



# UNICEF BANGLADESH Humanitarian Situation Report No. 67

UNICEF, together with the government, delivered 375 family kits with essential items to the families affected by the devastating fire in Korail slum, Dhaka to help them protect their health during this crisis.  
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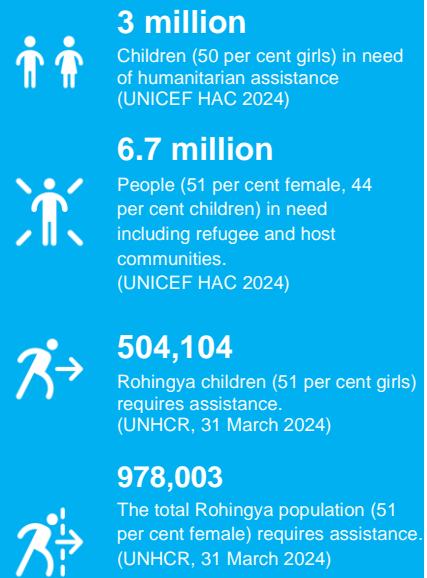
Reporting Period: 1 January to 31 March 2024

## Situation in Numbers

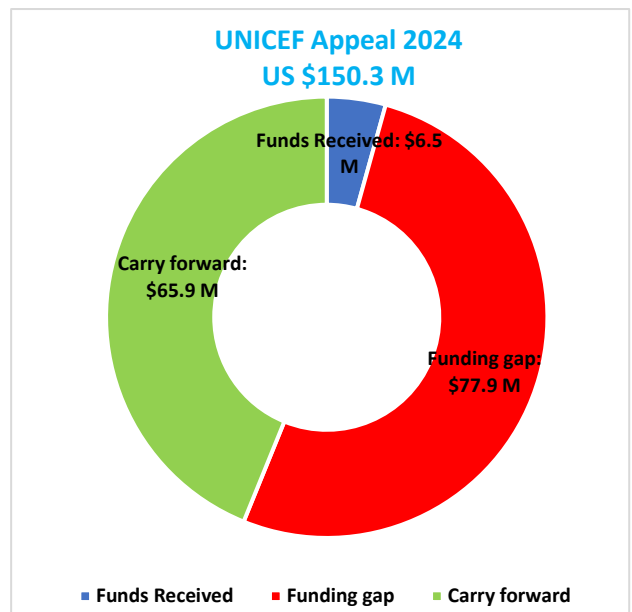
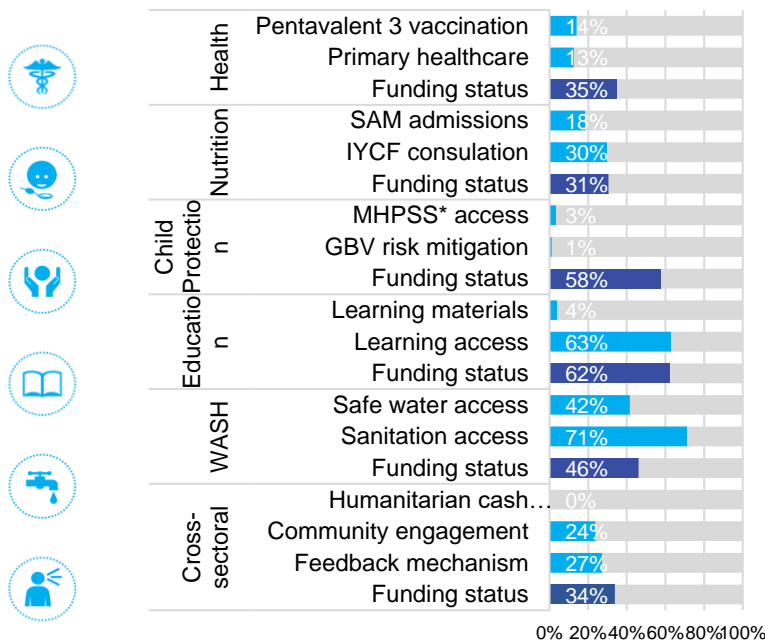
### Highlights

- Bangladesh continues to host **978,003 Rohingya refugees**<sup>1</sup> from Myanmar in 33 camps in Cox's Bazar District and Bhasan Char in Noakhali District, 52 per cent of them children (56 per cent in Bhasan Char).
- A devastating fire occurred in Rohingya refugee Camp 5, displacing around 5,000 refugees, including 3,500 children. UNICEF provided the affected **1,838 (838 female) learners with** education services through Temporary Learning Centres (TLCs) and nearby learning facilities.
- UNICEF contributed to more than **85 per cent of the education sector achievement** for the implementation of the Myanmar Curriculum, reaching **216,465 children (103,281 girls) in Cox's Bazar** and to 65 per cent of education sector achievement in **Bhasan Char, reaching 5,997 children (2,935 girls)**.
- UNICEF has now a standby facility for Anticipatory Action for cyclones and floods totalling \$2.26 million to provide cyclone and monsoon flood emergency response interventions and to benefit an estimated **300,000 and 130,000 people** respectively.
- In the first quarter of 2024, **UNICEF reached 7% of the total HAC target (3.2 M people)** for 2024 (**44,191 children, and 125,155 females**) including **173,547** Rohingya refugees through multi-sectoral services.

Supplies valued **\$1.26m** and **funds \$72.4m (48 per cent of 2024 HAC requirements)** are available for emergency response, leaving a gap of **\$77.9m** to respond to life-saving emergency needs of girls, boys, and women in Bangladesh.



## UNICEF's Response and Funding Status



<sup>1</sup> GoB UNHCR population factsheet March 2024.

\* Mental Health and Psychosocial Support (MHPSS) \*\* The households for the Humanitarian cash transfer instead of individual

## Funding Overview and Partnerships

In 2024, UNICEF's Humanitarian Action for Children requires US\$150.30 million to meet the critical needs of 3.2 million people, including 1.7 million children<sup>2</sup> affected by multiple shocks in Bangladesh. The funds will enable UNICEF, with the Government and its partners, to deliver integrated services in WASH, Nutrition, Education, Child Protection, Health, and Social Behavior Change (SBC) services to protect children's rights and to deliver on the Core Commitments to Children in Humanitarian Action including the refugee response in Cox's Bazar. In this reporting period, the UNICEF 2024 HAC appeal of **US\$150.3 million** has **US\$72.4 million** of its funding received (**48 per cent**) including **US\$65.9 million** in funding carried forward from 2023, leaving a funding gap of **US\$77.9 million (52 per cent)**. This includes contributions received from private and public sector donors who invest in both thematic and non-thematic programmes under this year's HAC.

UNICEF expresses its sincere gratitude to the Australian Committee of UNICEF, the Japanese and USA government, and other UNICEF National Committees for their support. At the same time, UNICEF acknowledges the current critical funding gap, which will be partly addressed through pipeline funds anticipated in the second quarter of 2024. The remaining funding gap needs continued work and investment to ensure UNICEF can meet the priority needs of girls, women, and persons with disabilities. In 2024, UNICEF continues to manage challenges to efficiently respond to the needs of vulnerable communities. To ensure the growing needs are met, flexible and multi-year donor funding during 2024 will be crucial in providing essential support to Rohingya refugees and the most vulnerable children in Bangladesh.

## Situation Overview & Humanitarian Needs

Bangladesh continues to host **978,003** Rohingya refugees<sup>3</sup> from Myanmar in 33 camps in Cox's Bazar District and Bhasan Char in Noakhali District, **52 per cent** of them are children (**56 per cent in Bhasan Char**). As part of the Rohingya refugee relocation plan by the Government of Bangladesh to Bhasan Char, a cumulative number of **35,059 refugees** were relocated to the island by 31 March 2024. The provision of basic services for the refugees in Bhasan Char has been ensured collectively by the humanitarian community. However, water-borne disease outbreaks, malnutrition, inadequate health facilities, lack of educational opportunities for adolescents, and the risks of sexual exploitation and violence, including Gender Based Violence (GBV) are issues still affecting children in the camps.



Rohingya refugee children collecting water from a well.  
© UNICEF/UN0803358/Map

The ongoing conflict in Myanmar continues to be a concern. Official entry into Bangladesh by new asylum seekers remains restricted. However, on average 30 to 130 Myanmar civilians (Rohingyas and others) have reportedly entered every month in search of safety since mid-Jan 2024. For the new arrivals, access to lifesaving assistance remains a challenge as they are not registered, and they therefore do not have ration cards to enable them receive food rations and medical care among other services.

On 7 January 2024, a devastating fire occurred in Rohingya refugee Camp 5, affecting blocks A, B, C, and D. Around 5,000 refugees, including 3,500 children, were displaced, with 976 shelters fully or partially damaged. A total of **1,094 children (568 girls)** under 5 years of age and **383 pregnant and lactating women (PLW)** were affected by the loss of shelters. The fire incident also impacted 13 refugee nutrition volunteers (7 female), affecting nutrition outreach activities and centre-level operations. A total of 20 learning facilities, including 14 learning centres (LCs) and 6 community-based learning facilities (CBLF), 17 of which are supported by UNICEF, were completely damaged including all teaching and learning materials, while another 1 LC was partially destroyed. In addition, 6 LCs had teaching materials stolen. A total of **1,838 (838 female)** learners were directly impacted with the loss of learning materials in the fire. In addition, severe hailstorms damaged four Learning Centres (LCs) in various Upazillas of Sunamganj District<sup>4</sup>. 390

<sup>2</sup> Intensive Child Protection interventions planned from the 2<sup>nd</sup> quarter of 2024

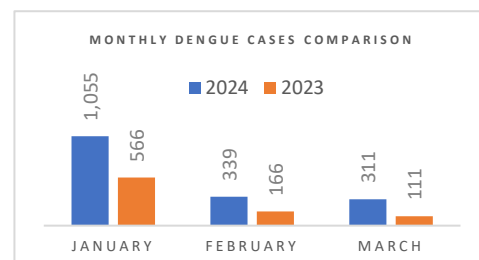
<sup>3</sup> Joint Government of Bangladesh – UNHCR Population Factsheet (as of 31 March 2024)

<sup>4</sup> Shantiganj, Bishwamvarpur and Shantiganj Upazilas were the most affected, especially in Paschim Pagla, Joykalash, Fatehpur, Solukabad, and Palash union of Shantiganj and Bishwamvarpur Upazila

learners were impacted, with 150 in Bishwamvarpur and 240 in Shantiganj. In Dhaka, a fire outbreak in Korail slum destroyed 375 houses, with up to 1,000 children affected.

Food insecurity, resulting in inadequate food consumption, is a major challenge in the Rohingya refugee camps. Compounding this issue, the General Food Assistance (GFA) provided by WFP as part of the humanitarian response was reduced from **\$12 per person equivalent to 2100 Kcal to \$10 in March 2023** and decreased further to **\$8 in June 2023 and later increased from \$8 to \$10 since January 2024**. The 2023 SENS results indicate a deteriorating acute malnutrition situation as a very high public health concern in Rohingya Camps (by 15.4%). MAM prevalence was **13.3%**, which constitute about a **6 times higher caseload** than SAM. Food consumption score remains low (**90% Refugee population are not having adequate food consumption after the ration cuts which was 44% in 2022, before the ration cut**)<sup>5</sup>. Addressing these challenges is crucial to ensuring the well-being and nutritional health of the Rohingya population, particularly the most vulnerable groups.

Public health emergencies remain a significant concern in Bangladesh, following the record high number of reported dengue fever cases in 2023. From January to March 2024, there were 1,704 dengue cases reported, including 629 women and 369 children under 15 years of age. Total number of deaths reported were 22 among which 50 per cent were women. Overall, case fatality rate (CFR) was 1.29 per cent but CFR among women was higher (1.75 per cent). Cases reported so far in 2024 are higher than in 2023, highlighting the continued risk for a major outbreak.



Nationally, up to 230 Unions<sup>6</sup> with 236,000 households (HHs) in Jamuna Basin and 42 Unions with 45,000 households in Padma Basin are at risk of annual cyclical floods in Bangladesh<sup>4</sup>. UNICEF continues to monitor the situation of the monsoon rains and prepares to respond in the event of severe flooding.

## Summary Analysis of Programme Response

### Nutrition

#### National Level

- During the reporting period, there were no emergencies requiring a nutritional response in Bangladesh. The Nutrition Section continued with preparedness activities ahead of the upcoming monsoon and cyclone season (March to July), including activities such as training of cluster members on nutrition in emergencies (NIE) at the national level; training of partners and other stakeholders on emergency preparedness and response (EPR); coordination of regular national level cluster meetings; training of partners on prevention of sexual exploitation and abuse (PSEA); and, ensuring sufficient supplies of therapeutic milk (F-75 and F-100), anthropometric equipment and other nutrition materials in facilities.

#### Cox's Bazar Rohingya and Host Community

- UNICEF is implementing a comprehensive package of nutrition interventions across 26 integrated nutrition facilities (INFs) and 2 Stabilization Centers (SCs) within the refugee camps in Cox's Bazar. These include screening and identifying cases of malnutrition, referring and providing SAM treatment for children and following up with patients, delivering IYCF and nutrition counseling and messaging, and mobilizing communities to support optimal nutrition practices.
- UNICEF provided Ready-to-Use Therapeutic Food (RUTF) supplies for treating severe wasting at **19 UNHCR-supported INFs** in Cox's Bazar including **2 INFs in Bhasan Char** and managed severe wasting with complications at the 20-bed GOB hospital in the Bhasan Char Island.
- In Cox's Bazar, **2,539 Rohingya children** under five (including **1,270 girls and 65 children with disabilities**) received treatment for Severe Acute Malnutrition (SAM). This represents **21 per cent of the target (of 12,131)**. Additionally, in Bhasan Char, **64 children (including 29 girls and 5 children with disabilities)** received SAM treatment, representing **7 per cent of the target (of 904)**.
- Similarly, in Cox's Bazar, **40,770 pregnant and lactating women** and caregivers of children 0-23 months (**203 with disabilities**) received counselling and messaging on IYCF, reaching **78 per cent** of the target (of 52,192).

<sup>5</sup> SENS 2023

<sup>6</sup> Union councils (or union parishads or unions) are the smallest rural administrative and local government units in Bangladesh. Each Union is made up of nine Wards. Usually, one village is designated as a Ward. There are 4,571 Unions in Bangladesh

<sup>4</sup> WFP Briefing to Donor Partners, April 2023

mothers), while in Bhasan Char, **764 mothers, representing 15 per cent of the target of 5,175 mothers**, received similar counselling and messaging to promote optimal IYCF practices.

- In host communities, **245 children (123 girls)** with SAM and medical complications, representing **31 per cent of the target (of 786 children)**, received life-saving treatment while **19,846 pregnant and lactating mothers (PLWs, 38 with disabilities)**, representing **25 per cent** of the expected target of **80,012 PLWs**, received IYCF counselling and messaging.

## Health

### National Level

- UNICEF Bangladesh continues to support the Directorate General of Health Services (DGHS) in the coordination of the dengue response. As the dengue cases began to rise in the first quarter of 2024, the DGHS organised a stakeholder consultation workshop on dengue preparedness and response, and with technical guidance from UNICEF, WHO and other partners, DGHS finalised a draft dengue prevention and control plan (priorities and actions) for 2024.
- UNICEF is co-leading the Health Cluster with WHO, and one cluster meeting was held in March 2024. The meeting discussed the public health situation update in Bangladesh including dengue, the national dengue strategy and plan and the priorities for 2024, accountability to affected populations, Minimum Initial Service Package (MISP) Readiness Assessment and the Joint and Inter-sectoral Analysis Framework.
- With UNICEF support, the DGHS conducted facility level **dengue death surveillance and response**. This program focused on two major healthcare facilities reporting a high number of dengue-related deaths. A total number of **220 deaths** were reviewed in Dhaka North City Corporation Hospital and Mughda Medical College Hospitals. A **dissemination exercise was conducted at the Dhaka North City Corporation hospital**. Verbal autopsy of **60 death cases** was also done at the community level to identify causes of the deaths.
- A country situation analysis on heat stress to inform national policy and strategy has been completed. Meanwhile, a national technical advisory committee is formed under the Planning and Development Department of the DGHS, while a national guideline on management of heat related illness and B.E.A.T. to address the heat wave impact in the summer has been produced. The heat risk communication is finalised and capacity development of healthcare providers is planned for Q2 2024.

### Cox's Bazar Rohingya and Host Community

- In Rohingya camps (including Bhasan Char), **5,717 Rohingya children 0-11 months of age (2,769 girls)** have received Penta-3 vaccines, from January to March 2024 (**15 per cent of the target**).
- In the host communities, **18,458 children of 0-11 months (9,157 girls)** received Penta-3 vaccines by the end of March 2024. UNICEF continues to support 6 Primary Health Care Centres including in-patient facilities. During January to March 2024, these facilities provided **27,882** total consultations of which **15,897** were for children under five years (**42 per cent girls**), and **27 persons with disabilities**.
- In Bhasan Char, UNICEF supported a Newborn Stabilization Unit (NSU) in a 20-bed hospital. **16 sick newborns (10 female)** were treated for different critical illnesses, bringing the total number to **150 admissions** since the beginning of the services. Through the outdoor paediatric service corner, **3,113 children** received consultations (**1,251 of them children <5 years of age**).

## Water, Sanitation, and Hygiene (WASH)

### National Level

- To enhance Government and CSO capacity in integrating climate resilience into the design, delivery, and monitoring of emergency interventions, the UNICEF WASH section trained **235 participants** on climate resilience in humanitarian action. These included **38 Executive Engineers, 36 Assistant Engineers, 38 Sub-Assistant Engineers, 14 Estimators and Draftsmen from DPHE and 67 NGO staff members. 42 officials from various government departments (Health, Education, Nutrition, and Disaster Management)** also participated.

- UNICEF, as part of Anticipatory Action for cyclones and floods, has a standby facility totalling \$2.2 million for a response, with the WASH sector earmarked for **\$1.5m** funding. It aims to provide cyclone and monsoon flood response in the Jamuna and Padma River Basin, to benefit an estimated **300,000 and 130,000 people**, respectively.
- Critical WASH supplies have been prepositioned in **29 disaster-affected districts** to address floods, cyclones, and landslides. To support the supplies management, UNICEF, in partnership with the DPHE, is developing a Digital Supply Management application for Humanitarian Response for the management of the prepositioned supplies. Additionally, support is provided to DPHE for operating and maintaining **50 Mobile Water Treatment Plants (MWTPs)** to be deployed during disasters.



*Group work during the training for Government and NGO partners on climate resilience*

## Cox's Bazar Rohingya and Host Community

- In Cox's Bazar, a joint UN meeting was held with the WASH sector and ISCG in January 2024 to discuss the rationalization of WASH in the camps, where UNHCR and IOM requested UNICEF to increase its WASH coverage as they plan to scale down due to decreased funding. As a result of the discussions, the three UN agencies agreed that in **2025 UNICEF will cover 50 per cent of the Rohingya Refugee population, UNHCR will cover 31 per cent, while IOM will cover 19 per cent.**
- During the reporting period, **271,362 Rohingya refugees (138,212 female including 1,992 persons with disability)** were supported with safe water supply, functional sanitation, and hygiene services, including solid waste management, through UNICEF support.
- **266,473 refugees** received a monthly supply of soap, while **91,548 women and girls of reproductive age** were supported to adopt improved menstrual hygiene practices through the provision of appropriate Menstrual Hygiene Management (MHM) kits and information.
- In Bhasan Char, **17,148 refugees (8,807 female including 167 persons with disabilities)** were reached with improved WASH services through the repair and upgrading of WASH facilities, community engagement for behaviour change and solid waste management.
- In the host community, access to safe drinking water has been restored for **8,231 people ( 3,969 females including 55 persons with disability)** through the rehabilitation of **175 handpumps**. In addition, **44,685 people (23,466 females including 226 persons with disability)** had their access to basic sanitation restored, while **48,937 people (25,691 females including 38 persons with disability)** benefitted from hygiene promotion and community engagement for behavior change through UNICEF support.
- UNICEF supported the construction of improved WASH blocks (consisting of water, latrines, and menstrual hygiene corners) as part of a **3-star approach in 11 schools**, benefiting **10,265 students (3,654 boys, 6,611 girls and including 15 children with disability)**.
- UNICEF provided training to **100 local latrine producers** on climate-resilient sanitation in Cox's Bazar. So far **100 climate-resilient latrines** have been produced for testing.
- UNICEF upgraded the water system for drinking in the **250-bed district Sadar Hospital** of Cox's Bazar.

## Education

### National Level

- Education Cluster members participated in the Capacity building on the Accountability to Affected Population (AAP) facilitated by the SBC Section where mainstreaming of AAP across education interventions was discussed.
- The National Cluster convened the Education Cluster meeting on 13 March 2024 and agreed on the approach for the Cluster Coordination Performance Monitoring (CCPM) process and the development of the 2024 Workplan.
- Schools and colleges continued to provide messages to prevent the spread of dengue, particularly on cleaning playgrounds regularly, and removing accumulated water to avoid breeding grounds.

## Cox's Bazar Rohingya and Host Community

- As part of the rationalisation and streamlining of the Rohingya response, the Education Sector and the UN agencies agreed to optimize the geographical presence of Education partners across the camps and to adopt a more integrated approach that promotes predictability and continuity of education services. As a result, **967 Learning Facilities for Early Childhood Development (ECD) and Myanmar Curriculum (MC)** were transferred from UNHCR to UNICEF to manage them from 01 January 2024.
- UNICEF also reduced the Implementing Partners (IP) geographic presence for ECD and MC from **65 locations across 30 camps to 35 locations across 31 camps** as part of the 'one partner, one camp' approach. In Bhasan Char, UNICEF received **7 schools** from UNHCR upon the rationalisation.
- Overall, UNICEF contributed to more than **85 per cent of the education sector achievement** for the implementation of the Myanmar Curriculum reaching **216,465 children (103,281 girls) in Cox's Bazar** and to **65 per cent of education sector achievement in Bhasan Char reaching 5,997 children (2,935 girls)**. Besides the Myanmar Curriculum, there were children who benefited from other education programmes such as ECD and Vocational Skills programme, which are included as part of the Annex of Summary of Humanitarian Programme Results (Cox's Bazar level).
- In January 2024, UNICEF resumed our partnership with the University of Cambridge Local Examinations Syndicate to update and finalise the assessment framework and create documents and tools to support the implementation of the assessment framework in a classroom setting. Cambridge is also in the process of developing a "Record of Learning" for children which they will receive after they complete each grade of the MC.
- UNICEF responded to the January 2024 fire by providing **2 tents** as Temporary Learning Centres (TLCs) to enable continuity of educational services. All directly affected **1,838 (838 female)** learners, started receiving education services after the fire incident.

## Child Protection, Gender Based Violence in Emergencies (GBViE)

### National Level

- As part of preparedness, a workshop was organised for the members of the CP-GBV working group in Bandarban in February 2024, focusing on Child Protection in Emergencies (CPiE) and Gender-Based Violence in Emergencies (GBViE), as well as preparedness measures in Bandarban District. A CP-GBV-GiHA working group has been established in the Barguna district in March and a kick-off meeting was held at the Department of Women Affairs (DWA) office to raise awareness among its members on cyclone preparedness.
- In March 2024, Korail slum experienced a devastating fire outbreak. **375 households, including more than 1,000 children were affected**. UNICEF responded by deploying **18 Social Workers, 5 Ward Volunteers, and 2 Psychosocial Counsellors** in collaboration with the Department of Social Services (DSS) to support the affected women and children in the location.
- Approximately **250 cases** were placed on case management by the DSS social workers. **375 family kits** were distributed by UNICEF to the most vulnerable fire-affected households through the Department of Social Services (DSS) and one temporary shelter was established within 24 hours of the fire to continue providing the hub's services for children, including adolescents.



*A DSS Social worker registering a case for case management*

## Cox's Bazar Rohingya and Host Community

- A total of **84,764 children, adolescents, and caregivers (Rohingya camps- 62,768, host communities- 18,303, Bhasan Char- 3,693; 25,711 girls, 23,030 boys, 16,306 men, 19,717 women, including 1,527 persons with disabilities)** accessed community-based mental health and psychosocial support in the 1st Quarter of 2024. A total of **13,328 women, girls, and boys (Rohingya camps- 11,920, host communities- 1,327, Bhasan Char- 81 where 6,686 girls, 6,037 boys, 574 women, including 83 persons with disabilities)** accessed GBV risk mitigation, prevention and/or response interventions.
- UNICEF reached **132 children (60 girls, 72 boys)** affected by the January 2024 camp fires in Cox's Bazar with psychological first aid (PFA). A **total of 1,176 children** received psychosocial support services.

## Prevention of Sexual Exploitation and Abuse (PSEA) and Child Safeguarding

- During the first quarter of 2024, UNICEF worked closely with staff and partners to sustain prevention and response efforts against sexual exploitation and abuse (PSEA), in line with its zero-tolerance policy. A key focus was placed on establishing secure and easily accessible feedback channels for reporting SEA cases. UNICEF staff received comprehensive PSEA and Child Safeguarding training, including a two-day session and a half-day refresher session. Furthermore, four additional PSEA and Child Safeguarding training sessions were conducted with various implementing partners. Moreover, a two-day full session was also conducted in Bhasan Char with four different implementing partners. PSEA focal points across the country, including those in Cox's Bazar, strengthened their skills through Training of Trainers' sessions and regular meetings.
- UNICEF played an active role in the PSEA Network in Cox's Bazar and Dhaka, with ongoing endeavours to establish the PSEA Taskforce for the UNICEF Bangladesh Country Office. This task force is designed to aid senior management in coordinating the formulation and execution of PSEA policies and procedures. UNICEF conducted PSEA capacity assessments for 29 CSOs and one INGO, utilizing the UN PSEA Common Toolkit, resulting in **100 per cent** of active CSO partners of UNICEF demonstrating high capacity.

## Social and Behaviour Change (SBC) and Community Engagement & Accountability

### National Level

- UNICEF Social and Behavior Change and Emergency staff, in collaboration with UNICEF Regional Office for South Asia (ROSA), organised a 3 days training on Accountability to the Affected Population (AAP) for UNICEF staff. **37** staff from all the field offices and country office actively participated aimed at enhancing their capacity on AAP and facilitating their contributions to the development of AAP roadmap.
- Together with United Nations Resident Coordinator Office (UNRCO) and BBC Media Action for ICGG and AAP WG members, UNICEF organised a workshop to develop HCTT/AAP WG Action plan on AAP for 2024-25. **38** participants from different clusters, working groups and agencies participated in the workshop and identified collective actions to strengthen the National AAP system. The workshop was co-facilitated by UNICEF BCO, UNICEF ROSA and BBC Media Action.
- UNICEF provided technical support to the Communicable Disease Control (CDC), DGHS to bring together the IEDCR, Lifestyle, Health Education, and Promotion wing of the Bureau of Health Education, BDRCS, ICCDRB, FAO, WHO, and USAID on 21st January 2024, to finalize the key messages on Nipah virus to ensure consistency in information sharing while communicating with populations at risk.
- UNICEF supported the CDC, DGHS to organize advocacy workshops on the Nipah virus. Around **150 officials** from Health, Education, Information, Agriculture, Livestock, and Forestry ministries, the Islamic Foundation, relevant non-governmental organizations, media, and farmers participated in the workshops and committed to communicating and engaging communities on the virus.
- UNICEF supported CDC, DGHS to disseminate Nipah Virus preventive information in the Social Media and on the UNICEF facebook page which reached **2,077,905 users and generated 57,393 engagement** among the users, and which was shared **1,593 times**.
- UNICEF contributed to the development of the national guidelines for heat related illnesses and facilitated discussions on heatwave- related RCCE (Risk Communication and Community Engagement) for Bangladesh and developed messages for upcoming heat session.



RCCE Materials on Nipah Prevention

### Cox's Bazar Rohingya and Host Community

- In Rohingya Refugee Camps, UNICEF partners continued community engagement activities, promoting proper hygiene practices to prevent dengue fever, uptake of routine immunization for children and prevention of dengue fever.
- A total of **384,007 individuals, representing 78 per cent of the** targeted Rohingya refugee population, were reached with various messages including on essential family health care and lifesaving behaviours and practices such as health hygiene, maternal and new-born care and completion of childhood immunization through two-way communications.
- As part of the community feedback mechanism, **14 Information and Feedback Centers (IFCs)** in camps provided crucial channels for community complaints and feedback. Through the centers, UNICEF received and

referred **45,176 complaints, feedback, and queries (26,011 were from female and 1,113 from PWD) and with 60 per cent** being successfully resolved, showing the effectiveness of the support mechanisms.

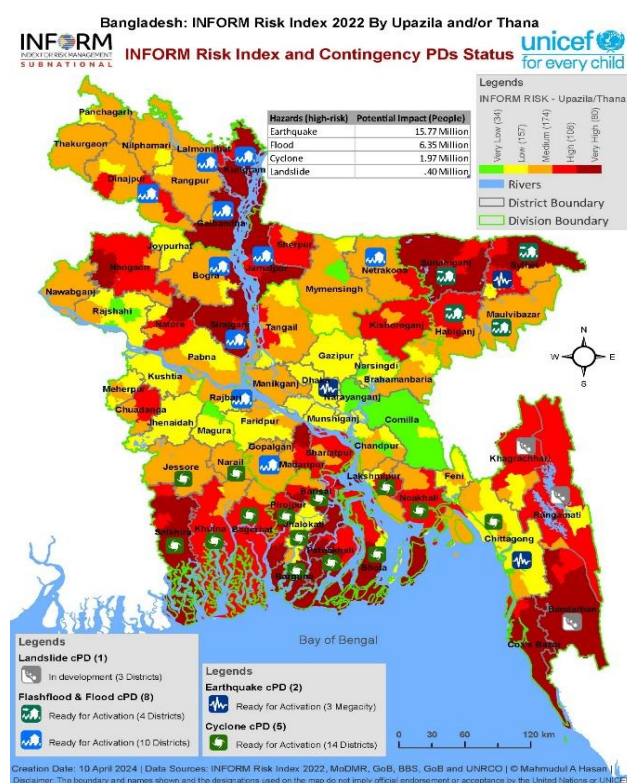
- In the host community, UNICEF and its partners have concentrated efforts on community mobilization to address harmful social norms and practices. **A total of 30,785 individuals, including 17,821 females and 196 Persons with Disabilities (PWD)**, were engaged in initiatives aimed at promoting essential family care practices and challenging harmful social norms. Special attention was given to combating issues such as child marriage, violence against women and children, and the promotion of girls' education.
- Through **4 IFCs** in host communities, **9,354 individuals, including 6,857 females and 150 PWD**, were referred to relevant government service facilities for further assistance and support. These efforts underscored UNICEF's commitment to fostering community resilience and addressing unique challenges faced by vulnerable populations in host communities.

## Humanitarian Cash Transfer (HCT)

- UNICEF has finalized the strategy for Humanitarian Cash Transfers (HCT) in the country. The policy will guide the distribution of Multi-Purpose Cash (MPC) grants to enable pregnant and lactating mothers (children 0-4 years) access a range of critical goods and services, which are essential for children's well-being during and post-disaster.
- In partnership with NGO partners, UNICEF is working on establishing a database of **40,000 potential beneficiaries (pregnant and lactating mothers) covering 30 upazilas of 14 districts in 7 divisions**. Training has been provided to **120 community volunteers and NGO staff** to build their capacity in implementing cash assistance programmes.
- About **2,600 community members** including leaders and local government representatives have received awareness on the criticality of cash support for people in need, particularly households with pregnant mothers and children during disasters.

## Emergency Preparedness

- UNICEF continues to monitor the climatic conditions off the coast at the Bay of Bengal with 4 deep depressions and 1 cyclone being predicted between March and May 2024 by Bangladesh Meteorological Department (BMD)<sup>7</sup>.
- The renovation of a warehouse of Department of Public Health Engineering (DPHE) in Chittagong, a collaboration between the DPHE of the Government and UNICEF, is completed and provides up to 780 m2 of space for supplies prepositioning, with savings of approximately USD 205,000 annually realized by shifting from the use of a private warehouse.
- **Supplies (\$1.26 million) and preparedness funds (\$2.40 million)** have been pre-positioned for emergency programming, with **15 contingency partnerships** ready for activation if required ahead of the cyclone and monsoon season (March-July).
- UNICEF participated in a joint inter-agency After-Action Review of the Chittagong Floods response where issues related to lack of access to some locations in the Chittagong Hill Tracts (CHT) and constraints experienced in locations affected by the floods, challenges in information collection, and the complex governance structure in the CHT were discussed.



<sup>7</sup> Bangladesh Meteorological Department (BMD) three-month outlook.



## Humanitarian Leadership, Coordination and Strategy

The Government of Bangladesh leads the Rohingya humanitarian response in Cox's Bazar and Bhasan Char. The National Task Force chaired by the Ministry of Foreign Affairs of Bangladesh provides oversight and overall strategic guidance for response. In addition, the National Committee on Coordination, Management and Law and Order, led by the Ministry of Home Affairs (MoHA), has been formed in December 2020. The Office of Refugee Relief and Repatriation Commissioner (RRRC) manages and provides oversight to the day-to-day operations under the Ministry of Disaster Management & Relief (MoDMR). The Deputy Commissioner (DC) leads the civil administration and coordinates the responses to the needs of Bangladeshi communities during disasters, and ensures security and public order. UNICEF leads the Nutrition and WASH Sectors and Child Protection Sub-Sector and co-leads the Education Sector with Save the Children in Cox's Bazar's Rohingya response and WASH and Education sectors in Bhasan Char, in coordination with the RRRC and the relevant government departments such as department of primary and mass education, department of public health and engineering (DPHE), department of social services (DSS) and others UNICEF is a core member of the Emergency Preparedness and Response Working Group (EPRWG), and Humanitarian Access Working Group (HAWG) which functions under Inter Sector Coordination Group (ISCG). UNICEF also actively participate in the Disaster Risk Reduction Working Group (DRRWG) which functions under the Office of District Commissioner. UNICEF provided support to district relief and rehabilitation office to organize multi-hazard simulation in a school as part of enhancing disaster preparedness in Cox's Bazar district on the occasion of National Disaster Preparedness Day 2024 in March 2024 where more than **700 students, Red Crescent Youth Volunteers, and members of fire service department** participated and representatives of Deputy Commissioner's Office observed.

UNICEF participated in a joint UN mission with 6 other UN agencies to the Chittagong Hill Tracts where a coordination and programmatic framework for the humanitarian and development nexus was discussed. In Cox's Bazar, child protection systems have been further strengthened, towards greater sustainability and more effective bridging of the humanitarian-development nexus. Progress has been made towards renewing the MoU with the Department of Social Services, providing a platform for continued support that will see, inter alia, a more agile social service workforce with greater visibility and connectedness across the Rohingya camps.

Investment in government bodies is also extended to the judiciary and law enforcement agencies to develop a more reliable continuum of care for children. At the community level, Community Based Child Protection Committees continue to be supported as central to the protective environment of children, with the number of vulnerable children identified and referred by CBCPCs showing a marked increase since last year. This also ties with the increased focus on prevention of all forms of violence. Two important studies commenced in the 1st Quarter: a Justice for Children assessment of the Rohingya camps that aims to research how refugee children access justice whether as alleged offenders or as survivors of violations, and; a knowledge, attitudes and practices study of violence against children that is looking at the drivers of violence, how survivors access support, and entry points for better prevention in the camp environment. The period has seen further integration of child protection and gender-based violence programming for children. The current focus is on building the capacity of caseworkers and volunteers to handle GBV cases where appropriate, and on making better use of Multi-Purpose Centres in dealing with GBV in a way that does not cut corners on access and preventing stigma.

UNICEF is one of the Strategic Executive Group (SEG) members with other UN agencies. The SEG provides overall guidance for the Rohingya humanitarian response and engages with the Government of Bangladesh at the national level. At the field level in Cox's Bazar, the ISCG Secretariat ensures the overall coordination of the response. The ISCG Principal Coordinator chairs the Refugee Operations and Coordination Team (ROCT), which brings together the Heads of operational UN Agencies, members of the international and national non-governmental organizations (NGOs), and donor representatives based in Cox's Bazar. The ISCG convenes the Inter-Sector Meeting to ensure intersectoral coordination in the response. The SEG Co-Chairs are leading a process to streamline the coordination system in Cox's Bazar that will be implemented in 2024. In 2022, the humanitarian community finalized a set of Principles of Rationalization that aim to ensure that all Rohingya refugees have equitable access to all basic services in a predictable, efficient, and timely manner and that the humanitarian community is transparent and accountable in its interventions. This exercise has informed the JRP 2024 and will continue to be applied in the coming years.

UNICEF convenes emergency management meetings quarterly and Emergency Focal Points meetings monthly. UNICEF participates in regular meetings convened by ICCG to strengthen emergency coordination in Bangladesh. In addition, UNICEF supported the RC's office to undertake an inter-agency after-action review (AAR) of the Chittagong Floods response where UNICEF, FAO, WFP and UNFP participated together with their partners, in addition to government authorities.

## Human Interest Stories and External Media

UNICEF developed communication and advocacy content, such as press releases, human interest stories, social media messaging, and multimedia assets to raise awareness on and encouraging continued support to respond to all six key programmatic areas<sup>8</sup> of responses for Rohingya and Bangladeshi children and communities, highlighted through the UNICEF Bangladesh website and social media channels. UNICEF Bangladesh is leading among all Country Offices globally in terms of digital media outreach, with over 11 million social media followers and over 6 million unique website visitors in 2023.

### Stories:

- [Women take charge of their own destinies in Cox's Bazar](#) (8 April 2024)
- [Empowering communities: Asma Akter's fight against lead poisoning](#) (7 April 2024)
- [From child labour to education](#) (22 February 2024)
- [A quiet force for change in Cox's Bazar](#) (15 February 2024)

### Press releases/statements:

- [UNICEF and JAPAN join hands to improve the well-being of Bangladeshi and Rohingya children living in Bhasan Char Island and Cox's Bazar](#) (1 March 2024)
- [Fire ravages Rohingya refugee camp leaving 3,500 children homeless and 1,500 without education](#) (8 January 2024)

For general information regarding the actions being taken by UNICEF and other humanitarian community actors for the Rohingya refugee Emergency, Cyclones, Floods, and the concerned resource requirements, please see the following documents.

- [UNICEF Bangladesh Humanitarian Action for Children Appeal \(HAC\)](#)
- [UNICEF Bangladesh Facebook page](#)
- [Bangladesh 2024 Joint Response Plan Rohingya Humanitarian Crisis](#)

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<sup>8</sup> They are health and nutrition, education, child protection, water sanitation and hygiene, HIV/AIDS, Social and behavioral change, and other salient child rights issues

## Annex A. Summary of Programme Results

Sector		Cluster/Sector Response <sup>9</sup>					
Indicator	Disaggregation	2024 target	Total results	Change since last report ▲ ▼	2024 target	Total results	Change since last report ▲ ▼
<b>NUTRITION</b>							
Children 6-59 months with severe wasting admitted for treatment	Girls	7,835	1,422	-	6,237	1,299	-
	Boys	7,588	1,426	-	6,068	1,295	-
	Person with Disability (PwD) <sup>10</sup>	183	70	-	122	65	-
Primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling	Women	205,838	61,380	-	113,300	80,003	-
	PwD <sup>3</sup>	3,859	248	-	1,240	605	-
<b>HEALTH</b>							
Children aged 0 to 11 months who have received pentavalent 3 vaccine	Girls	85,366	11,926	-			
	Boys	86,622	12,249	-			
	PwD <sup>3</sup>	4,126	-	-			
Children and women accessing primary healthcare in UNICEF-supported facilities	Girls	145,809	10,122	-			
	Boys	154,149	13,420	-			
	Women	211,664	41,083	-			
	PwD <sup>3</sup>	12,675	27	-			
Children and adults who were treated for dengue in UNICEF supported health facilities	Girls	4,301	2	-			
	Boys	6,663	1	-			
	Men	19,398	-	-			
	Women	31,262	-	-			
	PwD	1,701	-	-			
Healthcare providers trained in detecting, referral and appropriate management of dengue cases	Men	857	-	-			
	Women	524	-	-			
<b>WATER, SANITATION &amp; HYGIENE</b>							
People accessing a sufficient quantity of safe water for drinking and domestic needs	Girls	177,793	77,050	-	281,705	253,290	-
	Boys	182,542	80,641	-	295,733	265,901	-
	Men	181,839	70,014	-	252,769	227,467	-
	Women	193,480	78,894	-	290,404	261,014	-
	PwD	15,051	2,486	-	11,206	-	-
People use safe and appropriate sanitation facilities	Girls	115,180	83,353	-	281,705	268,417	-
	Boys	121,631	86,669	-	295,733	281,784	-
	Men	113,713	78,509	-	252,769	240,832	-
	Women	123,875	89,437	-	290,404	276,713	-
	PwD	7,736	2,422	-	14,609	-	-
People accessing basic hygiene services	Girls	111,335	-	-	281,705	-	-
	Boys	119,976	-	-	295,733	-	-
	Men	112,601	-	-	252,769	-	-
	Women	122,377	-	-	290,404	-	-
	PwD	7,509	-	-	14,609	-	-
Government staff/ volunteers trained on effective WASH responses for public health emergencies	Men	900	198	-	150	53	-
	Women	900	239	-	150	17	-

<sup>9</sup> Cluster/Sector response covers Cox's Bazar sector-level targets and results only.

<sup>10</sup> There was a challenge to collect disaggregated data by the person with a disability in the system.

CHILD PROTECTION & GENDER-BASED VIOLENCE							
Children and parents/caregivers accessing mental health and psychosocial support	Girls	758,742	25,711	-	39,043	2,644	2,644
	Boys	632,285	23,030	-	42,962	2,416	2,416
	Men	429,953	16,306	-	-	-	-
	Women	708,159	19,717	-	-	-	-
	PwD	69,428	820	-	846	36	36
Women, girls, and boys accessing gender-based violence risk mitigation, prevention, and/or response interventions	Girls	421,619	6,686	-			
	Boys	273,098	6,037	-			
	Women	403,492	605	-			
	PwD	33,508	83	-			
People who have access to a safe and accessible channel to report sexual exploitation and abuse by aid workers	Girls	330,310	-	-			
	Boys	338,137	-	-			
	Men	367,983	-	-			
	Women	395,483	-	-			
	PwD	27,959	-	-			
EDUCATION							
Children accessing formal or non-formal education, including early learning	Girls	187,873	116,280	-	227,311	151,047	-
	Boys	196,872	125,735	-	229,344	153,604	-
	Men	-	-	-	-	-	-
	Women	-	-	-	-	-	-
	PwD	6,260	1,467	-	13,700	2,367	-
Children receiving individual learning materials	Girls	317,817	12,388	-	227,311	70,057	-
	Boys	196,872	13,472	-	229,344	69,742	-
	Men	-	-	-	-	-	-
	Women	-	-	-	-	-	-
	PwD	13,537	160	-	13,700	1,619	-
CROSS-SECTORAL (HCT, SBC / ACCOUNTABILITY MECHANISM)							
Households reached with UNICEF-funded humanitarian cash transfers across sectors	Households	10,000	-	-			
People reached through messaging on prevention and access to services	Girls	354,302	88,250	-			
	Boys	371,604	90,273	-			
	Men	488,919	107,951	-			
	Women	524,928	129,126	-			
	PwD	39,658	4,264	-			
People with access to established accountability /feedback mechanisms (CFQ)	Girls	18,978	-	-			
	Boys	19,449	-	-			
	Men	69,292	22,538	-			
	Women	98,185	33,602	-			
	PwD	3,911	1,286	-			
People engaged in discussion and prevention actions on public health emergencies	Girls	61,508	29,431	-			
	Boys	64,335	25,289	-			
	Men	88,189	22,330	-			
	Women	96,468	42,009	-			
	PwD	5,940	1,076	-			

## Summary of Humanitarian Programme Results (Cox's Bazar only)

Indicator		Sector Response									
Sector	Disaggregation	2024 Target		Total Results		Change since last report ▲▼	2024 Target		Total Results		Change since last report ▲▼
		Rohingya*	Host	Rohingya*	Host		Rohingya	Host	Rohingya	Host	
<b>NUTRITION</b>											
Children aged 6 to 59 months with severe acute malnutrition admitted for treatment	Girls	6,648	385	1,299	123	-	6,185	52	1,270	29	-
	Boys	6,387	401	1,304	122	-	6,015	53	1,269	26	-
	CwD	130	8	70	-	-	120	2	65	-	-
Primary caregivers of children aged 0 to 23 months receiving infant and young child feeding (YCF) counselling	Women	57,367	80,012	41,534	19,846	-	86,100	27,200	53,788	26,215	-
	PwD	574	1,368	210	38	-	850	390	250	355	-
<b>HEALTH</b>											
Children aged 0 to 11 months who have received pentavalent 3 vaccine	Girls	19,505	43,178	2,769	9,157	-					
	Boys	18,813	44,732	2,948	9,301	-					
	CwD	383	2,461	-	-	-					
Children and women accessing primary health care in UNICEF-supported facilities	Girls	21,668	15,880	6,691	3,431	-					
	Boys	24,932	19,078	9,206	4,214	-					
	Women	45,074	114,590	11,985	29,098	-					
	PwD	917	4,187	27	-	-					
Children and adults treated for dengue in UNICEF-supported health facilities	Girls	82	-	2	-	-					
	Boys	33	-	1	-	-					
	Women	524	-	-	-	-					
	Men	714	-	-	-	-					
Healthcare providers trained in detecting, referral and appropriate management of dengue cases	PwD	14	-	-	-	-					
	Girls	-	-	-	-	-					
	Boys	-	-	-	-	-					
	Women	-	-	-	-	-					
	Men	-	-	-	-	-					
	PwD	-	-	-	-	-					
	Girls	-	-	-	-	-					
	Boys	-	-	-	-	-					
	Women	-	-	-	-	-					
	Men	-	-	-	-	-					
	PwD	-	-	-	-	-					
	Girls	-	-	-	-	-					
	Boys	-	-	-	-	-					
	Women	-	-	-	-	-					
	Men	-	-	-	-	-					
	PwD	-	-	-	-	-					
<b>WATER, SANITATION &amp; HYGIENE</b>											
People accessing a sufficient quantity of safe water for drinking and domestic needs	Girls	78,699	13,311	73,032	1,726	-	234,614	47,091	208,806	44,484	-
	Boys	82,458	15,302	76,474	1,901	-	246,333	49,400	219,236	46,665	-
	Women	78,420	17,928	74,055	2,243	-	243,654	46,750	216,852	44,162	-
	Men	68,594	17,949	65,106	2,361	-	206,973	45,796	184,206	43,261	-
	PwD	3,082	1,806	2,159	55	-	9,316	1,890	-	-	-
People use safe and appropriate sanitation facilities	Girls	78,699	19,325	73,032	9,240	-	234,614	47,091	223,704	44,713	-
	Boys	82,458	22,216	76,474	9,126	-	246,333	49,400	234,879	46,905	-
	Women	78,420	26,029	73,987	14,226	-	243,654	46,750	232,324	44,389	-
	Men	68,594	26,059	65,215	12,093	-	206,973	45,796	197,349	43,483	-
	PwD	3,082	2,622	2,068	226	-	9,316	5,293	-	-	-
People accessing basic hygiene services	Girls	78,699	32,636	30,612	11,820	-	234,614	47,091	-	-	-
	Boys	82,458	37,518	30,841	10,934	-	246,333	49,400	-	-	-
	Women	78,420	43,957	34,706	13,871	-	243,654	46,750	-	-	-
	Men	68,594	44,007	31,425	12,312	-	206,973	45,796	-	-	-
	PwD	3,082	4,427	618	38	-	9,316	5,293	-	-	-
Volunteers/government staff trained on effective WASH responses for public health emergencies	Girls	-	-	-	-	-	-	-	-	-	-
	Boys	-	-	-	-	-	-	-	-	-	-
	Women	400	-	239	-	-	100	50	13	4	-
	Men	400	-	198	-	-	100	50	41	12	-
	PwD	-	-	-	-	-	-	-	-	-	-
<b>CHILD PROTECTION &amp; GENDER-BASED VIOLENCE</b>											
Children and parents/caregivers accessing mental health and psychosocial support	Girls	45,426	40,500	20,378	5,333	-	29,716	9,327	1,916	728	-
	Boys	45,426	37,500	18,558	4,472	-	30,402	12,560	1,609	807	-
	Women	44,809	37,500	14,414	5,303	-	-	-	-	-	-
	Men	37,868	34,500	13,111	3,195	-	-	-	-	-	-
	PwD	3,471	4,200	710	110	-	620	226	21	15	-
Women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions <sup>11</sup>	Girls	12,812	3,159	6,028	658	-					
	Boys	12,811	2,928	5,399	638	-					
	Women	12,698	2,928	574	31	-					
	PwD	766	252	80	3	-					

<sup>11</sup> Data for men is available but not covered by the HPM indicator "Number of women, girls, and boys accessing gender-based violence risk mitigation, prevention and/or response interventions"

People who have access to a safe and accessible channel to report sexual exploitation and abuse by aid workers	Girls	170,283	84,404	-	-	-					
	Boys	178,640	84,756	-	-	-					
	Women	175,823	134,033	-	-	-					
	Men	149,381	134,593	-	-	-					
	PwD	6,741	12,258	-	-	-					

## EDUCATION

Children accessing formal or non-formal education, including early learning	Girls	120,500	2,400	115,486	794	-	196,618	30,693	144,213	6,834	-
	Boys	130,300	1,600	125,098	637	-	202,823	26,521	147,953	5,651	-
	Women	-	-	-	-	-	-	-	-	-	-
	Men	-	-	-	-	-	-	-	-	-	-
	CwD	2,508	112	1,459	8	-	11,983	1,716	2,166	201	-
Children receiving individual learning materials	Girls	120,500	2,400	12,232	156	-	196,618	30,693	65,214	4,843	-
	Boys	130,300	1,600	13,239	233	-	202,823	26,521	65,516	4,226	-
	Women	-	-	-	-	-	-	-	-	-	-
	Men	-	-	-	-	-	-	-	-	-	-
	CwD	2,508	112	156	4	-	11,983	1,716	1,541	78	-

## CROSS-SECTORAL (SBC / ACCOUNTABILITY MECHANISM)

People reached through messaging on prevention and access to services	Girls	106,016	13,827	81,090	7,160	-					
	Boys	111,351	13,677	84,657	5,616	-					
	Women	153,722	48,923	118,465	10,661	-					
	Men	131,959	48,573	100,603	7,348	-					
	PwD	5,030	3,500	4,068	196	-					
people sharing their concerns and asking questions through established feedback mechanisms	Girls	1,294	200	686	596	-					
	Boys	861	200	552	164	-					
	Women	62,151	12,000	26,059	6,261	-					
	Men	38,694	7,600	19,489	2,333	-					
	PwD	1,030	560	1,136	150	-					
People engaged in discussion and prevention actions on public health emergencies	Girls	32,052	4,148	25,230	4,201	-					
	Boys	33,616	4,103	21,773	3,516	-					
	Women	47,003	14,677	35,655	6,354	-					
	Men	40,329	14,572	18,092	4,238	-					
	PwD	1,530	1,050	958	118	-					

\* Rohingya column containing both Camp and Bhasan Char target and progress

\*\* Categorized based on the following threshold: 50% or above achievement against total annual target considered as "On Track" and achievement below 50% considered as "Constrained"

## Annex B. Funding Status\*

Appeal Sector	Funding Requirements*	Funds available					Funding gap		
		Funds Received Current Year (2024)		Total	Resources available from 2023 (Carry-Over)		Total funds available	\$	%
		ORE	ORR		ORE	ORR			
Nutrition	18,418,690	452,428	182,500	634,928	3,581,535	1,404,244	5,620,707	12,797,983	69%
Health	20,069,268	1,652,334	1,184,569	2,836,903	4,188,014	0	7,024,917	13,044,351	65%
Water, Sanitation and Hygiene	28,846,083	0	16,200	16,200	5,399,947	7,867,166	13,283,313	15,562,770	54%
Child Protection/GBV	22,259,089	0	0	0	2,643,663	10,243,493	12,887,155	9,371,934	42%
Education	46,868,698	0	2,708,312	2,708,312	13,240,423	13,311,911	29,260,646	17,608,052	38%
Cross-sectoral	6,613,384	0	86,500	86,500	494,374	1,658,666	2,239,541	4,373,843	66%
Emergency Preparedness	7,248,001	197,492	0	197,492	1,886,733	0	2,084,225	5,163,776	71%
<b>Total</b>	<b>150,323,213</b>	<b>2,302,254</b>	<b>4,178,081</b>	<b>6,480,335</b>	<b>31,434,689</b>	<b>34,485,480</b>	<b>72,400,504</b>	<b>77,922,709</b>	<b>52%</b>

\*As defined in the Bangladesh Humanitarian Action for Children Appeal for 2024