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**Landslides in the Chittagong Hill Tracts**

**HCTT\_HRP Report #1** (as of 31 July 2017)

**Overview**

Complementing Government of Bangladesh’s efforts, Humanitarian Partners are supporting the response in line with the [Humanitarian Response Plan (HRP)](http://reliefweb.int/sites/reliefweb.int/files/resources/Bangladesh_RP.PDF) developed by the Humanitarian Coordination Task Team (HCTT) based on the related [needs assessment](http://reliefweb.int/sites/reliefweb.int/files/resources/NAWG%20Report%20on%20Landslides_FINAL_%2020%20June%202017.pdf) prepared by the Needs Assessment Working Group (NAWG). This report presents a synthesis of the main relief activities implemented in the month of July. Detailed cluster/sector responses can be requested to cluster/sector focal points indicated in the HRP.

During the reporting period, assistance was provided in Food Security, Health, Protection (Gender Based Violence), Shelter, Water, Sanitation and Hygiene (WASH). A total of US$ 2.2 million representing 22% of the funding requirement was mobilized by the partners. During this reporting period, 18,000 persons were assisted out of a targeted population of 51,000. New deadly landslides occurred in the Chittagong Hill Tracts and, in neighboring districts during the last week of July. The incessant and heavy monsoon rain is aggravating an already precarious situation and, it impedes relief efforts. It also restricts access to emergency medical, psychosocial, and legal services by the affected population.

To date, national authorities are still sheltering around 1,500 persons who are receiving 3-cooked meals per day. National authorities are also effectively supporting landslide victims (deaths’ and injured persons’ families) through the provision of cash and food packages. Current level of assistance is saving lives but is insufficient to return to the pre-disaster conditions. Source of funds are mainly partners’ own resources but also, the Central Emergency Response Fund (CERF) and the START Fund. Private sector companies such as Grameen Phone and Banglalink are also supporting the response.

**Cluster/sector responses**

**Food Security:** Food assistance provided by the Adventist Development and Relief Agency (ADRA), the International Federation of Red Cross and Red Crescent Societies (IFRC)/Bangladesh Red Crescent Society (BDRCS) and World Vision benefited to 4,300 households (HH).



**Gender Based Violence:** Gender-based Violence (GBV) emergency response efforts are currently implemented in Rangamati district by Action Aid Bangladesh and Green Hill in partnership with UNFPA. Key response actions conducted include the distribution of 1,500 Dignity Kits and, the training of 100 service providers and community focal points on available health, legal, and psychosocial services for GBV-survivors and, on practical approaches for conducting safe, timely emergency referrals. Moreover, four safe spaces through which survivors may access multi-sectoral service referral and psychosocial support were established. All persons in collective shelters received information regarding the identification of GBV cases and response services.



**Health:** 60 Medical Teams assisted 5,500 patients. WHO distributed 50,000 Cholera Salines to manage water borne diseases and, 100 Inter-Agency Emergency Health Kits. UNFPA has supplied 850 clean delivery kits to visibly pregnant women through government field workers and 30 others for community outreach workers. Supplies and equipment for the clinical management of rape were distributed and, health staff were oriented on their use.



**Shelter:** Action Aid, Caritas, Catholic Relief Services, IFRC/BDRCS and World Vision Bangladesh provided emergency shelter assistance to 1,648 HH. UNDP will soon assist 1,500 additional HH and, with IFRC’s support, BDRCS will reach another 650 HH. With the support of the Global Shelter Cluster, technical trainings were conducted and information, education and communication materials were developed to support partners in the design of reinforced emergency shelters as well as tips for strengthening shelter resilience.



**WASH:** The Bangladesh Rural Advancement Committee (BRAC), the Department of Public Health Engineering (DPHE), UNICEF and World Vision Bangladesh provided WASH assistance. Contaminated water sources were treated both in Rangamati and Bandarban for the benefit of 14,000 persons. 14 water points were installed and water collection material distributed. Water trucking was organized to provide safe drinking water to more than 3,000 persons accommodated in emergency shelters. Temporary latrines for men and women were installed in 5 emergency shelters. Soaps and materials for cleaning the toilets were provided in all emergency shelters. Moreover, adolescent girls in those shelters received hygiene kits. Other WASH-related kits were distributed to 2,000 households.



**Multi-purpose cash assistance:** During the reporting period, 2,431 HH received multi-purpose cash assistance from Action Aid and IFRC/BDRCS following the guidelines developed by the Cash Assistance Working Group (CAWG).

**Gaps in the response**

Community members are grateful to the national authorities for the assistance received and the support provided. However, there are clear needs for complementary assistance. For instance, persons who have lost family members and persons who sustained injuries received direct cash assistance from the national authorities. In most cases, they also lost their houses and all the belongings. In those circumstances, these persons are currently saving funds received from national authorities in the hope to re-build a house in the future. Those who lost their houses but did not receive any financial assistance are unable to save funds to build a new house.

Furthermore, incessant heavy rainfall in the Chittagong Hill Tracts are exacerbating all humanitarian needs identified and are increasing the risks of further landslides and floods. Updated information collected by FAO indicates that more than 170 shops sustained heavy damages in Rangamati. If not made functional rapidly, landslides impact on livelihoods and food security would aggravate further. Gaps in all sectors of the response are significant. In the emergency shelters, rapid measures should be taken to improve the privacy, dignity, and safety of non-related households by ensuring adequate living space and separations in overcrowded, shared-living environments. In parallel, GBV-related risks for women and girls should be reduced notably by ensure that latrines are safely accessible to them, that water collection is safe and facilitated and, that unregulated entry and exit of collective shelters by the public is restricted, particularly at night. Health Education and Psychosocial are required. 24/7 maternal and newborn emergency services should be strengthened as well as the surveillance system of communicable diseases. Additional health kits are much needed to manage highly probable disease outbreaks. UNDP and UNWOMEN’s early recovery assessment confirmed notably that the urgent restoration of sustainable livelihood was required, notably for women to facilitate the early recovery of the affected population. The repair and rehabilitation of essential community infrastructure such as roads, bridges and culverts need to be promoted through cash for work assistance.

According to the Government D-form information 39,164 persons remain severely affected in Bandarban and Rangamati. Next to budgetary information is a table presenting an updated breakdown of several affected persons based on D-Form information received during a recent mission of the Resident Coordinator’s Office in the Chittagong Hill Tracts.

**Budget information People severely affected**





**For further information, please contact:**

*Satya Brata Saha,* Additional Secretary, Ministry of Disaster Management and Relief, Government of Bangladesh, HCTT co-chair, sbs.bipul@gmail.com and, *Henry Glorieux,* Humanitarian Affairs Advisor, HCTT co-chair, henry.glorieux@one.un.org