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Bangladesh (Rohingya Influx)

Health Situation Report 19 October 2017

Since the start of violence in Rakhine State, **over half a million** (582,140) people have fled Myanmar and arrived in Cox's Bazar, southern Bangladesh, according to the estimate of the Inter Sector Coordination Group (ISCG) hosted by the UN's Migration Agency (IOM). Numbers spiked again in the past week when over 18,000 Rohingya crossed into Bangladesh, fleeing what has been described as 'ethnic cleansing'.

The speed and scale of the influx has resulted in a critical humanitarian emergency. The people who have arrived in Bangladesh came with very few possessions. They have used the majority of their savings on transportation and constructing a shelter, often out of no more than bamboo and thin plastic. They are now reliant on humanitarian assistance for food and other life-saving needs. Basic services that were available before the influx are under severe strain due to the massive increase in people in the area. In some of the sites that have spontaneously emerged, there is no access to water and sanitation facilities, raising the risks of an outbreak of disease. The Rohingya population in Cox's Bazar is highly vulnerable, having fled conflict and experienced severe trauma, and now living in extremely difficult conditions.

IOM is working closely with WHO to coordinate health response planning. A revised emergency health sector response plan for the next 6 months has been created to address short- and medium-term plans for addressing

the acute health needs of the population. IOM continues responding to the influx with coordination and programmatic efforts, including expansion of existing health services, provision of new services, mobile medical teams, and has been providing services including: emergency health, primary and secondary health care, sexual and reproductive health, maternal and child health, mental health and psychosocial support, as well as referral services. Despite efforts, current responses are insufficient and need to be scaled up to save lives and improve health of children, women and men affected by this crisis.



Rohingya children waiting to receive oral cholera vaccine

Situation Overview

582,140

Cumulative Arrivals Since 25 August

212,518

Pre-influx Population of Undocumented Myanmar Nationals

Source: ISCG SitRep, 17 October 2017

47,764

People Provided with Clinical Consultations by IOM

161,228

Children and Women Vaccinated

3,285

Women Received Pregnancy-related Care

12

Health Facilities Supported

Source: IOM Bangladesh September 2017

Needs

- All new arrivals require **health assistance**.
- Crowded living conditions with lack of adequate water and sanitation (WASH) continue to present **significant risks of communicable disease outbreak**.
- All new settlements need scale up of Health Care services, including **mobile services to access those in hard-to-reach areas**.
- Health care services implemented at settlement level lack standardization, **quality of care** needs to be reinforced.
- Insufficient accessibility to **inpatient and secondary health facilities**, including referral system. Need to reinforce existing hospitals and additional inpatient service delivery.
- Insufficient services in **essential reproductive health** as well as **maternal, child and newborn health services**, especially in hard-to-reach areas.
- Insufficient **clinical management of rape survivors, family planning** as well as adolescent friendly health services.
- Need for **scaling up and standardization of the community health workers (CHW's) network**, to ensure adequate health/hygiene promotion and continuum of care.



IOM medical staff works at Ukhiya Health Complex

IOM Response

- IOM medical teams provided a total of **47,764 clinical consultations** since 25 August till 18 October, including 21,715 consultations in Ukhiya and 26,049 consultations in Teknaf.
- From the 12 health facilities, **866 cases were referred** to higher-level health care facilities in September 2017. A mobile health camp has been set up in Shamlapur.
- **926 health outreach events** were held in Ukhiya and Teknaf in September, and among them, 877 were courtyard meetings with a participation of **21,520 individuals**.
- A total of **3,285 women received pregnancy-related care**, including 2,438 antenatal care, 504 postnatal care, and 343 deliveries, in September.
- **Cholera vaccination campaign** has been launched and reached a total of **700,487 people** by 19 October.



IOM health team providing services at Shamlapur Health and Family Welfare Centre (H&FWC)

1. Support to Existing Facilities

IOM provides health care services to **over 1300 people each day**. Delivery facilities and patient stabilization unit have been activated in IOM Primary Health Care Clinic in Kutupalong, Ukhiya, where **24-hour services** have been launched. IOM has also scaled up services in its existing 12 health facilities, including the provision of 24-hour services in Leda Health Clinic, Shamlapur and in 2 Upazilia Health Complexes, where IOM provides support to government health facilities.

2. Emergency Health Care

IOM immediately mobilized **3 mobile medical teams** which are visiting new spontaneous settlements providing primary health care, and is planning on adding additional mobile teams to cover the expanding additional population.

IOM will treat people with dehydration caused by diarrhea by providing **oral rehydration solutions (ORS) in 60 tents**. IOM has started planning discussions in collaboration with IOM's dedicated site management team on construction of new Primary Health Care centres and Diarrhoea Management Units within new settlements.

3. Referral Supports

IOM is committed to strengthening referral systems, with **11 ambulances** currently in operation for emergency referrals. IOM additionally plans to purchase 10 new ambulances to allow for more efficient referral pathways. IOM understands the importance of and is in the process of facilitating the strengthening a variety of referral pathways, coordinating with other implementing partners so as to ensure greater efficacy and communication systems are in place.

4. Outreach and Health Education

IOM has scaled up outreach and health education as a fundamental preventative measure. **IOM has mobilized an additional 150 community outreach workers in addition to the existing 200**, to conduct house-to-house visits in order to provide people with further assistance (and target those who otherwise may struggle with accessing services), and assist with referrals. In addition, health outreach workers ensure those targeted receive vaccines during the measles, rubella and polio vaccination campaign as well as cholera vaccination campaign.

5. Mental Health and Psychosocial Support

There is a growing demand for mental health and psychosocial support (MHPSS) services among Rohingya who suffered from violence in Myanmar. IOM facilitates MHPSS services for about 120 beneficiaries each day. In addition, IOM coordinates with implementing partners to ensure that each new post that is constructed have a specifically designated MHPSS services available. IOM is working closely with partner agencies to ensure MHPSS is provided for the affected population.



People waiting to receive care at a government health facility supported by IOM in Shamlapur. IOM seeks to scale up services in order to deliver health care to the increasing number of people who recently arrived.



IOM volunteers make door-to-door visits to ensure those targeted receive the vaccine.

Cholera Vaccination Campaign

Massive cholera vaccination campaign has been launched by Ministry of Health and Family Welfare, supported by IOM and Health Partners including WHO, UNICEF, IFRC and others, in order to prevent an outbreak of cholera among over half a million Rohingya in Cox's Bazar.

The first round of the campaign will administer oral cholera vaccine (OCV) to 700,487 Rohingya men, women and children, aged one year and above. More than 200 mobile vaccination teams, each with five members, have been mobilized and dispersed across 12 Rohingya camps and makeshift settlements to roll out the campaign. IOM mobilized 200 volunteers to conduct the campaign. IOM volunteers will go house to house, together with community focal points members, to ensure all the Undocumented Myanmar Nationals receive the vaccine to protect them against cholera.

In the second round of the campaign, 250,000 children between the ages of 1 to 5 will be given a booster dose between 14 days and 3 months after they received the previous dosage.



A Rohingya boy receives one of the first Cholera vaccine doses, at a UN Migration Agency (IOM) clinic in Jumbali, in the world's second largest mass immunization for the disease which started on October 10th. Photo: Muse Mohammed / UN Migration Agency (IOM) 2017

Story

Baby Abdul was saved by medical teams at IOM's Leda Health Clinic helping Undocumented Myanmar Nationals.



Baby Abdul with his mother Fatima at the IOM clinic

He was 19 days old and weighted only 1.5 kilograms, when his mother, Fatima, 26, rushed him to IOM's Leda clinic, realizing that he was sick and in danger. IOM doctors immediately saw that he was malnourished and dehydrated. Born prematurely in a Undocumented Myanmar Nationals settlement, he was also at risk from septicaemia.

Medical staff sprang into action to save him and attached an IV tube to his head to feed and rehydrate him.

Weighing just 1.2 kilos at birth, Mohammed was less than half the average 3 kilos of a baby born at full term.

Fatima told doctors the baby was initially able to breast feed, pass urine and stool normally, but that all stopped a few days ago when he became ill.

Leda clinic staff stabilized Mohammed before transporting him and his mother in an IOM ambulance to Cox's Bazar's Sadar hospital for further tests.

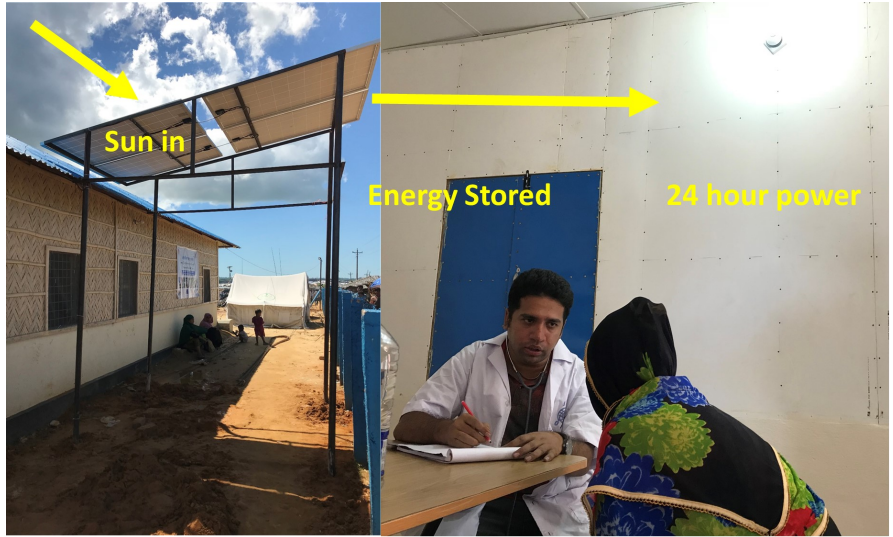
Abdul slept peacefully in his mother's arms. This is just one story in a sea of humanitarian needs.



Shedding Light on the Crisis: 24-hour clinic in the Rohingya camp

IOM has launched the first 24-hour clinic inside the largest Rohingya camp (Kutupalong Expansion Camp), thanks to the partnership with Solévolt, BPO Data Exchange, and Kopernik. The clinic has installed Solévolt solar energy systems to power clinics and provide outdoor lighting and mobile phone recharging to the surrounding camp population.

The partnership has meant that a primary health clinic initially built to provide general care can now provide 24-hour services including primary health care, consultation and medicine distribution, emergency stabilization and referrals and critically important 24-hour delivery room services for pregnant women.



Now the clinic is able to provide around the clock emergency consultation and medicine distribution

IOM is seeking \$ 9 million in order to provide services for this rapidly growing population.

IOM Health Appeal

\$ 9 million

Current funding

\$ 1.9 million

Donors



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