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SITUATION OVERVIEW

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IOM ASSISTANCE TO AFFECTED COMMUNITIES SINCE MARCH 2020

IOM RESPONSE (NATIONAL LEVEL)

POINTS OF ENTRY

During the reporting period, IOM organized a two-day-long workshop on “Development of standard operating procedures (SOP) for land ports and railway stations” in collaboration with 16 experts from the Communicable Disease Control of the Directorate General of Health Services, the Institute of Epidemiology Disease Control and Research, the health authorities of land ports and railways and WHO. The SOP will be used to screen, detect, interview, report and refer suspected ill passengers at railway stations and land border crossing points in Bangladesh.

On 11 October 2020, IOM organized the sixth crisis management team meeting at Dhaka’s Hazrat Shahjalal International Airport, in order to assess and follow up on the ongoing health situation at the POE. A total of 23 participants from different government authorities and UN agencies were present.

During the reporting period IOM donated and installed five walkthrough metal detectors with temperature measurement gates at four POEs for authorities to screen the temperature of every incoming passenger and donated nine health screening desks to three of Bangladesh’s international airports to support health officers to better screen, identify, and refer suspected ill passengers at arrival and departure points.

Left and Centre - IOM donated health screening desks to support health screening at Shah Amanat International Airport in Chittagong. Right - On 7 October, IOM facilitated a workshop to develop COVID-19 POE-related SOPs for railway stations and land border crossing points. © IOM 2020
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The IOM-managed severe acute respiratory infection (SARI) isolation and treatment centre (ITC) in Leda and three temporary isolation facilities are collecting samples for laboratory testing of suspected severe acute respiratory infection cases. These facilities are also serving as sentinel sites for sample collection from acute respiratory illness/influenza-like illness patients for better surveillance and case identification. In the last two weeks, a total of 714 samples were collected and transported to the laboratory in Cox’s Bazar.

IOM is also supporting contact tracing activities for COVID-19 surveillance, which involves the identification and follow-up of persons who have been exposed to those who have contracted the virus. In addition to contact tracing volunteers of IOM’s site management and site development (SMSD) unit, IOM is providing tracing supervisors and medical support teams across 13 camps. A total of 25 contacts were successfully traced, monitored and quarantined during the reporting period. Rapid investigation and response teams (RIRT) are active in seven camps, with the aim to locate the shelters of COVID-19 positive patients and support community health workers (CHW) in counselling families on the available options for treatment and quarantine. The teams are also regularly following up on COVID-19 positive families who are home-quarantined and ensuring the delivery of food and liquefied petroleum gas (LPG). During the reporting period, IOM staff met with Disaster Management Union volunteers to discuss the challenges they face during contact tracing.

New KOBO tools for contact tracing and laboratory data management were developed by IOM to streamline and facilitate COVID-19 information management and became operational during the reporting period. The Early Warning and Alert Response System is active as usual for the early identification of infectious diseases.

The number for the Prottasha migrant hotline is featured on the Probashi Helpline platform, www.probashihelpline.com. During the reporting period, the hotline for migrants received 118 direct calls from callers in Bangladesh. A total of 109 migrants received telemedicine support through the Probashi Helpline, and over 2,138 migrants received information support. In the past two weeks, over 1,000 new users used the website. In the same period there has been an increase of 188 per cent of requests from migrants within Bangladesh looking for support or information on how to return to work in countries they were working in before the COVID-19 outbreak.
INFECTION PREVENTION CONTROL

Site Management teams continue to promote the campaign “No mask, no entry to the service point” with all service providers to ensure physical distancing and mask wearing for both staff and beneficiaries at distribution points.

The teams also continue their awareness campaigns through targeted sessions, door-to-door visits, radio listening sessions and video awareness session with all beneficiaries, including the most vulnerable ones, on COVID-19 prevention measures, testing, quarantine and isolation facilities, child protection messages for children and parents during monsoon, re-opening of registration sites, addressing worries about immunization. Five information boards were updated with COVID-19 related information, communication and education materials across three camps.

A ‘go and see’ visit to a quarantine facility was organized for 24 community leaders from Camp 20 Extension and ten Imams from Camp 20. The visits are an opportunity for community and religious leaders to see how facilities function and what treatment entails.

Reusable cloth masks were distributed to 60 different committees in seven different camps in Kutupalong Balukhali Extension. Each of the 3,763 committee members received two reusable cloth masks, totaling a distribution of 7,526 masks.

To ensure staff safety and maintain adequate infection prevention control, hygiene materials and personal protection equipment (PPE) were distributed to IOM supported health facilities. The distributions included 13,250 masks, 1,500 gloves, 1,500 pieces of biohazard bags, 810 drying tissues, 750 hand rubs, 570 face shields, 165 scrubs, 150 footwears, 140 soaps, 30 goggles, 30 pairs of gum boots and 5 heavy duty aprons.

Door-to-door COVID-19 messaging is ongoing in camps where IOM is the area focal point for providing WASH services, as well as in an additional camp where IOM is providing WASH services through an implementing partner. In the past two weeks, teams completed a total of 67,498 awareness-raising sessions. The key messages focus on maintaining social distance, covering your mouth or face when coughing or sneezing, avoiding touching eyes, mouth, and nose with unwashed hands, washing hands frequently with soap and water, avoiding close contact with sick people, cleaning and disinfecting frequently touched surfaces daily, and staying at home as much as possible.

Door-to-door soap kit distribution is on-going and a total of 10,474 soap kits were distributed to beneficiaries in Camps 9, 11, 12, 23 and 24 during the reporting period.

The IOM WASH unit provided 2,347 household hand-washing devices to beneficiary families in Camps 2W and 11. A total of 55,412 household handwashing devices have been distributed since the COVID-19 response started.

IOM WASH team has been facilitating the disinfection of WASH facilities and key camp locations with 0.5% chlorine solutions. In the reporting period, IOM provided 80 kg of HTH chlorine to the implementing partners in Camps 24 and 25 for disinfection activities. Since March, IOM has distributed a total of 194 backpack sprayers and 3,958 kg of 65% HTH chlorine.

The temperature screening points (TSPs) are operational in ten camps and IOM manages the TSPs in Camps 9, 19, 22, 25, and Panzabar road. To access a camp, individuals at the TSPs are requested to wash their hands before their temperature is measured by a volunteer using a non-contact handheld thermometer. During the reporting period a total of 69,832 people were screened at the entry points of ten different camps, and 18 individuals with high temperatures were referred to health centres.

RISK COMMUNICATION AND COMMUNITY ENGAGEMENT (RCCE)

During the reporting period, CHWs completed a total of 99,442 door-to-door visits and organized 4,646 court-yard meetings, reaching 205,651 people, in close coordination with all implementing partners.

Ten outreach teams, consisting of SARI ITC staff and CHWs, continue their communication activities by reaching out to beneficiaries in their own communities, enhancing community-based surveillance and risk communication, strengthening the continuity of other essential health services through health promotion and referrals and establishing a connection to home-quarantine positive COVID-19 cases who refuse facility-based isolation. During the reporting period, the teams conducted 9,803 household visits, 133 group sessions (targeting specific groups such as women, youth, and community leaders) and referred 998 individuals from the community to health facilities.
CASE MANAGEMENT

IOM is continuing to operate three SARI ITCs in Camps 2W, 24, and 20 Extension for the treatment of cases, with a total of 114 functional beds with the capacity to scale up to 214. A total of 11 suspected and 1 confirmed cases were admitted to these ITCs in the last two weeks.

During the reporting period, a 6-bed maternity ward was opened at the SARI ITC in Camp 20 Extension. Antenatal care, assisted delivery, post-natal and basic neonatal care services will be provided to women who have symptoms of or who have tested positive for COVID-19.

The 93-shelters quarantine facility at Camp 20 Extension contributes to the COVID-19 early containment efforts by quarantining the contacts of confirmed cases. Food and psychosocial support, as well as follow-up and health services are provided by IOM and partners. A total of 14 contacts were quarantined at Camp 20 during the reporting period.

The dispatch and referral unit (DRU) is continuing to coordinate live isolation bed capacity management and ambulance dispatch for the COVID-19 response. The DRU fleet consists of 22 vehicles, 9 IOM vehicles and 13 from partners. During the reporting period, DRU responded to 14 requests for transport support, both from host community members and refugees. Of the 22 total beneficiaries provided with ambulance/transport support, three were confirmed COVID-19 cases, four were suspected cases, one was a contact for the quarantine centre, two were humanitarian workers transported for COVID-19 testing, ten were contacts who had been discharged and provided with transport to return to their homes from quarantine facilities and two were other kinds of transport requests.

In addition, IOM is leading the coordination of the mobile medical teams consisting of health sector partners trained to deliver immediate life-saving health services and facilitate emergency referrals, in emergency events.

MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT

Mental health and psychosocial support services continued as usual at health facilities, which included individual counselling, psychological first aid (PFA), awareness-raising sessions and follow-up. MPHSS community-based activities, such as non-formal education activities, arts and crafts, socio-relational activities and home visits, are being gradually restored while maintaining social distance and ensuring safety measures.

Two group sessions of clinical supervision for senior counsellors and social workers were facilitated by the clinical psychologist, with the participation of 14 MHPSS staff members. The goal of the clinical supervision is to improve the capacity of the team to support the beneficiaries in a holistic way while building on their professional capacity and resilience to deal with personal issues.

In the ITC centres, 104 inpatient and outpatient beneficiaries received PFA and basic emotional support during the reporting period. A total of 58,667 beneficiaries were reached through MHPSS awareness-raising activities, including face to face and pre-recorded MHPSS key messaging and dissemination of the MHPSS hotline number. Basic emotional support was provided through the hotline to 98 beneficiaries, while 32 received in-depth individualized tele-counselling support by MHPSS counsellors.
On 15 October, a webinar titled “Let’s invest for mental health” was held, organized by the MHPSS working group and facilitated by IOM. A total of 49 participants from different agencies joined this session, including guest speaker Dr. Kamruzzaman Mazumdar from the University of Dhaka.

The MHPSS team organized several art activities with children from different camps and host communities in Ukhia and Teknaf. Drawing sessions help children to develop communication skills in a safe and healing environment and are a way for them to safely express their thoughts and feelings. Toy-making sessions were also conducted thanks to the participation of an expert volunteer from the community who taught children the visual artform of origami. A total of 88 children participated in these activities. At the suggestion from the community, henna tattooing sessions were organised for 20 adolescent girls. The sessions were very popular and the activity is regarded by the community to be beneficial for the mental wellbeing of young girls.

As part of the World Mental Health Day celebrations, knowledge-sharing sessions were organized. A total of 54 adolescents participated in the sessions and discussed burning issues (child marriage, dowry, polygamy, gender-based violence, sexual harassment, gender discrimination, etc.) that lead to stress, anxiety, and community violence. During these sessions, adolescents voiced their concerns on these issues and offered recommendations on how to address them.

The MHPSS team in Camp 10 organized a five-day workshop aimed at strengthening social cohesion, reducing mental health-related stigma and improving community access to mental health services. A total of 16 influential persons from the community, such as Majhis, Imams, Muajjins and respected elderly persons participated in the workshop. Among the topics that were discussed were social stigma and taboos related to mental health, dowry, early marriage, family and community violence, and polygamy. The participants explored how these issues create anxiety, stress, insecurity, hopelessness, helplessness, disrupt family dynamics and cause emotional and physical suffering that sometimes leads to self-harm.

A five-day session on mental health was also arranged in the Balukhali sub-center and saw the participation of 12 host community key people, such as teachers, local government authorities, businessmen, youth and elderly representatives. The importance of mental health and its connection to different pressing social issues were discussed.

The artisans of the Cultural Memory Center organized a session titled Shantir Mahfil (“Peaceful Gathering”), where participants expressed their appreciation for the centre and its activities and the healing role it plays in the community. During the session, teams took the opportunity to discuss the importance of mental health and ways to combat mental health stigma.

**PROTECTION**

IOM protection teams continue to mobilize key community-based groups including volunteers, women’s committees and other support groups. During the reporting period, IOM gender-based violence (GBV) team reached a total of 3,783 vulnerable individuals with COVID-19 prevention messages including hygiene and hand-washing sessions. As part of COVID-19 prevention measures, IOM GBV distributed soaps to 777 individuals, reusable and washable cloth masks to 1,099 individuals and sanitary pads to 44 women participating in hygiene and handwashing sessions. IOM partners reached 777 beneficiaries through GBV-related outreach and awareness raising.

IOM counter-trafficking (CT) team reached 1,297 individuals through 196 different sessions on COVID-19 prevention and shared protection messages regarding personal hygiene, physical distancing, avoiding mass gathering, information on treatment and isolation, and CT messages on potential risk and trends of human trafficking that may occur during the health crisis in the camp as well as in the host community.

Through door-to-door visits, as well as in the health premises in coordination with IOM health, MHPSS teams and community health workers, IOM child protection (CP) team continues raising awareness on COVID-19, on the importance of quarantine and isolation and prevention measures and on ITC and hospital treatment connected to child protection issues (such as planning a temporary family separation in case of hospitalization). The teams reached a total of 2,094 persons. Additionally, a total of 384 children and 192 caregivers received psychosocial support and were provided with the ‘My Hero is You’ storybook to raise awareness on COVID-19, printed by IOM.

IOM general protection team continued to conduct awareness on COVID-19 prevention and mitigation with a total of 6,288 Individuals targeted in Camps 9,10, 18, 19, 20, 20 Extension, 23, 24 and 25. The team also started the formation of Community Protection Committees in order for community-based awareness efforts to reach a wider audience.
Protection Mainstreaming Efforts

As part of IOM’s commitments towards the inclusion of people with disabilities (PWD) across its programming and operations, the SMSD team has developed a tool called “PWD inclusion checklist”, and assessed Camps 15, 19, 20, 20E and 18 against it. IOM is also coordinating with Humanity & Inclusion/Handicap International (HI) at Leda SARI ITC to assess the site for accessibility issues and to explore further collaboration avenues on rehabilitation services at SARI ITCs.

A Women’s Participation and Leadership training program has been piloted in Camps 18 and 20 Extension. Program trainers and IOM SMSD teams from the two camps conducted the 8-day Training of Trainers for 12 women selected as representatives from the Rohingya community. The trained participants will roll out the training to other women community leaders.

During the reporting period, IOM SMSD team organized a two-day refresher training for 97 Women’s Committee members from Leda and Alikhali. During the training, the women reflected on what they have learned in the last two and a half years and how their experience and skills contributed to community projects.

In Camp 22, IOM engaged 100 women, including extremely vulnerable ones, in different WPA programs which revolved around COVID-19 key messaging, fire safety and safe LPG management, cyclone preparedness, shed making and tree planting. During the reporting period, women planted 400 trees in different blocks and along roadsides and set up 11 sheds over water tap stands. Women participating in WPA programs also disseminated cyclone-related messages and reached 2,215 households through 77 awareness sessions. WPA members also visited 1,812 households and conducted 189 sessions at block level on fire safety and safe LPG management. In Camp 23, a total of 265 women participated in activities which included camp maintenance, newly planted trees watering, and safety messages dissemination.

CONTINUATION OF ESSENTIAL SERVICES

- A key pillar in the COVID-19 response is the continuation of essential services that includes the support for 35 IOM-supported facilities that provide primary health care. These facilities offer outpatient, inpatient and sexual and reproductive health (SRH) care services and were recently upgraded to be aligned with the latest IPC protocols. During the reporting period, a total of 38,795 consultations were provided, skilled midwives attended 120 births and 99 people were provided with emergency referral support to specialised services outside the camps.

- IOM sexual and reproductive health (SRH) teams continue to provide additional services such as antenatal, postnatal, assisted deliveries, basic emergency obstetric and new-born care, comprehensive emergency obstetric and new-born care, neonatal care, family planning, menstrual regulation and post-abortion care services. These services are ongoing in 22 IOM facilities or Government facilities supported by IOM, and services are available 24/7 in ten facilities.

- IOM delivered a total of 42,870 refills to the host and Rohingya communities during the reporting time. The continuous LPG refill ensures the essential supply of cooking fuel needs for the affected beneficiaries. Besides that, IOM also supported 2,266 new households from both the refugees and the host community through LPG support initiatives. The most vulnerable elderly beneficiaries in camps are also receiving porter support to transport their cylinders from the distribution point to their shelters. A total of 1,023 elderly beneficiaries were supported through this project.

Left - On the occasion of Global Hand Washing Day (15 October), IOM and partners organised hand washing demonstration sessions in Camps 20 and 20 Extension. The household handwashing devices (pictured) have been distributed to individual households to encourage beneficiaries to wash hands regularly and to reduce the need for using communal handwashing points. Right - IOM and partners organised an awareness-raising event in Camp 19. ©IOM 2020
SUPPORT TO HOST COMMUNITIES AND THE GOVERNMENT OF BANGLADESH

- During the reporting period, IOM distributed 3,620 cloth masks, 59 liquid soaps, three infrared thermometers and 150 locally manufactured hand sanitizers. The masks and hand sanitizers were distributed to beneficiaries attending the celebrations for the International Day for Disaster Risk Reduction 2020 on 13 October.

- A total of 44,739 individuals were screened during the reporting period at different local government offices through the infrared thermometers provided by IOM.

- While increased awareness on physical distancing remains a key preventive measure to reduce the transmission, a total of 38,655 individuals benefited through awareness-raising initiatives supported by IOM-trained disaster risk reduction (DRR) stakeholders.

IOM has received funding for the COVID-19 response from:

[Logos of various funding agencies]

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