Humanitarian Response Coordination Architecture in Bangladesh Rohingya Refugee Crisis Operation

Practice, Challenges and Prospects

A Dissertation for the Degree of Masters in Disaster Management

By

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Abstract

Bangladesh is hosting over a million of forcibly displaced population who fled violence and ethnic cleansing in Myanmar. The new influx of around 400,000 people took shelter in peninsula of Teknaf and Ukhia of Cox’s Bazar. These arrivals have caused humanitarian crisis which is categorized as a one of global growing “refugee” crisis. The massive scale of refugee populations has led to life saving needs. Although Rohingya crisis has received huge global attention, efforts to continue to mobilize and sustain resources to cater to basic needs have people. In a changing humanitarian landscape, government with it humanitarian partners including UN, Red Cross and NGOs are striving for response coordination architecture to operate in complex humanitarian setting.

Evidence shows that parallel coordination structures do not benefit agencies to work in coordinated fashion rather they operate in isolation. Thus, overall coordination architecture is yet to form to guide an interoperable and coordinated response strategy. On the same note, working with own mandates, organizations, including government become unable to deliver integrated assistance and therefore it does not gain expected impact. This paper represents the issues of Rohingya crisis and the existing response coordination situation, problems, process and findings through literature review, key informant interviews (KII) of people directly involved in the complex operation and focus group discussions. The objectives of the study to analyze the coordination structure of humanitarian organizations in Bangladesh, in case of Rohingya crisis and compare with international standard. This paper will also find out the challenges and advantages of Cluster approach.
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LIST OF ACRONYMS

BBS
Bangladesh Bureau of Statistics
BDPC
Bangladesh Disaster Preparedness Centre
CDMP
Certified Disability Management Professional
CERF
Central Emergency Response Fund
CMAM
Community Management Of Acute Malnutrition
DA
Development Agencies
DDR
Disaster Risk Reduction
DTF
District Task Force
ECB
Emergency Capacity Building
ERD
Economic Relation Division
GDP
Gross Domestic Product
GET
Global Emergency Telecommunications
GLA
Global Logistics Cluster
HCT
Humanitarian Country Teams
HCTT
Humanitarian Coordination Task Team
IASC
Inter-Agency Standing Committee
ICRC
International Committee of the Red Cross
ICT
Information and Communication Technology
IDP
Internally Displaced People
INGO
International Non-Governmental Organization
IOM
International Organization for Migration
IRC
International Rescue Committee
ISCG
Inter Sector Coordination Group
IT
Information Technology
IYCF-E
Infant And Young Child Feeding Practices In Emergencies
LGD
Local Government Division
LRT
Logistics Response Team
MoCHTA
Ministry of Chittagong Hill Tracts Affairs
MoDMR
Ministry of Disaster Management and Relie
<table>
<thead>
<tr>
<th>Abbr.</th>
<th>Full Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>MoHA</td>
<td>Ministry of Home Affairs</td>
</tr>
<tr>
<td>MSF</td>
<td>Médecins Sans Frontières</td>
</tr>
<tr>
<td>MSU</td>
<td>Mobile Storage Units</td>
</tr>
<tr>
<td>NC4</td>
<td>NGO Coordination Council for Climate Change</td>
</tr>
<tr>
<td>NARRI</td>
<td>National Alliance for Risk Reduction and Response Initiatives</td>
</tr>
<tr>
<td>NFI</td>
<td>Non-Food Items</td>
</tr>
<tr>
<td>NGO</td>
<td>Non-Governmental Organization</td>
</tr>
<tr>
<td>NGOAB</td>
<td>Non-Governmental Organization Affairs Bureau</td>
</tr>
<tr>
<td>NTF</td>
<td>National Task Force</td>
</tr>
<tr>
<td>RC/ HC</td>
<td>Resident Coordinator/ Humanitarian Coordinator</td>
</tr>
<tr>
<td>RCRC</td>
<td>Red Cross Red Crescent</td>
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<tr>
<td>RRRC</td>
<td>Refugee Relief and Repatriation Commissioner</td>
</tr>
<tr>
<td>SGBV</td>
<td>Sexual and Gender Based Violence</td>
</tr>
<tr>
<td>SMA</td>
<td>Site Management Agencies</td>
</tr>
<tr>
<td>UNICEF</td>
<td>United Nations International Children's Emergency Fund</td>
</tr>
<tr>
<td>UNHCR</td>
<td>United Nations High Commissioner for Refugees</td>
</tr>
<tr>
<td>UNOCHA</td>
<td>the United Nations Office for the Coordination of Humanitarian Affairs</td>
</tr>
<tr>
<td>UN</td>
<td>United Nations</td>
</tr>
<tr>
<td>WASH</td>
<td>Water Sanitation and Hygiene</td>
</tr>
<tr>
<td>WFP</td>
<td>World Food Program</td>
</tr>
<tr>
<td>SOD</td>
<td>Standing Orders on Disasters</td>
</tr>
</tbody>
</table>
1.1 Background

According to Universal Declaration of Human rights, “All human beings are born free and equal in dignity and rights (UN, 1948). They are endowed with reason and should act towards one another in a spirit of brotherhood”. Human rights are inherent to every person as a consequence of being human. It is the fundamental freedom and dignity that every single human being is entitled to enjoy without distinction as to race, color, sex, language, religion, political or other opinion, national or social origin, property, birth or other status.

This thesis observes few significant issues of the human rights violation on Rohingya women and girl. The Rohingyas were forced to leave their homeland and fled to neighboring country like Bangladesh. The Rohingya’s had to face challenges in terms of camps and spontaneous setting which are undocumented. The Rohingya crisis is not only evolving on the identity crisis which leads to persecution and discrimination but also to the deprivation of fundamental human rights. The Rohingya people are the worst victim of state sponsored oppression and discrimination known as ethnic cleaning.

On 25 August 2017, violence had begun in Rakhine State, Myanmar, which has driven an estimated 509,000 Rohingya population across the border into Cox’s Bazar, Bangladesh (BBC, 2017). This exodus has become one of the fastest growing refugee crises in the world. Since then Bangladesh witnessed a massive influx of Rohingya people with very few possessions (BBC, 2017). They have limited access to shelter, water and sanitation, food, healthcare and other basic services in the sites where they have settled. All their savings were spent on transportation and while making shelter with bamboo and thin plastic. The basic services that were available are prior to the influx and are under severe strain due to the massive increase in population. The Rohingya population in Cox’s Bazar is highly vulnerable, many having experienced severe trauma, and are now living in extremely difficult conditions. The small peninsula of Teknaf and Ukhai became homes to around 1 million Rohingya populations and thus it has increased density of population in host community limiting their livelihood and economic opportunities. It has also created a tension over limited natural resources, social practices, values and norms as the Rohingya’s have taken jobs in construction, farming, fishing and restaurants, often accepting wages below half the normal rates. This has hit at least a third of the populations who are classified as very poor, and have experienced a double blow of low wages and rising prices.
Infrastructure, health and water services, which have been extended to the refugees by the District Government as a critical part of the humanitarian response, are under massive pressure. The environment, especially fragile forest and land resources, are being degraded.

The JRP lays out a vision for a coordinated response to address the immediate needs of the refugees and mitigate the impacts on affected host communities. Congested living conditions continue to foster risks such as disease outbreaks and fires. Rain and the monsoon season will cause flooding and landslides. The likelihood of such “crises within the crisis” exacerbates the already incredibly difficult circumstances faced by the refugees. On 14th September, the Bangladesh Government had allocated 2,000 acres of land for a new camp in Ukhia Upazila (Independent, 2017). The massive refugees are in urgent need of food security, WASH, shelter, site management, health and nutrition in both settlements and host communities. The Humanitarian agencies are still not operating to scale or with full coverage.

The Rohingya are an ethnic group. They are Muslim and are of South Asian origin. They have lived for centuries in the majority Buddhist Myanmar. The Rohingya crisis began in Burma from the British colonial period onwards. Their nationality was denied by the Burma Citizenship Law of 1982 (Amnesty, 1992). Some say they're illegal immigrants from Bangladesh, while the Rohingya people contended the fact and said that their ancestors were the natives of Rakhine state. They were not considered in the country's (Myanmar) 135 official ethnic groups and their citizenship is denied since 1982, which has effectively rendered the Rohingya people stateless (Star, 2017). They have been described as "the most persecuted minority in the world". The Rohingyas suffer from human rights abuse and the abuse range is from denial of citizenship, restriction on freedom of movement, obstacles to family system development, forced labor, land confiscation, arbitrary taxation, forced eviction, house destruction, deprivation of right to education, arbitrary arrest, rape, molestation, dishonor of women and more. Buddhist fundamentalism and anti-Muslim sentiment was also intensified in Burmese society.

In addition to a life-long experience of disenfranchise and discrimination, the Rohingya people have suffered traumatic experiences. The risk of being recruited to criminal activities or radicalization in displacement is likely to be multiplied due to lack of insufficient services like without basic needs being met and with no dignity. Although they are regularly referred to public health services, where they are supported by agency staff seconded to health complexes, they
face ongoing barriers to access to education and livelihoods. The sufferings of pregnant women and mothers with the newborn are in life-threatening condition. The Rohingya situation is urgent and complex. Rohingya women and girls are the victims of human rights violation in recent time. The humanitarian crisis has been embedded in the absence of their citizenship, statelessness and as a migrant refugee. According to a report it says in this year 48,000 women gave birth in the Rohingya refugee camps (Post, 2018).
1.2 Objectives

The principle objective of this paper aims to analyze the current humanitarian response coordination the structure in Rohingya crisis operation.

Numerous specific objectives of the study are as follows:

a. To find out the importance of collaboration between governmental and humanitarian agencies in response

b. To analyze the challenges and prospects of universal coordination architecture

c. To highlight underlying causes of problem in coordination

d. To identify the role of Bangladesh government and international agencies to inform interoperable response strategy
Chapter Two
2.2 Methodology

This paper represents the issues of Rohingya crisis and the existing response coordination situation, problems, process and findings through literature review, key informant interviews (KII) of people directly involved in the complex operation and focus group discussions. Focus group discussion followed by KII, mostly qualitative method along with quantitative research methods. The sample selection procedure of this study is purposive. The survey was conducted through a simple self-developed questioner by researcher.

Trend, flow and nature of new of influx of Myanmar population have been analyzed to suggest coordination structure and mechanism needs to deliver humanitarian assistance in a systematic way. Besides, a geomorphological, anthropological Rohingya-settled study and questionnaire survey for benchmark data were collected. To complete the interview, observation and recording technique were used to collect information about their livelihood. The interview was taken from those who fulfilled the inclusion criteria of the study. Permission was taken from every volunteer participant by using the consent form. At the beginning of data collection, researcher informed every participant about the ethical and confidential issues of this study. It was also informed that participant had right to refuse to answer any question of the research and also had the right to withdraw from any part of the research. All data of the research was used only for the research purpose and it was protected safely. Observation and individual household questionnaire mainly focused on the livelihood assets of the affected population in the study areas.

Literature review on Standing Orders on Disaster, Disaster Management Regulatory Framework and Humanitarian reforms 2015, IASC coordination architecture to review coordination practices in Rohingya refugee operation.
Chapter Three
3. Humanitarian Response Structure

3.1 International Organization:

Though the Humanitarian Charter can’t prevent humanitarian crises from happening, nor can they prevent human suffering but they can assist the victims of natural disasters and other emergencies. The International humanitarian coordination is concerned, as there are limited linkages and collaboration between the three humanitarian systems (UN, Red Cross/Red Crescent Movement, NGOs). However, there is a sense that the time has come for the humanitarian community to work collectively towards an inclusive system-wide coordination mechanism to which all stakeholders can feel a sense of belonging. For the humanitarian agencies, strategic guidance and national level government engagement is provided by the Strategic Executive Group (SEG) in Dhaka, which is co-chaired by the Resident Coordinator, IOM, and UNHCR.

This will also facilitate clustering at different levels where this model has a potential to increase efficiency in the use of resources. The ERC, in consultation with the IASC and major stakeholders, could designate an entity as Lead Sector to take charge and coordinate the development of the technical and management expertise and knowhow for the rest of the system. The system will operate at the regional as well as at the country level coordinated by the Humanitarian Coordinators and supported by Field IASC –Humanitarian Country Teams. The international forms of disaster management are follows in a picture.

![Diagram showing humanitarian response structure](image)

This picture shows the responding time of the disaster area which suggested by the UNOCHA, the minimum time to response in 12-48 hours.
The ERC are judged as good, and humanitarian coordination appears to be working well. The challenge is at the IASC level and in the donors’ community where there is an increasing demand on the ERC leadership to help to build a broader and more inclusive operational humanitarian community. This calls for a strengthening of the function (UNOCHA, 2001, 2015).

This graph shows the coordination of and planning of a disaster, which is a cycle of many tools of funding. Including the preparedness, Response, and Early Recovery are main pillar of this graphs.

In its current form and structure, the performance of the UN humanitarian coordination depends too much on the personal qualities, diplomatic skills, and military activities of the Resident Coordinator/Humanitarian Coordinator (Humphries, 2013, UNOCHA, 2012). Where these basic qualities exist, the system operates well. Where its performance is dismal, no stakeholder in the non-UN community feels attracted to be part of the system. In order to produce a larger number of outstanding Humanitarian Coordinators, the humanitarian community has to strengthen their system by properly selecting and training them well and provide them with the appropriate tools in order for effective systemic coordination to become the norm. The merged RC/HC position should be reviewed in order to meet a number of conditions required for an RC to be accepted as an HC by the larger humanitarian community.
Available tools and services by scale of disaster (as requested by affected Government)

<table>
<thead>
<tr>
<th>Emergency scales</th>
<th>Small</th>
<th>Medium</th>
<th>Large</th>
</tr>
</thead>
<tbody>
<tr>
<td>TECHNICAL TEAM MOBILIZATION</td>
<td>USAR “Light”</td>
<td>ERAT</td>
<td>USAR “Heavy”</td>
</tr>
<tr>
<td>TECHNICAL SERVICES MOBILIZATION</td>
<td>MCDA</td>
<td>UNHRD Network</td>
<td>INGO seed money</td>
</tr>
<tr>
<td>FINANCIAL RESOURCE MOBILIZATION</td>
<td>UN OCHA Emergency Cash Grants</td>
<td>UN Flash Appeal</td>
<td>UN OCHA Emergency Cash Grants</td>
</tr>
<tr>
<td>INFORMATION MANAGEMENT &amp; ASSESSMENTS</td>
<td>Humanitarian Coordinator</td>
<td>UNOCHA</td>
<td>Humanitarian Coordinator</td>
</tr>
</tbody>
</table>

Source: UNOCHA

In the collaborative approach for IDPs, the international humanitarian coordination system works by goodwill and consensus and depends too often on the HC authority and skills. While its role has to be maintained and reinforced, there is also a need to make progress in designing a more explicit model where, sector operational accountability will be clearly identified at the level of a designated organization, following standards to be agreed upon. Responsibilities to be covered under such a model are planning and strategy development, standard setting, implementation and monitoring as well as advocacy (Kaynak, 2014).

A number of tools for coordination such as contingency planning and preparedness, joint needs assessment, CAP/Appeals need to be developed as growing areas of collaboration between the UN, Red Cross/Red Crescent Movement, NGOs and IOM (IFEC, 2018). Also a number of operational procedures and practices such as human resource policies and procedures and financial management that the Red Cross/Red Crescent Movement are applying can find relevance and use in the UN system.
3.2 Aid from International organization for the Rohingya people

The JRP brings together over 130 partners. Some 127 international and national NGOs are known to be supporting the Government of Bangladesh in responding to the crisis. This includes at least 13 local, 45 national and 69 international NGOs. The vast majority of these NGOs work in various types of partnerships. A total of 12 UN agencies and the Red Cross and Red Crescent Movement are also supporting response activities. In addition, there are many more civil society actors, including faith-based organizations, and various government-to-government support programs present in the response.

There are currently 45 NGOs and UN agencies in Cox’s Bazar district that are active in various sectors, including the Red Cross movement and MSF.

UNHCR, the refugee agency for the United Nations has been working with Rohingya migrants since 1978. In addition to distributing emergency aid and shelter materials, the group gives protection and support to unaccompanied children, the elderly and survivors of rape and trauma. In the opening days of the crisis, UNHCR airlifted more than 1,500 metric tons of emergency life-saving aid to Bangladesh which included blankets, plastic sheets, sleeping mats, family tents, plastic rolls, kitchen sets, jerry cans and buckets (UNHCR, 2017).

UNHCR is working to mainstream refugee protection in all refugee settlements. It is trying to develop a referral system and safe spaces for survivors of gender-based violence. UNHCR has increased its presence in the field through the deployment of emergency teams and relief specialists in different sectors. UNHCR has appointed more than 80,000 refugee families with upgraded shelter kits, which includes bamboo poles, ropes, shelter-grade tarpaulins, sandbags, and tools (UNHCR, 2018). The Bangladesh government, supported by UNHCR along with its partners, has added 32 kilometers of brick roads and footpaths, 91 kilometers of drainage pipes, and has constructed 45 kilometers of steps across the settlement (UNHCR, 2017). Moreover, 63 kilometers of retaining walls and structures; 94 kilometers of drainage is being constructed; 2,324 meters of bridges have been built. UNHCR has also strategically prepositioned 116 storage containers with emergency aid and upgraded 20 community buildings and facilities in the Bangladeshi host communities (UNHCR, 2018).
UNICEF has dug hundreds of water wells and installed thousands of latrines. Along with that they have helped the Government to immunize 900,000 children and adults against cholera and have screened more than 250,000 children for malnutrition, disease and unsafe water. Because through an outbreak of cholera or diarrhea could kill thousands (UNICEF, 2017). The building of learning and recreational spaces for children is still on process as huge challenges are being faced. Children also face an uncertain future.

The fragile camps are built on sandy soil and steep slopes which must be urgently reinforced to avoid being swept away in the coming cyclone season. Meanwhile, young girls and children are at risk of sexual exploitation and gender-based violence and are prey to traffickers. According to Jean-Jacques Simon, UNICEF’s communications chief in Bangladesh, UNICEF is prioritizing shelter, food, water and to protect children and women. The group has installed water pumps and deep tube wells in the camps. Malnourished children are receiving therapeutic food and supplements. The group also announced to vaccinate 150,000 children against measles, rubella and polio (UNICEF, 2017).

IOM, the United Nation’s migration agency, manages camps and shelters, as well as also working to protect form landslide and other natural disaster in Cox’s Bazar (IOM, 2018). In addition to providing healthcare and sanitation, the group is scaling up programs to protect girls, women and others vulnerable to trafficking. IOM employs Rohingya refugees on a casual basis, and most of the 500 employees in Cox’s Bazar are Bangladesh.

Action against Hunger is responding to the Rohingya crisis with 700 staff members and 1,000 volunteers on the ground in Bangladesh, delivering hot meals and water. Health workers are treating malnourished children, while mental health counselors are providing support to refugees suffering from acute stress and trauma.

Save the Children has been working in Bangladesh since 1970. In addition to distributing essentials like tents, cooking kits and hygiene kits to the displaced Rohingya, Save the Children is paying special attention to helping children, particularly those who are not accompanied by family members. It says 1,400 staff members and volunteers are currently dedicated to the Rohingya response.
According to the group, doctors without Borders (known as Médecins Sans Frontières) have been working in Bangladesh since 1985. At least 2,000 staff members are treating ailments including severe dehydration, diarrheal diseases, violence-related injuries and cases of sexual violence. The International Rescue Committee is helping the Rohingya remaining in Rakhine, with 400 staff members and volunteers providing medical care and emergency relief (Frontières, 2017).

World Food Program is a United Nations agency that has been distributing high-energy biscuits to migrants as they have arrived in Bangladesh (WFP, 2017). With 88 employees on the ground, it will continue to address food scarcity through subsidies in rice and nutritional powder.

Humanitarian partners seek to meet the needs of all Rohingya refugees comprehensively and equitably, ensuring that both new arrivals and the pre-existing population’s needs are covered. Responses are provided on the basis of vulnerability, not status, to ensure all needs are met and to avoid generating conflict between groups. Programming that was ongoing prior to the influx are maintained, expanded or adjusted as appropriate for sectors to manage the current situation.

The first phase of life-saving humanitarian assistance focused on coverage of all those in need, regardless of where they are located. The first phase consists of rapid delivery of life-saving interventions, including clean water and temporary latrines; emergency shelter based on plastic sheeting, bamboo and technical support; fortified biscuits and rice distributions, mobile primary health care provision and establishment of early warning and surveillance systems. Information hubs are established to ensure people can be effectively screened and referred to available services. The largest site in Ukhia requires administration and management hubs coordinating the response from both the Kutupalong and Balukhali entrances.

Humanitarian partners seek to ensure that adequate site planning and infrastructure is put in place to support the population in safe, healthy and dignified sites of manageable size and with adequate water availability. Site Management Agencies (SMAs) are assigned and allocated to blocks and sites depending on size to ensure adequate monitoring and coordination at site level. The sites are to be spread and maintained at manageable size to mitigate the risk of outbreak and conflict. Site management teams deployed to each site coordinates services and ensures equitable governance and consistent community engagement. Communities will be appropriately engaged and consulted in site planning and relocation processes.
Humanitarian partners continue to strengthen efforts to evaluate the capacity of implementing partners and track programs with stronger reporting and auditing tools to ensure effective delivery of critical, life-saving programs. Moreover, support will be required to deliver rapid ‘emergency’ training sessions and on the job of mentorship to Site Management Agencies (SMAs) both locally and internationally, many of which have limited experience in camp management.

While agencies have started to scale up, the response is still far from adequate. Capacity was very quickly overwhelmed by the influx. Prior to the influx, there are only a few national NGOs partners operating in Cox’s Bazar, and they had already become overstretched as the international agencies turned to the same organizations for implementation. There is a need to identify new partners to fill up the gaps both expanding operational capacity and bring in expertise to improve coordination with national NGO engagement, and build capacity development for national NGOs in both technical areas and administrative functions (HR, finance, and management).

3.3 Aid from Nation Organizations for the Rohingya people

Since the beginning of the crisis, the Bangladeshi government set up a separate civilian authority to manage the refugee crisis. All domestic and international aid agencies must gain approval from this governing body to work in the country. Since September 2017, the government has deployed thousands of soldiers from the Bangladeshi military to manage the camps. The soldiers manage camp headquarters, where supplies are stored and guard the roads leading to the camps. The government has also set up a large surveillance system, which includes a network of internal and external intelligence officers. They control who can or cannot enter into the camps. But there are other issues that the government cannot completely control like the spread of communicable diseases and also the environmental damage and loss of biodiversity as the government cleared forest reserve land to build the camps.

Although, the urgent humanitarian needs of the Rohingya refugees and their host communities in Cox’s Bazar must be addressed. It has to be done in a coordinated manner, under the leadership of the Government of Bangladesh, the humanitarian community has engaged in multi-sectorial
needs assessments, consultations and strategic planning, which has culminated in this Joint Response Plan. The process has entailed ongoing bilateral consultations at the District level with the Deputy Commissioner (DC), the Refugee Relief and Repatriation Commissioner (RRRC), led by the Senior Coordinator for the Rohingya Refugee Response and the ISCG Secretariat, with Sectors engaging relevant line Departments and Ministries.

In common with all sovereign states, the government of Bangladesh bears primary responsibility for assisting its population during emergencies, as well as developing and implementing policies to reduce risk. Given the scale of disaster vulnerability in the country, it is little surprise that elaborate institutional and policy structures have arisen at national and regional levels.

BRAC was ranked as the No. 1 nongovernmental organization in the world by NGO Advisor. Of the 1,300 staff members directly serving the refugee population in Cox’s Bazar, Bangladesh, many are locals who speak a dialect similar to that of the Rohingya in Rakhine State. BRAC has also trained 800 Rohingya refugees as volunteers. The group is now focused on health, education and the protection of women and girls (BRAC, 2018).

The International Federation of Red Cross/Red Crescent Society is working together with RCRC Movement partners and contributing all sectors as defined in the response plan. They are part of all sectors at field level in order to ensure the coordination and effective implementation.

New international partners require clearance from the NGOAB, and their presence needs to be informed to the involved Ministries and DA. The Government position favors NGOs that are already registered in Bangladesh. NGOs have regularly faced difficulties in securing these clearances in timely manner, even before the influx. Advocacy on clearance and visa issues is needed to support scale up and consistency in operations.

Even before the influx, the response was focused predominantly in the makeshift settlements, again predominantly driven by prevailing restrictions and political constraints, but also due to ease of delivery and identification of beneficiaries. Rohingya that scattered in host communities and dispersed in the forests and villages are harder for humanitarian actors to identify and access. Physical access is heavily constrained, with limited roads to most sites now heavily congested with traffic and people, slowing access for humanitarians. Dirt roads have been rapidly destroyed
by rain and heavy vehicles, with a need for road repair to facilitate supply of aid. Concern for security in the makeshift settlements is increasing for both humanitarian workers and beneficiaries to provide and access services.

Bangladesh government has banned 12 local non-governmental organizations from carrying out humanitarian assistance operations for Rohingya people. The home ministry letter argued that as these NGOs were working without registration from the NGO Affairs Bureau, there accountability could not be ensured (NewAge, 2018).
Chapter Four
4.1 Analysis of Bangladesh Humanitarian Coordination Structure

Bangladesh also plays host to numerous partnerships and collaborations aimed at improving the performance of humanitarian action in the country. This includes a diverse range of actors, but is perhaps typified by the bilateral implementation relationships that exist between international and national NGOs in the country. ECB in Bangladesh has undertaken work both to boost the emergency response capacity of its member agencies, and to improve the humanitarian system in Bangladesh more generally. In particular this has included working alongside CDMP to improve knowledge of humanitarian principles and accountability, as well as to assist in building the capacity of state structures at the local level.

National NGOs undeniably play an essential role in the functioning of the humanitarian system in the country, primarily as implementing agencies. Despite this, and recognizing that partnerships may go beyond simple ‘sub-contracting’, the links between national and international actors appear to continue to be seen as bilateral – rather than recognizing the links that already exist between organizations or succeeding in bringing national actors into collaborative initiatives at the national level.
In case of Rohingya crisis, there are several gaps of Bangladesh which is mainly effect to protect the Rohingya people. The most important gap is absence of refugee status of Rohingya people; they called 'forcefully displaced Myanmar citizens' (Tribune, 2017). And Bangladesh is not ligature to UN treaties related to nature. Because of not a refugee, those displaced people are losing many opportunities and facilities which are legal rights of refugees. It may cause some of the criminal gangs are taken opportunities to involve and using them to criminal activities because of self-settled. Another problem with the local government and local people is due to lack of dialogue and collaboration with Rohingya. Many Rohingya women faced sexual violence and harassment by the local people. Because of similarity with the Chittagong’s language and cultures, many Rohingya integrated with the local people. Local government did not include Rohingya people with their development agendas. Most of the Rohingya people are extremely poor, uneducated, and inefficient. It is not possible to include them as a work force in Bangladesh. Rohingya people are not allowed to move outside the camp, though they have equal rights to move freely as a citizen, behind the reason to go back to Myanmar and get their rights equally. The inability to join with any kind of economic activities is becoming more risky.

4.2 Networks and humanitarian response in Bangladesh

The environment for the networks explored below is in many ways a microcosm of the environment for civil society in the country more generally: NGOs occupy a vital role in public life, but are not immune from the institutional and governance challenges facing state and other actors. There are a variety of networks, associations and other structures linking NGOs and other development actors in Bangladesh, spanning a range of sectors and issues, perhaps as a consequence of the relative weakness of state structures, and the vibrancy and breadth of civil society actors. Although many of these are of little relevance here, it is important to note the prevalence of such structures and that, in some cases, they cut across development and disaster response. The NGO Coordination Council for Climate Change (NC4), for example, has over 100 members, and exists in an attempt to create a common platform for local, national and international organizations around climate change issues. NC4 works on knowledge sharing, policy development and advocacy, and promoting community level adaptation. As well as working on issues related to disaster preparedness and risk reduction, it is also linked to the
disaster management community through the Bangladesh Disaster Preparedness Centre (BDPC), who host the NC4 secretariat.

Other networks have fewer apparent links to humanitarian response concerns, for instance the Equity and Justice Working Group, better known as Equity BD, a smaller network of NGOs, CSOs, and activists. Its main focus is economic justice and human rights, but it also works on DRR and climate justice. Equity BD’s secretariat function is in turn hosted by COAST trust, whose work includes both DRR and response. Humanitarian Networks Perhaps one of the most significant distinctions between the disaster response community and wider civil society in Bangladesh is the relative prominence of international actors in the disaster response sphere. These structures, notably the HCTT in relation to coordination and the NARRI Consortium as a funding channel, play a central role in humanitarian activities in the country, and include only a limited role for national NGOs. Although not formally networks, they display the characteristics of networked structures (notably through attempts to enhance the exchange of information and build trust) and, more importantly, fulfill functions similar to those that might be fulfilled by networks – most notably in their roles as conduits for information and resources. Despite this, there exist a small number of other networks serving national actors in in Bangladesh.

The existing refugees have put immense strain on infrastructure, services and the host population, overwhelming existing response capacity. Most of them, who have arrived, came with very few possessions. They are now reliant on humanitarian assistance for food, and other life-saving needs. Population movements remain highly fluid, with people settling into pre-existing makeshift or spontaneous sites before infrastructure and services have been established. Many sites are now alarmingly overcrowded, exacerbating risks to people’s security, safety and wellbeing. In these highly congested conditions there is an increasingly high risk of an outbreak of disease.

Many of the new arrivals are visibly traumatized and disoriented, suffering from the consequences of extreme violence, from the loss of or separation from family members, and from the ordeal of displacement. Rape, human trafficking, and survival sex have been reported among the existing perils for women and girls during flight. Children’s well-being and mental and physical development is affected by the incidents that led to their flight and there are growing numbers of separated and unaccompanied children being reported. Most newly arrived
children have not been able to access education since they arrived. Protection interventions and up-scaled outreach and referrals are needed to ensure that protection responses and services reach those most in need.

4.3 Vulnerabilities and Risks

Population suffers from gap in food consumption quality. Seventy-two percent of the children are not eating minimum dietary diversity and 63% of the women eat less than 5 food groups. Twelve percent of the populations have food consumption poor and borderline. On average 33% and 17% live below the poverty and extreme poverty lines. Primary School completion rate for Cox’s Bazar is 54.8% against the divisional and country level rate of about 80%. The situation is further compounded by the increasing displaced population, adversely affecting the food security and nutrition situation, and impacting the local economy by introducing a labor surplus which has driven day labor wages down and an increase in the price of basic food and non-food items. Further increases in population and density are likely to affect the basic road and market infrastructure that exists, resulting in the need to build up services, with congestion already a major problem that is limiting access and mobility around large sites.

4.4 Needs

Basic services that were available prior to the influx are now under severe strain due to the massive increase in people in the area; camps are concentrated in two upazilas, Ukhia and Teknaf, putting an immense strain on infrastructure, services and the host population.

The major logistics constraints faced by the humanitarian community in the emergency response are a lack of available storage facilities. This is further exasperated by a lack of suitable land in the area to allow for Mobile Storage Units (MSU) to be assembled as land is susceptible to flooding and there is existing standing water.

Although the road network in the country is generally favorable and the transport services seem to be adequate and available in the local market, some difficulties in roads accessibility are being encountered closer to the camps. The two roads, one coastal and one inland, that leave Cox’s Bazar heading south towards Ukhiya camp, are narrow two lane road and already heavily
congested with local traffic. The maximum suitable truck would be 10 MT only. The coast road is currently closed to truck movements.

4.5 Response Strategy

The Global Logistics Cluster support team has deployed a Logistics Response Team (LRT) to assess logistics gaps and bottlenecks and to facilitate access to common services and logistics information for all the humanitarian community.

The main needs identified by partners are for storage and coordination with the Office of the Refugee Relief and Repatriation Commissioner (RRRC) on permissions to access the Ukhiya camps, and with MoDMR for customs clearance procedures.

The limited storage capacity and the increased humanitarian activity have placed significant demand on common logistics storage in the area of Cox’s Bazar and the surrounding areas of the makeshift settlements. The Logistics Sector is setting up a Logistics Hub in the space allocated by the Government, a football pitch of 90 x 90 m in Ukhiya Degree College that will permit the erection of 13 Mobile Storage Units for a total of approx. 4,600 m³. It’s estimated that the Hub will be partially operative starting from Thursday, 5 October 2017.

Two Logistics Sector coordination meetings have been held on 25 and 28 September, with a total of 40 participants from 18 organizations attending the meetings.

4.6 Emergency Telecommunications Sector

4.6.1 Overview of Needs

To ensure common inter-agency emergency telecommunication services in all common operational areas, WFP, as lead of the Emergency Telecommunication Cluster globally, will support the Government of Bangladesh, ISCG and humanitarian community through deployment of staff for coordination and information management.

4.6.2 Response Strategy

The Global Emergency Telecommunications cluster support team has deployed an IT Emergency Officer to assess the ICT gaps and bottlenecks, and to facilitate access to telecommunications that are required for response operations.
Support also will be provided by augmenting the current in-country telecommunication service delivery in terms of technical staff and telecommunications equipment for the current response.

**4.7 Response Strategy to Nutrition**

The main priorities for the Nutrition Sector are:

- Timely provision of quality life-saving services on community management of acute malnutrition (CMAM) to affected children under five (boys and girls) and PLW.
- Timely provision of quality age-appropriate fortified supplementary foods, micronutrient supplements and deworming and nutrition education to affected children PLW and adolescent girls;
- Ensure protection, promotion and support for appropriate IYCF-E practices for affected women and children and enable access to relevant information about emergency nutrition services.
- Timely quality nutrition assessment and strengthening of nutrition monitoring/surveillance system.
- Strengthened Nutrition Sector Coordination and inter-sector coordination to ensure an effective, coordinated and integrated nutrition response;
- Provide technical guidance and training/capacity development support to implementing partners.

The Nutrition Sector partners will increase the number of nutrition service delivery points to optimize geographic and case coverage while minimizing overlap in service provision amongst partner programs.

Nutrition Sector meetings in Cox’s Bazaar will be the main platform for coordinating and providing technical direction for the nutrition response. The Nutrition Sector will activate a CMAM Technical Working Group and an Assessment Information Management working group to provide technical direction of the nutrition response. The Nutrition Sector will prioritize establishment of a core-pipeline of essential nutrition supplies to support the rapid scale up of the response and to ensure continuity in provision of nutrition services.
4.8 Multi Sector (Registered Refugee Response)

Shelter repair: An assessment of shelter conditions in the registered camps will determine the sheds most in need of repair or vulnerable to inclement weather and, among those, which house vulnerable refugees particularly women and children that should be prioritized for repair or, in the short term, temporary measures, such as plastic sheeting.

4.9 Health/Nutrition and WASH Repair

Health and WASH facilities overwhelmed by the influx will be cleaned and repaired alongside the building of new WASH facilities to ensure that any new arrivals remaining in the registered camps are not overburdening existing facilities intended only for the registered population. Water production is increased to allow for new arrivals living both inside and outside the camp to access adequate safe water. Nutrition screening will be undertaken to assess the effects of registered refugees sharing their food rations with new arrivals from both October 2017 and August 2017.

4.10 NFI Provision

Vulnerable registered refugees will be provided with supplementary NFIs to correspond to the actual number (as opposed to the registered number) of refugees living in a household.

4.11 Protection

In additional to the profiling and registration data updated on a continuous basis, Partners will be engaged or their capacities expanded to recruit staff and volunteers to train and coordinate additional community protection networks and referral systems. More refugee volunteers will be recruited for community-based protection and dispute resolution to maintain a meaningful ratio of refugees to volunteers. Awareness-raising campaigns on hygiene and the risks of SGBV, trafficking, and maritime onward movement will be undertaken, targeting the refugees most
vulnerable to such risks. Family tracing mechanisms will be established in consultation with ICRC for registered refugees who have lost contact with relatives in Myanmar.

4.12 Donating Through the Central Emergency Response Fund (CERF)

CERF provides rapid initial funding for life-saving actions at the onset of emergencies and for poorly funded, essential humanitarian operations in protracted crises. The OCHA managed CERF receives contributions from various donors mainly governments, but also private companies, foundations, charities and individuals which are combined into a single fund. This is used for crises anywhere in the world.

4.13 In-Kind Relief Aid

The United Nations urges donors to make cash rather than in-kind donations, for maximum speed and flexibility, and to ensure the aid materials that are most needed are the ones delivered.
5.1 Practice, Challenges, and Prospects

<table>
<thead>
<tr>
<th>SI</th>
<th>Challenges</th>
<th>Consequence</th>
<th>Outcomes/ Facts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Operational Constrains</td>
<td>Lack of proper policy for refugees in host country Bangladesh, and also lack of long term strategy.</td>
<td>Future assistance is uncertain by the donors.</td>
</tr>
<tr>
<td>2</td>
<td>Coordination</td>
<td>Several severe operational gaps and absence of preparedness.</td>
<td>Hindering the operation ad delaying the process as well as improper distribution of relief.</td>
</tr>
<tr>
<td>3</td>
<td>Accountability</td>
<td>Lack of controlled and coordination in between government and non-state stakeholders.</td>
<td>Inefficient and ineffectiveness use of cash and relief materials.</td>
</tr>
<tr>
<td>4</td>
<td>Localization</td>
<td>Local organizations claim of being overlooked for wider coordination.</td>
<td>The space is limited for other organizations.</td>
</tr>
</tbody>
</table>

The district has significant Government and social forestry reserves: the three pre-existing settlements, as well as the new proposed camp, are all on Forestry Department Reserve. In addition, there is a system of social forestry in Bangladesh which extends onto tracts of land surrounding the settlement areas. Encroachment onto these resources through establishment of shelters, and deforestation hastened by an expanding population gathering wood fuel, has long been a major source of tension between Government authorities, host communities and the displaced population. The solution needs to address both reduction in demand, and supplementing the stock of wood fuel. Even before the influx, the water table in Ukhia was dropping by 3 to 5 feet per year. Teknaf has always had water issues, with poor groundwater. The district has also long been slated for large-scale development in tourism and infrastructure, with 120 kilometers of coastline, and lying at a strategic position for the region.
Typical challenges:

- Massive population, not always accessible
- Diffused funding making it difficult to coordinate
- Widespread poverty, almost infinite needs
- To protect life and physical/psychological integrity
- To protect the integrity/dignity of persons
- Ensuring access to water, sanitation, food, shelter, health services
- To avoid and protect against discrimination in access to assistance (women, ethnic minorities, older persons, disabled, etc.)
- To Prevent and end exploitation of women and children
- To Ensure freedom of movement and the right to choose one’s place of residence in the context of forced evacuations or relocations.
- Complex features of the recurring & creeping disasters
- Lingering recovery

There is currently no Office for the Coordination of Humanitarian Affairs (OCHA) in Bangladesh. The absence of an OCHA office is a reflection of the increased capacity of state
actors and their ability to coordinate response, but also reflects the ongoing sensitivity within the state to the presence of formal humanitarian architecture.

5.2 Women and female-headed households

The majority of the people, 65 per cent, who have crossed since 25 August, are women and girls. Prior to the August 2017 influx, an estimated 19 per cent of the families were believed to be living in female-headed households19; it is likely that this figure has only increased. These families face numerous protection concerns, and are struggling to access lifesaving assistance due to security and cultural constraints. Prior to 25 August, 9 per cent of women were believed to be pregnant or breastfeeding. It is estimated that among the 26,000 newly arrived pregnant and lactating women, 15 percent will experience complications related to pregnancy requiring emergency obstetric care. Women have also reported high rates of gender-based violence, including incidents of sexual abuse and violence.

5.3 Children

Children face serious protection risks like psychosocial distress, neglect, abuse, separation from caregivers, child marriage, child labor and trafficking. Thousands of children have been separated from their parents or primary caregivers while fleeing into Bangladesh. Adolescent boys and girls face specific risks as they do not have access to education. Girls are particularly susceptible to early or forced marriage and sexual abuse, whilst boys face heightened risk of child labor, exploitation and human trafficking. They are vulnerable to malnutrition, health problems, and protection concerns. Improving access to community-based protection and quality child protection services is a priority for all children at risk. Abandonment of newborns as well as increasing risks of foeticide following the occurrence of previous sexual and gender-based violence, are a serious concern. Prior to this latest crisis, 5 percent of households were headed by children.

Need

There is an immense and urgent need to provide mental health and psychosocial support for refugees of all ages. Children have told of the horrific violence they witnessed in Myanmar,
including seeing family members killed and their homes burnt down. Many are burdened with the trauma of losing loved ones, the anxiety of acute fear, and/or the uncertainty of not knowing where their family is. Some have also suffered abuse and torture themselves, and were forced to watch family members tortured. Immediate and consistent mental health and psychosocial support services are crucial to help girls, boys and their families cope and begin to heal.

5.4 People with disabilities

Heavy rain has caused severe flooding in many of the areas where Rohingya communities are living, turning dirt roads to mud. The new sites that have been established since the recent influx often have no access points. As a result, people with physical disabilities are struggling to access aid due to access challenges and safety and security risks. Services and shelters are also not suitable for their needs and are placing them at risk. Similar risks are also faced elderly households, which constituted 11 per cent of all households prior to August. Due to situations that people are fled from, many people are reported to be highly traumatized.

The district is highly vulnerable to shocks, in an extremely fragile environment which has annual cyclone and monsoon seasons. Cox’s Bazar and Chittagong have been hit by more than three significant cyclones in the last two years. With weak shelters and little infrastructure in place, the displacement settlements are particularly vulnerable to impact. Climate change is also impacting the seasonal patterns. For Rohingya, limited scope to build self-resilience, and access to cyclone shelters have been recurrent issues that will now magnify.

5.5 Prospects

The Government of Bangladesh has triggered a wide response across Ministries, agencies, and the Military, and on 14 September allocated 2,000 acres of land for the establishment of a new camp. Local communities have been at the frontline of the response, providing food and basic items for new arrivals. National and international humanitarian agencies have rapidly responded in support of Government efforts. However, the scale of needs dramatically exceeds our current capacity to deliver. A rapid scale-up and comprehensive humanitarian response by all partners is critical at this stage.
<table>
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<tr>
<th>SL</th>
<th>D M Institutional Arrangements</th>
<th>Sector/ Inter Sector Coordination Group (ISCG)</th>
<th>Analysis</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>National Disaster Management Council</td>
<td>UNCT CXB/ ISCG Dhaka</td>
<td>➢ Individualistic and mandate based response, not guided by humanitarian response coordination principles</td>
</tr>
<tr>
<td>2</td>
<td>Inter-Ministerial Disaster Management Coordination Committee (IMDMCC)</td>
<td>Senior Coordinator</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>National Disaster Management Advisory Council</td>
<td>ISCG Coordinator</td>
<td>➢ Absence of clear leadership in humanitarian response strategies</td>
</tr>
<tr>
<td>4</td>
<td>Ministry of Disaster Management and Relief</td>
<td>Coordination Unit</td>
<td>➢ Parallel and <code>adhoc</code> coordination structures</td>
</tr>
<tr>
<td>5</td>
<td>Department of Disaster Management</td>
<td>Civil Military Call</td>
<td>➢ No registration of forcibly displaced Myanmar’s nationals</td>
</tr>
<tr>
<td>6</td>
<td>District Disaster Management Committee</td>
<td>NGO Support Call</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Municipal Disaster Management Committee</td>
<td>Field Coordination Call</td>
<td>➢ Poor institutional mechanism for quality control and compliances</td>
</tr>
<tr>
<td>8</td>
<td>City Corporation Disaster Management Committee</td>
<td>Situation Unit</td>
<td>➢ Protection, inclusion and gender issues are not respected</td>
</tr>
<tr>
<td>9</td>
<td>Upazila Disaster Management Committee</td>
<td>Communication Call</td>
<td>➢ Conflict of interest in terms of mandates</td>
</tr>
<tr>
<td>10</td>
<td>Union Disaster Management Committee</td>
<td>Information Management Call</td>
<td></td>
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<tr>
<td>11</td>
<td></td>
<td>Reporting Call</td>
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The Standing Orders on Disasters (SOD), published by the DMB, provides the key reference point for all actors in the preparation, response and recovery phases of disaster response. The SOD outlines the duties and responsibilities regarding disaster management at all levels of the state, and forms the reference point for a wide range of actors seeking to clarify the basis for their interactions with state authorities.
The District Authority has established a mechanism for receiving and allocating private cash donations and has made efforts to curb the outpouring of private donations that have caused congestion and generated risk along the Kutupalong Road. The District health complex continues to provide essential support for people requiring urgent medical attention, receiving referrals from the humanitarian primary health facilities, and extending vaccination campaigns to cover new arrivals, with the Civil Surgeon establishing a district control room. The Department of Public Health Engineering has deployed resources to provide water in the spontaneous settlements. Local communities have been at the frontline of the response, providing food and basic items for new arrivals.
The Government of Bangladesh Department of Immigration and Passports has initiated biometric registration of the Rohingya refugees with the support of UNHCR (Tribune, 2017).

The National Task Force (NTF), chaired by the Foreign Secretary with participation from 22 Ministries and Agencies is monitoring the implementation of the national strategy and remains in place to oversee influx response. At district level, a District Task Force (DTF) is monitoring and coordinating the implementation of the strategy on the ground, led by the office of the Deputy Commissioner. The Military has deployed to Cox’s Bazar. The members of the Task Force include Ministries like MoHA, MDMR, MoCHTA, MoC and different line agencies like NGO Bureau, BBS, ERD, LGD as well as security and intelligence agencies. There has not been a formal request for international assistance from the Government of Bangladesh. The Government has accepted bilateral assistance from Member States.
The Rohingya Refugee Crisis Response Plan is focused on life-saving and protection assistance for the most vulnerable people. The Plan targets 1.2 million people, including all Rohingya refugees, and 300,000 Bangladeshi host communities over the next six months (Bhatia, 2017). The plan prioritizes the provision of life-saving assistance, improving the conditions and management of settlement areas, as well as promoting protection, dignity and respect for the Rohingya refugees.

The plan also factors in a contingency for new arrivals that are anticipated in the coming months, as the influx continues day to day. Given the scale and the possibility of a rapid deterioration of conditions, which could turn the crisis into a catastrophe, partners remain committed to the principle that our plans must be grounded in capacity. We urge more experienced partners with relevant expertise to join the response, so that we are better able to cover urgent needs and save lives.

A rapid response from donors to this Response Plan is essential if the humanitarian organizations are to move ahead with critical activities to save lives, and provide protection to Rohingya
refugees in Bangladesh. As we seek to save the lives of all refugees and vulnerable host communities, and to provide them with dignity and hope for the future, I look forward to working with all stakeholders inside Bangladesh and international partners to ensure that principled, effective humanitarian action reaches those who need it most.
6.1 Conclusion

Bangladesh is one of the most disaster-prone countries. Bangladesh is exposed to a wide range of disaster hazards, and is consistently ranked amongst the most vulnerable countries in the world. In addition to natural disasters such as flood, cyclone and river erosion we are facing new kinds of challenges such as electrocution, slum fire, waterlogging and so on. There has been drastic reduction in the number of deaths due to natural disasters. But the situation has improved little with regards to loss of property. On an average, we lose around 3-5 percent of our GDP due to disasters. The ongoing changes taking place in Bangladeshi society, and the implications for NGOs and civil society, the structures designed to manage the risk of and response to disasters have evolved dramatically in recent years, and the outcomes of these changes are yet to be fully seen. The existing ecosystem of humanitarian assistance is not balanced in the favor of the local actors. The Government of Bangladesh does not issue refugees and asylum seekers with individual identity documents. Temporary documents issued by Government of Bangladesh are insufficient to protect against abuse. In refugee camps there is an urgent need to replace ‘family books’ with individual documentation in order to guarantee effective access to rights and entitlements, particularly for refugee women and children.

Community people and organizations at the local level have little involvement in the policymaking process of humanitarian intervention. They are basically being perceived as a beneficiary and local level implementers. In order to enhance the efficiency and effectiveness of humanitarian aid there is an urgent need to shift the power balance in favor of the affected communities and local level organizations.

The government does not involve non-government organizations. Though the local organizations have the capacity to implement any project these are heavily dependent on donors and INGOs due to resource constraints. That’s why these need to tap alternative funding sources. The private sector spends a large amount of money in their CSR programs. If the government formulates a policy to channel these resources to local organizations to implement humanitarian assistance projects, it will be a great boost for the local actors.

The Secretary-General of Humanitarian aid said urgently needs a fund of US$950 million. The shortfall is worsening conditions for hundreds of thousands of refugees living in fragile
conditions since fleeing a military crackdown in Myanmar last August. To address the ongoing 24 and increasing needs, a new Joint Response Plan was launched on 16 March 2018, requesting US$951 million to provide life-saving assistance to 1.3 million people, including Rohingya refugees who fled Myanmar to Bangladesh and local host communities. As of 1 October, the appeal remains less than 40 per cent funded. The priority needs in the plan, which covers the March-December 2018 timeframe, include food, water and sanitation, shelter, and medical care. Based on the scale and severity of the situation in Myanmar, and the movement dynamics to date, humanitarian partners will plan for contingency for 189,000 more people. Further influx will require additional land for further site establishment.
Reference


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