

## Flooding and landslides Response Update

Week 1- 27 July to 3 August 2021



*HOPE Field Hospital, before and after the flooding, which took place on 26-28 July 2021*

### Background

A heavy monsoon rain on the night of 26 July and during the day on 27 July 2021 triggered landslides and flooding the refugee camps in Bangladesh. ISCG Flash update on monsoon response of 29 July 2021 reported a total of 21,606 Rohingya refugees affected, 6 Rohingya refugees' fatalities, 13,432 Rohingya refugees displaced and 3,851 Rohingya shelters destroyed. According to data, the most affected camps are Camps 3, 4, 5, 12 and 19. UNFPA-supported facilities HOPE Field Hospital, located at Camp 4, was submerged by water, including the pharmacy, maternity ward, storage area, administrative area, child ward and doctors' residence. As a result, many life-saving and valuable medicines got lost, damaged machinery and equipment, important files and documentation lost, and furniture destroyed.

With all these impacts, the **HOPE Field Hospital** is trying its best to continue the provision of 24/7 service for the patients. UNFPA has been working around the clock to provide technical support to HOPE and partners on the ground to assess the situation and repair process to restore the services. The repair consists in **replacing electrical outlets, wires and cords damaged under water**. UNFPA is currently assessing the damaged related to medicines and equipment as well as reviewing the stocks commodities. To continue services in this adverse condition, UNFPA needs instant logistics, medicine and financial support from our donors.

**Sexual Reproductive Health and Rights**



*Maternity ward flooded in HOPE Field Hospital*

- **HOPE Field Hospital**, the only **Comprehensive Emergency Obstetric and Neonatal Care (CEmONC)** and **24/7 SRHR facility in the Rohingya refugee camps** is one of the worst affected facilities;
- Flooding damaged medicines and other logistics items in the hospital's stores, including **soaking of hospital documents** (hard copies: patient files from previous years, employee records of last years, register books of previous years, old stock registers of last years);
- Damages have been reported to **neonatal ward**, including to **oxygen concentrators and suction devices** - newborns receiving care in this department were referred

to a nearby partner facility;

- Additional damages of walls to **maternity postnatal ward, doctor's rest room, kitchen/dining area and many hospital beds**; additionally, bedding and mattresses got soaked and still did not have the chance to dry -lack of sun;
- The flooding destroyed the **drum containing fuel for the generator**, which powers the whole hospital, including the water filtration and drainage system; breeding of mosquitoes in surrounding water and pest problems cause exacerbation of asthma and spreading of mosquito borne diseases. Moreover, as employees continue to work in dirty water, they face different kinds of skin problem like rash and itching; finally, due to the contamination of the water filtrage system, some staff lost motion;
- Three more **facilities in Camp 4, 7, 26** are also waterlogged, although the facilities remain open, serving those who can access;
- Health personnel and community volunteers clean up the damages caused by the flooding in HOPE field hospital;
- Client flow has significantly reduced due to roads washed away by the heavy rainfall and health facilities are not reachable by both clients and service providers; as HOPE is the only 24/7 hospital functioning in the camp care for emergency obstetric care, if emergency



*Health personnel and community volunteers clean up the damages caused by the flooding in HOPE Field Hospital*

referrals are not managed in the hospital, it will interrupt the whole referral pathway, putting a risk the lives of both mothers and newborns;

- SRHR and covid-19 related community mobilization and awareness activities are ongoing but with significant challenges. **Community Health Workers (CHWs) sheds in camps #4, #7 and 25 have been flooded and are partially damaged.** CHWs have lost contact with some of their clients who had to relocate from damaged shelters. The flood-affected people have been relocated into safer spaces, in different areas of the camp. Roads are dangerous for movements, and the camp mobile network has not been functional to keep communication going. CHW are in touch with focal people (Mahjis) for respective camps, as well as the CiC office concerning any updates.

### Gender-based violence (GBV)



*Temporary tent installed by UNFPA to provide psychosocial support to women and girls in the refugee camps*

- The GBVIE team conducted an assessment of **Women Friendly Spaces** affected by the heavy rain and flooding on July 28th in **camp 9, 13, 2E, 1E** and two host communities to assess the damages and the impact on service delivery and vulnerable women and girls;
- Temporary tent installed by UNFPA to provide psychosocial support to women and girls in the refugee camps;
- All **27 UNFPA's supported Women Friendly Spaces** (20 in camps and 7 in host communities) have remained operational despite the destruction caused by the rain with the tremendous support of **community volunteers** who worked tirelessly to clean up the damages. Many women

and girls have been coming to the **Women Friendly Spaces** during this emergency **seeking information and support; taking shelter, receiving services and utilizing wash facilities;**

- **Integrated lifesaving SRHR- GBV services** continue to be provided in all locations with **midwives supported by case workers and volunteers.** Coordination at camp level for emergency relief and distribution is ongoing;
- UNFPA has **dignity kits pre-positioned in all Women Friendly Spaces** (20 in each facility) of which **119, out of the 1,152** distributed by GBVSS partners to women and girls, as of 1 August 2021;
- The **MHPSS team is ensuring Psychological First Aid (PFA)** for affected women and girls using the existing pool of trained case workers and volunteers;
- UNFPA has deployed 9 GBV case workers as part of the Protection Emergency Response Unit (PERU) to respond to protection needs exacerbated by this crisis;



*Integrated SRHR-GBV services continue to be provided in the refugee camps of family planning, protection against gender-based violence and midwifery services*

## Adolescents and Youth (A&Y)

- A field visit was conducted on 28 July 2021, visiting Camps 3, 4, 5, 7, 9 and 10, where **Menstrual Hygiene management kits (MHM kits)** are currently stored;
- To address the immediate needs of adolescent girls, the A&Y team is working with implementing partners, DanChurchAid and Plan International and currently distributing **1,114 Menstrual Health management kits (MHM) to adolescent girls in camps 7, 8e, 9 and 10.**
- While adolescent girls need menstrual health management kits, **adolescent boys identified clothes as an immediate need**, as well as **MHPSS materials**, which will provide **relief from boredom, stress and anxiety about the current situation.** However, they expressed they were unaware of where to access these services and materials. Additionally, adolescent girls noted that a lack of access to mobile phones and confined spaces prevents them from accessing remote services like Alapon Helpline; **Awareness-raising sessions** have been continuous since the start of the national lockdown: **Youth mentors and the Champions of Change sessions** play an essential role in sharing information about the Alapon Helpline; Specifically for the flood response, the A&Y team proposes to conduct **microphoning** to increase adolescent boys' knowledge about Alapon; for adolescent girls, A&Y has procured **mobile phones** to enable them access to Alapon



*Adolescent girl sharing her concern of living in fear of dying in landslides, after the deadly flooding of 27th July 2021*



*Psychosocial support activities in the refugee camps, in the times of covid-19 and after the dreadful flooding of 26/27 July 2021 is essential in keeping young people motivated, safe and united*

outside of their homes;

- There is still a significant need for **additional MHM kits and waterproof bags to protect clothing;**
- UNFPA/A&Y is currently developing additional strategies to address the MHPSS and protection needs of adolescents and young people in the camps. To this end they are working to secure funding for the procurement and **distribution of torchlights** (for safety and security) for adolescent girls; **PSS kits to address issues of boredom, frustration, and anxiety;** and **megaphoning of key messages on child marriage, sexual harassment, human trafficking, AYSRHR, disaster risk reduction and the promotion of MHPSS services like the Alapon helpline.**

## Protection sector - GBV Sub Sector coordination

- The GBV Sub-Sector is working in close collaboration with its **52 partners** to provide updates to the ISCG, identify imminent needs for the emergency response, and coordinate closely with GBV focal points of camps and host communities to develop a coordinated response strategy;
- The GBVSS Coordinator and the GBVSS Field Coordinator conducted a field visit on 29<sup>th</sup> July (Camp 1E, Camp 1W, Camp 6 and Camp 13) to observe **safety concerns, conduct safety mapping and safety walks or assessments**;
- **79 Women Girls Safe Spaces (WGSS)** are currently open. *Among 18 reported organizations, 12 facilities are open during the flood & 2 organizations are providing shelter to the families mainly women and children;*
- **2 learning centers** of UNFPA implementers run by Mukti in camp 1E sheltering displaced families were visited to assess safety concerns and GBV mitigation risks;
- UN Women WGSS center run by ActionAid Bangladesh, with 3 households being sheltered in camp 4 from 27th July. UNICEF supported 2 more WGSSs that are ready to use as a shelter. 66 PSS volunteers of “Rokeya Foundation” and their family members are being sheltered in their multi-purpose center which is located in Camp 14;
- GBV sub sector is assessing facilities and WFS opened to host displaced households and individuals, and check storage conditions, localization and distribution plans of **18,174 dignity kits prepositioned and additional dignity kits or other essential needs or items identified by partners. 1,152 dignity kits have been already distributed by 4 GBVSS partners (27July-31 July)**;
- Some GBVSS partners are relying on GBV case managers to conduct **rapid needs assessment to evaluate damages and identify imminent needs (i.e. International Rescue Committee)**;
- During this visit, the GBVSS Coordinator conducted interviews with different key roles (CiCs, case managers, GBV focal points and Complaints Feedback Mechanism Officials or volunteers) to assess **referral pathways, Information and Feedback Centers or the visibility and location of PSEA awareness posters with hotlines and contact details of d GBV Focal Points in WFSS that remain opened and being used during the strict Covid-19 measures** The GBV SS Team, during the field visit also contrasted the increased GBV capacity after the recent Protection mainstreaming training, developed with the support of the GBVSS, is also helping to identify or report GBV/PSEA cases and refer them to timely, appropriate, quality and available services will also be assessed;
- GBVSS/UNFPA continues collaborating with the Child Protection Sub-Sector Coordinator, PSEA Coordinator and the Protection Sector Coordination team to better coordinate the response and



*Women cooking in a learning center in Camp 1E, where 5 Households spent the night, 14 individuals*



*GBV Sub Sector Coordinator talks with a midwife and case workers in the refugee camps, in the aftermath of the flooding*

to implement **key emergency protection activities** through essential or front line workers already trained to identify or deliver GBV related services during COVID-19 strict measures;

- **Through the coordination of the GBVSS, in collaboration with GBV focal points and CiCs, the sub-sector is coordinating interventions at the camp level** to rationalize service delivery and capitalize on existing supply-chains or facilities. A Whatsapp group administered by the GBVSS Coordinator has been created with GBV focal points for the Monsoon response-to collect direct communication in order to strategize a response based on relocalization of services;

- The GBVSS Coordinator is **mapping existing complaint and feedback mechanisms to report PSEA and the understanding of GBV and PSEA by frontline workers and the importance of confidentiality and a survivor-centered approach.**

## Funding requirements

UNFPA needs a total of 400,000 USD for the **procurement of dignity kits and clothes** to be distributed to vulnerable women and girls. To address the needs of adolescents and youth, UNFPA will require 300,000 USD for the procurement of **menstrual health management (MHM) kits, torchlights, psychosocial support kits, dry bags, clothing and megaphones**. Immediate inflow of financial support would be allocated to the purchase of **medical supplies, cleaning materials, furniture, electronics and medical equipment in HOPE Field Hospital**, for an amount of USD 800,000. The long term support, for the amount of USD 1,450,000, would be used to renovate the hospital and build stronger boundary walls for security and avoidance of future happenings

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