

# Humanitarian Response to the Fire in Rohingya Refugee Camp 13

## Situation Report 1

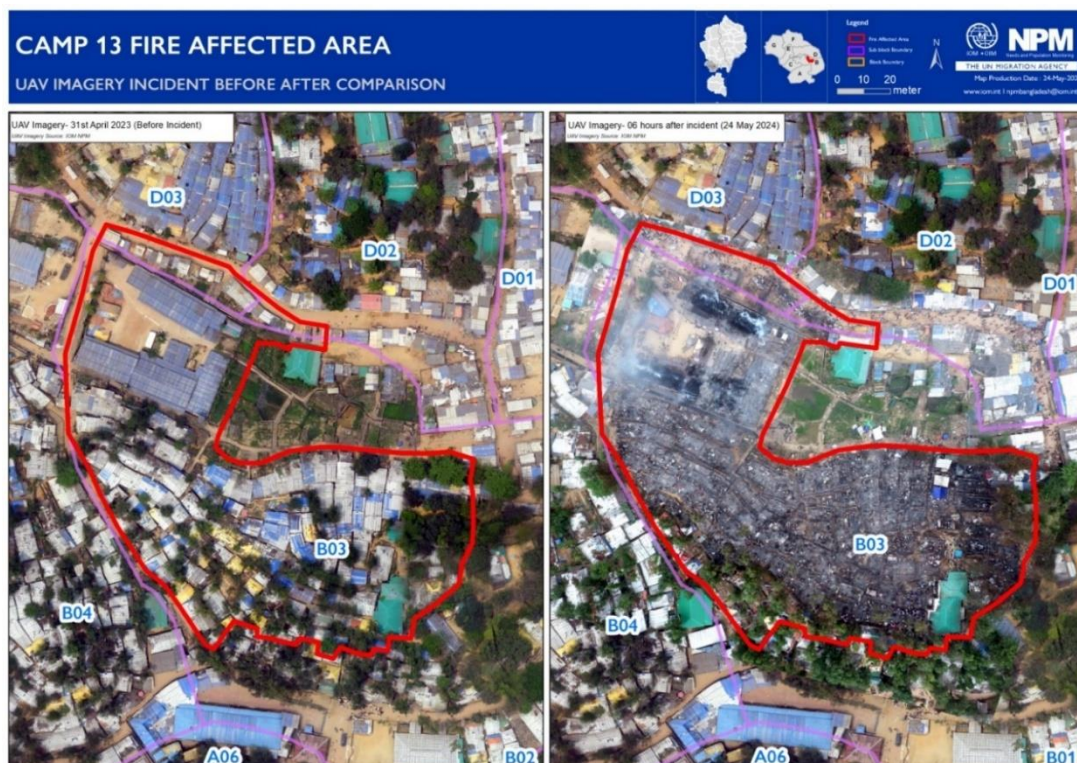
As of 25 May 2024



### Situation Overview

On Friday 24 May 2024 a fire swept through Camp 13 at around 10:15 am local time. Over 1,100 Rohingya refugees have been affected with destruction of shelters and loss of belongings, as well as destruction of camp infrastructure. IOM as the Area of Responsibility (AoR) agency was on the ground at the onset of the fire, as the teams were preparing the camps for a potential approaching cyclone. Under the leadership of the Refugee Relief and Repatriation Commissioner (RRRC) Office and in coordination with the Camp-in-Charge (CiC), IOM immediately mobilized response teams to assist the refugees and bring the situation under control with the Fire Service and Civil Defense. The Armed Police Battalion (APBn) and camp-based mobile firefighting units managed crowd control and fire extinguishing. Disaster Management Unit (DMU) volunteers were among the first to respond to the fire and created fire breaks to stop the fire from further spreading and to mitigate the loss of life and property.

Partners have conducted a preliminary assessment of the situation and needs of the affected people. The households affected by the fire are temporarily displaced and living in communal facilities and shelters of relatives and neighbours. Currently the area is being cleared of debris to allow safe access and mobility, with distribution of essential items and reconstruction to follow. So far, no casualties have been reported.



## Inter-Sector Response



### Shelter-CCCM Sector Lead Agencies: IOM and UNHCR

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#### Impact

- As of 25 May, around 221 shelters were either destroyed or partially damaged.
- The fire also damaged 17 solar streetlights, one lighting arrester, over 1,000 m<sup>2</sup> of slope stabilization mitigation measures, pedestrian access pathways and stairways, the drainage network and a number of fire points.

#### Response

- IOM is distributing emergency shelter kits to the affected households and technical support is being provided to install emergency shelters. Shelter kits have been distributed to 177 households so far. An emergency shelter kit contains two tarpaulins, 10 pieces of muli, two bundles of 6 mm rope and two bundles of 3 mm rope.
- Non-Food Items (NFIs) have been distributed to 154 households so far, including blankets, floor mats, mosquito nets, and portable solar lights. Clothing is being distributed by Save the Children, with support from IOM and Caritas.
- IOM together with the partners conducted a rapid assessment to identify the immediate needs. A total of 372 Rohingya community volunteers and 240 refugees through the cash-for-work facility were engaged in debris removal and clearing of walkways and other facilities to improve access through the affected area.

#### Challenges and Needs

- The approaching potential cyclone is expected to make landfall on 26 May and may create additional needs and slow down efforts in the fire affected areas.

#### Partners

- Save the Children, Caritas



### Food Security Sector Lead Agencies: FAO and WFP

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#### Impact

- 221 households were in need of food assistance in the aftermath of the fire.

#### Response

- On 24 May, WFP urgently provided emergency food assistance in the modality of hot meal packages to 1,000 individuals in the hours following the fire.
- On 25 May, WFP distributed 1,000 hot meal packages at lunch and 1,000 at dinner for a total of 2,000 meals to 221 households.
- 610 cash-for-work workers were deployed for site cleaning and 50 volunteers supported the food distribution.

#### Partners

- WFP



## **Water, Sanitation, and Hygiene (WASH) Sector Lead Agency: UNICEF**

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### **Impact**

- A total of 27 latrines, 8 bathing cubicles, 14 tubewells and 3 tapstands have been affected.

### **Response**

- Emergency water supply (trucking) and restoring existing water supply systems.
- 193 households received WASH emergency kits including menstrual hygiene management kits.
- Emergency repair ongoing to make sanitation facilities usable.
- Debris management also ongoing.

### **Challenges and Needs**

- Need for increased emergency response capacity.

### **Partners**

- SHED



## **Health Sector Lead Agency: WHO**

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### **Impact**

- Although the health facilities have not been directly affected, there have been several cases recorded requiring immediate health assistance and referral services. Furthermore, the fire incident impeded the movement and accessibility of individuals in need, particularly vulnerable groups such as pregnant and lactating women seeking healthcare services.
- Damages caused to water and sanitation facilities might lead to poor hygiene conditions, increasing the risk of infectious diseases.
- Based on the information available, households whose shelters have been impacted by the fire have sought refuge with their relatives. This overcrowding may have a detrimental effect on living conditions and could potentially contribute to the spread of communicable diseases.

### **Response**

- Deployment of Mobile Medical Teams (MMTs) to respond to the immediate needs of affected persons.
- Immediate on-site medical care for burns, smoke inhalation, and other injuries.
- Transport of severely injured individuals to hospitals or specialized burn units.
- Awareness messages to affected people, including information about available services and referral pathways.

### **Challenges and Needs**

- Public health risks: Overcrowded and unsanitary conditions following the fire can lead to outbreaks of infectious diseases.
- Mental health: High levels of stress and trauma among camp residents can lead to mental health crises that are difficult to manage without adequate support. The Health Sector will coordinate with the partners and the Mental Health and Psychosocial Support (MHPSS) Working Group to assess the situation and mental health status of affected persons, especially vulnerable groups.
- Cyclone: The potential impact of the cyclone will worsen the current public health conditions and

increase the occurrence of waterborne and other infectious diseases. Additionally, the complex disasters can cause greater displacement within the camp, disrupting health service delivery and complicating the delivery of health aid and services.

#### **Partners**

- IOM, BRAC, HMBD, BDRCS



#### **Protection (including GBV and CP) Sector Lead Agencies: UNHCR, UNICEF, UNFPA**

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#### **Impact**

##### Protection:

- While no protection incidents have been reported, the situation for some refugee households remains precarious. Some families lack essential items, and some have lost vital registration documents. This, coupled with the trauma experienced by some people, creates a heightened vulnerability for these families.

##### Child Protection (CP):

- 20 children were initially identified as separated from their families. All of them have been reunified with the support of community volunteers and camp focal point. Additionally, three children were reunited with their families, who had come from other camps to see the fire and got separated.
- Approximately 900 children, according to volunteers, have lost their shelters and are taking refuge with neighbours/relatives or in temporary shelters.
- Community volunteers reported that 25-30 children were injured, all of whom received primary treatment.
- One child friendly space (CFS) was destroyed by the fire.

##### Gender-Based Violence (GBV)

- Camp 13 GBV focal point (FP) was in contact with all GBV actors and confirmed that no women and girls safe spaces (WGSS), women friendly spaces (WFS), or other GBV facilities were damaged and that regular service provision could continue. GBV staff and facilities remain positioned to respond to the emergency.

#### **Response**

##### Protection:

- Protection Sector volunteers actively warned and rescued elderly people, children, and women. Community-based protection partners responded from the beginning of the incident, with 17 Community Outreach Members (COMs) and 7 Community Group members still working in the affected area.
- The Protection Emergency Response Unit (PERU) was available to assist the efforts of Protection focal point and partners on the ground, providing critical protection services to support the affected families.
- Children (both affected and not affected) have been observed roaming around the burnt areas without shoes and clothes putting them under health and safety risks. Protection volunteers and DMU volunteers worked to keep children away from the burnt areas.

- SCCCM and Protection partners are closely collaborating on information and complaint desk establishment in the area to track lost documents and address protection concerns.

#### Child Protection (CP):

- CP actors are closely monitoring the situation to ensure that no child goes missing or becomes a victim of kidnapping. CP staff from different agencies have been deployed along with volunteers to ensure necessary support to the children and their families.
- CP partners have provided psychosocial support (PSS) and psychological first aid (PFA) to 270 children and their families.
- CP partners are offering need-based support to children previously under case management services and are working to identify new cases in the affected block.
- CP partners are sensitizing children in the affected areas about the dangers of collecting debris, which can cause further injury. They are also advising children and caregivers to avoid gathering in these areas to prevent trafficking or abduction.
- One CP partner has distributed NFIs to children and their families, including clothes, slippers, mats, pillows, and blankets.

#### Gender-Based Violence (GBV):

- GBVSS in conjunction with GBV FP, GBV actors, and Protection FP have been in communication with regards to the number of stockpiled dignity kits prepositioned for distribution. Over 575 have been reported as ready for distribution. Dignity kits will be distributed to women of reproductive age (WRA) with priority going to shelterless people. All organizations will work simultaneously in distributing dignity kits to avoid overlapping.
- GBV actors coordinated with the MHPSS focal point of Camp 13 to provide PFA services through caseworkers, social mobilizers, and volunteers.
- WGSS and WFS remain open for services. Some may be used as temporary shelters for women and girls if needed.

#### **Partners**

- Protection: IOM, UNHCR, IRC, BRAC, DSS, NGOF, Caritas
- CP: Save the Children, BRAC, World Vision
- GBV: UNFPA, Mukti, IRC



**Nutrition Sector Lead Agency: UNICEF**

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#### **Impact**

- Affected Nutrition programme participants (beneficiaries) include:
- Severe Acute Malnutrition (SAM) under five child – 1.
- Moderate Acute Malnutrition (MAM) under five children – 8.
- Supplementary Feeding Programme (SFP) (6-23 months) – 60.
- Nutrition Sensitive E-Voucher Programme (NSEP) under five children – 102.
- Blanket Supplementary Feeding Programme (BSFP) Pregnant and Breastfeeding Women (PBW) – 45.

#### **Response**

- Tracking of Nutrition programme beneficiaries affected by the fire incident.

- Screening of malnutrition for the most vulnerable group (under five and PBW) at the temporary shelter for any additional nutritional supplements.
- Conducting the feasibility of establishing a breastfeeding corner at the temporary shelter.
- Infant and Young Child Feeding (IYCF) counselling to all affected PBW.

### **Challenges/Needs**

- Potential risk of increasing malnutrition rate as lack of WASH facilities and food insecurities as affected population are unable to cook their food. Children, pregnant women, and breast-feeding women are particularly at risk.
- Programme participants are mentally stressed.

### **Partners**

- Concern Worldwide



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#### **Education Sector Lead Agencies: UNICEF and Save the Children**

- No education facilities have been damaged by the fire according to camp focal point.



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#### **Livelihoods and Skill Development Sector Lead Agency: UNHCR**

- No formal livelihood facilities or assets have been damaged by the fire according to camp focal point.

### **Contact**

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Rohingya refugee response: Cox's Bazar: [iscg@iscgcb.org](mailto:iscg@iscgcb.org).

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<https://rohingyareponse.org/>