

Real-time case study on links between development and humanitarian programming for Rohingya refugees in Cox's Bazaar, Bangladesh

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Who are the Rohingya?

Distinct Muslim ethnic group from Rakhine state in Myanmar

Estimated global population:
1.5 - 2 million people

Prior to August 2017 there was an estimated 1 million in Myanmar, with large diasporas in Bangladesh, Pakistan and Saudi Arabia.





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A History of Persecution

Rohingya is **not** one of them.
There are **135** distinct ethnic groups officially recognised by the Myanmar government.
Rohingya were excluded from the citizenship law, and instead rendering them **stateless**.
Myanmar government claims they are illegal Bengali migrants from Bangladesh.

Warning: Graphic content



1992: Conflict and Refugee crisis

More than 250,000 Rohingya civilians forced out of northern Rakhine state as a result of increased military operations in the area. They seek refuge in southern Bangladesh.



2012: Rakhine state riots

An estimated 90,000 people displaced by violence within Rakhine state. Tens of thousands end up in “Internally Displaced Persons” camps in Myanmar, where they remain today.



2015: Rohingya refugee crisis

Mass migration of at least 25,000 Rohingya people by boat to Bangladesh, Malaysia, Thailand and Indonesia.



October 9, 2016: Nine Myanmar police killed in Rakhine border attack. Police name insurgents as Arakan Rohingya Salvation Army (ARSA).




ALJAZEERA

In response, Myanmar authorities launch "clearance operations" between October 2016 to June 2017, which kill more than 1,000 Rohingya civilians, according to UN.

25 August 2017

Rohingya militants attack 30 police posts in Rakhine state

At least 59 insurgents and 12 members of the security forces killed.

Arakan Rohingya Salvation Army (ARSA) claim
responsibility



In response, Myanmar military led a crackdown against Rohingyas in northern Rakhine state. Rohingya refugees quickly began fleeing Myanmar by the thousands, then, within weeks, by the hundreds of thousands.



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Men, women and children arriving in Bangladesh with bullet wounds, and report **indiscriminate** shootings, rapes, sexual abuse, torture and other violent acts.



The U.N. High Commissioner for Human Rights says the violence appeared to be "a textbook example of 'ethnic cleansing'"

Exodus



Almost 700,000 people arrived in Cox's Bazar between August and December 2017, in what was the fastest refugee movement since the Rwandan Genocide.



Most travelled several days through Myanmar with just the clothes on their backs. At its peak, over 10,000 people were flowing across the border each day.



When they arrived in Cox's Bazar, families set up shelters wherever they could find space.



The camps in Cox's Bazar now form the largest refugee settlement in the world.



In October 2017, Save the Children collected **testimonies from children.**

They painted a disturbing picture of the horrors they had survived.

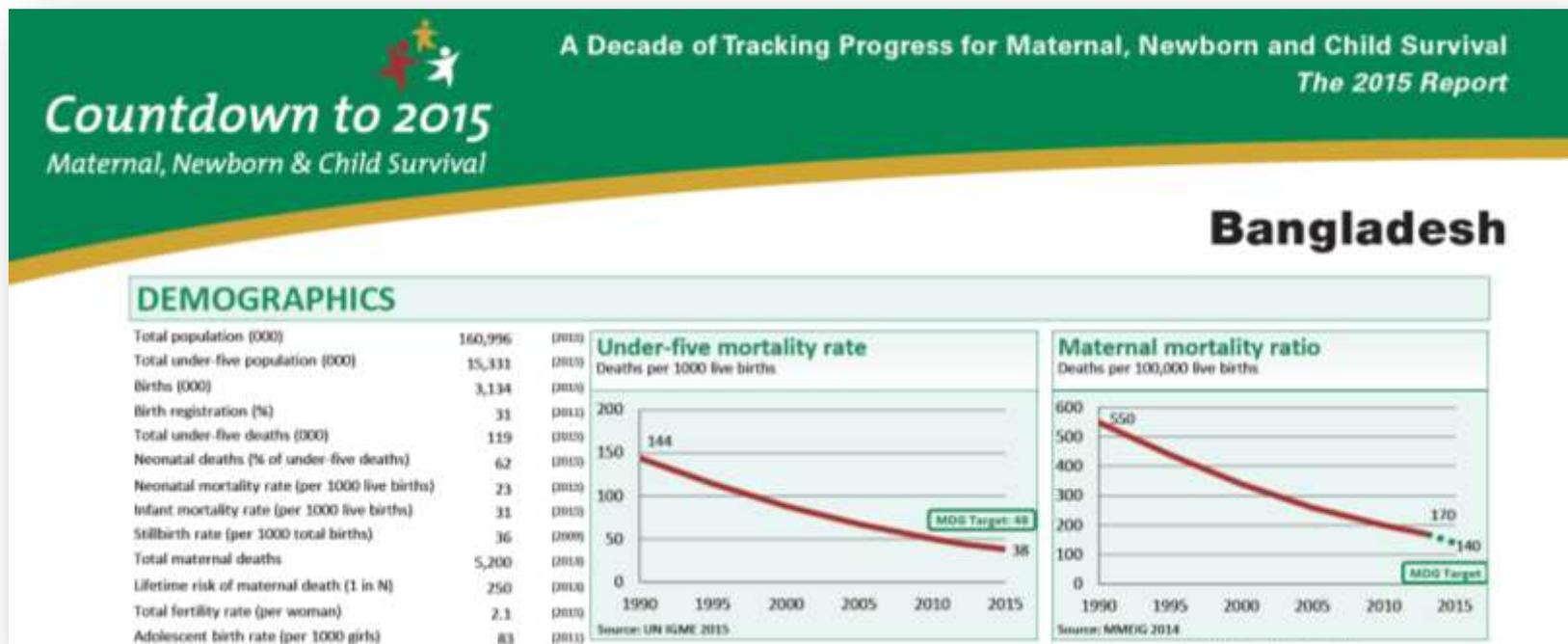




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Humanitarian or Development?

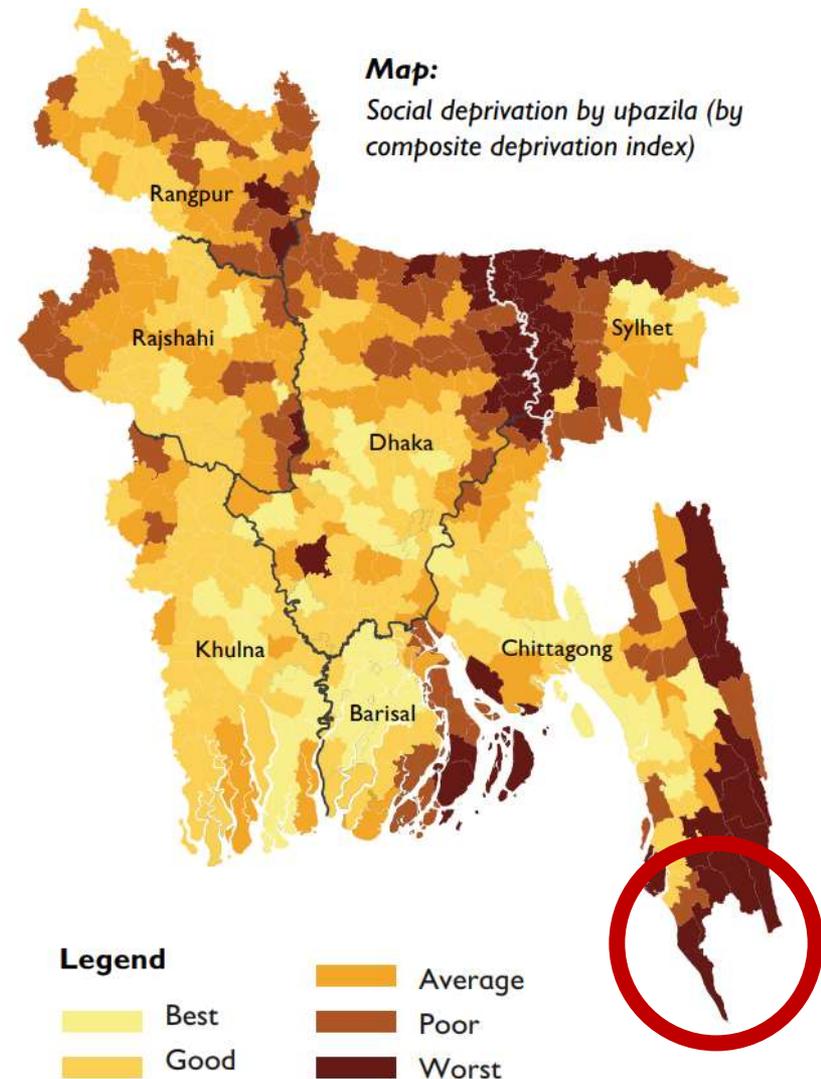
Bangladesh: An MDG success story



- Under-5 mortality reduction exceeded the MDG target
- Remarkable progress in reducing malnutrition, with the proportion of underweight children declining sharply from 61.5% to 35.1%
- Maternal Mortality Ratio fell from 322 in 1998-2001, to 170 in 2014

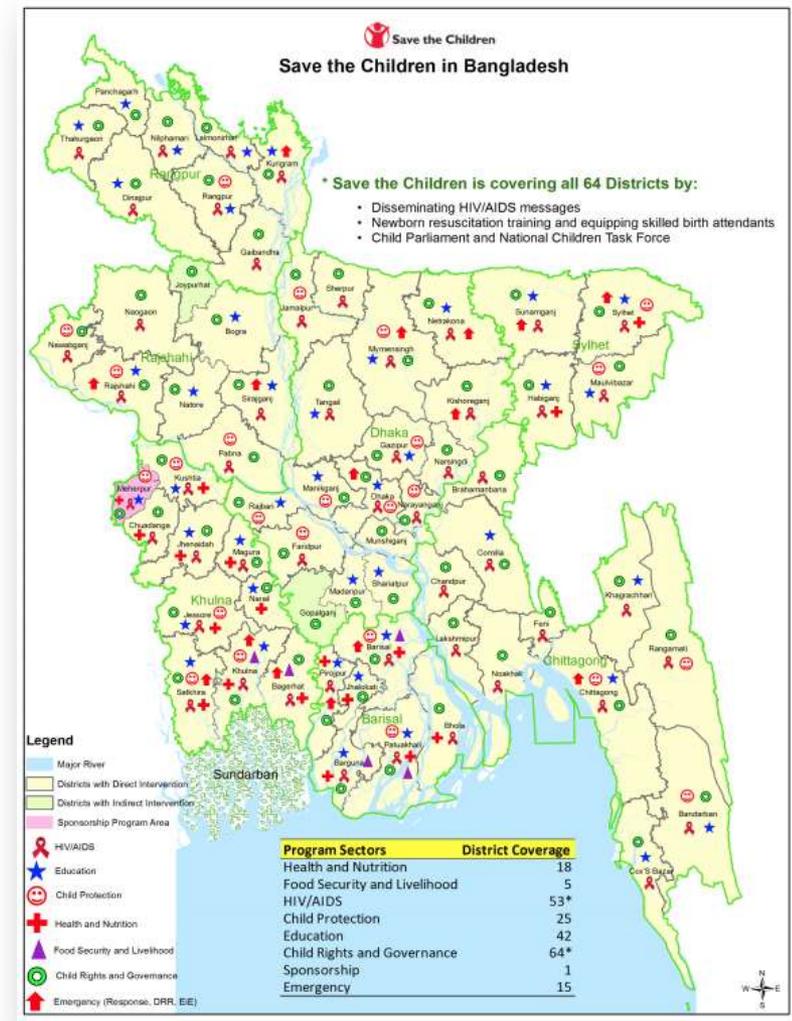
Bangladesh: A long way to go

- Only 37% of births 2011-2014 were delivered in a health facility, and this number drops to 15% for women in the lowest wealth quantile.
- 1/3 of women who gave birth did not receive antenatal care from a medically trained provider.
- Massive shortage of trained health professionals, with 0.3 doctors and 0.3 nurses per 1000 population; cumulatively less than 23 doctors, nurses and midwives per 10,000 population.
- Huge geographic disparities.



Save the Children in Bangladesh

- Save the Children has been working in Bangladesh since **1970**.
- Child Rights Governance and Child Protection, **Health, Nutrition, HIV/AIDS, WASH**, Child Poverty, and Education.
- Save the Children directly reaches more than **12 million** children and adults per year, through implementation of over **90 projects**.
- **Health and nutrition programming in 18 districts**, with further systems support in all 64 districts
- **800+ staff** and 65+ partner organizations.



Our Approach

Development

- A catalytic role in fostering positive changes in **policy frameworks**
- **Innovating and demonstrating** solutions for health system on the ground and advocating for **system changes**
- Strong and long-standing partnership with government and other key agencies to **shape national strategies and policies**
- Supporting and strengthening national health sector development initiatives in a manner that leads to **sustainable change**

Capacity to deliver humanitarian health?



Participants at a seminar jointly organised by Unicef, WHO, Bangladesh Neonatal Forum, Bangladesh Perinatal Society, ICDDR,B, along with Saving Newborn Lives Programme and USAID-funded Maternal Child Health Integrated Programme of Save the Children in the city on the occasion of World Prematurity Day.

**750,000 preterm babies die
a year globally**



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“The assumption that a strong development health portfolio will **automatically** lead to a strong emergency health response was clearly proven wrong with this case.”



**Pharmaceutical
Supply Chain**

Supervision

**Humanitarian
Coordination**

Staffing

Construction

Logistics

**WASH
Infrastructure**

**Referral
Networks**

**Outbreak
Response**

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Health posts are running throughout the camps, which see thousands of people per week.

Observations / Recommendations

Institutional mandate and leadership – from the top, all the way down.

Preparedness and scenario planning – keep plans fresh and use them!

Capacity building for assessments, supply chain, operations, coordination, etc.

Respect **differences in approaches** – e.g. definitions of quality and timeliness, and better understanding of different **population needs** (e.g. outbreaks, GBV)

Leverage long-standing networks – respect years of work to build relationships (these long-standing relationships can also come with high expectations – need to balance expectations with capacity to deliver)

Tap into **global capacities**, standards, coordination mechanisms, etc.

Better utilize **existing tools**, resources – humanitarians tend to recreate the wheel!



Thank you