



Daffodil *International* **University**

Project Report on **“The Nutritional Status on Rohingya children (06 to 59 months) with NAW Round-1 2019”**

Supervised By:

Dr. Bellal Hossain
Professor and Head
Department of Nutrition and Food Engineering
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Submitted By:

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Date of Submission: 23rd June, 2019

Letter of Transmitted

23rd July, 2019

To,
Dr. Md. Bellal Hossain,
Professor and Head,
Department of Nutrition and Food Engineering,
Faculty of Allied Health Sciences,
Daffodil International University,

Subject: Submission of Internship report.

Sir,

I would wish to take this chance to thanks for the recommendation and support you have got given to the current report. Without your facilitate help it could not be possible to finish this report.

To prepare the report I collected what I feel to be most relevant data to create my report as scientific and reliable as doable. I actually have intensive my best effort to realize the objectives of the report and hope that my endeavor can serve the aim. The sensible information and skill gathered throughout report preparation can infinitely facilitate in my future career. I request you to justify ME for any mistake which will occur within the report despite of my best effort.

I would extremely appreciate if you enlighten me along with your thoughts and views concerning the report. Additionally, if you want to enquire regarding a facet of my report, I might life answer your queries.

Thank you once more for your support and patience.

Yours Sincerely,
Amit Hasan Abir
ID: 151-34-390

Letter of Authorization

23rd July, 2019

To,
Dr. Md. Bellal Hossain,
Professor and Head,
Department of Nutrition and Food Engineering,
Faculty of Allied Health Sciences,
Daffodil International University,

Subject: An announcement concerning the validity of the placed Report.

Dear Sir,

This is my truthful declaration that the “Internship Report” I even have ready isn't a duplicate of any place report antecedent created by the other students.

I additionally categorical my forthright confirmation in support to the very fact that the same place report has neither been used before to satisfy my different course connected nor it'll be submitted to the other person in future.

Yours Sincerely,
Amit Hasan Abir
ID: 151-34-390

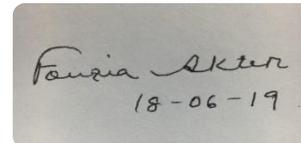
Certification Approval

I am happy to certify that the place report on National Nutrition Work with government of people republic of Bangladesh conducted by Amit Hasan Abir bearing ID 151-34-390 of the department of Nutrition and Food Engineering has been approved for presentation and defense/viva-voice.

I am happy to herewith certify that the info and finding given within the report is the authentic work of Amit Hasan Abir, I powerfully suggested the report given by Amit Hasan Abir for more tutorial recommendations and defense/viva voce. Amit Hasan Abir bears a robust ethical character and a really pleasant temperament. It's so a good pleasure operating with him. I would like him all success in life.



Dr. Md. Bellal Hossain
Professor and Head
Supervisor
Dept. of Nutrition and Food Engineering
Faculty of Allied Health Sciences
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Fouzia Akter
Assistant Professor
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Declaration

This is to certify that Amit Hasan Abir containing ID: 151-34-390 from Program B.Sc. in Nutrition & Food Engineering is a regular student department of Nutrition & food Engineering, Faculty of Allied health Science, Daffodil International University. He has with success completed his project and field work Nutrition Action with UNICEF Bangladesh from 10th April to 29 March.

We are aware that Amit Hasan Abir had completed his Internship by perceptive as our Administering and worker.

Mohammad Abu Bakr Siddique
Nutrition Officer (IM), Nutrition Sector
UNICEF, Bangladesh

ACKNOWLEDGEMENT

In the preparation of this report, I would like prefer to acknowledge the encouragement and help provide to maine by variety of individuals. At first, I would like prefer to categorical my feeling to my creator the almighty Allah for sanctification mine the strength and chance to finish the report in time with success. I'm grateful to every single and each people that are unit square attached me in every section of my life. I am grateful to my oldsters while not whom I can't be here. While not the support of my mother, I couldn't be ready to win my objectives and goals.

My deep feeling and sincere due to the honorable Dean, school of Allied Health Science, faculty member **Dr. Ahmed Ismail Mostafa** for his kind cooperation and to just accept this Degree. I am deeply indebted to professor. **Dr. Md Bellal Hossain**, My Head of Department of Nutrition & Food Engineering, Daffodil International University for provide such a chance to achieve sensible information.

I would conjointly prefer to categorical my nice respect & warmest due to my project supervisor **Fuoza Akter**, Assistant Professor of the Department of Nutrition & Food Engineering for her whole-hearted facilitate and direction throughout my project work and structure attachment amount.

My feeling goes to entire NFE Department of Daffodil International University for transcription berth program that facilitates integration of theoretical information with reality scenario.

Moreover, I would like conjointly prefer to categorical my feeling to UNICEF Bangladesh including Civil Surgeon office Cox`s Bazar along seniors and colleagues sensible advices, suggestions, inspiration and support. I have to mention the marvelous operating surroundings and cluster commitment of this organization that has enabled me to agitate tons of things.

I conjointly appreciative; **Salahuddin Papel**, Nutrition Coordinator, Care Bangladesh, **Moshfequa Rahman Khan Oishi**, Nutrition Supervisor; Save the Children cooperation throughout my berth program at UNICEF Bangladesh and Civil Surgeon, Cox`s Bazar .

Finally, I would like to **Abu Ahmed**, Nutrition Officer (IM), and UNICEF Bangladesh. Precise huge feeling & humbly convey my heart-felt relevancy for his permission to hold out this berth in his organization.

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1.1 Abstract

Since August 2017, over 730,000 Rohingya, together with four hundred thousand kids, have fled violence in Myanmar and settled in Cox's Bazar District, Bangladesh. Since then, with the support of the government and humanitarian partners, refugees have gained access to basic services. The refugees stay extremely captivated with short-term aid, however, and reside in precarious conditions, notably in congested camps. The engorged conditions and poor data of hygiene practices still place camp inhabitants at high risk of malady. Over 6,000 children known as unaccompanied and separated are in danger of trafficking, early marriage and sexual exploitation. 23% of women and fifty 57% children feel unsafe once exploitation latrines. Including the health concern the NAW program also the role playing plan for the health issue for those children. Despite the many progress created towards increasing access to emergency education, 39% of kids and 97 % of adolescent's still lack access to learning opportunities. Adolescents and youth face specific risks that are exacerbated by the shortage of education, occupational coaching and safe keep opportunities. Elements of Bangladesh, including Cox's Bazar, are often vulnerable by cyclones and monsoon flooding. Nationally, 60% of the country is prone to floods. Cyclones and storm surges are common in coastal areas, with devastating effects on native populations. Nutrition Action Week organized by UNICEF with people republic of Bangladesh (Civil Surgeon office cox`s bazar). For the last two years it is happening for total humanitarian purposes. In the meantime 2017 is had stared during Rohoigya influx. Now this action week continues as vitamin A plus camping. In this year almost 155,000 refuges children covered for this NAW Round-1. We were involved 89 students from almost 14 several university's from Bangladesh where's nutrition related study and research available. We all worked in total 22 camps in Ukhia and Teknaf as Site Supervisors. This round-1 not only given the vitamin A plus capsule we also served as mentored in every individual site of different camp. The children from age 06-59 all went for full body measurement and MUAC screening and these data was inputted in special ODK software.

1.2 Humanitarian Strategy:

[2]UNICEF's humanitarian response in Bangladesh is aligned with the 2019 joint response arrange for the Rohingya crisis. In cooperation with the government and partners, UNICEF can still link it's humanitarian response and development programs to realize property results. In 2019, UNICEF can deliver life-saving, multi-sectorial services where doable, whereas strengthening service delivery and promoting social cohesion in host communities. (UNICEF 2015, Humanitarian Action for children)

This includes providing water and sanitation; providing health services youngsters for youngsters for kids and pregnant women; facilitating treatment for youngsters with severe acute deficiency disease (SAM); supporting access to quality education; reaching children suffering from violence, abuse and neglect with bar and assistance; and preventing gender and sexual violence and supporting survivors.



The precise desires of adolescents are going to be prioritized, notably their access to education, health care, activity and life skills coaching and participation opportunities. UNICEF can still invest in preparation, answerability to affected populations and gender-based violence mitigation.

Wherever in agreement with the govt., money help are going to be joined to social protection measures. Lessons learned in Cox's Bazar are going to be accustomed strengthen government service delivery across Bangladesh. UNICEF can still lead the nutrition sector and therefore the kid protection subsector, and co lead the education and water, sanitation and hygiene (WASH) sectors.

1.3 Results from 2018

As of twenty nine October 2018, UN agency had received US\$116.7 million against the US\$149.8 million attractiveness (78 per cent funded).⁶ UN agency achieved outstanding results for kids and affected populations, particularly in camp settings, and reinforced its add host communities.

The stress on WASH activities, significantly the institution of diarrheal treatment centers and also the delivery of sturdy behavior amendment communication electronic messaging, contributed to averting a doubtless major Indian cholera epidemic.

The institution of over 100,300 learning centers provided education opportunities for over seventy per cent of targeted school-aged youngsters. Nutrition Action Week allowed for the screening of over 155,000 youngsters, with over 100,000 youngsters referred for guided missile treatment.

UN agency additionally scaled up efforts across all programme areas to supply youngsters and adolescents with opportunities for a much better future. With UN agency support, the education sector developed a learning framework for pre-primary through grade eight which will offer standardized teaching and learning for expatriate youngsters.

1.4 2019 programme targets:

Nutrition

- 24,500 kids underneath five years with surface-to-air missile admitted for treatment.
- 191,074 kids aged half-dozen to fifty nine months received fat-soluble vitamin

Health

- 105,152 kids aged zero to eleven months received powerfulness three immunizing agent.
- 3,200 sick newborns treated

WASH

- 550,000 folks making the most of safe water to united standards that meets domestic demands.
- 550,000 folks making the most of useful latrines to united standards

Child protection and gender-based violence

- 160,000 kids, as well as adolescents, received psychological state and psychosocial support.
- 46,930 adolescents received life skills education.
- 27,000 adolescent women and ladies supplied with gender-based violence interference and response services.

Education

- 272,000 kids aged four to fourteen years accessed formal or non-formal education, as well as early learning.
- 52,000 adolescents aged fifteen to 18 years participated in skills development programmes for learning, personal management and/or employability

Communication for development/answerability mechanisms

- 825,000 folks reached through electronic communication and dialogue (house to house) on key life-saving behaviors and referrals to services with a spotlight on health, nutrition, WASH, education and kid protection.
- 50,000 folks accessing mechanisms for registration their needs/concerns, as well as feedback and grievance mechanisms.

1.5 Funding on Nutrition: 18,000,000 (Requirements)

[3]UNICEF is was requesting US\$152.5 million to satisfy the saving and humanitarian-development desires of Rohingya refugees and Bangladeshi host communities. This includes the availability of essential nutrition, health, WASH, protection and education services. Most will spend in whole year on children health, hazard management, WASH and overall child protection.

A big funds already pointed for NAW Round-1 programme and rest of for this project will spend for round- in mid-November in 2019 This charm includes UNICEF's share of US\$113.7 million needed below the 2019 Joint Response set up, in addition as a further US\$38.8 million required to strengthen UNICEF's humanitarian and development add Cox's Bazar District and strengthen emergency state components wide.

2.1 Nutrition Action Week Round-1, 18-27 March 2019

Accelerating the provision emergency Nutrition Services for vulnerable Rohingya Children.

The influx of Rohingya refugees from northern part of Myanmar Rakhine State into Bangladesh restarted from 25 August 2017. As of 15 January 2019, in total 907,199 Rohingya refugees, including 44,921 registered refugees are living in border side upazilas of Bangladesh. An estimated 168,460 U5 children are living in the Makeshift and registered camps who need continuous humanitarian assistance including critical lifesaving nutrition interventions.

Recent follow up Emergency Nutrition Assessment (Smart, round -3) in November 2018 in Makeshift camps of Cox's Bazar, Bangladesh, showed a 1.1% prevalence of life threatening severe acute malnutrition –a reduced rate that seen among Rohingya child refugees in May 2018.

Approximate 2,100 children under five suffering from severe acute malnutrition (SAM) are at a very high risk of dying every day if appropriate nutrition treatment support is not continued.

The assessment also found that 53.2% children aged 6-23 months are anemic which is indicative of inadequate dietary diversity and improper IYCF practice.

2.2 In total targeted process only for NAW program:

Intervention	Overall campaign	Overall coverage Round-1(Nov2017)	%	Overall campaign	Overall coverage Round-2(July2018)	Percentage %
<i>Vitamin A(Blue)</i>	19,433	16,190	83%	16,379	14,753	90%
<i>Vitamin A(Red)</i>	157,313	140,015	89%	133,518	132,414	99%
<i>Deworming</i>	118,427	104,048	88%	99,761	88,888	89%
<i>Screening</i>	176,756	164,679	93%	149,897	149,664	100%
<i>No. of children enrolled in OTP</i>	3,896				1,076	

Table: Coverage of NAW-2018 (Round-1 and Round-2)

The Government of Bangladesh, UNICEF and partners had started providing the required nutrition support and currently around 2,500 acutely malnourished children through 60 outpatient Therapeutic Feeding Program (OTPS) and 7 stabilization centers (SC).

Around 98% of children reached with vitamin –A Supplementation (VAS) in the last NAW conducted in July 2018. This campaign of vitamin A supplementation & deworming will be the continuation of last two round of NAW. Moreover, the association between SAM and Vitamin A deficiency has already been evidenced.

Therefore, to enhance access and accelerate coverage of emergency nutrition service, the nutrition partners collectively need to organize “Nutrition Action Week” in registered camps, makeshift and new camps.

2.3 Goal:

[1]The overall goal of the campaign is to prevent further deterioration of nutritional status of children through increased uptake of critical nutrition interventions for the most vulnerable under five years children, there by avert potential excess mortality and growth deprivation of Rohingya refugee children. (UNICEF Bangladesh, humanitarian action; pdf)

2.4 Objectives:

- To reach at least 90% of 152,418 children aged 06-59 months with vitamin A capsules.
- To conduct screening of 90% 152,418 children aged 06-59 month refer malnourished children to the specific nutrition treatment program (i.e.: SC,OTP,TSFP).
- To dissemination information on important breastfeeding practice and age appropriate feeding practices.

2.5 Methods on works: The campaign was held on take place 18 to 27 march 2019.

Time Daily 8.00 am to 4.00 pm.

2.6 Delivery approach:

The campaign was nutritional facility based. There were 90 sites leading by 90 teams considering of 900 members to implement the campaign activities across the camp settlements.

During this campaign community engagement will take place through trained community mobilization volunteers and information feedback centers. In addition, other activities which will be key part of this campaign includes mobilizing household, engaging religious leaders and community dialogues to disseminates key messages on NAW through various channels of communication (IPC sessions, PSAs).

2.7 Partners:

Under the guidance of IPHN, Civil Surgeon office Cox`s bazar and all Nutritional sector partners. Including UNICEF, UNHCR, IOM, WFP, SARPV, ACF, Save the Children, SHED, Concern worldwide, BRAC, World vision international and MSF were actively participating in this week long campaign.

3.1 Duties perform on NAW (Nutrition Action Week) 2019

I was working in camp no. 15 (Jamtoli) in Cox`s Bazar as a site supervisor. It was OTP Center of SCI (Save the Children). I was working under my team leader Mr. Salahuddin Papel, Nutrition Officer, Care Bangladesh. Almost 10 volunteers were working together in that NAW 2019. In my camp my target was 1420 child for screening, 141 for vitamin A (Blue), and 1138 for vitamin A (Red) supplementation. I was completed my target 100% & also covering total 1650 child in that week.



REPORTING PERIOD: 1 to 31 March 2018

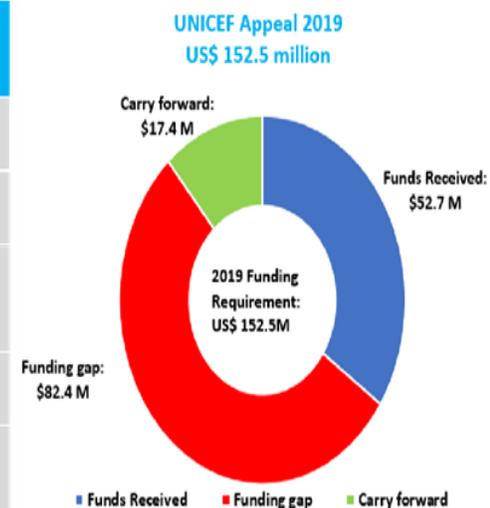


SITUATION IN NUMBERS

UNICEF's Response with Partners

Key Programme Indicators	Sector		UNICEF and IPs (Refugees and Host Communities)	
	Target	Total Results (2019)	Target	Total Results (2019)
Nutrition: Children under 5 years with SAM admitted for treatment	34,550	6,220	24,500	4,200
Health: Children 0-11 months who have received Pentavalent 3 vaccine			105,152	28,335
WASH: People benefiting from safe water to agreed standards that meets domestic demands	1,242,441	914,556	550,000	317,750
Child Protection: Children reached with psychosocial support services	343,206	44,566	160,000	24,719
Education: Children (4-14) who have accessed non-formal education, including early learning ¹	306,031	255,238	221,000	180,293

assistance
(Based on ISCG SitRep, March 2019)



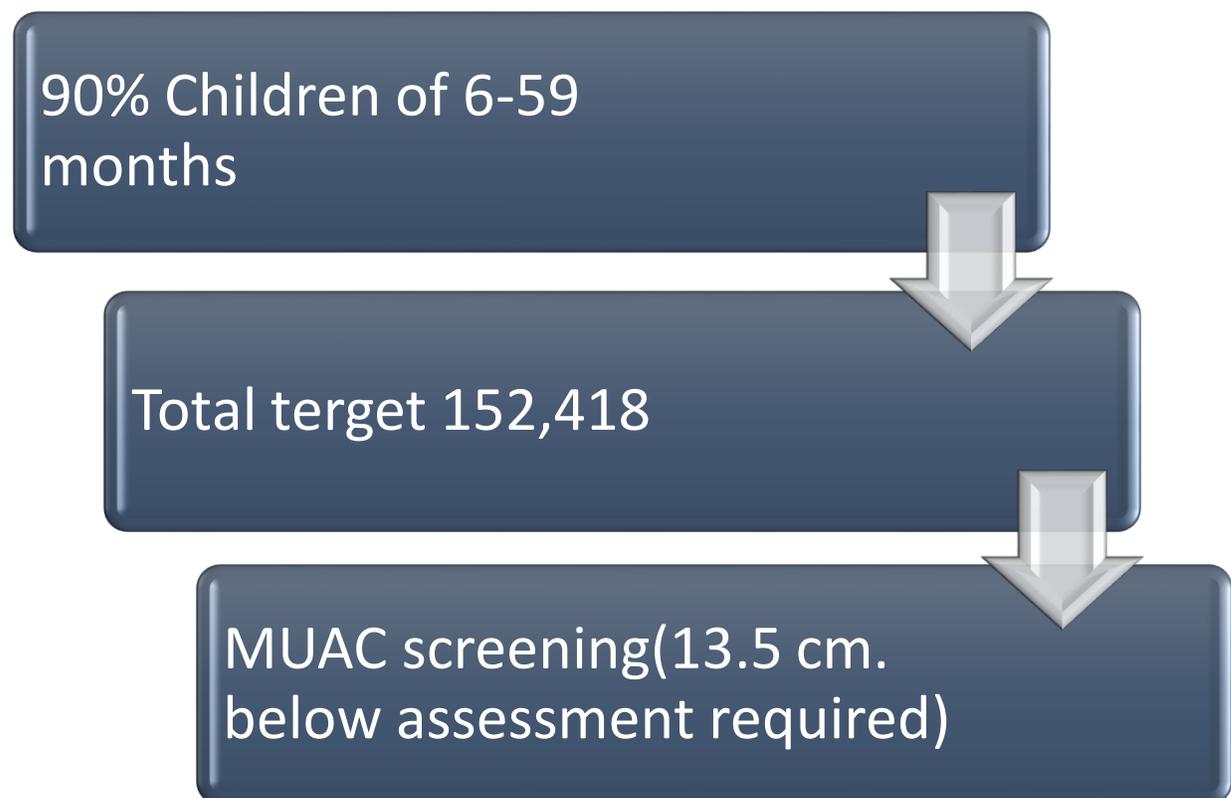
[4]Earlier mentioned the project work based on anticipation with the Cox's Bazar Civil doctor, UN agency and sector partners organized a Nutrition Action Week all told Rohingya camps from 18-27 March 2019. 95% kids below five in camps (144,383 children) were screened for deficiency disease and received a supplementation. Screening known one, 203 kids (49% girls) with severe acute deficiency disease, of that 617 were freshly admitted for treatment et al were already in treatment. (Humanitarian task; UNICEF)

- In March 2019, UN agency and partners created 118 learning centers. There are now 1,991 UN agency supported learning centers in camps, benefitting one hundred eighty, 293 Rohingya expatriate kids.
- Recent survey of (girls of ladies) and girls in camps fifteen and sixteen on expelling hygiene management indicated that lxviii per cent of these surveyed expressed satisfaction with their access to expelling hygiene management (MHM) services; ten per cent have seen associate degree improvement since the last survey in December twenty18 whereas 20 per cent feel services have worsened. Steps are taken to boost MHM services supported this feedback.
- Since Jan 2019, UN agency and its native partner have established 3 data Feedback Centers (IFCs) in host communities. These centers have been well-received, with 488 items of feedback and 330 queries received in March.

3.2 For the total surveillance on the project of Nutrition action Week round-1 based on software where every data of the children during measurement to feeding capsule had been collected by ODK apps which operated by a smartphone.

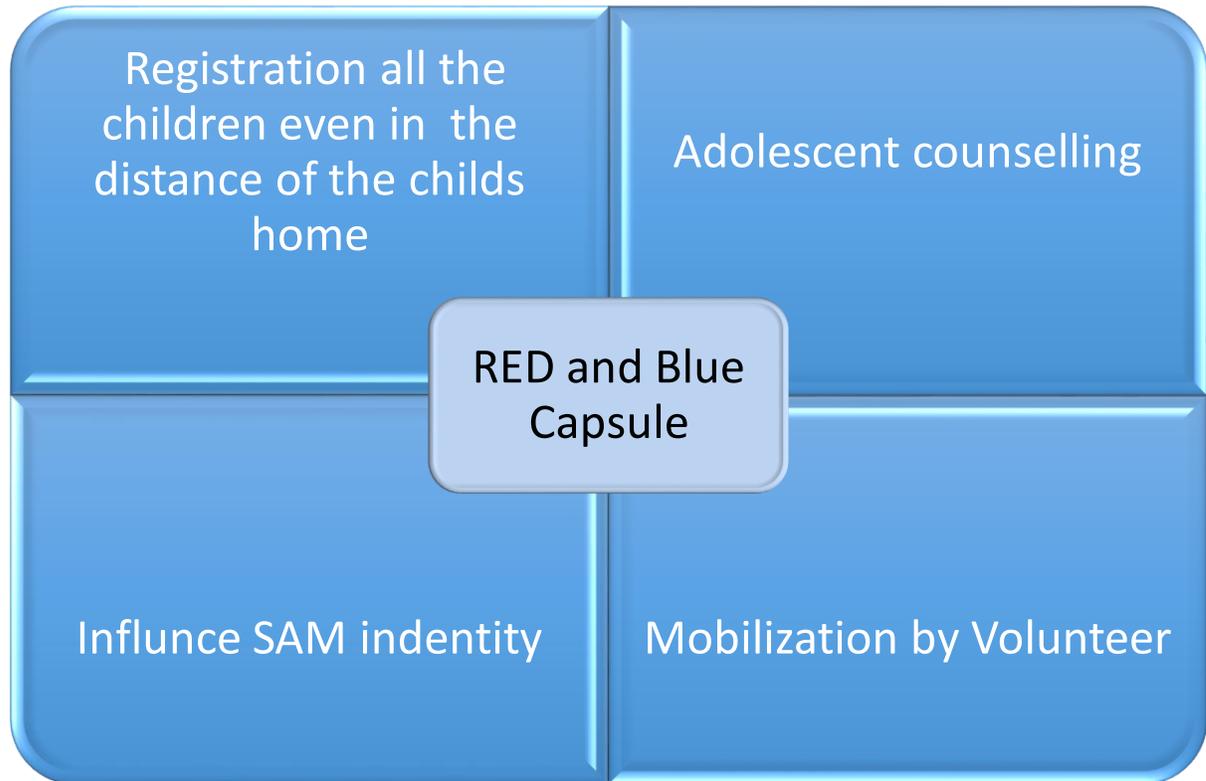
UNICEF aid with UN and a software developer developed an interface where the all data with authentic source saved after any collection of data. That Web interface is www.ona.io where's the account created of every sited supervisors.

My account was named by amit_diu and included a pass code which strictly monitored by UNICEF IT expert.



Real Time monitoring each and in every camp and also every selected site before work.

3.3 For every site with every site supervisors supplied and suggested to do these work.



3.4 Registration form for the refugees children along all the measuring information with MNR card in first step.

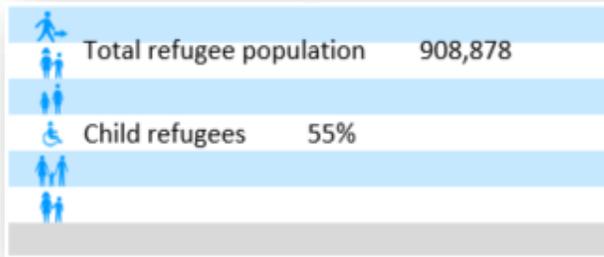
MNR Card	NAW Referral No	Referral from other facilities (Referral No.)	Identified as SAM (Yes/No)	Already enrolled in OTP (Yes/No)	Admitted OTP	Identified as MAM	Already enrolled in TSFP	Admitted in TSFP	Referred to OTP (Referral NO)	Referred to TSFP (Referral No)
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										

Form which had been used for last two years Nutrition Action Week and the general procedure of the registration finalization.

4.1

683,000

Children in need of humanitarian help (UNICEF HAC 2019)



2 million

People in want - together with refugees and host community
(UNICEF HAC 2019)

499,883

Rohingya kids in want of help among the age (estimation supported ISCG Site Rep, March 2019)

Situation summary and humanitarian desires

[1]Plan is in progress in shut coordination with the Inter-Sector Coordination cluster kid refugees 55th (ISCG), sector partners and dealing teams (Emergency Task Force, Natural Hazard expatriate girls and women fifty two task Force and knowledge management operating Group).United Nations Children's Fund aims to handle Refugees with disabilities four-dimensional key areas associated with kids doubtless tormented by severe weather events within the total affected population 1,200,000 camps and host communities, with attention on risks analysis, access, upgrading of Total affected kids 683,000 facilities, communication with communities, partnerships, preposition of provides Note: United Nations Children's Fund and ISCG and also the identification of further human resources.

The government coordination mechanism that must be tested throughout the SIMEX might currently turn up in might. Within the absence of cyclone shelters for refugees (cyclone resistant shelters exist within the host community however cowl solely or so twenty per cent of the Asian country host population), the refugees could also be suggested to remain in their shelter or in upgraded structures at intervals the camps or reckoning on the severity of the cyclone, be radio-controlled by the recommendation of the military.

4.2 Humanitarian Leadership, Coordination and Strategy:

The humanitarian response for the Rohingya expatriate crisis is expedited by the ISCG in Cox’s Bazar. The ISCG Secretariat is radio-controlled by the Strategic government cluster (SEG) that’s designed to be associate degree inclusive decision-making forum consisting of heads of humanitarian organizations.

A review of the coordination system was conducted in October 2018 by UNHCR, IOM and UNDP and also the recommendations rising from the review area unit being mentioned.

The Principals of UNHCR, IOM and also the Emergency Relief organizer are visiting Asian country finish of Apr to more discuss this new coordination mechanism and alternative key problems relevant to the Rohingya crisis.

On the government aspect, a National Task Force, established by the Ministry of Foreign Affairs, has lead the general coordination of the Rohingya crisis.

At the Cox’s Bazar level, the expatriate, Relief and homecoming Commissioner (RRRC) continues to be answerable for daily coordination of the expatriate operation while the Deputy Commissioner is answerable for the event of the Bangladeshi community throughout the district In Cox’s Bazar United Nations Children's Fund leads the nutrition, WASH sector and kid protection sub-sector, and co-leads the education sector with Save the youngsters.

In Cox’s Bazar, UNICEF’s actions area unit centered around four key ways. Firstly, saving lives and protective kids and their families within the expatriate camps continues to stay dominant.

Secondly, United Nations Children's Fund is promoting social cohesion and confidence building within the host communities in Ukhiya and Teknaf Sub-Districts. Thirdly, systems area unit being reinforced and programme implementation accelerated within the remainder of the district of Cox’s Bazar. Finally, United Nations Children's Fund can apply the teachings learnt from its add the expatriate camps and also the district of Cox’s Bazar to feed these into national ways and it’s add alternative elements of the country.

OTP performance indicators

	Cured	Death	Default	Did not recover
<i>January</i>	97.0%	0.1%	1.0%	1.9%
<i>February</i>	96.7%	0.2%	1.3%	1.8%
<i>March</i>	Had been working through the month			

4.3 Summary Analysis of Programme Response

Nutrition: In March 2019, 1,103 kids aged 6-59 months (52 per cent girls) were known with severe acute deficiency disease (SAM) through active case finding in communities and Nutrition Action Week, and admitted to patient therapeutic programmes (OTPs) for treatment. 32 kids (66% girls) with SAM and medical complications were admitted to the 2 United Nations agency partner operated stabilization centers in camps for patient treatment.

To boot, eighty seven infants aged 0-6 months (50 per cent girls) were admitted to seven CMAM-I centers (Community-based Management of At-Risk Mothers and Infants) supported by United Nations agency.

There has been a decreasing trend in SAM admissions in last 3 months that is being rigorously analyzed. Mobile groups were sent to remote areas of camps and have begun distinctive kids with SAM not accessing services; this means a requirement for additional widespread community-based nutrition services and a stronger observance of community reach activities.

Under the leadership of the Cox's Bazar Civil Surgeon's workplace, United Nations all agency and sector partners organized Nutrition Action Week spherical one across all Rohingya camps from 18-27 March 2019 (round 2 are going to be command in six months). Ninety fastened and seventeen mobile sites were accustomed reach 95% of kids underneath five in camps.

This meant that a hundred and forty four, 383 kids (49 per cent girls) were screened for deficiency disease and provided fat-soluble vitamin supplementation. there have been one, 203 kids (49 per cent girls) known with SAM, as well as 617 kids (49 per cent girls) not already in treatment World Health Organization were observed one in every of the fifty six nutrition sector OTPs.

Full results area unit obtainable. So far in 2019, 96% of the two, 844 kids admitted for treatment for SAM are discharged as cured, with a 1.3 % defaulter rate and 2% of death rate.

UNICEF conjointly focuses on preventing deficiency disease. Nutrition awareness activities in March saw kid and young kid feeding (IYCF) counseling reach one, 911 ladies; orientation sessions interact one hundred forty influential community leaders and 410 fathers and mothers-in-law; and cookery demonstrations and yard conferences command for 885 caregivers women. These community mobilization activities area unit designed to boost dietary habits and food decisions, and increase nutrition.

Host Community: United Nations agency works closely with government authorities to deliver preventative and curative nutrition services in host communities. As a part of this partnership, in March, United Nations agency restored the Ramu sub-District Health and birth prevention workplace, providing improved coaching facilities at sub-district-level.

- Meanwhile, sixty Community Nutrition Volunteers supported by United Nations agency continued their proactive identification of kids with deficiency disease, screening 11,673 kids (47 per cent girls) for acute deficiency disease.
- Forty-five kids (56 per cent girls) were admitted for treatment within the district hospital and Ukhiya, Teknaf, Pekua and Ramu Sub-District

Health: In March 2019, the nineteen UNICEF-supported health facilities in camps provided thirty 1,266 health care consultations, as well as 12,888 for youngsters underneath five. The foremost common causes for consultation were acute infection, pox (chicken pox) and symptom. (Humanitarian index; relifweb)

Up to now in 2019, there are seventy 4,507 reportable cases of pox, with the illness currently showing a declining trend. Within the last 3 weeks of March, there have been 5,536 (week 11), 5,996 (week 12) and 2,478 (week 13) cases. United Nations agency health facilities conjointly provided 1,869 pregnant ladies with their fourth antepartum care visit whereas 441 ladies received postnatal care.

There are 172 contagion cases reportable up to now in 2019, conveyance it the whole to 8,518 cases since the start of the natural event in November 2017. The last death was reportable on fifteen Jan 2019 (45 deaths are reportable in total).

Routine immunization continues in camps to stop the additional unfold of diseases; a 2,710 kids received their third dose of power immunizing agent in March 2019, indicating they're on target to possess received their full schedule of vaccinations.

A study is being conducted by International Centre for unconstipated illness analysis, Bangladesh, with support from United Nations agency, to assess the effectiveness of oral Indian cholera vaccination (OCV) among Rohingya refugees, once nearly 880,000 refugees were immunized in 2017-2018. Eleven police work units (nine sites in Ukhiya and 2 in Teknaf) were started in government, United Nations agency and different partners' health facilities. Tests are completed on 3,775 stool samples therefore far; results are going to be printed by the top of the year.

Host Community: Cox’s Bazar District Hospital Special Care Newborn Unit (SCANU) provided babe look after 248 sick newborns as well as twenty eight Rohingya newborns in March. Meanwhile, the Newborn Stabilization Units (NSUs) in Teknaf and Ukhaia cared for eighty six sick newborns as well as seven Rohingya. To boot, 1,143 pregnant mothers were counselled and tested as a part of the bar of mother to child transmission of HIV infection services currently being offered in 2 government and 9 NGO health facilities in camps and therefore the host community.

WASH: UNICEF provides rescue WASH services to 250,000 Rohingya refugees within the eight camps beneath UNICEF’s space of responsibility, as in agreement with the WASH Sector. In 2019, the WASH Sector is action 3 main pillars: quality, property and equity. UNICEF and World Health Organization with the Department of Public Health Engineering (DPHE) square measure conducting Water Quality police investigation (WQS) across all camps.

Testing began in March. The police investigation includes hygienically inspections and water quality testing at water points and in households. The WQS can facilitate to focus on actions to boost water safety and forestall waterborne diseases, together with characteristic wherever hygiene promotion and/or tube-well decommissioning square measure required. Meanwhile, UNICEF has listed and tagged over 17,000 hand pumps across the exile camps. This may strengthen the present WASH sector water quality information, rising overall management of water purpose quality and practicality. In March, 350 tube-wells and 104 faucet stands were restored, transportation the entire for the year to 1,838 tube-wells and 383 faucet stands restored.

UNICEF employs

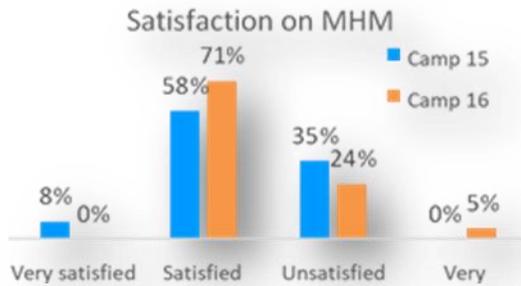
Third-party monitors World Health Organization conduct Daily social unit surveys, to permit UNICEF to boost its WASH services for families.

In March, these surveys were conducted in camps fifteen and Sixteen. Feminine surveyors talked to girls and women to grasp however they're managing their menses within the camps, and what extra support they have.

On average, sixty eight per cent of girls expressed satisfaction with their access to emission hygiene management (MHM) unsatisfied services.

OCV Campaign	Dates	Target age group	Target	Reached	%
Phase 1, Round 1	10 - 18 Oct 2017	Over 1 year	658,371	700,487	106%
Phase 1, Round 2	4- 9 Nov 2017	1 to 5 years	182,317	199,472	109%
Phase 2, Round 1	6 - 13 May 2018	Over 1 year, refugees	984,906	879,273	90%
Phase 2, Round 2	17 Nov - 13 Dec 2018	not reached in round 1 and host community	328,556	364,686	110%

10% have seen Associate in nursing improvement since in these services since the last survey in December 2018 whereas 20% feel the services have worsened. UNICEF is functioning with partners to deal with these considerations and aggregation feedback from girls and women on however they feel services may well be improved and that services have truly worsened.



Host Community: UNICEF, DPHE and partners square measure operating across Cox’s Bazar District to deal with key WASH-related challenges for communities: long distances to water points, tide quality and also the lack of comfortable variety of latrines.

Throughout March 2019, UNICEF partners made eleven new deep tube-wells fitted with hand pumps in Moheshkhali and Ukhia Sub-Districts and restored 121 hand pumps in Chokoria Sub-District. In Teknaf, a water distribution network together with a borehole, star pump and storage tanks was completed providing chlorinated, safe water to a 2,000 people.

The water treatment plant providing water to Rohingya Camp twenty two has been extended to produce safe water to one,000 individuals within the surround host community. Altogether, 42,000 individuals have benefitted from improved access to safe water in March.

Additionally, one hundred fifteen new latrines were completed in Ukhia and a hundred thirty five latrines restored in Chokoria, together with the installation two hundred hand washing stations. These interventions combined to produce improved access to safe sanitation to 5,400 people.

Locations for all host community WASH interventions square measure known through a democratic desires assessment together with individual regime authorities. Twenty-one ward-level Water and Sanitation Committees are mobilized and trained in 2 unions of Chokoria. These committees support designing, implementation and observance of WASH activities inside the communities with the target of rising quality and property of WASH services.

Child Protection: to this point this year, 24,498 youngsters (215 of annual target) have accessed psychosocial support through UNICEF partners, together with 8,469 youngsters (52% of girls) in March. Case management services were extended to 163 (57% of girls) new vulnerable youngsters, adding to the present caseload of 284 (63% of girls) unaccompanied, 1,138 (57 per cent girls) separated and 1,350 (70 per cent girls) otherwise vulnerable youngsters receiving regular case management from UNICEF partners.

UNICEF conjointly works with Rohingya communities to guard youngsters inside their own neighborhoods from exploitation and abuse, by serving to them to prepare themselves into community-based kid protection committees (CBCPCs). In March, CBCPCs reached 3,400 girls and 3,734 men with awareness sessions on topics like kid wedding and kid labor. UNICEF and its partners square measure mapping CBCPC practicality still as community data concerning the committees.

Preliminary findings indicate that seventy nine per cent of the 502 community member's surveyed square measure awake to CBCPCs however solely twenty two per cent approach the CBCPCs big protection problems. The ultimate report is predicted by the top of April and its recommendations can to tell ways to strengthen the CBCPC mechanism.

The thirteen UNICEF-supported Safe areas for girls and women freshly reached 490 women and adolescent girls with gender-based violence (GBV) interference and response services (including psychosocial support, case management and skills training) in March.

Stretch activities by girls and adolescent women, still as Community Watch teams, reached 12,386 individuals (78 per cent females) with messages on GBV prevention; risk mitigation; and knowledge on obtainable services. Along with the kid Protection and GBV Subsectors, UNICEF expedited a five-day coaching to assist twenty two case employees and supervisors higher answer kid survivors of sexual assault.

Host Community: throughout the reportage amount, in coordination with the Department of Social Services, case management services were provided for 158 youngsters (51% girls) and life skills sessions for forty three youngsters (53% girls). To boot, 607 girls and women and 314 men and boys were reached big protection and GBV messages.

Integrated Programming for Adolescents:

UNICEF has begun to roll out its strategy to fulfill the education and protection desires of adolescents stricken by the Rohingya exile crisis. 2 utile kid and adolescent centers (MPCs) square measure currently operational, providing a package of services that features life skills and psychosocial support; basic attainment and numeracy; and activity skills. There square measure 800 adolescents listed within the centers, a hundred and forty (42% female) of whom square measure taking part in activity skills coaching. Eight-four MPCs square measure being planned across camps and also the host community in 2019 to produce comprehensive services to 40,000 adolescents.

Education:

In March 2019, 118 learning centers were made, transportation the entire variety of learning centers in camps to 1,991. These centers square measure benefitting a hundred and 80,293 Rohingya exile youngsters (49% girls), 10,703 of whom were freshly listed in March. All youngsters are placed in categories supported their competence level as per the educational competence framework and Approach (LCFA).

UNICEF aims to succeed in its 2019 target of 2,500 learning centers by mid-2019, providing access to education for 221,000 Rohingya exile youngsters. UNICEF and its partners square measure currently bunch up to 6 learning centers within the same location to control as a unit, permitting youngsters to additional consistently access education across LCFA levels.

Thirty clusters square measure currently being piloted, and also the lessons learned are going to be incorporated throughout the bunch within the remaining LCs. Forty per cent of learning centers have dedicated WASH facilities, whereas others believe public latrines in proximity to the center.

By the top of 2019, UNICEF aims to extend this to ninety per cent of learning centers with dedicated WASH facilities.

The enrollment of young kid with disabilities has been exaggerated from seventy six youngsters in February to 124 children (30 per cent girls) in March in forty two learning centers. Youngsters square measure screened with support from a neighborhood organization, and supplied with the services and helpful devices they need, together with to participate in learning.

Academics in forty two learning centers camps are trained on teaching methodologies to actively have interaction these youngsters in their lessons.

Host Community: The primary cohort of the choice learning programme have graduated, and 994 adolescents (57% girls) out of the 1,000 taking part adolescents have enraptured on to job placements. Successive cohort can begin from Gregorian calendar month 2019; UNICEF's implementing partner is presently conducting a desires assessment to spot.

Training on faculty effectiveness was provided to 264 faculty Management Committee (SMC) members (36% female) from 10 public primary colleges. This may facilitate the Committees to develop faculty improvement plans and supply simpler overall faculty management. UNICEF and also the District Primary Education workplace decide to train 2,365 SMC members from 215 colleges in 2019.

Communication for Development, Community Engagement and Accountability: to beat challenges to participation in Nutrition Action Week, together with an absence of awareness or interest, social mobilization activities included: 1,300 Rohingya volunteers enterprise social unit visits; 695 community leaders and 834 spiritual leaders sensitized; ten public service announcements aired; and 2 radio magazines and 2 live talk show programmes broadcasted.

To support exaggerated immunization rates, 110,693 households were reached with electronic messaging on routine immunization and also the messages were mentioned in fifty eight community consultations command with 1,193 people. This result in the identification of rumors and harmful social and cultural norms that act as barriers to immunization; action plans on routine immunization were developed by communities at the consultations.

UNICEF's fifteen data and Feedback Centers (IFCs) received 1,195 complaints, 265 items of feedback and 3,782 queries in March. Most complaints were on short food and latrines, whereas the queries were relating to health services and non-food things together with wear. Those seeking services were brought up close service points.

Host Community:

Since January 2019, UNICEF and a neighborhood partner have established 3 IFCs in host communities. These centers are well received, with 488 items of feedback and 330 queries received in March. To addresses the considerations of host community teams and build social cohesion, episode twelve of Sanglap (Dialogue) was recorded, permitting a hundred and twenty host community members to debate their considerations.

UNICEF's nationwide native Governance for youngsters programme, crystal rectifier by the Cox's Bazar Deputy Commissioner's workplace undertook a month-long campaign on hand-washing and ending kid wedding, participating thirty two,200 students at thirty five secondary colleges in four sub-districts (Ramu, Ukhiya, Teknaf and Cox's Bazar Sadar).

5.1 Funding

So far this year, US\$ 52.7 million has been received for the response. United Nations International Children's Emergency Fund desires to specific its sincere feeling to North American. Education Cannot Wait (ECW), the eu Union, Germany, world Partnership on Education (GPE), Japan, KFW Development Bank, Portugal, the Republic of peninsula, Sweden, European nation, the u.s., the UK, King Abdullah Foundation, UN OCHA and varied United Nations International Children's Emergency Fund National Committees WHO have contributed liberally to the present response. Continued and timely donor support in 2019 are going to be important so as still offer essential WASH, Health, Nutrition, kid Protection and Education services to Rohingya refugees and host communities.

5.2 Funding Structure:

Appeal Sector	Funding Requirements	Funds available*				Funding gap	
		Funds Received Current Year		Total	Carry-Over	\$	%
		Emergency resources	Other resources				
Nutrition	18,000,000	2,324,265	3,716,255	6,040,520	2,849,136	9,110,344	51%
Health	19,773,645	4,942,792	252,698	5,195,489	2,266,408	12,311,747	62%
Water, sanitation and hygiene	35,700,000	7,749,512	2,287,897	10,037,408	2,345,413	23,317,178	65%
Child Protection/GBV	18,835,658	3,221,476	6,962,458	10,183,934	4,783,217	3,868,507	21%
Education	47,000,000	5,730,126	12,533,364	18,263,490	311,507	28,425,003	60%
Communication for development	4,200,000	604,472	316,697	921,169	972,682	2,306,149	55%
Emergency preparedness	9,000,000	1,967,796	93,775	2,061,570	3,910,604	3,027,826	34%
Unallocated		0	0	0			
Total	152,509,303	26,540,438	26,163,143	52,703,581	17,438,967	82,366,755	54%

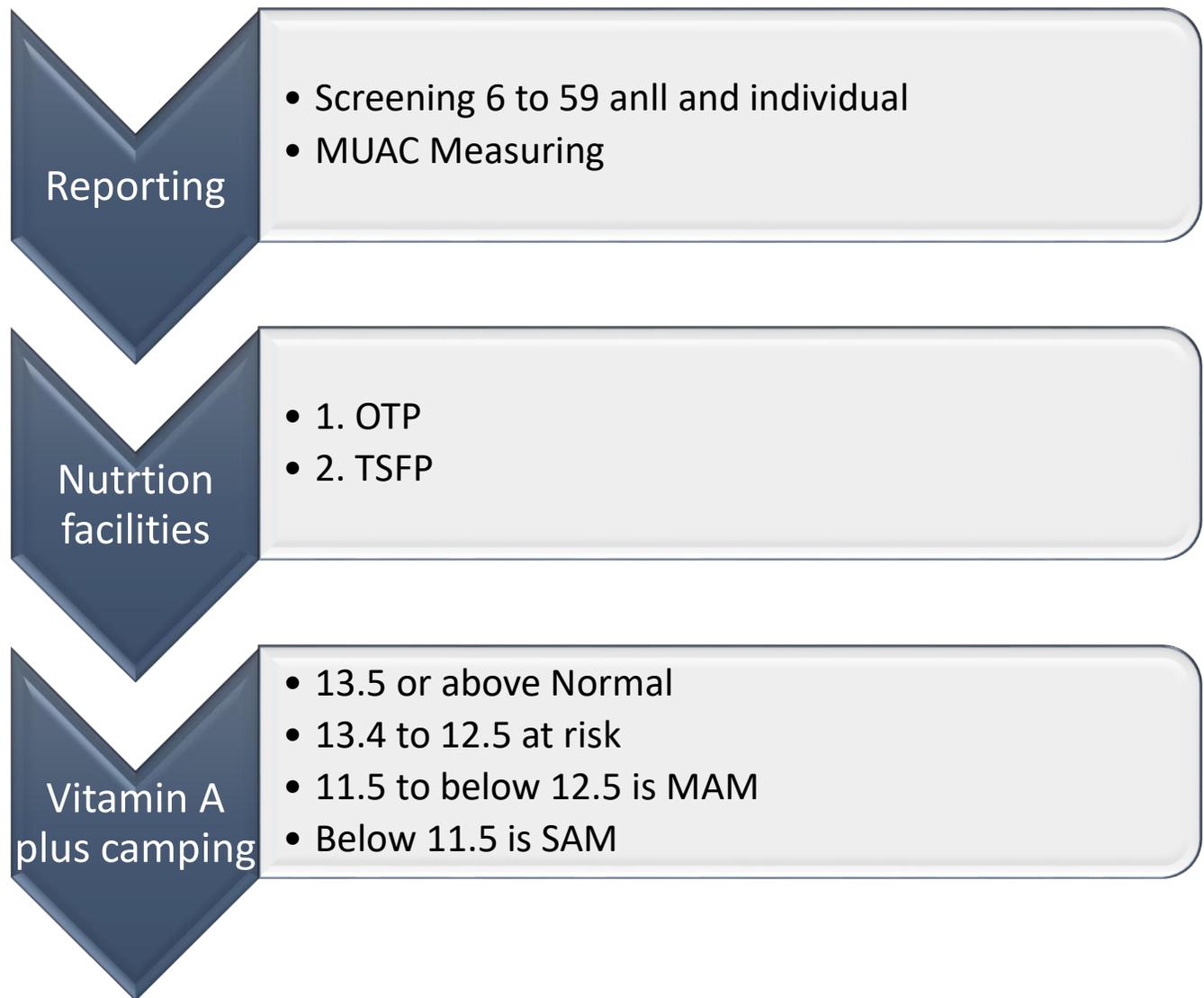
The funds offered embrace funds received against the present charm year and also the balance from the previous year. Additionally, United Nations Children's Fund has an extra \$26 million carry over allotted for 2020 supported the multi-year agreements.

	2019 Target		Total Results		Change since last report	2019 Target		Total Results
	Refugee	Host Community	Refugee	Host Community		Refugee	Host Community	
NUTRITION								
Children under 5 years with SAM admitted for treatment	24,000	500	4,057	143	1,180	29,054	5,496	5,890
Children aged 6 to 59 months who received vitamin A at least once in the year	148,324	42,750	144,383	46,917	191,300	148,324	42,750	144,383
HEALTH								
Children aged 0 to 11 months who have received Pentavalent 3 vaccine	28,857	76,295	8,045	20,290	11,590			
Sick newborns treated	200	3,000	95	912	334			
WATER, SANITATION & HYGIENE								
People benefiting from safe and chlorinated water through a distribution network	250,000		71,000		-			
People benefiting from safe water								

to agreed standards that meets domestic demands	250,000	300,000	250,000	67,750	42,000	906,511	335,930	757,056
People benefiting from functional latrines to agreed standards	250,000	300,000	202,720	16,888	5,400	906,511	335,930	769,458
CHILD PROTECTION & GENDER-BASE D VIOLENCE								
Children reached with psychosocial support services	117,280	42,720	24,498	221	8,559	284,119	59,087	43,231
Adolescents received life skills	34,400	12,530	7,833	165	4,548	74,900	-vi	30,505
education Adolescent girls and women provided with gender-based violence prevention and response services	20,000	7,000	6,449	-	490			
EDUCATION								
Children aged 4 to 14 years who have accessed formal or non-formal education, including early learning	221,000	51,000	180,293	-vii	10,703	306,031	56,403	255,238
Adolescents aged 15 to 18 years who have participated in skills								

development programmes for learning, personal empowerment and/or employability	40,000	12,000	140	1,000	-			
C4D/ ACCOUNTABILITY MECHANISM								
People reached through messaging and dialogue (house to house) on key life-saving behaviors and referrals to services with a focus on health, nutrition, WASH, education and child protection	725,000	100,000	551,366	29,604				
People accessing mechanisms to voice their needs/concerns, including feedback and complaint mechanisms	40,000	10,000	19,070	1,618	6,060			

6.1 Fixed spotted work plan for full project line.



Before the full week project it was almost 3 days of workshop in hotel Long Beach, Cox`s Bazar with Civil Surgeon office and UNICEF officials along 20 INGO, NGO and well known national and also international organization.

Second Day of project plan making and form training



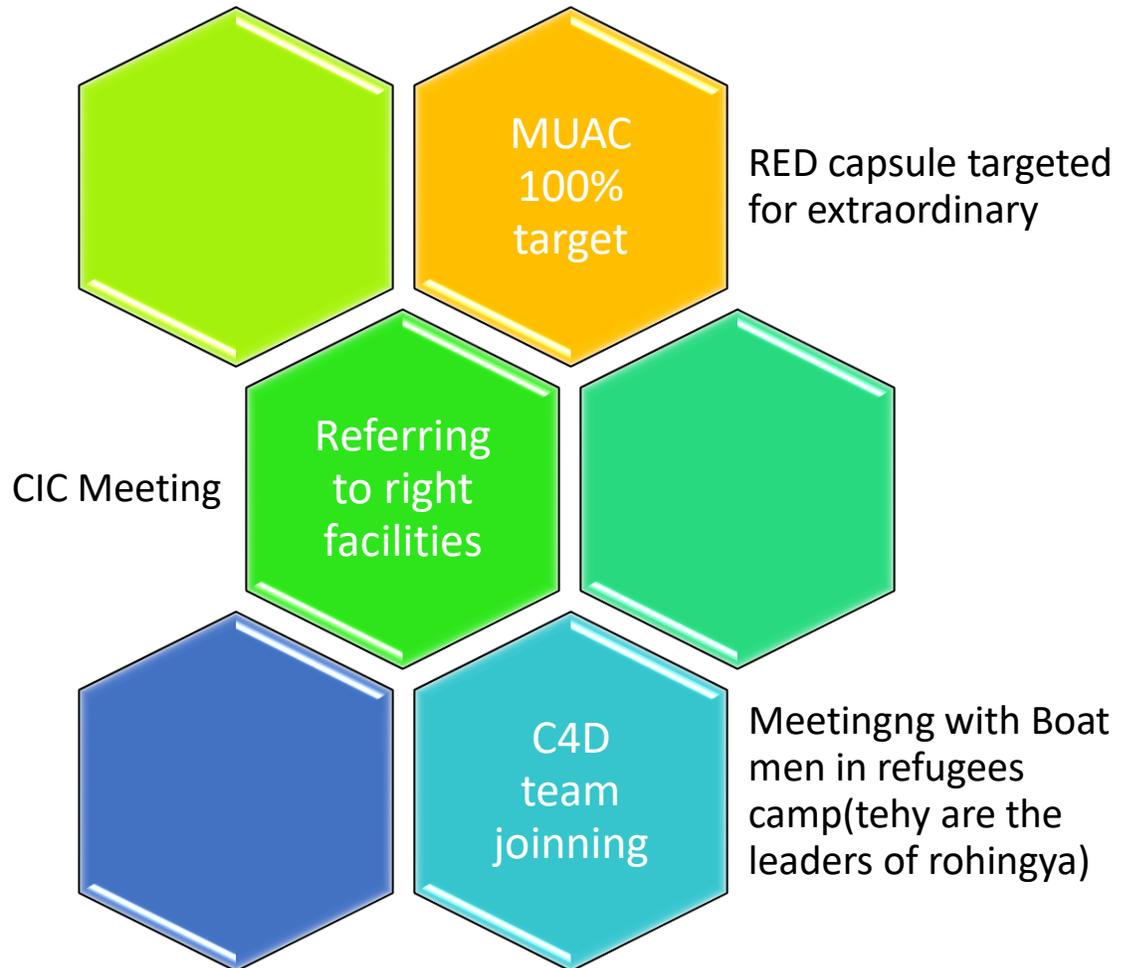
Section round and pre plan works also distributed for the implementing partners.

Day 3 for final type recoding and the selected statement for 22 individual camps.



Effort observing of the delivery approach other participant partners of the camping to made it a successful program and a standard presentable data to worldwide.

6.2 Target before the week start the pre works held at my camp Jamtoli refugee camp 15.



The week started with the visiting and the motive and coloration with the site staffs of the save the children (SIC) OTP camp 15 also connected with the SARPV and Concern worldwide of rest two site of the camp.

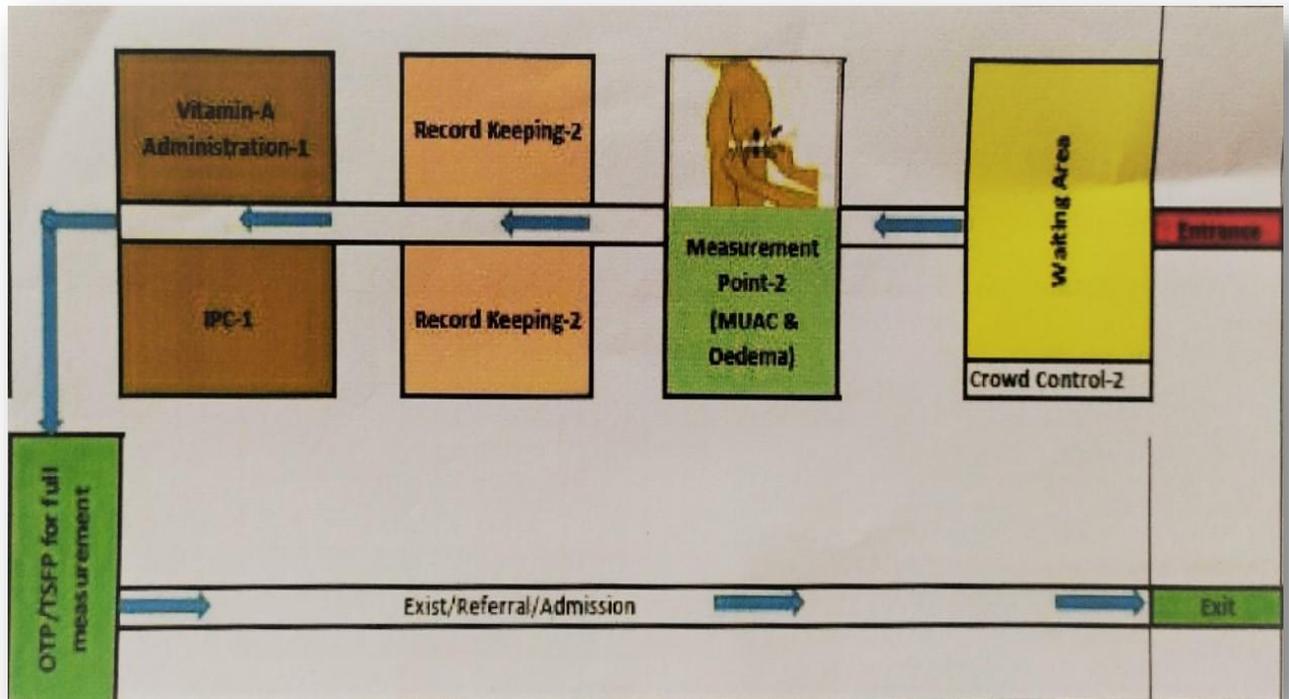


Figure: Systematic diagram of the daily participation

- ✓ Ensured the before giving the capsule the edema will must be checked.
- ✓ If there were no MNR card the house old number card entire as MNR card but before that facility ID number (like my one was SCI OTP-59) 5959 included and then the household number was entered.
- ✓ Facility Id started the number of 0001 the 1...2...3....4.....5 etc.
- ✓ Referred in OPT as SAM> YES

Referred as MAM>NO

- ✓ Referred as MAM in TSFP>NO
- ✓ Rest of refers from SIC OPT-59 only referred in the facility of SARPV TSFP.

7.1 Individual child registration form

S	MNR	Name	Age	Sex	Guardia	Majhee	Block	House	Vit.	Vit.	M	SA	MA	At	Ref
L	Card				n	Name		hold	Red	Blu	U	M	M	Ri	er
	No.				Name			No.	(6	e	AC			sk	NO
									to	(12-					
									11)	59)					
1.															
2.															
3.															
4.															
5.															
6.															
7.															
8.															
9.															

- ❖ In my Save the Children site SCI arranged 10 of volunteers and staffs for my supports.

- ❖ The camp focal who was the lead of the individual camp reorganized the thing from the first day I supervised the activity during the action week project and also helped my staffs and volunteers with the recommendation.



Figure: MUAC screening of children

- ❖ In the site there was two permanent entire staff whom that I selected and the field site the teams who went to door to door for camping along data collection there was one volunteer for entry and one women volunteer for give the capsule.

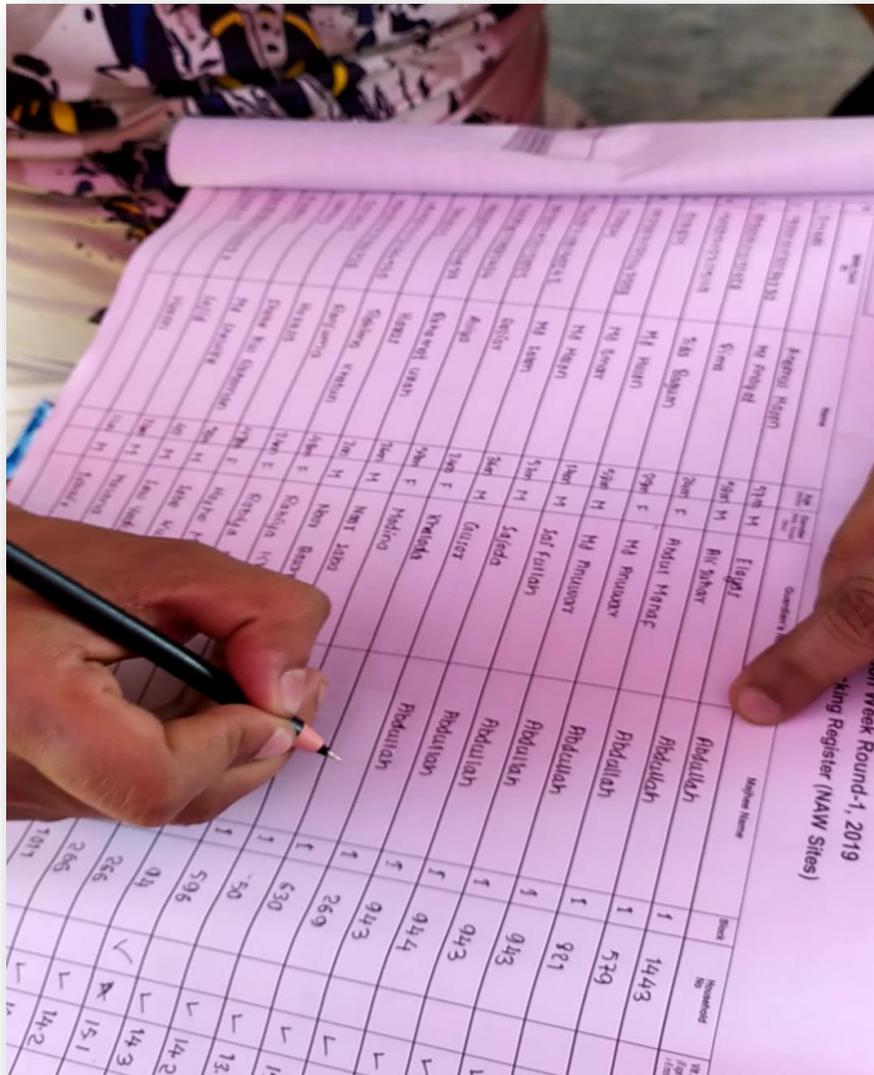


Figure: During the entry at the site of Individual Child Registration form

- ❖ In the meantime I input the collected data into ODK.



Ending the daily task the registration form and left items was finalized by the camp focal with the other site supervisors for final reporting in daily regulation



8.1 Few Individual Child Registration in several day

S L	MNR Card No.	Name	Age	Sex	Guardia n Name	Majhee Name	Block	House hold No.	Vit. Re d (6 to 11)	Vit. Blu e (12- 59)	M U A C	SA M	MA M	At Ri sk	Ref er NO
1.	19954 87525 21502 55214	Sadia Begum	29	F	MD. Anowar	Abdulla h	I	5822	Yes	No	12. 3		Yes		T- 59/ 246 532

Summary:

There we got a child who was 29 months old and she went for first edema test and then full measurement. She had the MNR card which contains number 19954875252150255214. The guardian and majhe name included and she came from I block and household number also inputted. During full measurement we found her MUAC test is 12.3 which mentioned she has MAM. But we gave her A plus red capsule because she had no Edema or chicken fox or not even any severe disease. We referred her to TSFP with a referral number. After this she with her guardian went to TSFP of site at SARPV in camp 15. No remarks delivered.

S L	MNR Card No.	Nam e	Age	Sex	Guardi an Name	Majhe e Name	Bloc k	Hous ehold No.	Vit. Re d (6 to 11)	Vit. Blu e (12- 59)	M U A C	SA M	M A M	At Ri sk	Ref er NO
1.	19955 72281 52025 2	Kazi Rahi m	9	M	MD. Nuru	Abdull ah	F	5855	No	Yes	10.8	Y e s			T- 59/68735

Summary:

There we got a child who was 9 months old and he went for first edema test and then full measurement. He had the MNR card which contains number 1995572281520252. The guardian and majhe name included and he came from F block and household number also inputted. During full measurement we found her MUAC test is 10.8 which mentioned he has SAM. It identified as serious condition. We didn't gave him A plus capsule. We referred him to OTP and admitted in our own OTP (SCI OTP-59). Remarked as severe condition need good surveillance.

S L	MNR Card No.	Name	Age	Sex	Guardian Name	Majhe Name	Block	Household No.	Vit . Red (6 to 11)	Vit. Blue (12 - 59)	MU AC	S A M	M A M	At Risk	Refer N O
1	2688 4851 9852 0	Rukia Jahan	18	F	Shakila Khatun	Abdur Rahim	F	2658	Yes	No	12.9			Yes	T-59/ 68 73 5

Summary:

There we had a child who was 18 months old and she went for first edema test and then full measurement.

She had no MNR card but she had house hold number. The guardian and majhe name included and she came from F block and household number also inputted. During full measurement we found her MUAC test is 12.9 which mentioned she was in at risk. But we gave her A plus red capsule because she had no Edema or chicken fox or not even any severe disease. We didn't referred. No remarks delivered but gave her present guardian some counselling.



S	MNR	Name	Age	Sex	Guardian	Majhe	Block	Household	Vit. Red	Vit. Blue	MUA	SA	M	At	R
L	Card		e		Name	Name		No.	(6 to 11)	(12-59)	C	M	A	Risk	ef
	No.														er
															NO
1	12355 58984 95453 24	Nurul Huda	11	M	Khod eja Ara	Hamid	I	118	No	Yes	14				

Summary:

There we had a child who was 11 months old and he went for first edema test and then full measurement.

He had MNR containing number 12355589849545324. The guardian and Majhe name included and he came from I block and household number also inputted. During full measurement we found his MUAC test is 14 which is extraordinary and identified as he is in good condition. And we gave him vitamin A plus blue capsule because he is below 12 months. We didn't referred. No remarks delivered and a satisfactory child registration.

9 Finalization for Result create

From the real funding to total plan work the terminology fix plan on the NAW Round-1 2019 was big task. In my camp 15 of Save the Children (SCI) almost covered 2889 children (Screening) and provided the capsule the essential supplement which one the method of the emergency nutrition.

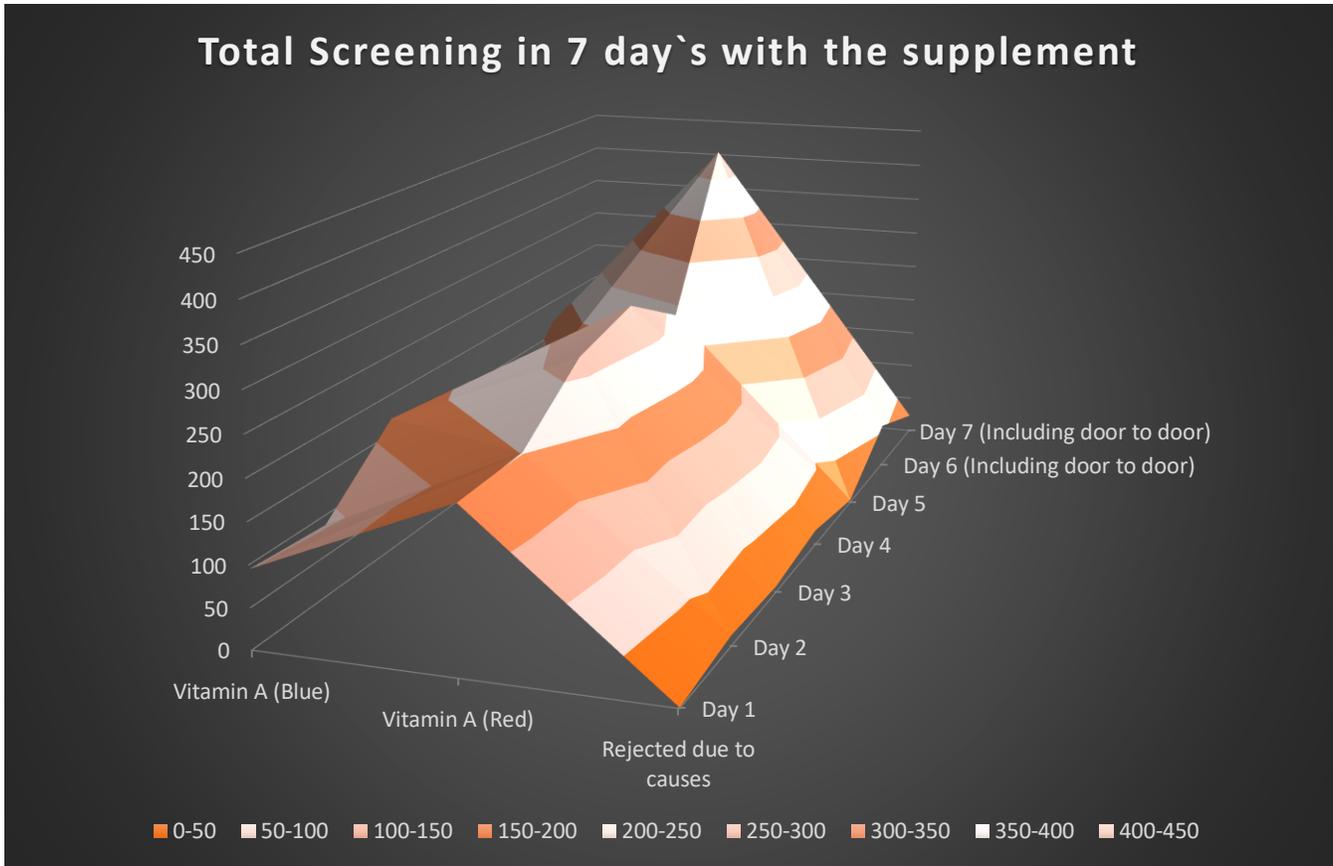


Chart: Day to Day Progress of NAW Round-1 2019

10 Conclusion:

UNICEF, Bangladesh monitored for the child nutrition to total health related issue for last three years after the influx of the refugees Rohingya who`s were forcefully displaced from their motherland Myanmar. Nutrition action week in one of major impact for the children nutrition.

By the comparison with 2017 and 2018 NAW program the Round-1 of 2019 made big difference and welly cover almost 1.5% of million Rohingay children where`s not only the vitamin A capsule were provided but also the total body and health condition collected by the various process by the experts and those huge data will beneficial for these adorable children whom are facing terrible health problem in the remote and unstable place like refugees camp. We with the UNICEF aid with Civil Surgeon office with almost 20 of INGO/NGO played an astonishing role play at this NAW round one.



Reference:

1. UNICEF 2015, *Humanitarian Action for children*, 16 May, 2019, [https://www.unicef.org/appeals/files/2019-HAC-Bangladesh\(2\).pdf](https://www.unicef.org/appeals/files/2019-HAC-Bangladesh(2).pdf)
2. Relifweb n.d. *Humanitarian Action for Children 2019 – Bangladesh*, 01 June, 2019, < <https://reliefweb.int/report/bangladesh/humanitarian-action-children-2019-bangladesh>>
3. UNICEF 2018, *Humanitarian Situation Report (Rohingya Influx)*, 29 May, 2019, <[https://www.unicef.org/appeals/files/UNICEF Bangladesh Humanitarian SitRep Rohingya influx March 2019.pdf](https://www.unicef.org/appeals/files/UNICEF_Bangladesh_Humanitarian_SitRep_Rohingya_influx_March_2019.pdf)>
4. Prothom Alo 2019, *National Nutrition Week begins*, 05 June, 2019, <https://en.prothomalo.com/lifestyle/news/174569/National-Nutrition-Week-begins>
5. Facility Registry 2019, *Cox's Bazar Civil Surgeon Office*, 13 June, 2019, < http://facilityregistry.dghs.gov.bd/report_org_list.php>