

BANGLADESH

REFUGEE RELIEF, DISASTER PREPAREDNESS, CAPACITY BUILDING

CHF 5,351,000
20,000 beneficiaries

Programme No. 01.30/98

Myanmar Refugee Relief Operation

The Bangladesh Red Crescent Society (BDRCS) has been responsible for distributing food and other basic relief items since 1992 to Myanmar refugees in camps located in the Cox's Bazaar and Bandarban Districts of south-east Bangladesh.

The refugees started arriving in late 1991, their numbers peaking at 265,000 in mid-1992. They come from Rhakine State in Western Myanmar, which has a common border with Bangladesh of some 300 km. Inhabitants of this part of Myanmar have sought refuge in Bangladesh on several occasions.

Repatriation started in late 1992. By early 1994 the population had stabilised at around 200,000 persons located in 18 camps. During 1994, the repatriation of refugees escalated from near stagnation to a peak of 24,000 in November. By mid 1995, however, the rate had dropped to some 200 people per month, as the review of the remaining caseload by the Government of Myanmar slowed almost to a standstill. During 1995 and 1996 a total of 80,000 refugees were repatriated; by the end of July 1997 the cumulative repatriation numbered 229,483 persons. Towards the year's end, two refugee camps remained, with a total population of approximately 20,000 persons.

The Operation

Government Action

The GOB continues to administer the camps and provide storage for food, supplied by WFP. The Ministry of Health provides the health service for all except children under ten years. The Department of Public Health provides water supplies.

Red Crescent Action

In the two remaining camps, two BDRCS teams totalling 23 staff assisted by 31 volunteers manage the weekly distributions of food to all refugees and distribute fortnightly or monthly other items such as cooking fuel, soap, blankets, etc.

Other Agencies' Action

MSF Holland, Concern and IIRO remain as providers of preventive and clinical care for under ten year olds. Therapeutic and supplementary wet feeding for children under five is carried out by MSF Holland and Concern and supplementary dry rations are supplied to pregnant women and lactating mothers.

Objectives in 1998

Some 20,000 refugees will probably remain in the two camps of Kutapalong and Nyapara in 1998, requiring the continuation of distributions of food and other items. It seems unlikely that the Government of Bangladesh will recognise and register any new arrivals, given its reluctance to accept those who arrived in 1997 and their classification as illegal immigrants. Any reduction of numbers will depend on the rate at which GoUM is able to expedite its review of returnee applications and, since repatriation is voluntary, on the perceived/actual situation in Myanmar.

The operation will run from 1 January 1998 to 31 December 1998, maintaining the present level of ration distribution for 20,000 refugees in the two camps. Repatriation will be monitored and appropriate assistance provided. If the number of refugees declines in the course of the year one camp may be closed and BDRCS staff reduced accordingly.

Plan of Action

Food items will be distributed weekly, non-food items weekly and bi-weekly. A two weeks' ration will be supplied to each returnee immediately before departure. The daily food ration works out at approximately 1,900 kcal and 33.17 gr protein per person per day.

If, as expected, the camp population remains stable the operation will be manned by a programme director and 23 BDRCS staff. Additional assistance with distributions will be provided by 31 volunteers receiving a small daily allowance. These 23 staff and volunteers will continue to be supported by one Federation delegate.

The programme will continue to include the training and development of BDRCS personnel in the technical aspects of relief management. Information/dissemination seminars on the Movement's Principles and activities will be an element in the training package. If possible, this training will be extended to implementing partners, their staff and management/executive personnel.

Statistical reports are submitted by BDRCS to GoB on a quarterly basis; reporting will continue within the established framework. BDRCS will continue to be responsible for initiating reporting on income from sources other than the Federation.

The budget makes provision for funding throughout 1998. However, should the operation (against most expectations) be concluded before the end of the year, funds will be transferred to the Federation Rehabilitation/Reintegration Programme for the returnees in Myanmar.

Capacity

National Society

Because of the disaster vulnerability of Bangladesh, disaster preparedness and response is the National Society's biggest programme and permanent first priority, and a sphere in which it has accumulated years of experience.

Federation

The Federation Delegation comprised a Head of Delegation and five delegates at the end of 1997. Within the Federation Delegation, the Disaster Preparedness Delegate will continue to be responsible for assisting, supporting and monitoring the operation.

Co-operation

The BDRCS/Federation will maintain current levels of co-operation and co-ordination with GoB, UNHCR, NGOs and other agencies.

BDRCS Capacity Building

Institutional Development

National Headquarters Programme

In 1997, progress was made in transforming the National Headquarters, in accordance with a consultancy report and the criteria of a "Well-Functioning National Society". Priorities for 1998 focus on the need to continue to strengthen governance and management functions. A management information system and new administrative and financial rules and procedures will be introduced. In-house and external training of key managers will continue. Major efforts will be made to develop a comprehensive fund-raising plan and to step up in-country fund-raising initiatives, as well as to formulate a long-term strategy for widening the financial resource base towards self-reliance. The National Headquarters will be renovated in order to provide a safe and functional working environment.

The Second Phase Feasibility Study on Property Development will concentrate on an assessment of the BDRCS properties in and outside Dhaka. The results of the study will be used to prepare a proposal for financial resource development.

District Unit (BDRCS Branch) Capacity Building

(Budgeted and planned within the Community Service, the Community Based Disaster Preparedness and the Health Programmes).

To reach the Society's ultimate goal — a network of 68 strong and pro-active district Branches — Branch institutional development was started in 1997 in 28 Branches: 13 Branches within the CBDP Programme and 15 Branches within the Community Services Programme. In 1998, this work will continue in the 28 Branches and be started in five new Branches within the CBDP Programme. The main focus will be on the creation of the necessary infrastructure and capacity to manage sustainable activities; orientation and dissemination of RC/RC principles and International Humanitarian Law; intensified fund-raising; promotion of a broadbased and active membership.

Institutional Development of the Health Sector

The BDRCS is providing essential services, particularly to rural people, through its health programmes, based on a Primary Health Care (PHC) approach. The BDRCS health units work in places where government facilities are scarce. BDRCS is also involved with blood donor recruitment and blood collection. BDRCS has four General hospitals, six Maternity hospitals, three Out-patient Clinics, two Eye Hospitals and 61 MCH centres. All services are facing major financial, managerial and technical problems.

The objective is to support the BDRCS Health Division's Institutional Development. A review of its health programmes in the last quarter of 1997 focused on the development of a health policy, a strategic plan, and programme Plans of Action for 1998-2001. Individual development plans will be prepared for each activity. The technical capacity and participation of Branch volunteers, national and field level staff will be ensured through participatory planning workshops, training seminars and short-term courses for effective, decentralised programme development and management.

Community Services Programme

The Community Services Programme focuses on those Branches which have a large socially and economically deprived population, but are situated outside highly disaster prone areas. It was started in mid 1997. For 15 targeted project villages in 15 Districts, saplings will be planted, and training in community-based first aid and installation of tube-wells and slab latrines will take place. The responsibility for implementation will rest with the Branch Executive Committee and volunteers, supported by a Branch officer and the NHQ.

Community Based Disaster Preparedness (CBDP) Programme

Because Bangladesh is hit each year by flooding, tornadoes, river erosion, and drought, as well as cyclones, this programme aims to develop the Disaster Preparedness capacity of BDRCS Branches in highly disaster-prone Districts. It will promote a more decentralised, flexible and cost-effective approach to disaster response. The National Headquarters will also be strengthened to provide co-ordination, support, supervision and advice to the Branches. In 1997, a Disaster Management Division linking the CBDP Programme, the CPP Programme and Relief Activities was established in line with this goal.

Each Branch will develop a District Emergency Plan and build the human and material resources necessary for its implementation. Local fund-raising for this plan will raise awareness of DP as well as the profile of the Branch. 13 Branches were supported in 1997 to recruit and train CBDP squads of 28 volunteer members who are now active in DP activities. The Squads will be supported at NHQ level by the Disaster Management Division and the Disaster Advance Response Team (DART) and Disaster Health Response Team, when established.

The most vulnerable communities in each District will be targeted. As an entry point to the communities, work began in September 1997 on sanitation projects and health awareness in 13 communities. A further five communities will be added in 1998 and a start made on raising awareness, community-based first aid, disaster early warning and training.

Cyclone Preparedness Programme (CPP)

The Cyclone Preparedness Programme is a well-established, key activity, partially funded by the Government. Its network of 33,000 volunteers promotes community awareness, disseminates warning signals to vulnerable communities along the coastal belt, assists with evacuation and provides first aid and relief during cyclones. The CPP radio communications system, the largest in Asia, provides the only reliable means of communication pre- and post-cyclone for the entire coastal belt.

The focus in 1998 will be on increasing the effectiveness of the warning systems through community awareness and the extension and upgrading of the system, including the radio network. Post cyclone damage assessment will also be improved. Further training of newly-recruited volunteers, including 5,466 female volunteers, will be carried out. The need to integrate women into the programme has been recognised and efforts intensified to increase their participation. The training of CPP staff officers will continue and the programme will be reviewed and evaluated to ensure better responsiveness and flexibility. Offices in some Thanas and in the NHQ will be upgraded.

Blood Services

The BDRCS Blood Centre in Dhaka was established in 1981. By mid-1993 it was 70% self financed. Since the Centre has not been able to keep pace with current technology, in 1998 the BDRCS/Federation aims to strengthen the capacity of collection/donation of the BDRCS blood bank. The provision of a safe blood supply through the introduction of HIV/AIDS screening is a first priority. The BDRCS/Federation will seek the support of a specialist for six weeks to support the Centre's technical development.