



UNHCR supports 22 healthcare facilities, 21 mental health and psychosocial support (MHPSS) service points, 19 nutrition and two stabilization centres. These facilities provide quality lifesaving and comprehensive primary and secondary health care, nutrition and MHPSS services for all refugees. Provision of essential medicine and medical and therapeutic nutrition supplies is ensured through digitalized drug management software in camp health facility pharmacies and the central store.

KEY ACTIVITIES



Health activities in the Camps



General health services in the camps include management of communicable and non-communicable diseases, mental health and psychosocial support, primary dental and physiotherapy care, comprehensive laboratory services and provision of essential medicine, in coordination with other health partners. Women of reproductive age, men and adolescents have access to sexual and reproductive health services through antenatal care clinics, postnatal care and family planning clinics at health facilities and drop-in centres. Health facilities deliver 24-hour basic emergency obstetric and neonatal care, and referrals for comprehensive management of obstetric complications.

UNHCR supports patient referrals for further medical treatment to government facilities in Cox's Bazar and Chittagong district hospitals. UNHCR also continues to build partner staff capacity on disease surveillance, management of diseases and reporting.



Community Health and outreach programmes



As the lead agency for the Community Health Working Group (CHWG), UNHCR coordinates community health interventions across all 33 camps in Cox's Bazar. Key activities include coordination of outreach health programmes, training, and capacity building of 1,672 Rohingya and Bangladeshi community health workers (CHWs) and 140 CHW supervisors. The CHWG supports risk communication, community engagement and social mobilization for mass campaigns and other camp-wide health activities such as vaccinations (including Covid-19, cholera, Penta, and Td) and surveys. CHWs play a key role in disaster response. During emergencies such as disease outbreaks, floods, fire incidents, cyclones, etc., they are mobilized for active community-based surveillance, referral and reporting on morbidities and mortalities (including maternal mortality) in tandem with continuous sensitization of the community.



Mental Health and Psychosocial Support (MHPSS)



Multilayered MHPSS is integrated across all UNHCR-supported primary healthcare facilities, with psychologists offering individual counselling and refugee volunteers supporting mental well-being through group sessions as well as basic individual support. MHPSS services are also integrated in eleven facilities in camp offering protection, education, and community health support to refugees. Community para-counsellors receive training and supervision through scalable evidence-based methods in a 'helping refugees help each other' approach.

Helpful strategies and awareness on mental health needs are promoted through community awareness sessions on topics such as peace of mind, journey of life, better parenting, child-to-child support, anger management, stress management and self-care. In Q1 2023, over 75,000 participants were reached through these sessions, through which 3,516 mild to moderate cases

in need of focused support were identified and referred for counselling. Early detection reduces the risk of serious mental health conditions developing down the line. To build capacity, UNHCR periodically provides technical supervision to Bangladeshi staff and refugee volunteers delivering focused one-to-one counselling to refugees with moderate to severe mental health needs.



Nutrition and Food Security



Afrin Nutrition and food security assistant: GK nutrition centre

The 2022 nutrition survey found a high rate of malnutrition among children 6-59 months: 12.3% had global acute malnutrition. To address this, UNHCR and partners provide prevention and treatment programmes for children under five years, pregnant and lactating women, and other vulnerable population living in the camps. 361 trained community nutrition volunteers carry out community-based nutrition activities, health and nutrition screening and referrals of malnourished children. Severe and moderate acute malnutrition is treated through outpatient therapeutic and targeted supplementary feeding programmes while inpatient management of severe acute malnutrition with medical complications is provided by stabilization centres. Prevention of malnutrition includes promotion of appropriate infant and young child feeding practices through individual counselling, group sessions, cooking demonstrations, community-based mother-to-mother support groups, and community dialogue with key leaders, including religious and block leaders.

In 2023, growth monitoring and promotion to support early identification of children with acute and chronic malnutrition will ensure provision of timely support. In addition, micronutrient deficiency programmes for 2023 include deworming campaigns, iron and folic acid supplementation for adolescent girls to prevent anemia, and biannual vitamin A supplementation campaigns to boost immunity of children under five years.

 **Host Community Support**



UNHCR continues to support the Ministry of Health and Family Welfare to construct, repair and equip health facilities in and outside camps through provision of medical items, human resources, equipment, capacity building, construction, rehabilitation and furnishing of facilities. The new Ukhiya Specialized Hospital provides outpatient and emergency services to the refugees and host community in Ukhiya. In January 2023, the outpatient department complex was completed at Sadar District Hospital in Cox’s Bazar and handed over to the Ministry.

Combined, these facilities will provide health services for refugees and local Bangladeshis, significantly easing the load on existing facilities in Cox’s Bazar District.

Bhasan Char



UNHCR leads the Health and Nutrition Sector on Bhasan Char in coordination with the Assistant Refugee Relief and Repatriation Commissioner (ARRRC) and health authorities on the mainland. On the island, 90 refugee volunteers have been trained as community health and nutrition workers, psychosocial volunteers and para-counsellors to support community-based disease surveillance and prevention programmes.

Health: UNHCR supports the 20-bed hospital operated by the ministry of Health with a solar power grid providing 24-hour power to enhance quality service delivery and specialized health care such as dental, eye, physiotherapy, telemedicine, and rehabilitation services.

MHPSS: The MHPSS team held a series of discussions with volunteers and partner staff from the protection, health, education and site management sectors to jointly develop an action plan contextualizing and strengthening

MHPSS interventions and community- based activities, ensuring technical supervision for specialists, reviewing awareness materials and integration with other sectors. The plans were shared with the inter-sector group and discussed with relevant agencies to ensure complementarity of efforts.

Nutrition: Comprehensive nutrition programmes are implemented by the nutrition partner, including treatment of acute malnutrition through outpatient therapeutic and targeted supplementary feeding programmes. Prevention activities include blanket supplementary, infant and young child feeding programmes, growth monitoring and promotion deficiency programmes, deworming campaigns, and iron and folic acid supplementation programmes targeting adolescent girls.

Total beneficiaries*

190,327

The UNHCR health unit in Bangladesh provides vital medical services and healthcare support to Rohingya refugees, ensuring access to quality healthcare. They offer comprehensive primary healthcare, immunizations, and disease prevention activities to improve well-being in challenging conditions.

33,592

of cases identified and referred to health facilities by CHWs

17

of primary healthcare facilities providing care for priority NCDs

38

of qualified midwives/MCH

1,912

of beneficiaries receive eye care services at MoH

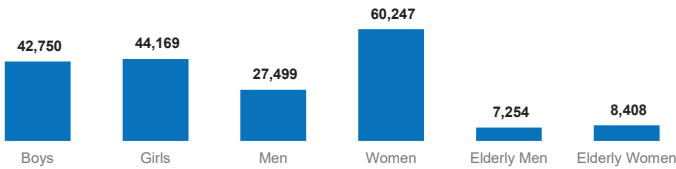
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of normal deliveries conducted in the PHC

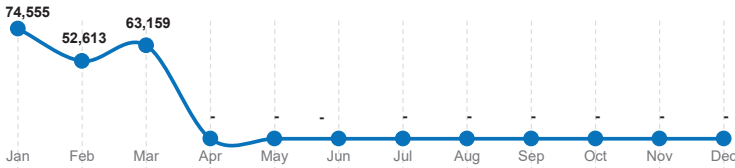
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of staff trained on Sexual and Reproductive health topics

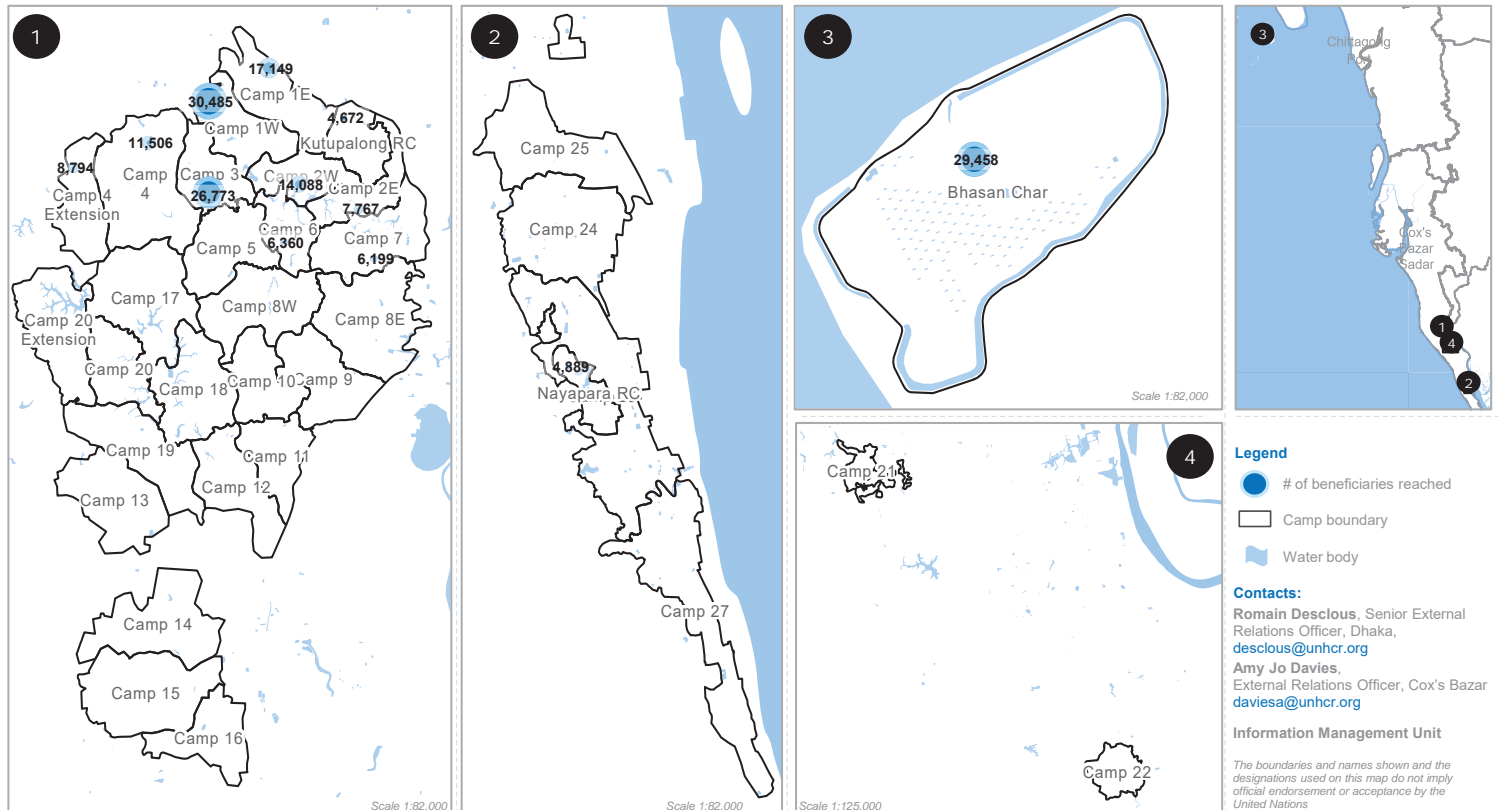
Age and gender



Monthly Trend (Beneficiaries reached by month)



Geographic overview (beneficiaries by camp)



Key achievements

Progress against target

