



Information and Feedback Centres

Improving Accountability to Rohingya Refugees in Cox's Bazar, Bangladesh

This is one of a series of case studies based on UNICEF-supported communication, community engagement and accountability activities as part of the larger humanitarian response to the Rohingya refugee crisis in Cox's Bazar, Bangladesh, from September 2017 to December 2019.

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Abbreviations

AAP	Accountability to the Affected Population			
ACLAB	Alliance for Cooperation and Legal Aid Bangladesh			
BRAC	Bangladesh Rural Advancement Committee			
CAP	Communication, Advocacy and Partnerships			
C4D	Communication for Development			
CCP	Johns Hopkins Center for Communication Programs			
CwC	Communication with Communities			
DRR	Disaster Risk Reduction			
IEC	International Education Centre			
IFC	Information and Feedback Centre			
IPC	Interpersonal Communication			
ISCG	Inter Sector Coordination Group			
ISPs	Information Service Providers			
NGO	Non-governmental Organization			
SIM	Subscriber Identification Module			
SOP	Standard Operating Procedures			
SPEAR	Social Policy, Evaluation, Analytics and Research			
UNHCR	United Nations High Commissioner for Refugees			
UNICEF	United Nations Children's Fund			
WASH	Water, Sanitation and Hygiene			

Introduction

The onset of the Rohingya refugee crisis in August 2017 irrevocably changed the present and the future of hundreds of thousands of children, women and men from the Rohingya community and introduced the entire Cox's Bazar district, one of the poorest areas in Bangladesh, to an unprecedented crisis and a new social reality. The situation was so dire that a month later, on 20 September 2017, UNICEF activated a Level 3 emergency response¹ – the highest level of alarm.² Together with the Government and other humanitarian partners, UNICEF immediately responded to provide life-saving assistance and protection to the newly arrived Rohingya children and their families, also taking a lead role in health; nutrition; water, sanitation and hygiene (WASH); child protection; and education - areas that are fundamental to the survival, protection and wellbeing of the refugee community. UNICEF also played a strong supporting role in communication for development (C4D) interventions as well as community engagement and accountability to the affected population.

Background

In August 2017, a staggering number of Rohingya families were forced to flee, escaping atrocities and persecution in their native Myanmar and, in less than two months, more than 740,000 people³ had crossed the border into Bangladesh, bringing the total number of affected people in Cox's Bazar district, one of the poorest and most disasterprone districts of Bangladesh, to an estimated 915,000,⁴ more than half of them children.⁵ The

majority of the new arrivals were among the most vulnerable, including children, women and the elderly, many of whom walked 56 kilometres⁶ a day for 6 to 10 days to reach the border. When they arrived in the hills surrounding Cox's Bazar, they were suffering from exhaustion, hunger, severe trauma and other serious health threats. "We heard the news [about the crisis] from the Bangladesh border guards high officers who asked for our support to control the situation,"7 said Atiqul Islam, project manager from PULSE,8 a local non-governmental organization (NGO), "It was the middle of the night when we arrived to the site. We saw thousands of Rohingya children, women and elderly members of the community along the roadside for kilometres, so desperate and exhausted they were sleeping. 'Please wake up', we told them, 'have some water, some food'."

During the initial stage of the emergency, the challenges were acute. The Rohingya people, one of the largest and most persecuted minority communities in the world, were caught up in the world's fastest growing refugee crisis⁹ in extremely complex and desperate conditions.

The need for accurate and timely information was urgent and often a matter of life and death. The newly arrived refugees were seeking information about their new surroundings: How secure were they and their children? How could they access water, food, shelter and health services? And, without resources, how could they build shelters and where could they find clothing, blankets and

cooking utensils? What current and future risks might they encounter and how could they avoid threats to their safety? The quality of information was another critical factor. They needed accurate, accessible and timely messages delivered to all, including those in remote and spontaneous sites – tailored to the unique set of challenges encountered and adjusted to the changing and evolving needs of the situation.

The situation was extremely fragile and the needs of the affected community were at a peak. Early observations from the field and the findings from a multi-sector rapid assessment revealed that the majority of the new arrivals were not aware of the humanitarian services available, and frontline workers and service providers faced difficulties in their outreach and referral efforts. The response mechanisms were more secure in the formal refugee camps, whereas in the overcrowded makeshift settlements or spontaneous sites the situation was dire, with little or no access to safe water, sanitation, healthcare and other services. A rapid assessment of language barriers and information needs undertaken by UNICEF and partners demonstrated that, among the long list of complex obstacles, the lack of credible sources of information and an effective response mechanism seriously compromised the humanitarian response. Many Rohingya refugees reported that the aid provided was not sufficient for their needs and that their voices were not being taken into account by aid providers. The vast majority of refugees (84 per cent) expressed reluctance to file a complaint or suggestion. In addition, women and girls felt unsafe - even more so in their own shelters where they lacked privacy and safety - and their voices were largely unheard because there was no feedback mechanism to record their complaints concerning gender-based violence and sexual harassment. The need for an accessible, efficient system to deliver a humanitarian response was urgent.



Rohingya Children in a UNICEF-supported learning centre.



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Information and feedback centres:

Examples of accountability, community engagement and empowerment



To respond efficiently and scale up interventions to meet the demands of the crisis, UNICEF and partners worked hand in hand with local organizations, such as the local NGO PULSE, and quickly established information and feedback centres (IFCs) in critical locations across the camps, helping to address the wide range of urgent humanitarian needs and improve accountability to the affected children and their

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families. The main function of IFCs is to provide a two-way information flow through face-to-face interactions with community members, discussing emergency preparedness, cross-cutting issues concerning social cohesion, gender equality and safe environments for women and girls, and mobilizing communities as active change agents for their own wellbeing and awareness raising.

The first two centres were formed in September 2017, during the first weeks of the crisis, and began providing life-saving information and on-site referral for urgent services, including nutrition; WASH; medical help; hygiene behaviours; vaccination campaigns; and child and newborn care. The needs of the new arrivals, combined with safety and security threats, grew rapidly and became increasingly severe as the influx continued. In addition, there was evidence¹⁵ that gender-based violence¹⁶ was becoming a critical concern¹⁷ for refugee women and girls within the overcrowded camps. These circumstances required immediate access to specialized services, psychological support and information on spaces where they could feel safe.18

To address the mounting needs, UNICEF extended the duration of its partnership with PULSE and worked to increase referral capacity through new IFCs.¹⁹ Implementation was more complex than anticipated and required tackling several challenges, such as the need for more staff and greater technical capacity, and the ongoing efforts to convince the Camp in Charge²⁰ or landowners from host communities to designate additional space for new IFCs in severely congested camp areas. But UNICEF's partnership with government authorities and with PULSE and, more recently, the Bangladesh Institute of Theatre Arts (BITA), 21 helped address the challenges. By 2018, 12 IFCs had been established and located in 11 camps. "The

IFCs are crucial for the C4D response in the camps," explained Samia Ahmed, emergency specialist at the UNICEF Cox's Bazar Office, "There are 34 camps and one more camp might be added soon.²² We are in the second phase of the emergency; the situation and needs are becoming more complex. Old habits and behaviours among the refugee community are regaining strength. So we need more IFCs and a more coordinated response in the field to increase outreach and impact."23 By June 2019, two years after the onset of the crisis, the number of functioning IFCs in the camps, combined with four new IFCs established in host communities, had reached a total of 20 centres, linked to a network of 300 community mobilizers from Rohingya and host communities.

Objectives of information and feedback centres

IFCs play a fundamental role in community outreach and engagement efforts to enhance accountability to the affected populations. IFC functions include:

- receiving and responding to community feedback, grievances and complaints;
- providing information and referral on available services in the catchment area, using social maps to indicate the location of service points;
- mobilizing community volunteers for outreach to the community;
- conducting sessions to disseminate lifesaving messages and to demonstrate and practice positive behaviours;
- conducting community consultations and meetings;
- mobilizing communities during health, nutrition, protection and other campaigns.



Information service provider receiving feedback from Rohingya in an information feedback centre.



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- providing contact details of service providers;
- disseminating public service announcements on key issues, such as nutrition action weeks, vaccination campaigns and cyclone preparedness;
- disseminating culturally appropriate and user-friendly information, education and communication materials, including answers to frequently asked questions.

In addition to the dissemination of lifesaving information and materials on site, IFCs provide 'safe spaces', where vulnerable individuals – notably women and adolescent girls – can go for protection and receive accurate information and service referrals related to gender-based violence, sexual harassment, protection from sexual exploitation and abuse, and sexual reproductive health services.



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Information service provider conducting an IPC session on menstrual hygiene in safe room.



Information service provider disseminating key lifesaving messages among religious leaders in Rohingya camp.



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How do information and feedback centres work?

The IFC staff – known as information service providers (ISPs) – keep logbooks to document the complaints and feedback received, as well as demographic information of the affected community, including the gender, age and origin of the refugees. In order to respond to the complaints and feedback in an efficient, consistent and timely manner, UNICEF and partners developed Standard Operating

Procedures (SOP). This has helped facilitate follow-up in response to the feedback and complaints regarding the quality and relevance of services provided. Complaints that cannot be addressed on site by service providers or site management focal points are elevated to the relevant supervisor of the respective agency at Cox's Bazar.²⁴ The feedback loop is closed once the response is communicated back to the community. Community members are informed in all cases.



UNICEF staff in a regular monitoring visits in Rohingya camp.

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To further improve the feedback and response mechanism, UNICEF developed a real-time data generation system and dashboard, which are maintained by ISPs at the IFCs. When a community member visits the centre and reports a case, the data is recorded in the logbook and the system is updated to collate information across the districts of Cox's Bazar. ISPs are trained on digital data collection and storage through the Open Data Kit application, using tablets. ²⁵ The digitizing of data reduces the IFCs' dependency on a conventional paper logbook and provides an opportunity to monitor real-time information, track tendencies and analyze in detail the nature and frequency of queries, needs and issues. Data sets and analysis are shared with UNICEF section heads and with the cluster/sector lead under the Inter Sector Coordination Group on a weekly basis for follow up. The database

is accessible easily from multiple locations and devices, plus the digitization of feedback saves resources, enabling a more rapid and cross-sector response. For example, during the acute watery diarrhoea campaign, the complaints, feedback and queries, which highlighted the rumours and misconceptions that were being reported at IFCs, were shared with the WASH section/sectors. This allowed the sector and WASH focal points in the identified camps to respond and intensify hygiene promotion key messages.



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Standard Operating Procedures

More than 90 information hubs/information service centres had been established as of March 2019, operated by different humanitarian agencies that are members of the CwC Working Group. Although the initial objective of the information hubs was the same, differences in the operating systems and the lack of a standardized procedure for referral, recording, feedback and followup weakened the collaborative efforts of the humanitarian agencies and their accountability to the affected communities.²⁶ In March 2019, in order to better equip the system for response and address the challenges encountered, the Information Hubs Sub-Working Group under the CwC Working Group set up a common protocol or SOP. The protocol was the result of extensive

consultations among a range of stakeholders, which helped ensure that critical information is received by the right people, and that complaints and feedback are recorded through a standard system, triggering a timely and efficient response.²⁷

The SOP provide step-by-step guidance for information hubs and IFCs on a number of operational, technical and ethical issues, ranging from actions to be taken when an affected community member arrives at the centre, to instructions for logging feedback into the data system, to necessary privacy considerations and procedures when dealing with sensitive issues (such as gender-based violence, sexual harassment and protection from sexual exploitation and abuse), to codes of conduct to be followed to protect the anonymity of community

members and confidentiality of the collected data. According to the SOP, female community members who prefer to speak confidentially to a female staff member must be provided a quiet and safe space to meet and receive counselling.

The SOP also stipulate that reports of a sensitive nature, for example, involving sexual abuse, sexual exploitation, gender-based violence and other crimes, should be handled through a separate system with more rigorous security.

Standard Operating Procedures for information hubs

Provisions of the SOP include the following:

If the feedback relates to a reported case of sexual abuse or exploitation or other crimes

Reports of a sensitive nature should be dealt with in a different manner than regular feedback or complaints:

- The information hub staff member should have been trained in basic case management

 these steps should be followed in particular in explaining that it was not the fault of the survivor and that they did the right thing reporting this.
- In the case of a sensitive issue being raised, this should be referred to the Protection from Sexual Exploitation and Abuse Working Group/protection from gender-based violence referral pathways.

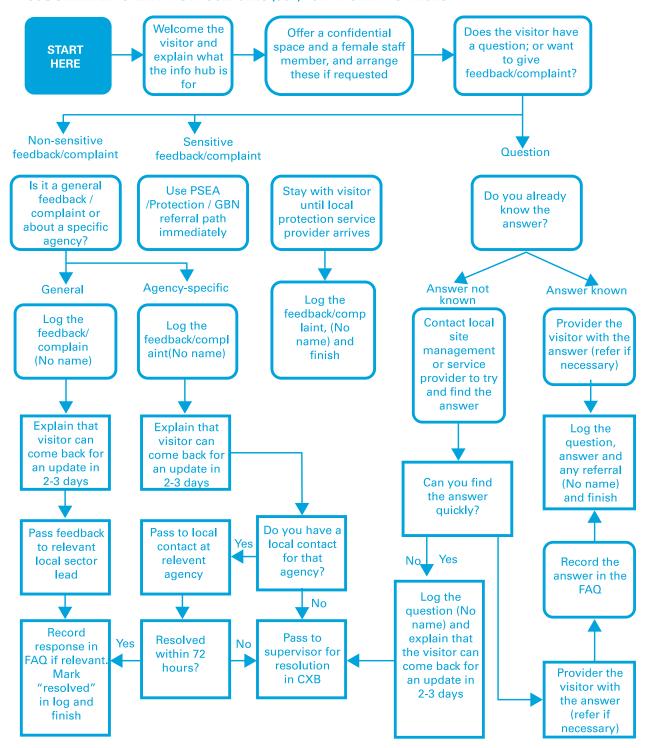
Interim measure until camp-level referral pathways exist

- All information should be handled in a confidential and sensitive manner.
- As soon as it is clear that the feedback or complaint is of a sensitive nature and/or relates to
 protection issues, the information service providers (ISP) should politely stop the discussion,
 thank the community member for raising the issue, explain that this is not their fault and
 that they will make sure that the community member has the right support for this sensitive
 issue.
- The relevant focal point should be contacted if it is about gender-based violence, child protection, or all other protection related issues.
- The ISP should remain with the person giving the feedback until the local protection service provider has arrived.
- The information hub staff will write down the complaint in the register or online data kit and refer accordingly, especially in the case of gender-based violence.

Source: Inter Sector Coordination Group, 'Standard Operating Procedures (SOP) for Information Hub and Information Service Centre', Communication with Communities Working Group, Cox's Bazar, Bangladesh, March 2019, https://reliefweb.int/sites/reliefweb.int/files/resources/info_hub_generic_sop.pdf.

Figure 1. Standard Operating Procedures diagram

ISCG STANDARD OPERATING PROCEDURES (SoP) FOR INFORMATION HUBS

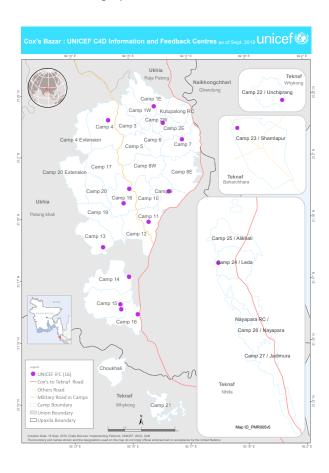


Source: Inter Sector Coordination Group, 'Standard Operating Procedures (SOP) for Information Hub and Information Service Centre', Communication with Communities Working Group, Cox's Bazar, Bangladesh, March 2019, https://reliefweb.int/sites/reliefweb.int/files/resources/info_hub_generic_sop.pdf>.

Management structure

Each IFC is managed by three ISPs (female and male) who are present at the centre from 8 am to 4 pm daily. The ISPs are trained and equipped to perform several tasks, including interpersonal communication (IPC), dialogue and discussion of life-saving issues, the operation of the dashboard for data entry, demonstration of life-saving behaviours, and dissemination of information and educational materials. Between September 2017 and June 2019, the centres provided lifesaving information and collected close to 80,000 individual complaints, queries and feedback, with a response rate of nearly 100 per cent, significantly improving the responsiveness of service delivery.²⁸ The analysis of data collected by the IFCs demonstrates that most of the complaints and feedback received were related to health issues, while other complaints, queries and feedback concerned nutrition; childcare; child protection; WASH; shelter; gender-based violence; non-food items (such as cooking fuel); and vaccination campaigns.

In addition to the staff at the IFCs (three ISPs at each IFC), there are 300 'model mothers' and vouth volunteers linked to the centres. The volunteers gather at the centre from 9 am to 1 pm every day and conduct their daily tasks, which include face-to-face outreach activities at household level to promote community mobilization. Each IFC has 13 'model mothers' from the Rohingya refugee community and 12 (six female and six male) youth volunteers from the camps (a total of 25). The volunteers and mobilizers are each expected to contact 15 families per day for engagement and consultation. An average of three to five family members participate during an interpersonal communication session, which lasts approximately 20-35 minutes, depending on the nature of the messages or dialogue and the demonstration required. An estimated 4,500 households are contacted in 15 locations per day, per site, with 112,500 IPC sessions conducted every month (equivalent to 25 working days). A mapping system has been developed to avoid duplication of messaging and to facilitate tracking and monitoring by the mobilizers.



Serving others: The transformative impact of IFCs Establishing an IFC requires approximately two weeks to complete. The designated site of each IFC is approved by the Camp in Charge before the construction is intitated. The specifications of the IFC are also aligned with the structure specifications provided by site mangament and confirmed by the Camp in Charge. Once operable, the IFC structure and maintenance are monitored and assessed quarterly to make sure that the location is safe and the IFC is functioning under secure conditions.

Serving others: The transformative impact of IFCs

The spectrum of actions and services listed above are integral to the role of IFCs in the camps and host communities. However, there is another function of the IFCs that cuts across all other interventions and services, enhancing its role in the humanitarian response and bolstering the success and credibility that IFCs have earned over the last two years. That function is the role IFCs play as an information hub and meeting point for the affected communities. IFCs are more than referral points for service provision or centres for the dissemination of technical information. IFCs function as a front stage for the humanitarian response, and they serve as a backstage where

humanitarian actors and the vulnerable population meet around a number of different interventions, actions and tools. The IFCs provide a conducive environment for the communities to report and record their complaints, feedback and queries, and they are a central point for gaining access to all service providers' contact details, informative posters, inspiring paintings, bilingual leaflets, a wind-up radio set, tablet computers and a logbook, and all the tools of the work undertaken by the staff and community mobilizers.

A quick visit to any IFC will provide evidence of the community's engagement. Bringing together members of the community from different age and gender groups, youth and mother volunteer mobilizers, and children interacting with each



Information feedback centre is primary source of information for many Rohingya people in camps.

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other, the IFCs are seen as community centres that foster collaboration and teamwork, promote solidarity and, ultimately, generate hope for a better future. The impact of such an enabling environment on vulnerable community members is transformative and well captured in the following three-word quote: "Rohingya need me!" This is how Somira, a Rohingya refugee, age 25, summed up her experience as a 'model mother' and community mobilizer at an IFC. Like other community mobilizers, Somira takes pride in the work she does. "My family, my husband, everybody around me supports my work as a volunteer; because they know what I am doing here [she points to the little boy at the door of the centre], even my five-year-old son knows, and he wants to help too." Empowered by their agency and contribution to the community, the volunteers are passionate about helping others overcome challenges and avoid the difficulties they themselves experienced. Hasine, a 'model mother', explained, "If I knew before what I learned about childcare here [at the IFC], maybe I wouldn't have lost my two children in Myanmar." 29

Another aspect of IFCs concerns the gender dynamics of the response. The available data demonstrate that the majority of refugees using the IFCs are women (70 per cent to 75 per cent), who are also responsible for household chores and for the wellbeing of the family. However, as research³⁰ conducted by UNICEF and the Institute of Development Studies revealed, there have traditionally been many restrictions on the movement of Rohingya women and adolescent girls. The religious, social and cultural norms of the community (such as purdah,31 the practice of female seclusion) and safety concerns (including sexual harassment, genderbased violence and human trafficking) impose restrictions that confine them to their homes, unless accompanied by a male family member. Therefore, enabling women and girls to gain access to public spaces, including child-friendly

spaces and 'safe spaces' for women, as well as basic facilities and services available in the camps, proved to be a challenge.

Two years after the onset of the crisis, this picture had gradually changed. The active involvement of female mobilizers in IFCs, and their increasing visibility in the public sphere, combined with gender-focused IPC sessions at household level, have contributed significantly to the efforts of UNICEF and other humanitarian agencies³² towards gender equality. Ayesha, a mother of four, shared her experience, "I was sick for a long time, suffering from strong pain, but I didn't know where to go, how to ask for help. My neighbour is a 'model mother'; she told me 'go there [IFC], tell them your problem'. It was my first time in the centre. I was sent to a health facility the same day where the doctor said that I was infected; I have diphtheria and it is dangerous," she explained,33 "I was soon cured."34 Listening to Ayesha's story, Jamal Uddin, a project manager from the partnering NGO BITA, emphasized the radical shift in the community's perception over time, "Arriving to this point was not easy. Our mobilizers were not accepted at the beginning. The refugee families, particularly men, were very afraid and reluctant to cooperate. Some accused our staff, 'You are here to convert our wives and daughters to Christianity!' New volunteers are lucky; the [Rohingya] people are already convinced about the IFCs and appreciate the work they do for them."35

Among the many factors behind the high motivation and drive of the 'model mothers' and youth volunteers are their sense of self-worth and pride in the work of the IFCs, the bonds they form with humanitarian workers and other community members, and their ability to contribute to the family income. This is also true for local IFC staff. Halida, age 21 and the eldest of six sisters, explained, "All my sisters and teachers

say they are proud of the work I do at the centre. They encourage me to continue my studies after graduation. I am thinking of organizing female groups and working on refugee culture in the future." In fact, the inclusive and participatory environment organized around each IFC plays an essential role in promoting collaborative, socially cohesive and peaceful coexistence between the Rohingya refugee and host communities. This is what Idris, a youth mobilizer from the host community, wanted to explain, "I have been involved in the IFC interventions for more than 20 months. It was a big lesson for me. The work we do together [with Rohingya people] in this centre allowed me to get to know Rohingya people better. We are hosting a refugee family in our house. They live together with us."36

Global commitments in the local context

IFCs play a central role in strengthening UNICEF's overall response to the Rohingya humanitarian crisis and, at the same time, they are a significant step forward in the efforts of the organization to improve accountability to affected populations. A review of the observations and recommendations made by the Grand Bargain agreement³⁷ and the World Humanitarian Summit commitments help clarify the point. The Grand Bargain aims to improve the delivery of humanitarian aid by prioritizing the need for accurate and timely information to reach the most vulnerable communities, and for an effective process to promote participation and feedback, taking into account the views of the affected community in order to tailor the humanitarian response accordingly. Such a response would need to fulfill the core commitments and responsibilities outlined by the World Humanitarian Summit,38 including taking concrete steps to end and prevent gender-based violence in emergencies and to improve accountability, 39 meeting needs, reducing vulnerability, and increasing the resilience of refugees. The World Humanitarian Summit responsibilities also call for empowering women and girls and enabling adolescents to be agents of positive transformation, 40 putting affected communities at the centre of the humanitarian response.41

In order to achieve this level of success, a twoway, trusted, efficient and gender-sensitive response mechanism is necessary to disseminate information and provide reliable feedback, with the active engagement of the most vulnerable community members and accountability to all those affected. What is equally vital for UNICEF and other agencies is to create a secure environment that safeguards the affected community in contact with aid agencies from any form of sexual exploitation and misconduct. The most recent Grand Bargain Independent Annual Report⁴² urges humanitarian agencies to take appropriate measures and establish selfreporting systems to prevent sexual exploitation and abuse. Delivering timely and on-site referral, disseminating life-saving messages, promoting positive behaviour, and empowering members of the affected community to become mobilizers and change agents is critical for success. The commitment for accountability to the affected population also requires access to safe and private spaces, especially for women and girls, and standard procedures, including for protection from sexual exploitation and abuse, and genderbased violence prevention and response. IFCs across Cox's Bazar district make a practical contribution to fulfilling these commitments.

Lessons learned and way forward

- Face-to-face community feedback mechanisms that include both fixed and mobile components are an effective way to reach and engage affected communities for accountability, service utilization and behaviour change. Investments are required early on for developing and testing SOPs and building capacity of staff to effectively gather and respond to community feedback whilst maintaining confidentiality and consistency.
- The use of multiple communication devices and creative tools, such as tablet computers, wind-up radio sets, speakers, mikes, information leaflets, visual materials and mural art, are an effective component of the IFC response. Strengthening the infrastructure of the centres through the provision of electrical and solar power and internet connectivity would further improve online communication and related activities, and strengthen real-time data collection and monitoring, as well as saving limited resources.
- Digitizing information, complaints, queries and feedback collected at IFCs facilitates rapid data entry and retention and improves analysis and information sharing, thereby increasing the efficiency of the response at multiple levels. Such an initiative also introduces new challenges and priorities related to risk management and data protection, which needs to be addressed by appropriate data security and oversight mechanisms.
- Instantaneous and broad dissemination of digitized information and data to other sectors/clusters for a more timely and efficient response remains a key challenge to be addressed. Consultative efforts should

- be made at the start for building ownership and action from other agencies and sectors/ clusters.
- The low level of awareness is another important area for future attention, as currently only about 23 per cent of the refugee children and families in the camps know about the IFCs.⁴³ Investing in more actions to increase awareness of and access to the IFCs should be made.
- In order to further strengthen accountability to the affected population and assess the community's satisfaction regarding the services delivered by IFCs, a number of surveys have been conducted in refugee camps and host communities. The findings will inform future interventions, services and feedback mechanisms.
- There are a number of different models of information hubs/centres run by different agencies in the camps. To harmonize the response, standardize the services and ensure quality, an Information Hubs Sub-Working Group was established under the CwC Working Group in January 2018.44 Despite the many efforts of the Information Hubs Sub-Working Group (including developing SOP and setting up measures for better coordination), a number of information centres continue to operate using a separate mechanism and procedure for referral, recording and response.45 Consolidating the approach of different agencies in the use of a common agreed mechanism for data collection and analysis would greatly enhance both coordination and the humanitarian response.⁴⁶

Endnotes

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- ⁴ This figure includes 34,917 previously registered refugees from Myanmar in Kutupalong refugee camp and Nayapara refugee camp. See https://data2.unhcr.org/en/situations/myanmar_refugees.
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- ⁷ In-depth interview at the PULSE office in Cox's Bazar, 13 February 2019.
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- ²⁰ The Camp in Charge is the Bangladeshi government's administrative authority in the camps.
- ²¹ The Bangladesh Institute of Theatre Arts (BITA) is a non-government organization, working in the field of human rights, social inclusion, cultural heritage awareness and poverty alleviation since 1994. For more details see https://bitactg.org/history.

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- ²³ Interview, UNICEF Cox's Bazar Office, 13 February 2019.
- ²⁴ 'Influx of Rohingya Refugees in Bangladesh: Revised response plan'.
- ²⁵ The Open Data Kit application was developed and piloted in collaboration with UNICEF's Social Policy, Evaluation, Analytics and Research Section.
- Communicating with Disaster-Affected Communities Network (CDAC), 'Real-Time Evaluation of Communicating with Communities Coordination: The Rohingya response', report commissioned by UNICEF on behalf of the Communication and Community Engagement Initiative, July 2018, <www.alnap.org/help-library/real-time-evaluation-of-communicating-with-communities-coordination-the-rohingya>.
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- ²⁸ United Nations Children's Fund, Communication for Development (C4D) Supplement to the Global Annual Results Reports 2018, UNICEF, New York, June 2019, p. 15, <www.unicef.org/media/54916/ file/Global_Annual_Results_Report_2018_C4D.pdf.pdf> (note that the number of collected complaints, queries and feedback had increased to 80,000 by June 2019).
- ²⁹ Interviews with IFC staff, 'model mothers' and youth volunteers, 9 and 10 February 2019.
- ³⁰ Ripoll, Santiago, 'Social and Cultural Factors Shaping Health and Nutrition, Wellbeing and Protection of the Rohingya Within a Humanitarian Context', Social Science in Humanitarian Action, October 2017, .
- ³¹ Purdah is a powerful cultural and religious norm that prevents women from being seen by men other than their husbands It requires women and girls to take up traditional gender roles such as housework and childcare, and to remain inside the home.
- ³² Action Against Hunger/Save the Children/Oxfam, Rohingya Refugee Response: Gender analysis, Joint Agency Research Report, Oxfam International, August 2018, https://reliefweb.int/sites/reliefweb.i
- ³³ All names of the refugee and host community members quoted in this case study have been changed to protect their identities.
- Focus group discussions with adult female Rohingya community members, Cox's Bazar, 10 February 2019.
- ³⁵ Interview, refugee camp, Cox's Bazar, 10 February 2019.

- ³⁶ Exploratory interviews with youth volunteers, refugee camps, Cox's Bazar, 9 February 2019.
- Launched during the World Humanitarian Summit held in Istanbul in 2016, the Grand Bargain agreement currently has 61 signatories, including major international aid agencies. See 'The Grand Bargain, A Shared Commitment to Better Serve People in Need', 23 May 2016, Istanbul, https://reliefweb.int/sites/reliefweb.int/files/resources/Grand_Bargain_final_22_May_FINAL-2.pdf.

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 For further details, see Commitment #6: A Participation Revolution: Include people receiving aid in making the decisions which affect their lives.
- ³⁸ 'Commitments to Action', World Humanitarian Summit,' 23–24 May 2016, Istanbul, <www.agendaforhumanity.org/sites/default/files/resources/2017/Jul/WHS_commitment_to_Action_8September2016.pdf>.
- ³⁹ Core responsibility 2: Upholding the norms that safeguard humanity.
- ⁴⁰ Core responsibility 3: Leave no one behind.
- ⁴¹ Core responsibility 4: Changing people's lives: From delivering aid to ending need.
- ⁴² Metcalfe-Hough, Victoria, Wendy Fenton and Lydia Poole, Grand Bargain Annual Independent Report 2019, Humanitarian Policy Group, June 2019, p. 45, <www.odi.org/sites/odi.org.uk/files/resource-documents/12734.pdf>.
- ⁴³ Innovations for Poverty Action, 'Current Level of Knowledge, Attitudes, Practices, and Behaviours (KAPB) of the Rohingya Refugees and Host Community in Cox's Bazar: A report on findings from the baseline survey', IPA, 2018, https://reliefweb.int/sites/reliefweb.int/files/resources/4._h_c4d_kapb_baseline_survey_full_report_final_ipa_oct_15_18_0.pdf, submitted to UNICEF 15 October 2018.
- ⁴⁴ Humanitarian Practice Network, 'Rohingya Refugees in Bangladesh: The humanitarian response', Special feature: Humanitarian Exchange Magazine No. 73, October 2018, p. 28, https://odihpn.org/wp-content/uploads/2018/10/HE-73_web.pdf.
- ⁴⁵ 'Real-Time Evaluation of Communicating with Communities Coordination'.
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