



Photo: UN Women/Mahmudul Karim

GENDER ALERT ON FIRE IN KUTAPALONG AND BALUKALI CAMPS

March 29, 2021

Issue 1: Ensuring a Gender-Responsive Humanitarian Response

The Cox's Bazar Gender in Humanitarian Action Working Group (GiHA WG) is deeply concerned about the safety and well-being of the Rohingya refugees affected by the massive fire outbreak on the afternoon of March 22, 2021. The fire outbreak affected Camps 8W, 9, 10 and 8E located in Balukhali and Kutupalong areas that accommodate Rohingya refugees in Cox's Bazar in Bangladesh. This Gender Alert has been developed by GiHA WG as an aide-memoire of the gender-specific impacts of the fire. It focuses on the promotion of a Gender-Responsive Humanitarian Response that places the needs and dignity of women, girls, men, and boys at the centre. It concludes with a set of recommendations for all stakeholders involved in the fire response.

This Gender Alert serves to advance the [gender equality commitments](#)¹ and gender-responsive measures by providing a basis for an informed analysis on the gender-specific impacts of the fire. By assessing, coordinating, and responding to the trends identified and discussed

1. The gender equality commitments were developed to mobilize inter-agency and inter-sector support within the Rohingya refugee response to make gender equality core to its humanitarian action.

throughout, the document serves as a guide for stakeholders to integrate gender equality commitments across the fire response and to address the specific needs of vulnerable Rohingya refugees living in the affected areas while maintaining COVID-19 prevention measures.

Context

On the afternoon of March 22, 2021, a massive fire broke out in the Rohingya refugee camps in Ukhiya, Cox's Bazar. The fire quickly spread across three camps consuming shelters and personal belongings of refugees as well as essential facilities such as hospitals, primary health facilities, learning centers, and women friendly spaces in the camps. More than 48,000 individuals have been affected by the fire. Many are staying with relatives or in learning and transit centers which are accommodating the most vulnerable people.

The Government of Bangladesh and aid agencies are responding to those affected. The distribution of water, hot meals and high energy biscuits is ongoing. Emergency shelter and non-food relief item kits including floor mats, blankets, solar lamps, have been provided to those affected. The priority

is to reunite families and children who were separated during the fire and the subsequent movements to safe places, as well as to identify and support persons with specific needs, such as older persons, pregnant women and persons with disabilities.

This fire outbreak has highlighted the capacity of women and men volunteers as first responders. They are helping people to safety, supporting fire response efforts and continue to work to support aid efforts on the ground.

Conflict and humanitarian crises affect women, girls, men, and boys differently. This fire outbreak is no exception. Systematic efforts to collect sex, age and disability disaggregated data (SADDD) and to consult with the affected population must be put in place to ensure that the diverse needs of all groups are fully understood and targeted effectively in the response.

WOMEN AS FIRST RESPONDERS

Since the fire outbreak both female and male community volunteers have been active as first responders. They have supported the affected Rohingya refugees in moving to safe spaces, assisting older persons, reunifying missing children with parents, supporting injured persons in receiving essential health services, as well as supporting marginalized individuals in collecting of NFIs. These community volunteers are also assisting the CiC team in receiving distribution materials, while playing a vital role in disseminating service information, especially to women and girls.

The UN Women Gender Field Officers are providing support to other sectors through coordination with site management and site development (SMSD), Protection team, World Food Programme (WFP) and CiC offices. Additionally, they are leading volunteer teams and supporting in the needs assessments to identify gender gaps.

Emerging Gender Impacts and Priorities to ensure a Gender-Responsive Approach

HEALTH CARE

It is crucial to ensure that essential services and assistance are available for pregnant and lactating women who are currently displaced due to the fire or indirectly affected by it. Women and girls must have access to essential reproductive health services. Priority activities include ensuring safe deliveries at health facilities with skilled birth attendants; referral to emergency obstetric and newborn care for complications of pregnancy and childbirth; and access to clean delivery kits to pregnant women. In addition, it is critical to assure access to clinical care for survivors of sexual violence, anti-retroviral treatment along with contraceptives and treatments for symptoms of Sexually Transmitted Infections (STDs). It has been noted that there is an imminent need of saline, antenatal and postnatal (ANC/PNC) services, mental health and psychosocial support (MHPSS), as well as primary health care.

VIOLENCE AGAINST WOMEN AND GIRLS

A comprehensive response to the fire must include interventions to prevent, mitigate and respond to violence against women and girls (VAWG). The existing crisis of VAWG in the camps is very likely to worsen where protection and law enforcement are weak, massive numbers of shelters are damaged and families are displaced. In such contexts, women and girls are highly likely to experience greater risks of violence and disrupted access to life-saving care and support. The referral pathways must be recirculated amongst the affected population as well as frontline responders. Gender-based violence (GBV) actors need to ensure robust presence in the affected areas to assist women and girls. Displaced women and girls without male companions must have access to sex segregated safe spaces as alternative accommodations.

SUPPORT TO PERSONS DISPLACED BY THE FIRE

The affected population who is currently displaced is more prone to risks related to health, security, and economic losses. Pre-existing challenges, including inadequate and crowded accommodation, insufficient water and sanitation facilities, lack of food and non-food items (NFIs) are exacerbated as a result, especially for women and girls. Due to underlying conservative socio-cultural norms, women, girls and persons with disabilities living in the camps have limited access to basic assistance and services. Experiences from previous crises

suggest that it is likely that negative coping mechanisms such as early marriage, child labour, sales of assets, and limitation of food intake will be adopted.

It is necessary to establish static service points for missing and lost children, along with hotline numbers of Protection, Child Protection and GBV actors to address related issues, as well as a systematic documentation process for missing, separated, and unaccompanied children.



Photo: UN Women/Mahmudul Karim

FOOD AND NON-FOOD ITEMS (NFIs)

Priorities for food and NFIs should be determined through consulting with women, girls, men and boys (with age and sex segregation) about their individual and family needs. Measures should be adopted to ensure the inclusion of those who are marginalized and hard to reach, including women and girls with limited mobility, female-headed households, lactating and pregnant women, unaccompanied boys and girls, older people, third gender, persons with injuries and persons with disabilities. While women should be prioritized as targets for the distribution of NFIs, separate lines for distribution, along with breastfeeding corners in distribution areas and porter services should be established to assist the most vulnerable. This also includes the distribution of female hygiene kits, house-repairing kits, essential resources and clothes as based on GFOs interviews with women. Measures must be adopted to ensure that the distribution of aid is safe for all who are eligible to obtain it and that the risk of exploitation and abuse of displaced persons, in particular women and children, is minimized. Overall, distribution activities must adhere to COVID-19 prevention measures,

including access to hand sanitizers, personal protective equipment (PPE), and social distancing.

SHELTER

In responding to shelter needs, it is important to consider the safety and diverse needs of women, girls, men, and boys, older people, persons with disabilities and third gender populations. Host families who are providing housing support for the affected Rohingya families should receive assistance. In situations where families must share accommodation spaces, safety measures must be implemented to assure that the facilities are safe considering differences in vulnerabilities. Identification and support to unaccompanied youth, children, older people, and those who are caregivers must be ensured.

WATER, SANITATION AND HYGIENE (WASH)

Sanitation facilities must be provided according to the distinct needs of the affected population, including separate toilets and bathing spaces with strong locks and lighting in close vicinity of the living areas. Inclusive measures such as handrails and ramps should be installed. The 72-hour emergency kit must include menstrual hygiene management (MHM) kits. Availing MHM disposal bins for women and girls should be prioritized.



Photo: UN Women/Mahmudul Karim

IMMEDIATE ACTIONS

The immediate actions that should be prioritized in this situation are:

Needs Assessments

The different needs of women, girls, men and boys during and after this massive fire outbreak must be assessed. Incorporating sex, age and disability-disaggregated (SADDD) data and gender analysis in assessments is necessary to ensure that the interventions leave no one behind. To ensure minimum standards, assessment teams must at least include females, and ideally be gender balanced. It is important to adopt special measures such as same-sex interviews, interviews conducted in private, spaces and at a convenient time for both women and men. Consultations with women and men of all ages are critical to determine the different needs, priorities and capacities, thereby reflecting them in the fire response.

Coordination

Coordinate across humanitarian sectors, as well as engage with gender actors, women's groups and networks, especially Women-Led and Women-Focused Organisations (WLOs/WFOs) to identify meaningful ways to involve the affected population in the needs assessments, as well as the design, implementation and management of the response. It is crucial to support partner organisations in using Gender with Age Marker ([GAM Tool](#)) from the beginning of the programme cycle. Gender-responsive fire outbreak interventions must be assured across all sector with a particular focus on:

- Loss and damage assessment using gender measures
- Food security interventions
- Rebuilding of shelters and key facilities (i.e. women-friendly spaces, learning centres)
- Access to healthcare and NFIs
- Education
- Reissuing and registration of documents
- Communication and information sharing with affected populations