, a total 181 child got support in CFS. 66 children attend in MAPS
- A total 53 children referred to other service providers. 66 newly arrived children participated in hygiene awareness session arranged by child club.
- Three guards were appointed for NYP Child Safe Space (CSS). Another recruitments are in process.
- Token distributed to # 06 UAS Children for support.
- Members of CBCPC and CPV are engaged in community based initiatives of providing food and sheltering, in close coordination with Child Centred Care team in the settlements.
- Child club members are engaged in identification of UASC, referring children to CFS. One game show organized by child clubs of NYP and 65 newly arrived children take part in a story telling session.

Distribution Planned:

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

Capacity:

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

Gap:

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

Needs:

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



Education

Sector Coordinator
Md Sajidul Islam
msislam@unicef.org

Sector Co-lead

Responses:

- Out of 85 LCs, 83 LCs at Leda (59) and Shamlapur (24) makeshifts now operate for conducting the classroom teaching and learning. Only 2 LCs are using as a temporary emergency shelters for the pregnant women and young children
- 156 Learning Centers and 18 PG centres resumed to regular program.

Maheen Chowdhury
Maheen.choudhury@save-thechildren.org

ISCG Dhaka
Saltanat Builasheva
sbuilasheva@unicef.org

Co-Lead
Jacklin.rebeiro@savethechildren.org

Attendance rate is still low but it is increasing every day. Along with regular students, few fresh arrival students also attended in LCs;

- Teachers arranged community kitchen for newly arrived children, women and elderly peoples
- The teachers are providing support for referral pathway to the new arrival before and after school hours
- Teachers of makeshifts and registered camp have started home/shed visit to talk with children for wellbeing of them as schools are closed and children are at stress.
- All the teachers and staff are organizing series of meeting with parents, LCMC and Block leaders for recreation and learning opportunities of the UMN children
- The sector is in process to deliver EIE kit in new arrival areas in addition to continuity of education services for on-going EIE program for UMN children and education program in host community.

Capacity:

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

Gaps:

- Temporary shelter to be established for newly arrived UMN children for creating the recreational and learning opportunities by the partners organization

Needs:

- Referral and Blanket Supplementary Feeding for new arrivals.

Responses:

- Sector continued nutritional support for new fresh arrival through their existing nutrition program (EMOP, BSFP and nutrition caner from RC)
- In total 811 children were screened today in host communities including Balukhali and Unchiprang settlement among them 20 children identified as SAM.
- Sector started massive screening in Unchiprang settlement. Have plan to start mobile OTP from next week.

Capacity:

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



Nutrition

Sector Coordinator
Zahid Manir
mmanir@unicef.org

ISCG Dhaka
Mohammad Mainul Hossain
Rony
rony.hossain@fscluster.org

Inter-Sector Coordination Team

Inter-Sector Coordinator	Margo Baars	mbaars@iom.int	01757586391
National Coordination Officer	Saikat Biswas	sbiswas@iom.int	01713480305
Information Management Officer	Zhu, Ying (Dream)	yzhu@iom.int	01789173924