BANGLADESH Rohingya refugee response – fire in camps 8E, 8W and 9

CRISIS IMPACT OVERVIEW

A devastating fire broke out in the Kutupalong Balukhali Extension (KBE) on 22 March 2021 at 3pm, starting in camp 8W and spreading through camps 8E and 9, touching camp 10 (IOM 23/03/2021),¹ and damaging a reported 200 structures in the host community (BDNews 23/03/2021). The damage caused by the fire significantly sets back the humanitarian response and exacerbates the existing needs of the Rohingya, who already live in precarious conditions. While fires in the camps are common, this fire was described as unlike any other fire seen in the camps since 2017.

As at 24 March, out of the 124,381 people living in the four camps (UNHCR 28/02/2021), 45,000 are estimated to be displaced and tentative preliminary figures based on IOM data suggest the total number of people affected is 88,000 (WFP 23/03/2021). Of the displaced, thousands of people are being re-hosted in other camps and preliminary assessments indicate that at least 10,000 shelters and 1,600 facilities have been destroyed or damaged (Preliminary information from operational actors 23/02/2021). 11 people have been confirmed dead, more than 500 are estimated to have required some form of medical assistance, and approximately 400 reported temporarily missing from their area (IOM 23/03/2021; Prothom Alo 23/03/2021; Al Jazeera 23/02/2021).

Rohingya refugee volunteers mobilized immediately to support the community as first responders (IOM 23/03/2021;IFRC 23/03/2021; UNHCR 23/03/2021). Government response services, including the fire brigade and army, also tried to control and put out the fire (BDNews 22/03/2021).

SCOPE AND SCALE

Camp 9 sustained the most damage; IOM figures indicate that nearly its entire population lost their homes and belongings. Camps 8E and 8W faced significant damage, while camp 10 sustained some damage along its border with camp 9. Families whose shelters were not damaged or destroyed are still affected by the damage to latrines, water pumps, health facilities, learning centers, markets, and distribution sites. Those affected need shelter, water, food, medical support, and access to toilets and bathing facilities. This puts additional pressure on already strained facilities and services supporting the Rohingya across KBE. These households will also likely suffer trauma due to the size and scope of the fire and the damage. Previous accounts of violence in Myanmar repeatedly included references to fire and the razing of villages. Thus, psychosocial support that is extended beyond households whose homes were destroyed is necessary.

Briefing note 25 March 2021

The health centres that burned down (IOM hospital, Turkish field hospital, MSF clinic) did not only serve the affected camps but served the wider Rohingya population and the Bangladeshi host community. The loss of these hospitals will have a long-term impact on being able to adequately meet the health needs of the Rohingya in the camps. Other long-term impacts will include mental health and psychosocial wellbeing and the decreased ability of refugees to meet their basic needs because of the loss of savings and personal belongings.

LIMITATIONS

The information in this report is based on precrisis information and currently available secondary data. At the time of publication, assessments were ongoing and new information will become available. This should be used to complement the information in this report.

Population data of affected camps (as at 28 February 2021, UNHCR) Infant below 1 1-4 Children 5-11 Children 12-17 Children 18-59 Adult 60+ Elderly Total Total Camp Families Individuals Female Male Female Male Female Male Female Male Female Male Female Male 2177 6273 477 Camp 8E 6277 29500 39 42 1719 1810 3208 3388 2013 7656 698 Camp 8W 31321 2001 3680 2292 6355 6652 207 263 1982 3643 2068 7702 485 643 7224 33456 2228 2245 3550 3638 2284 2429 8369 6922 Camp 9 192 215 593 791 Grand 20153 94277 438 520 5929 6056 10401 10706 6365 6898 23727 19550 1555 2132 Total

Source: UNHCR

¹ The cause of the fire remains unknown.



CRISIS IMPACT BY SECTOR

Food and nutrition

At the time of writing, two WFP nutrition centres and one food distribution point had been destroyed. Two other nutrition centres and an e-voucher outlet are temporarily closed while assessments are underway (WFP 23/03/2021). As all Rohingya receive monthly food assistance, it is essential that distributions continue. Rapid identification of affected people is underway but is somewhat complicated by the spread of refugees into neighboring camps and/or staying with relatives or friends. Those displaced are likely to be without cooking fuel and essential NFIs needed for cooking. Pre-cooked meals are being provided until cooking fuel and NFIs can be distributed. However, nutrition is a key concern immediately after a crisis. Factors such as inadequate and undiversified food, insufficient hygiene and inadequate shelter and safe spaces for women to breastfeed negatively impact nutrition (FSL Coordination Meeting 26/02/2021; REVA 02/02/2021). A prolonged diet of High Energy Biscuits (HEB) will not provide children with the nutrients they require, potentially resulting in poorer long-term health. Dietary diversity has significant negative correlation with the adoption of negative coping mechanisms within households, particularly households with larger dependency ratios (REVA 02/02/2021).

WASH

Water supply networks, latrines, and bathing spaces were destroyed in three camps. Water points, toilets, and bathing facilities in the surrounding camps were already at full capacity prior to the fire and are likely unable to meet the additional demand. For refugees currently residing in open spaces, rates of open defecation are likely to be high. If left unchecked for an extended period of time, this could lead to the spread of waterborne diseases. However, rapid reparations to WASH facilities have already begun and the hours that functional water points are operational have been increased to allow people more time to collect water (Information from operational actors 24/03/2021). Water storage is likely to be a major problem as refugees who fled the fire did not bring their water containers with them and thus must share water containers with whomever is hosting them.

Health

At least six health facilities have been reported as damaged or destroyed by the fire (WHO 23/03/2021).² An IOM hospital, MSF's Balukhali clinic, and the Turkish field hospital, all in camp 9, were burned down. The Turkish field hospital, a key referral facility which housed a WHO container for emergency preparedness and response stockpiling, has since been turned into a temporary health post and is receiving people throughout the day for care (WHO 23/03/2021). Given that these health facilities collectively provided care for over 70,000 people, their destruction will have a severe impact not only on the residents of camp 9 but on the surrounding camps. These facilities also provided care to the Bangladeshi host community. Vaccination points destroyed in the fire, coupled with challenges around registration and community mobilization, could affect the response's ability to provide the Rohingya with COVID-19 vaccinations. Loss of emergency preparedness and response stockpiling materials will decrease the ability of humanitarian actors to respond to future health shocks in the camps. Additional mental health and psychosocial support will be necessary following the fire.

Shelter and NFIs

The total number of shelters destroyed remains unconfirmed, but reports suggest upwards of 10,000 have been destroyed (IOM 23/03/2021). More than 200 structures in the host community were also damaged (BDNews 23/03/2021). Those who lost their homes have sought shelter with friends or relatives, in learning centers and safe spaces, or outdoors. These refugees likely lost all their belongings and remaining assets in the fire. Cooking items, liquefied petroleum gas (LPGs), water containers, and food stocks were lost, and families do not have the necessary items to store food and water. Families re-hosting Rohingya refugees will also need additional support given the strain on existing resources. With the monsoon season approaching, it is imperative that new and durable shelters are built and that all shelters that sustained damage but were not fully destroyed also receive shelter materials to reinforce their homes.

Protection

Family separation is a major concern, along with human trafficking. Hundreds of people are still missing, including children. Some of these children have been reunited with their families while others remain in the care of various organisations working towards family reunification (BRAC 23/03/2021; UNICEF 23/03/2021). Even prior to the fire, children and adolescents were common targets for human trafficking (IOM

² WHO Cox's Bazar Fire Incident Situation Report #1



09/2018, 11/2019, Child Protection Sub-Sector 09/2020; UNHCR 11/2019). Concerns about kidnapping and trafficking are high and protection actors have launched messaging about these issues to raise awareness among the affected population (Information from operational actors 24/03/2021). There have also been anecdotal reports of theft and looting. The security situation in the camps had been deteriorating over the last year and people are now more vulnerable than they were just a few days ago. Women and children had previously referred to shelters as one of the places they felt safest; this is no longer available to them. Most people have also likely lost all their documentation. The Rohingya have had a prolonged struggle to obtain ID documents, from the denial of citizenship in Myanmar to registration challenges within the camps in Bangladesh. The loss of essential documents, such as SMART cards,³ and SCOPE cards,⁴ is of major concern as these are required to collect humanitarian assistance and access essential services. A major re-registration effort is required, and this could temporarily affect family reunification.

Education

A total of 149 learning centers were damaged or destroyed (UNICEF 23/03/2021). Other learning centres and multi-purpose centres not affected by the fire are being used for temporary shelter (UNICEF 23/03/2021). Education has long been a recurrent issue for the Rohingya. In early 2020, the Government of Bangladesh approved the use of the Myanmar curriculum in learning centers for Rohingya refugees (UNICEF 10/02/2020). However, risk mitigation measures to prevent the spread of COVID-19 resulted in the closure of education facilities for much of the year and learning centres remain closed (UNICEF 23/03/2021; ISCG 31/12/2020). The destruction of learning centres and the long-running issues around education in the Rohingya refugee camps highlights the importance of quickly re-establishing education facilities for children. Rohingya youth have repeatedly expressed the desire for an education and this should be prioritised (HRW 03/12/2019). The prolonged use of intact learning centers as shelters could have a negative impact on the resumption of education.

AGGRAVATING FACTORS

Prior to the fire, the Rohingya already struggled to meet their basic needs. In 2020, 91% of Rohingya households resorted to negative coping mechanisms to address their needs and 46% of households were economically vulnerable, with consumption below the Minimum Expenditure Basket (MEB) (REVA 02/02/2021). The most vulnerable Rohingya, such as older people, persons with disabilities, pregnant and lactating

women, and children, already struggled to access critical infrastructure and services before. The decrease in available centers, facilities and services, and distribution points, and longer distances to travel to access them now, will likely make it even harder for these people to meet their needs. Vulnerable households, such as single female headed households, are also far less likely to be able to absorb shock than their male counterparts and are more likely to rely on negative coping mechanisms to meet their needs (ACAPS 10/2020; JMSNA 08/2020; REVA 02/02/2021).

The monsoon season, which begins soon and runs between May and September, could be an aggravating factor if people remain in temporary shelters or unsheltered in open spaces (UNHCR 23/03/2021). Durable shelters, service centers, and distribution points need to be constructed as soon as possible to ensure they are in place prior to the heavy rains. Overall access difficulties to reach essential services are exacerbated during the monsoon due to the difficult and dangerous camp terrain and weather-related damages to temporary structures, particularly for vulnerable populations with pre-existing mobility restrictions (ACAPS 10/2020).

Humanitarian and operational constraints

Even prior to the fire, humanitarian resources were overstretched and struggled to meet the basic needs of the approximately 860,000 residents. Capacity to scale up and meet additional needs using already overstretched resources while simultaneously maintaining delivery to all other Rohingya refugees will be challenging. Key constraints include:

- **Increased pressure on existing facilities**. The destruction of key humanitarian facilities (distribution sites, health centres, learning centres) will require humanitarians to set up temporary emergency sites and/or to adapt existing sites for larger populations.
- **Funding**. Although many actors (local, national, and international) are responding to the immediate needs of the affected population, mitigating long-term impact will require additional funding. At the time of writing, the 2021 Joint Response Plan for the Rohingya refugee response was only 5.9% funded (Global Humanitarian Overview 2021).
- Mobile connectivity. Network restrictions limit the ability of refugees to call for assistance or contact their families (ISCG 23/03/2021). Solar batteries, previously used to charge phones, likely burned in the fires, further hampering the ability of the Rohingya to contact each other and the outside world. Connectivity issues also limit

³ The identity card, also known by the Rohingya community as a 'smart card', is issued to all refugees above the age of 12.

⁴ ID used to access collect food distributions.



the humanitarian response's ability to coordinate while responding to urgent needs on the ground (ISCG 23/03/2021).

 Identification of displaced Rohingya. Rohingya whose homes were damaged or destroyed have spread across the camps. Some are being hosted by other Rohingya, some are staying in adapted facilities (such as learning centres or women friendly spaces), and some are outdoors. Re-registering all those who were displaced by the fire may be difficult and these displaced Rohingya may struggle to move between camps because of the loss of ID documents. They thus may not be able to receive immediate assistance, adding to pressure on their host family's resources.

Information gaps and needs

SITREPS continue to be published by agencies and organisations operating in KBE. A Joint Needs Assessment (JNA) on behalf of the response is underway, and specialised assessments coordinated by the relevant sectors. While recognising that information continues to come out, some preliminary information gaps include:

- What assistance is prioritised by the Rohingya and how they would like to build back better. As many Rohingya lost everything, their specific needs and the assistance that they would like to receive needs to be identified with a focus on building back better. As assessments are ongoing, it is expected that this gap will be filled.
- Host community impact. At the time of writing, very little information is available about the impact of the fire on the Bangladeshi host community. However, camps 8E and 9 border the host community and Bangladeshis accessed some of the health facilities that were destroyed. More information on how the fire affected people beyond the boundaries of KBE is necessary.
- **Impact on vulnerable populations**. There is currently very limited information available on the impact on vulnerable populations, such as persons with disabilities, older people, and pregnant and lactating women. It is expected that more information will come to light after the sector assessments and the JNA are published.

DRAWING FROM PREVIOUS LESSONS

- Rohingya refugees were the first responders, working to put out the fire and supporting affected people on the ground. Their contribution needs to be recognised and they should be empowered as first responders to disasters in their own communities.
- Fires in the Rohingya refugee camps are quite regular. Between 1 January and 18 March 2021, 34 fires occurred, an average of three per week (NPM Incident Dashboard). A better understanding of how and why this fire spread so wildly in comparison to others could help improve fire prevention and complement existing training of both first responders and the wider refugee population (EETWG 05/2019, European Commission 2018).
- Humanitarian responders were very quick to react, with local, national, and international organisations providing life-saving assistance on the ground within hours. However, joint assessment coordination mechanisms were slow to kick off and lessons could be drawn from this to ensure a swifter reaction to future crises.
- Rohingya refugees have previously expressed a desire to be involved in decisionmaking in the response (J-MSNA 08/2020, PSRP 07/2020, ACAPS & IOM COVID-19 Explained series 2020). The response must include Rohingya refugees in the redevelopment and reconstruction of the camps from the very initial stages, ensuring that key facilities and services are designed in a way that is inclusive and accessible to everyone. The Rohingya should also be engaged through open-ended consultative forums, in line with their own preferences.
- Over the course of the last four years, Rohingya refugees have spoken clearly about how they prefer to receive information and how they want to communicate their needs. Access to information is a priority for many refugees, regardless of age, gender, ability, or population group. The response needs to consider the information that has been gathered over the last four years about communication needs, especially for women, older people, and persons with disabilities, when preparing communication materials post-fire. This is imperative to ensure that all the affected refugees know where to go to access assistance and services. (BBC Media Action What Matters Bulletin 2020; ACAPS & IOM COVID-19 Explained series 2020).



