Three Years On:
Rohingya Refugee Response Report 2020
“Tell them we are human.”

A Rohingya leader conveyed that message to Mr. Bob Rae, then Canada’s Special Envoy to Myanmar, during his 2017 visit to the camps in Cox’s Bazar, Bangladesh. He had asked the young man what Canada could do to help the refugees.

The Rohingya leader’s words stand true today. Three years on into this protracted humanitarian crisis, 860,000 Rohingya are still living in limbo in the world’s largest refugee camp. It’s unlikely that conditions will be conducive for them to return home to Myanmar any time soon. Without citizenship in Myanmar or recognized refugee status in Bangladesh, the Rohingyas’ future remains uncertain at best. World Vision’s top priority remains protecting the rights, dignity and well-being of Rohingya refugees, especially children, as people created in the image of God.

This past year has been one of remarkable achievement in our work with both the refugees and vulnerable Bangladesh host communities. I would like to commend our outstanding, dedicated team of more than 600 full-time response staff, 1,100 field facilitators and volunteers. They have consistently delivered quality, life-sustaining assistance despite unprecedented challenges, including the COVID-19 crisis.

Your support enabled us to innovate, adapt and deliver cost-effective services across seven sectors to 498,906 refugees in 34 camps, as well as 200,000 Bangladeshis in host communities. Our budget more than doubled from USD26.9 million in Year 2 to USD59 million in Year 3.

• Education: In partnership with UNICEF, we constructed 18 learning centres, providing daily informal education sessions for up to 3,356 children and 3,503 adolescents.

• Food assistance: In partnership with the USAID Bureau for Humanitarian Assistance programme to improve the food security and nutrition of 74,736 Rohingya refugees and 5,229 vulnerable host community members affected by the influx.

• Host communities: In close collaboration with the Government of Bangladesh, we expanded our two new long-term development programmes in Teknaf and Ukhiya. More than 200,000 Bangladeshis in eight villages in Ukhiya, including 1,030 sponsored children, are already benefitting from these multi-sector programmes. This year, we also provided 16,887 community members affected by the refugee influx with periodic cash assistance to improve their social welfare.

• COVID-19 crisis: In March, we pivoted our entire programme to focus on slowing the spread of the virus. We quickly disseminated life-saving prevention information and distributed soap to 17,700 refugees. We also engaged 500 faith Muslim faith leaders to help us get the word out. When prevention precautions restricted our access the camps, we trained 56 Rohingya “lead mothers” who successfully carried on the campaign, reaching 1,400 fellow refugees.

As we enter Year 4 of the humanitarian response, we will continue to support Rohingya refugees to build the skills and capacities they need for their sustainable return and reintegration in Myanmar when conditions become conducive. We will advocate for increased access to formal education for children and adolescents, and for livelihood opportunities for adults.

We are deeply grateful to our government partners, dedicated donors and generous supporters worldwide for their unwavering commitment. Together, may we respond to the plea to “tell them we are human,” and dedicate our best efforts and resources to serving Rohingya families and Bangladeshis in need.
### Rohingya Refugee Response Impact

498,906 refugees reached with life-saving humanitarian assistance.

#### EDUCATION

- **18** learning centres constructed.
- **3,356** children attended learning centres.
- **22,972** children supported with psychosocial services.
- **3,503** adolescents (girls and boys) participated in skills development programmes for learning, personal empowerment and employability.

#### GENDER-BASED VIOLENCE PREVENTION

- **6,759** refugees (men, boys, girls, women) participated in GBV awareness and prevention training.
- **3** women and girls’ safe spaces (WGSS) constructed.
- **2,827** women and girls received feminine hygiene materials.
- **355** women and girls participated in WGSS programmes.

#### NUTRITION

- **35,861** girls, boys, and pregnant and lactating women received blanket supplementary feeding/therapeutic supplementary feeding, nutritional support.
- **4,568** people received management of acute malnutrition services.

#### FOOD SECURITY

- **10,176** households provided with monthly food assistance.
- **217,999** people received food vouchers to exchange at WFP stores.
- **USD 18 million**: value of food vouchers provided to refugees.
- **227,326** refugees and host community members reached with prevention information.
- **16,887** host community members, including 2,738 with disabilities, provided periodic cash assistance to improve their social welfare.

#### COVID-19 INTERVENTIONS

- **548** faith leaders (Rohingya and Bangladeshi) engaged to disseminate information and sustain hope.
- **21,131** refugees received hand-washing supplies.
- **8,661** refugees received hygiene kits.

#### WASH

- **35,325** refugees, including 565 people with disabilities, reached with clean water and sanitation facilities.
- **322** bathing spaces constructed.
- **1,373** handwashing stations installed.
- **402** latrines constructed.
- **498,906** refugees reached with life-saving humanitarian assistance.
My name is Parvina. (Note: Name has been changed to protect her identity.) I am 17 years old. I am a Rohingya Muslim and I used to live in Myanmar.

My father died when I was young. After my mother remarried, living with my stepfather was tough. I came to Bangladesh with my uncle when I was nine years old. I worked for a family for four years as a domestic worker. They did not pay me. They said they would raise me and find a husband for me. The next family I worked for paid me 2,000 taka (about USD23) a month. I had to work all day and night. I could not take the hardship.

When many Rohingya came to Bangladesh [in August 2017], I moved to the refugee camp to be with my people. I met a boy from Myanmar who is four years older than me. I shared my struggles with him. He told me, “I will live my life with you.”

I thought, ‘If I get married, I will have peace and I will have shelter.’ I got married when I was 15-and-a-half years old and now we have a baby. When I was pregnant, I was still a child. I did not have self-confidence. Tamanna, a World Vision worker, heard about my difficulties. She supported me a lot. I went to the hospital for regular check-ups with her. She brought me nutritious food.

I was not mature enough to get married. If I hadn’t got married, I could have enjoyed my life. My wish for other girls is for them to get married after they are 18 years old when they are mature. I wish a better life for them.

If you want to stop early marriage, you can do one thing. You can organise meetings, invite girls along with their parents and speak with them. If you speak about the effects of early marriage—the good and the bad impacts—and how child brides suffer, maybe they will understand and think about it before they get married.
EDUCATION

Rohingya children deserve education, too

Rohingya children and adolescents know clearly what they want: access to formal education, and they want it now.

More than 400,000 school-aged children in the camps have missed three years of education—years they can’t make up. At present, they do not have access to formal education. Temporary learning centres and madrassas can offer only informal educational services, catering to primary school-aged children. The majority of adolescents age 15 to 18 fare worse, with virtually no opportunities to access any form of age-appropriate education.

Rohingya parents, teachers and leaders fear that a “lost generation” is evolving—children whose educational prospects have permanently dissolved.

Education provides physical and psychosocial protection for children, particularly during conflict and displacement. The prolonged denial of access to formal education puts Rohingya children at significant risk of child labour; trafficking, prostitution, forced and early marriage, sexual- and gender-based violence, substance abuse, anti-social behaviour and the potential risk of radicalization. Children face remaining trapped in cycles of poverty with associated income- and food insecurity.

Without the opportunity to undertake primary and secondary formal education using the Government of Myanmar’s curriculum while in the camps, Rohingya students cannot systematically obtain the benchmarks needed to prepare for and pass matriculation exams. Opportunities to improve their own lives will remain firmly out of reach in Bangladesh and when they eventually return home to Myanmar.

World Vision continues to advocate for Rohingya children’s access to education. To fill a temporary gap, this year we completed the construction of 18 learning centres for children and adolescents, funded by UNICEF. Children learn basic literacy, numeracy and life skills, in addition to studying English and Burmese. Adolescents participate in technical workshops, such as solar appliance repair for boys and tailoring for girls.

The centres are a safe haven, especially for adolescent girls whose movement in the camps is normally restricted. The daily sessions provide a sense of routine and stability that helps children recover from the stress many experienced during their violent exodus from Myanmar and to cope with the hardship of life in the camps. We provide psychosocial support for children in need, and involve their families through parents’ committees and workshops on child protection.

3,356 children attended learning centres.
22,972 children supported with psychosocial services.
3,503 adolescents (girls and boys) participated in skills-development programmes for learning, personal empowerment and employability.

The 400,000 school-age Rohingya children need access to formal, accredited education. To help fill that gap, this year we provided informal educational services to children age 3 to 14, and technical skills training to adolescents age 15-19. Above: Adolescent boys learn how to repair solar panels—a valuable skill given that every refugee family owns one in the camps where there is no electricity. Below: Rohingya adolescent girls chose to learn tailoring—typically a male domain in their culture. World Vision worked closely with parents to gain their trust and obtain permission for their daughters to attend the daily courses. Most adolescent girls are confined to their shelters as parents fear for their safety.

Shabir Hussain/World Vision
John Warren/World Vision

Shabir Hussain/World Vision
Rohingya men unite to prevent violence in their homes, community

Obaidur firmly believes that good teaching can influence men for good. He’s seen that happen in his own life through his participation in a men’s group aimed at addressing gender-based violence.

"Now we know why problems arise in our families and how to solve them," says Obaidur, a 58-year-old respected Rohingya majhi (camp leader), who is the father of eight sons. "We have learned these things from the sessions World Vision organized for us."

The group has 250 active members. Like Obaidur, many were upstanding community leaders in Myanmar before extreme violence forced them to flee their country.

"I was a chairman of 11 villages with nearly 14,000 families. Most were farmers," recalls Obaidur. "People were very hardworking. I had 70 cows and 50 goats, and I owned a bus and two trucks."

Today, Obaidur lives in a one-room shelter with his family, alongside almost 860,000 fellow refugees. For food and other basic needs, they depend on aid from humanitarian organisations serving in the camps.

Despite the challenges, Obaidur and his fellow group members want to help build peace in the camps where they have lived for three years. But preventing and stopping gender-based violence is not easy here where stress levels run high as couples struggle to feed their children while worrying about their future.

"There are many reasons why quarrels and physical violence happen in the camp," says Obaidur. "Men cannot provide food for their families, and there are shortages. Women ask, 'Where is the salt and oil?' Men cannot buy them because they can’t earn an income. Men get angry; women don’t listen. Quarrels happen in the family and escalate in society."

Obaidur says many issues come up when the men’s group meets to discuss social issues in one of eight tea corners constructed by World Vision. "We have learned many good things sitting together," he says. "When our NGO brothers share new things and techniques with us, we can adopt and apply them in our families."

Change is gradually happening, says Obaidur. He is applying his new learnings in his own family. "For example, I now know that women should be respected for their work. Sometimes they get stressed because they have many household chores," he says. "So I help my wife to cut vegetables, collect water and other small tasks."

6,759 refugees (men, boys, girls, women) trained in GBV-awareness and prevention.

355 women and girls participated in programmes at WV safe spaces.

2,827 women and girls received feminine hygiene materials.

8 men’s tea corners built.

658 men, 326 boys participated in GBV/COVID-19 awareness sessions.

Domestic violence constitutes 76% of all reported cases. Women and adolescent girls can find support and referral services at our safe spaces.

GENDER-BASED VIOLENCE PREVENTION

Breaking the silence together

Together, Rohingya women and men, as well as adolescent girls and boys, are striving to change the way their community and culture view gender-based violence (GBV). They are increasingly at the centre of addressing their own protection needs and finding workable solutions to this deeply entrenched social problem. World Vision is supporting them every step of the way.

In the camps, GBV is a constant threat. Reported incidents include rape, physical assault, sexual violence, forced marriage, denial of resources and psychological abuse. Domestic violence constitutes 76 percent of the total reported GBV cases. As GBV is generally under-reported, the recorded cases likely represent only a small fraction of the overall number. Adolescent girls, who are more vulnerable to child/forced marriage and sexual violence, face heightened obstacles to access services.

With generous funding provided by the Governments of Australia, Japan and New Zealand, World Vision conducted several innovative GBV-awareness and prevention projects this year.

Anchored in a rights-based, community-based approach, World Vision is creating safe spaces for Rohingya women and men to discuss GBV in their families and community. They are identifying domestic violence as a problem and talking about solutions—often for the first time in their lives.

Men and boys are learning how to become champions for women and girls. We are also equipping GBV survivors with the skills and resources they need, and linking them to professional services provided by the camp-wide protection sector, as needed.

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In partnership with the World Food Programme and UNICEF, through our food assistance and nutrition programmes we are helping Rohingya mothers to raise healthier families. Shabir Hussain/World Vision
Slowing the spread of COVID-19 in the camps

Adequate WASH services are critical to reducing mortality and morbidity, and enhancing refugees’ protection, dignity and quality of life.

The goal of our extensive WASH programme is to ensure that all refugees, and affected host communities have regular, sufficient, equitable and dignified access to safe water for drinking and domestic needs. We also work to ensure that they have adequate, appropriate sanitation facilities. And we promote good hygiene practices, as well as providing practical materials, such as soap, toothpaste and feminine hygiene products.

This year, World Vision’s WASH team preserved through innumerable challenges to deliver clean water and sanitation services to a record-breaking 34,325 refugees. They constructed hundreds of latrines and bathing spaces during extreme heat and monsoon rains. And even before the first COVID-19 cases were reported in Bangladesh in March 2020, our WASH team acted swiftly to get life-saving prevention information out to refugees and host communities. They engaged more than 450 Rohingya faith leaders to help spread the word. The team trained hundreds of adults and children on proper handwashing, social distancing and correct mask usage. They dispelled rumours and myths about the virus, and equipped families with the knowledge and skills they needed to protect themselves.

Practical support accompanied the public health information. In partnership with UNICEF, World Vision distributed 264,975 pieces of soap to 17,665 families (88,325 refugees). We set up handwashing stations in all our field distribution points and camp facilities, including food assistance points, women’s safe spaces, community kitchens and children’s learning centres. World Vision’s effective WASH programmes received generous support from DFAT, DFID, GAC, IOM, MFAT and UNICEF.

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Pump it up: Network delivers water on-tap

In 2019, World Vision constructed an innovative solar-powered water network that delivers clean water to the doorsteps of up to 5,000 Rohingya refugees in Camp 15 and 360 people in surrounding host communities.

“We had great difficulties to get water in the past,” recalls Shahanara, a 25-year-old Rohingya mother of three young children. “My husband and children had to climb up the steep hills to our home several times a day after collecting water from a tube-well pump in the valley.”

According to international humanitarian standards, refugees need at least 15-20 litres of water per day per person for drinking, bathing and household needs. This means Shahanara and her family had to haul aluminium water jars weighing 15 kg uphill five or six times a day.

Water shortages forced Shahanara’s family to make hard choices. “Before we only bathed once or twice a week and rarely washed our clothes.”

In Rohingya culture, fetching water is usually women’s work—and it’s often risky: “The area around the tube wells is crowded and many men are around. Girls feel insecure and uneasy about going there,” explains Shahanara. “It was also especially difficult for pregnant women to go down and get water: Only the Almighty could see our sufferings.”

To address the problem, World Vision installed two 250-metre deep boreholes on one of the camp’s highest hills. The water is purified by an automated chlorine dosing system and stored in two tanks that hold up to 190,000 litres.

“There’s no electricity in the camps, but we do have 12 hours of sunshine for most of the year,” says WASH Manager Gunjan Gautam, an engineer who supervised the challenging year-long project. “We use solar power to pump the water from the boreholes to the tanks and out to the community. It’s economical for long-term operation and maintenance.”

Fifty-six solar panels (each one 310 watts) generate eight kilowatts of electricity daily—enough to run the motorized pumps that distribute water to 30 tap stands via a 3,055-metre pipeline network.

“We have easy access to a clean water right near our house now,” says Shahanara. “My children have enough safe water to drink. We can take a bath every day, and wash our dirty clothes and bed sheets every week. The tap stands are close to our shelters so girls feel safe when they collect water. Thanks to those who made this possible. You have a place in heaven for what you have done.”

35,325 refugee, including 565 people with disabilities, reached with clean water and sanitation facilities.

6 solar-powered water networks in three camps benefitting 21,274 people. (UNICEF)

1 solar-powered water network benefitting 7,282 people. (DFAT Australia)

2 solar-powered water networks benefitting 10,000 people. (GAC)

4 faecal sludge management plants, 2 solid waste dump sites constructed.

Even before the first case of COVID-19, we distributed 264,975 pieces of soap to 17,665 families (88,325 refugees). Xavier Sku/WorldVision

Funded by Global Affairs Canada, this solar-powered network delivers water to 5,000 refugees. Himaloy Joseph Mree/WorldVision
of breastmilk; only 64 percent of these children are exclusively breastfed.

Addressing malnutrition in the camps is a top priority for World Vision. Funded by the World Food Programme and UNICEF, our extensive prevention and treatment programmes are saving lives and making a measurable difference.

Blanket supplementary feeding: To prevent acute malnutrition, we conducted a blanket supplementary feeding programme in three camps in 2019, and we are currently serving five in 2020. All children under age 5 and all pregnant and lactating women living within our nutrition centres’ catchment areas received monthly supplementary food rations. We closely monitored those assessed as being undernourished and they received additional therapeutic feeding. We served 13,780 girls and 14,775 boys, as well as 3,868 mothers, effectively helping to prevent malnutrition.

Acute malnutrition management: We have been providing management of acute malnutrition in children under age 5 and pregnant and lactating women since 2018. This year, we shifted our services to five new camps and began managing cases of serve acute malnutrition for patients without medical complications through an outpatient therapeutic programme. Severe cases with medical complications were referred to centres run by other partners. Targeted supplementary feeding was also implemented for children and women suffering from moderate acute malnutrition.

Awareness raising and counselling on infant and young child feeding (IYCF): Our teams held information sessions to engage mothers, adolescent girls, household heads and community leaders on child nutrition practices. We also trained Rohingya women as “lead mothers” to pass on their new-found knowledge to others. Our community workers went house-to-house to provide iron and folic acid supplementation to thousands of adolescent girls, and pregnant and lactating women, in order to help prevent anemia.

NUTRITION

Fighting malnutrition, one child at a time

Good nutrition is an essential foundation for health and development, yet malnutrition continues to be the world’s most serious health problem and single-biggest contributor to child mortality. It’s no different in the Rohingya camps.

Despite improvements since the refugees arrived in 2017, levels of malnutrition among children, adolescent girls, and pregnant and lactating women remain a serious concern. Chronic malnutrition (stunting) is still high at more than 30 percent across the response.

Infants are particularly vulnerable. A reported 30 percent of infants under six months of age are at risk of malnutrition. Up to 30 percent of infants are given pre-lacteal food during the first three days after birth; 5 percent of infants age 0-5 months are fed formula instead of breastmilk; only 64 percent of these children are exclusively breastfed.

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Enhancing refugees’ dietary diversity, dignity

Najir, 42, carefully selects a kilogram of perfectly shaped, unbruised apples for his seven children—a rare treat for Rohingya refugee families.

Najir enjoys choosing food for his family at the large e-voucher store run by the World Food Programme (WFP) in partnership with World Vision. His assistance card entitles him to shop at one of 15 WFP stores in the camps, including four run by World Vision, that serve more than 600,000 refugees. Each family receives an assistance card loaded with 840 taka (USD10) per family member per month. Najir can choose from 20 staple items and fresh food, including live fish and chickens, fresh fruit and vegetables, eggs, salt, spices and sugar.

As of February 2020, 70 percent of the 855,000 Rohingya in the camps are enrolled in the e-voucher system, according to WFP. The remaining refugees receive monthly rations of oil, lentils and rice. All refugees will transition to the e-voucher system this year.

Najir’s wife, Somsida, 37, recalls how monotonous it was to eat the same food constantly before they received their card. “Every day, it was the same rice with lentils,” she says. “My children wanted to eat fish and meat. We had none. We even could not even afford vegetables.”

The e-voucher programme ensures that refugees have more choice over the food they eat, while supporting their dietary diversity and their dignity, says Geoffrey Ocen Kotchwer, World Vision’s food assistance manager. “In the shops, our staff are trained to explain clearly how the e-voucher system works and help ensure that all people are treated respectfully.”

To strengthen women’s control of household resources, the assistance cards are issued in the name of the senior most woman in the household (whenever possible). They can opt to nominate an alternative to purchase on their behalf.

Najir’s children laugh with excitement as their father arrives home, carrying bags of food. “They love apples,” says Najir. “Every time I go to the shop, I make sure I keep enough money on the card to buy some for them. When I see them eating apples and smiling, I feel peace.”

Rohingya families remain 100 percent reliant on food assistance, with almost none being able to afford a nutritious diet, according to recent studies. They have few opportunities to produce their own food, limited financial and physical access to food, as well as limited income sources, and they face movement restrictions and protection issues.

In partnership with the World Food Programme (WFP), World Vision is providing direct life-saving monthly food assistance (rice, lentils, oil) to 10,176 households, representing more than 50,880 people. We also served 217,999 refugees who receive e-vouchers that they exchange for food at WFP shops in the camps. Families can choose from up to 20 food items, including staples and fresh meat, vegetables and fruit, enabling them to improve their dietary diversity. In 2020, all refugees will transition to the e-voucher system.

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FOOD SECURITY

WV and WFP: Feeding 268,880 mouths a month

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World Vision plays a critical role in ensuring that beneficiaries are well served through the e-voucher shops. Staff members go door-to-door in the camps to inform refugees about the new system and register them. They handle any complaints or concerns, such as lost cards, and work with local suppliers to guarantee the quality of the food provided.

Our teams also ensure that every shopper’s food is accurately measured, weighed and properly debited from the e-voucher assistance card. World Vision also hires porters who carry the heavy sacks of food home for single mothers, the elderly and people living with disabilities.

In local host communities, we also supported 16,887 of the most vulnerable members, including the elderly, widows and people living with disabilities, with periodic cash assistance toward their basic needs.
EMERGENCY FOOD SECURITY PROGRAM (EFSP)

Reaching refugees, local residents with food assistance, training

Food security is a serious concern in Bangladeshi communities in Ukhiya and Teknaf upazilas, and in the nearby Rohingya refugee camps. In the camps, poor dietary diversity is a key reason for malnutrition given that most households have difficulty accessing fresh food. In the host communities, the prolonged humanitarian crisis has contributed to rising food prices and falling wages.

Funded by USAID Bureau for Humanitarian Affairs and implemented by World Vision, our 24-month Emergency Food Security Program supports both Rohingya refugees and vulnerable Bangladeshi households in Cox’s Bazar District who are affected by the ongoing crisis.

This innovative programme equips Rohingya refugees and Bangladeshi community members with knowledge and know-how, enabling them to improve their families’ nutrition and food security today and for years to come.

**Project goals:**

- Increased consumption of diverse, quality foods that meets the nutritional requirements of vulnerable households in refugee camps and host communities.
- Enhanced capacity of refugees and host communities to withstand future shocks.

The programme will support 74,736 refugees across 22 camps and 5,229 host community residents in five unions in Ukhiyga and Teknaf sub-districts.

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CASH-FOR-WORK/NUTRITION (EFSP)

“I can see my village developing, and so am I.”

Farida never imagined her life could change so much, so fast. A mother of two young children from Ukhiya upazila in southern Bangladesh, Farida recently started her first job. She is working on a road rehabilitation project, earning 5,600 taka a month (USD68) under a cash-for-work activity funded by EFSP and implemented by World Vision. “This is the first time I have ever earned money by working myself,” Farida said.

Farida has big plans for her hard-earned wages. “Our house is very old and could fall down from the wind. I always dreamed about having a better shelter for my children,” she said. “My husband drives a rented taxi motorcycle, but he earns very little and could not afford to pay for a better home. Now we both work and I earned enough to repair our home.”

Farida, one of 900 women enrolled in the cash-for-work programme since December 2019, is eager to take steps to improve her children’s future. With income from her new job, she could pay monthly school fees for her seven-year-old daughter, Bubul, which is something unusual in her low-income community.

As one of 150 “lead mothers” in the programme’s new community nutrition groups, Farida is learning about savings and money management so she can maximize her nine months of cash-for-work earnings.

“They teach us about saving money and how to make a profit from a small business and from gardening,” she said.

Farida and the other lead mothers are helping mobilise more than 1,800 other women in their community to promote good family health at home. She is also learning about good nutrition during the training sessions.

“We are changing our food habits. Before we always ate the same kind of food, and we didn’t like to eat vegetables,” Farida said. “Now, we are including variety in our meals, especially for our children.”

Farida is proud of her contribution to her family and to her community as one of 5,207 residents making a lasting difference through the programme. “I can see that my village is being developed, and so am I.”
“My children love meals with cooked dried fish,” says Toyeba, 40, a mother of five sons and three daughters. “Before, I couldn’t afford to buy it. Now, using my fresh food vouchers, I can buy dried fish for them, as well as eggs, and sugar.”

Toyeba and her family are among the 74,736 refugees who received fresh food through USAID’s Emergency Food Security Program implemented by World Vision.

Toyeba appreciates the monthly food vouchers that she receives because they allow her to purchase a variety of food so she can prepare tasty, nutritious meals for her family. Each family receives a voucher worth USD10 per family member that can be exchanged for fresh vegetables, fruit and staples at 10 outlets in 13 camps that are stocked by local Bangladeshi traders contracted by World Vision.

The fresh food vouchers complement monthly rations of rice, lentils and oil that the refugees in the camps receive from the World Food Programme (WFP). Currently, about half the population also receive fresh food supplies from WFP’s e-voucher shops, on top of their regular rations. WFP plans to transition all refugees to the voucher system soon. Until then, World Vision is filling an important gap by giving mothers like Toyeba access to vitamin-rich foods that her children need to thrive.

“Being able to choose her own food gives her a sense dignity and control over decision making,” says Toyeba. “One without the other wouldn’t give me what I need to cook complete meals for my family.”

In April, COVID-19 lockdown measures reduced the number of World Vision field staff who could access the camps. To ensure that critical programmes continued, our teams trained 56 Rohingya lead mothers who reached 1,391 fellow refugees through 276 health and hygiene sessions on COVID-19 prevention, nutrition, and gender-based violence awareness, as well as monsoon and cyclone preparedness.

“Before, we didn’t know how to influence other people. At the centre, we are learning things like hygiene and handwashing, and how to convince others in a good way to do this, too,” says Fatima, 25, a Rohingya mother of five.
With 40,000 people per square kilometre, the Rohingya refugee camp is one of the most densely populated places on Earth. Practicing social distancing and other COVID-19 prevention measures is extremely difficult. Refugees come in close contact when they queue for food assistance or fill buckets at the community water point. Most families share a latrine with up to 20 people. They need masks to protect themselves, but sufficient quantities to cover almost 1 million people are in short supply.

To help Rohingya families stay safe, we began training refugee women to sew re-usable cloth masks. As of the end of June, 56 women trainees have produced 11,747 cloth masks, as part of the EFSP project. More than 9,166 face masks have been distributed to 4,583 households.

“At this crisis moment, the face masks are life-saving for us,” says Hajera, a camp leader and mother of four. “My family and everyone in my block feel blessed to receive them.”

Escape extreme poverty for people living on less than USD1.25 a day is difficult. But it’s happening for Gul and her five children, as well as 1,400 of her neighbours living in Ukhiya, a sub-district in southern Bangladesh.

Gul, 40, is participating in World Vision’s five-year Gender Inclusive Pathways Out of Poverty (GPOP) project for vulnerable families. Funded by the Australian government, this ultra-poor graduation scheme benefits 15,000 local residents affected by the influx of 740,000 Rohingya refugees into Cox’s Bazar district in August 2017. A UN Development Programme study published in 2018 estimated that prices for essential goods skyrocketed by 50 percent, while daily wages dropped by at least 15 percent. This year, the COVID-19 crisis exacerbated the already critical situation.

Gul and her fellow GPOP participants received an investment asset of their choice (chickens, goats, vegetable seeds or small-business materials). They are also benefitting from related training, temporary income support for food, nutrition classes and repeated visits from project coaches to reinforce the training and bolster their confidence. Lastly, participants learn how to set up savings groups and open a bank account together.

Gul chose to invest in commercial vegetable production, and she harvested her first crop this year. She received vegetable seeds, fruit-tree saplings and 12,800 taka (USD156) in conditional support, part of which she used to lease land for one year. Supported by her husband and family, she cultivated a wide variety of vegetables and sold her crop for 15,000 taka (USD183). Today, her children enjoy having fresh food on the table daily, and Gul can pay their school fees with her profits.

The GPOP project is just one of the many ways that World Vision is advancing sustainable livelihoods and long-term development in host communities. This year, we expanded our two new long-term development programmes in Teknaf and Ukhiya, supported with private and grant funding. To date, more than 200,000 residents in eight villages, including 1,030 sponsored children, are participating in community development initiatives.

1 UNDP, Impacts of the Rohingya Refugee Influx on Host Communities, November 2018.
I remember those first days when the Rohingya arrived in Bangladesh in September 2017. Our team worked without food, drenched in the rain. We worked all day assisting families living on the roadsides. At night, we filed reports and prepared materials for the next day. We hardly slept, but I didn’t feel tired for a single minute. I felt I was doing what I was meant to do: helping people who needed our support.

I remember back in April 2018 when we distributed building materials to nearly 1,000 refugee families right before the rainy season started. It was a huge task that took almost a month. Families lined up every day to get the bamboo poles, tarps, rope and tools they needed to repair their shelters before the monsoons hit. I worried about the children’s health. If families couldn’t repair their shelters in time, everyone would suffer. The children would get sick when rain flooded their homes. When our team finished delivering the materials, we felt so good.

Some people ask me if it’s hard to lead a mostly male team and work with male refugees who have traditional views. To be honest, sometimes I have to work harder than I need to accomplish something. But I can usually

Monsoon rains, washed out roads, unending logistical challenges and COVID-19. Nothing stops our team from getting the job done. Their motivation? Compassion for the some of the world’s most vulnerable children and their families, both Rohingya refugees and local Bangladeshis in need. Two of our 600 outstanding staff members, 1,100 field facilitators and scores of community volunteers share why they do what they do.

“I’m proud to be a servant of humanity. Women in our community cooking centres have learned to make delicious, nutritious food, and they are honoured in their families for this. Through sessions here, they have also learned to resolve quarrels in their families. When they share both words of happiness and their sorrows with me, my heart is filled with joy.” Lima Mary Rozario, Field Assistant

“I work with Bangladeshi mothers in the host community. They have little knowledge about nutrition; some of their children suffer from stunting and wasting. The mothers themselves are in poor condition, too. I give them basic information about what to feed their babies. It makes me so happy when I see them practicing this and their health improving.” Musharraf Marin-e-um, Nutrition Officer

Driven by compassion

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As a Muslim, I always pray for the Rohingya refugees and everyone that the Almight will give us the strength to combat the coronavirus and protect us from it. I believe that we can stop this pandemic in the camp and around the world by working together and supporting each other. My father is no longer with us, but I know he would agree.”

Rachel Wolff (left), former Response Director with Lima Mary Rozario, Field Assistant, Community Cooking and Learning Centres.

Jon Warren/World Vision

Shahin Ara Chowdhury, 40, began her career with World Vision Bangladesh in 2002 as a disaster management officer, preparing communities for disasters and responding to emergencies. For almost two decades, she has worked on the frontlines during flooding, cyclones and landslides across Bangladesh. Shahin Ara was one of the first World Vision team members on the scene in August 2017 as more than 740,000 Rohingya Muslim refugees from Myanmar poured across the border into Bangladesh. Since then, this soft-spoken woman has headed our critically important distribution team. Shahin Ara and her team of nine men and women organize weekly distribution of life-sustaining materials—everything from soap to building supplies—for thousands of families. Recently, Shahin Ara’s work has become even more crucial as she helps refugees combat COVID-19.

"As a girl growing up in rural Bangladesh, I watched my father cope with devastation and death. He was a government official in the Social Welfare department, based in Chittagong. I remember how he worked day and night for weeks after Cyclone Bob slammed into Chittagong, Bangladesh’s second largest city, on 29 April 1991. More than 138,866 people died and millions of Bangladeshis lost their homes. My father left the house every day very early and returned home late at night, hardly slept, but I didn’t feel tired for a single minute. I felt I was doing what I was meant to do: helping people who needed our support.

My father’s dedication moved me. It changed my life forever. He encouraged me to go into development work. My father used to say, “If a woman enjoys her work, she should be given the opportunity to succeed.” In 2002, I joined World Vision as a disaster management officer. I’ve never looked back.

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ADVOCACY

How we influence for change

Advocacy is foundational to the Rohingya refugee response, especially given the complex protection and humanitarian access issues. World Vision is recognised in Bangladesh as a trusted voice and valuable partner working to protect refugees’ rights and well-being, in cooperation with UN agencies, fellow NGOs and government officials at all levels. This year, we used a wide variety of platforms and channels to advocate for change on many issues.

- Our Response Director served as co-chair of the NGO Platform Steering Committee, particularly influencing action on protection, child protection and humanitarian access restrictions.
- Our technical experts participate actively in all relevant sector coordination groups. We currently serve as the co-focal on the education working group and as co-chairs on the technical working groups for sanitation, livelihoods, transfers, and men and boys engagement.
- Internationally, we addressed member state representatives in Geneva on several occasions, as well as US State Department staff. In January, we hosted a three-day visit by two Canadian Members of Parliament, who later advocated for the Rohingya in Parliament and with their constituents. We also briefed several British MPs and DFID staff on refugee issues in March.

World Vision conducted the first research study on access to education that includes the views and opinions of Rohingya children and adolescents. More than 4,000 participants were interviewed including children, adolescents, youth, parents, teachers and faith leaders. The final report is to be published in October 2020.

- In partnership with several other leading NGOs, World Vision co-led the development of a briefing paper on the Rohingya’s refugee status in Bangladesh. Presented to UN leaders and donor representatives in Cox’s Bazar, Dhaka and Geneva, the well-received brief contributed to ongoing high-level discussions and reinforced INGOs support on this issue.
- We joined fellow NGOs in calling for internet and phone service to be restored in the camps. In effect since September 2019, the shutdown is risking the health and lives of over 1 million people in the camps and host communities by hindering aid groups’ ability to provide emergency health services and rapidly coordinate essential preventive measures, especially during the COVID-19 crisis.

ACCOUNTABILITY

Keeping children, communities at the centre

Rohingya men and women, boys and girls are at the centre of all we do, along with the most vulnerable Bangladeshis living in surrounding host communities.

The Rohingya people have faced statelessness, systematic discrimination and targeted violence for decades in Myanmar’s Rakhine State. The UN has described the violence that led to their mass exodus into Bangladesh in August 2017 as having “genocidal intent.”

Today, the 855,000 Rohingya living in the refugee camps find themselves wholly dependent on humanitarian assistance—not by choice. Survivors not victims, these adults and children continue to consistently demonstrate unimaginable strength and dignity in the most adverse conditions. Ensuring that we as humanitarian actors uphold their dignity, and recognize and respect their right to inclusive and equitable assistance, is crucial.

Guided by the international Core Humanitarian Standards, World Vision’s approach to assistance is community-led, rights-based and participatory. We engage refugees and community members to help us plan and implement programmes that meet their needs. We listen to their suggestions and discuss their preferences. Our teams provide communities with the information they need about services and activities, and we ensure they understand how they can give us feedback and make complaints. We also leverage their capacities and skills in all our work whenever possible.

Communicating effectively with communities during the COVID-19 crisis was especially important this year. Our accountability team shared timely, appropriate materials in Rohingya and Bangla on COVID-19 prevention that helped slow the spread of the virus and save lives.

Capturing, analyzing and using feedback is another critical way that World Vision stays accountable to those we serve. This year, we strengthened and refined our complaint, feedback and response processes by creating more ways for refugees to provide feedback and by increasing the number of help desks in the camps. Over 90 percent of all complaints received through channels, such as our help desks and feedback boxes, were resolved within 30 days.

We used this accountability data to inform our management decisions and adapt our programmes to better fit community needs.

Our staff assist refugee families as they queue outside WFP’s e-voucher store where they can purchase food items using pre-paid debit cards. Jon Warren/World Vision

World Vision works with UN agencies, fellow NGOs and local government to protect refugees’ rights and well-being. Jon Warren/World Vision

World Vision Bangladesh | Rohingya Refugee Response Report 2020
**Response Funding Portfolio by Year (Raised and Spent)**

- **YEAR 1**
  - US$10.75 Million

- **YEAR 2**
  - US $26.9 Million

- **YEAR 3**
  - US $59 Million

**Response Year 3 Funding Portfolio by Sector**

- Cash, Food Security and Livelihoods
- Nutrition
- WASH
- Education and Protection
- GBV Prevention

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**Camp Intervention Sites**

- **Kutupalong-Balukhali expansion site**, or **mega camp**

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**World Vision Sectors**

- Child Protection
- GBV
- Education
- Nutrition
- Food SecurityLivelihoods
- WASH

**Assets and Centres**

- Community Cooking and Learning Centres (34)
- Disaster Risk Reduction Project Sites
- E-voucher/GFD Sites (3)
- Fresh Food Market Sites (2)
- Access Market (1)
- Learning Centres (ages 3-14) (11)
- Nutrition Treatment and Prevention Centres (5)
- Mobile Children’s Centres (8)
- Multipurpose Child and Adolescent Centres (18)
- Multipurpose Training Centres (3)
- Men’s Teas (8)
- Women and Girls’ Safe Spaces (2)
World Vision Bangladesh is grateful for the generosity of international governments, United Nations agencies and the many private donors who fund our work through our World Vision Support Offices.

**World Vision Support Offices**

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