

Update on the context and situation of children

Bangladesh has made significant strides in its quest for growth and economic development. Annual growth over the last decade has averaged 5.2 per cent. Gross domestic product (GDP) per capita reached US\$1,000 in 2014, rising to US\$1,906 in 2019. The headcount poverty rate (upper poverty line) fell from 48.9 per cent in 2000 to 24.3 per cent in 2016 (Household Income and Expenditure Survey [HIES], 2016) to an estimated 20.5 per cent in fiscal year 2018/19 (Bangladesh Bureau of Statistics, 2019). However, growth has not been evenly spread across the population. From 2010 to 2016, the income Gini coefficient increased from 0.458 to 0.482, pointing to increasing disparities. Over the same period, rural poverty decreased faster (from 35.2 to 26.4 per cent) than urban poverty (from 21.3 to 18.9 per cent) (HIES, 2016). The poverty rate in households with children is higher (28.3 per cent) than in those without (24.3 per cent). Children thus feature disproportionately among the poor (HIES, 2016).

Bangladesh is changing rapidly – economically, socially and demographically. As of 2019, 75 per cent of the duration of its 55-year demographic window of opportunity has passed. Urgent action is needed for Bangladesh to reap maximum benefit from the estimated 18 years remaining of this demographic window. Currently, 33.19 per cent of educated youths are unemployed (Bangladesh Institute of Development Studies, 2019), demonstrating a clear mismatch between labour market supply in this demographic window and its utilization.

A Multiple Indicator Cluster Survey (MICS) was completed for Bangladesh in 2019, the first since 2012–2013. It provides data for 151 major indicators related to women and children, 29 of which relate to the Sustainable Development Goals (SDGs). MICS 2019 data will support various reviews of the most critical priorities for children, which will in turn support informed decision-making for relevant policies and programmes and facilitate the required actions. UNICEF Bangladesh emphasizes harnessing the power of evidence to drive change for children.

Every child survives – reproductive and maternal health

Bangladesh has led the way in reducing child mortality, with neonatal, infant and under-five mortality rates on a constant downward trend over the last 30 years. Yet infant mortality remains high at 34 deaths per 1,000 live births, with two thirds of these deaths occurring within 28 days of birth. Coverage of antenatal care visits showed improvement in 2019: 75 per cent of pregnant women had at least one visit and 37 per cent had four visits (though 17 per cent of women had no antenatal care during their last pregnancy). The skilled birth attendance rate has also increased (59 per cent in 2019) as has the rate of health facility deliveries (53.4 per cent in 2019). However, only two thirds of newborn babies receive a post-natal check. Bangladesh aims to achieve 80 per cent coverage for early infant HIV diagnosis by end-2020 (currently 70 per cent). Only 64 per cent of infants born to HIV-positive mothers in facilities in 2019 are tested. Just 11.6 per cent of young people possess comprehensive knowledge about HIV prevention.

Every child thrives – health, nutrition and development

The share of children who are ever breastfed is very high (98.5 per cent), but a much lower proportion (46.6 per cent) are breastfed within one hour of birth. The prevalence of moderate and severe stunting among children under 5 years of age has fallen from 42 per cent in 2012–2013 to 28 per cent in 2019. Wasting prevalence shows no change (9.8 per cent). Just 27 per cent of children aged 6–23 months receive the minimum acceptable diet, with slightly more breastfed infants (28 per cent) receiving such a diet. Seventy-six per cent of households consume iodized salt as of 2019.

Every child learns, from early childhood to adolescence

Bangladesh has made great progress in ensuring preschool education for five-year-old children, with coverage up from 50 per cent in 2010 to 87 per cent in 2019. MICS data show, however, that only 18.9 per cent of children aged 36–59 months attended early childhood education in 2019, a slight increase on 2012–2013 (13.4 per cent). The primary school net attendance rate rose from 73.2 per cent in 2012–2013 to 85.9 per cent in 2019. Only 57.8 per cent of adolescents attend lower secondary education, but this is still an improvement on the 2012–2013 figure (46.2 per cent). Bangladesh's children are accessing services, but service quality remains poor: primary net enrolment exceeds 98 per cent, yet only 32 per cent of Grade 5 children perform at grade level in mathematics and 42 per cent in Bangla (National Student Assessment, 2017). Low performance is a predictor of dropout and engagement in child labour/marriage and other harmful practices. Poor water and sanitation facilities in schools (student-to-toilet ratio is 115:1), along with inappropriate hygiene practices, further affect children's enrolment, attendance, retention and learning (National Hygiene Survey, 2018).

Every child is protected from violence and exploitation

According to MICS 2019 data, Bangladesh's birth registration rate for children under 5 has risen sharply, from 37 per cent

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in 2012–2013 to 56 per cent in 2019 – but universal birth registration is still a long way off. Harmful practices against children persist. Violence is endemic, and 88.8 per cent of children aged 1–14 years have experienced violent discipline by a caregiver. Among children aged 5–17 years, 6.8 per cent are engaged in child labour. Child labour is higher among children not attending school (18.9 per cent) than among those who do (4.4 per cent). Child marriage remains widely accepted and extremely common: 32.9 per cent of girls aged 15–19 years are married. Among women aged 20–24 years in 2019, 51.4 per cent were in union before the age of 18 years – virtually no different to the 52 per cent rate in 2012–2013.

Every child lives in a safe and clean environment

Climate change and pollution have become substantial issues in Bangladesh, negatively affecting a significant number of children. These issues adversely affect access to water, continuity of education, nutrition status and environmental health, with disproportionate impacts on the poorest and most marginalized children. The Global Climate Risk Index 2019 ranks Bangladesh seventh among the countries most affected by extreme weather events from 1998 to 2017, with over 190 events affecting 37 million people (Eckstein et al., 2018). Bangladesh is also among the countries most affected by pollution and other environmental health risks, with 28 per cent of all deaths attributed to diseases caused by pollution, compared with 16 per cent globally (World Bank, 2018a). Children suffer disproportionately from air pollution: 6,000 deaths of children under 15 in Bangladesh in 2016 were attributed to poor air quality. A 10µg/m³ increase in PM_{2.5} is associated with a 9 per cent increase in infant mortality (Heft-Neal et al., 2018).

As of 2019, almost all households in Bangladesh (98.5 per cent) have access to an improved source of drinking water, but water quality remains low. Only 42.6 per cent of the population lives where there is an improved drinking water source located on the premises that is free of E. coli contamination, available on demand, and with arsenic levels of no more than 50 parts per billion. Some 20 million people in coastal Bangladesh are already adversely affected by saltwater contamination of freshwater sources and soil as a result of sea-level rise, with high levels of salt ingestion linked to increased rates of hypertension and miscarriage among pregnant women as well as to skin diseases, acute respiratory infection and diarrhoeal disease (World Bank, 2018a). About 64 per cent of households have access to improved sanitation that is not shared. Knowledge of key hygiene messages is high, but handwashing at key moments is very infrequent. One quarter of the population live in households without water and soap (National Hygiene Survey, 2018).

Equitable chance in life

Among children aged 2–17 years, 7.3 per cent have a functional difficulty in at least one identified domain. Bangladesh currently hosts over 900,000 Rohingya refugees (55 per cent children), who have no legal status in the country, restricting their ability to access health care, education, justice and other basic services outside of the camps.

Programme and intervention strategies should identify effective approaches to address inequalities, negative social norms and gender stereotypes early in childhood. Bangladeshi society has been rapidly ageing – with an increasingly challenging ratio of working-age population to elderly dependents – and its demographic window of opportunity is projected to close one and a half decades from now. It is imperative that Bangladesh urgently prioritizes investments in children, so that they may become two, three or even four times more productive than today's adults by the time they reach adulthood. UNICEF Bangladesh advocacy and programming in 2020 will be based on this analysis and narrative.

Major contributions and drivers of results

Every child survives and thrives

UNICEF supported Bangladesh's national maternal, newborn and child health (MNCH) programmes through skills-based capacity building for maternal and newborn care in 22 districts; a mass media campaign that reached people 180 million times; community mobilization of 600,000 households by 3,000 trained front-line workers on MNCH practices; development of Maternal and Perinatal Death Surveillance and Response plans; and endorsement of a national training module on kangaroo mother care (KMC). Over 69,000 sick newborns made a full recovery in 32 UNICEF-supported special care newborn units, while 1,295 low birthweight babies received KMC in 36 other UNICEF-supported facilities – twice as many as received KMC in 2018. UNICEF supported the Government of Bangladesh (GoB) to finalize, approve and disseminate the Bangladesh National Strategy for Maternal Health 2019–2030. A quality improvement initiative was scaled up in 27 facilities across 7 districts and a learning model was developed with partners. UNICEF supported the Directorate General of Health Services to develop an e-tracker for child immunization and pregnant women, within the DHIS2 platform, for real-time monitoring of MNCH services.

Prevention of mother-to-child transmission (PMTCT) of HIV interventions were extended to 12 hospitals, with 62,000 women receiving HIV counselling/testing during antenatal care.

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Over 3.1 million children under 2 years were vaccinated with all antigens and MICS 2019 data show 86 per cent immunization coverage (against the 90 per cent target for 2020). Vaccine storage capacity was improved with 52 district stores with 51 walk-in cold rooms constructed during 2018–2019.

Nutrition counselling coverage during antenatal care increased from 32 per cent in 2016 to 56 per cent in 2019. Iron and folic acid supplementation via facilities reached 3.7 million pregnant and lactating women in 2019 (up from 2.7 million in 2018) and the national vitamin A campaign's last round reached over 95 per cent of 24 million targeted children. A Public Expenditure Review for nutrition, covering 22 ministries, highlighted a 2 per cent expenditure on nutrition-specific interventions. Support for health care providers increased the proportion of pregnant women receiving three nutrition services in a single antenatal visit from 20 per cent in 2018 to 65 per cent in 2019. The Government adopted comprehensive competency-based training for nutrition, piloted by UNICEF, and rolled it out in eight districts (80 per cent of costs covered by Government budget). Over 8,000 health care providers were equipped to deliver quality nutrition services.

The Mothers@Work programme, which supports businesses to create enabling environments for maternity rights and breastfeeding, expanded to 92 ready-made garment factories, reaching about 160,000 working mothers and 2,865 young children. To scale up Mothers@Work, a standardized toolkit was developed for factories wishing to implement the programme; a partnership with the Ministry of Labour and Employment was established to systemize roll-out; and a partnership with the Garment and Knitting Association aims to reach 2 million female workers by 2030.

A major challenge for Bangladesh's 36 million adolescents is accessing age- and gender-appropriate quality health services. A multi-sectoral National Plan of Action for Adolescent Health Strategy (2017–2030) has been approved and Government funds allocated to enable adolescent access to services (200 facilities/year). Additionally, UNICEF supported non-governmental organizations (NGOs) to reach 3,500 adolescent sex workers, drug users living on the street, men who have sex with men and transgender individuals with essential HIV services: 88 per cent accessed HIV testing/counselling; 74 per cent were screened for sexually transmitted infections; 62 per cent were screened for tuberculosis; 37 per cent received life-skills education; and 6,000 sessions of psychosocial counselling were dispensed. A cost-benefit analysis of nutrition interventions was prepared with the World Bank to inform a scale-up plan for adolescent nutrition interventions to address micronutrient deficiency. Policy advocacy on prioritizing adolescent nutrition is a UNICEF focus, resulting in modelling of secondary school-based interventions to improve dietary practices. A minimum package for urban nutrition services was defined.

Every child learns, from early childhood to adolescence

Strengthened institutional capacity of the Ministry of Women and Children Affairs (MoWCA), Ministry of Primary and Mass Education (MoPME) and Ministry of Chittagong Hill Tracts Affairs resulted in solid progress for early childhood development (ECD). Establishing a coordination structure for ECD, the standardization of pre-primary education (PPE) and a government commitment to two-year PPE, plus recruitment of over 26,000 teachers by the Directorate of Primary Education, increased the Hill District Councils' ownership of 4,000 para-centres, ensuring early learning services for 214,467 children, including Rohingya refugees. UNICEF also provided technical support in training PPE teachers and supervisors and in revising the two-year curriculum based on a UNICEF-supported diagnostic exercise. An accelerated coverage plan for PPE has raised enrolment to 3.5 million children across all 65,000 government primary schools.

UNICEF initiated the integrated ECD programme in collaboration with Government in Chittagong Hill Tracts, reaching over 45,400 children (34 per cent girls) with early learning and pre-primary education in 2019 through para-centres.

A major strategy to improve the learning environment and service quality involves decentralized school planning and budgeting at local level. School-Level Improvement Plan (SLIP) guidelines were revised to emphasize safety and risk reduction, and the Government used SLIP to pay grants to 64,300 schools serving over 15 million children. Guidelines for *upazila* (sub-district) plans were also developed and piloted to decentralize planning and decision-making. UNICEF supported this process, which will see local officials work with schools to plan for education in the *upazila*. The Government will expand the pilot to 50 *upazilas* in 2020.

The National Curriculum and Textbook Board (NCTB) developed Bangladesh's first comprehensive curriculum framework spanning pre-primary to secondary education. The revised framework integrates life skills, child safety, sexual and reproductive health and rights (SRHR), gender, climate change and formative assessment. It will inform subject curricula and be used to influence classroom practices. This curriculum support is closely associated with teacher training reforms: UNICEF and the National Academy for Primary Education are partnering to revise the Diploma in Primary Education Programme, the main primary teacher training programme.

Efforts to improve service delivery models, including in humanitarian settings, continued in 2019. Education services were

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provided to over 530,000 girls and boys with direct UNICEF support. This includes 250,000 children (51 per cent girls) attending 1,210 schools implementing the learning-focused school effectiveness model. UNICEF supported NGOs to provide education to 16,260 out-of-school children (55 per cent girls) in 2019 using the ability-based accelerated learning (ABAL) model and helped the Government to plan the enrolment of 1 million out-of-school children. UNICEF continues to support Government capacity to monitor and measure the intervention's efficacy.

Elsewhere in Bangladesh, schools were supported to teach about climate change and to continue education for 54,000 children in disaster-affected schools.

Contributions by UNICEF let partners build evidence and develop models on which other, major investments (e.g., greater budget allocation to SLIP) are based. These models are critical to support the Fourth Primary Education Development Programme (PEDP4) sector plan, for which UNICEF is a major provider of technical assistance. PEDP4 will remain the chief mechanism for influencing the policy and programmatic direction of primary education and Government's use of its resources, and for leveraging donors' technical and financial resources.

While lower secondary attendance has increased to 57.8 per cent, the secondary school dropout rate (37.6 per cent) remains a concern. The education sector has focused on addressing quality of learning using a systems approach. Key components included strengthening school-based planning, developing the country's first comprehensive curriculum framework and adopting an adolescent skills framework. A strategy to scale up the alternative learning programme for the most disadvantaged out-of-school adolescents was drafted and will be implemented as part of Generation Unlimited (which launched in Bangladesh in February 2019). A madrasa resource book on life skills for adolescents was produced for roll out in 2020. Another critical focus has been the inclusion of SRHR education at secondary level, while successful advocacy on menstrual hygiene management (MHM) led to development of a multi-sectoral national strategy on MHM, also for roll out in 2020.

Every child is protected from violence and exploitation

In 2019, 2,500 local government elected representatives and health and family welfare assistants were trained by the Office of Registrar General and UNICEF in birth registration. Awareness messages on the importance of birth registration within 45 days reached 70,000 front-line health workers, local government representatives and parents.

Following sustained advocacy with the Bangladesh Supreme Court, a decision was made to resume birth registration in Cox's Bazar (CxB) district – blocked since November 2017 due to the Rohingya crisis – though this has not yet recommenced.

UNICEF contributed to increasing the justice system's capacity to administer the Children's Act. A child protection system assessment gauged readiness to implement the Act and the findings, suggesting a lack of collaboration among duty bearers, insufficient human resources and overburdened courts, will now guide the development of a costed action plan. To aid interpretation of Act provisions, 102 children's court judges, judicial magistrates and public prosecutors and 1,452 newly appointed police officers were trained in child-friendly procedures.

Mechanisms for reporting violence continue to be strengthened. The national child helpline received 80,000 calls and steps were taken to improve referrals to trained social workers. UNICEF partnered with Bangladesh's largest telecommunications company to: reach 500,000 students with messages about online behaviour and support services; build the capacity of call centre agents; and strengthen child welfare board functioning. Capacity to provide services improved in 2019 and case management increased: 14,401 children were reached by UNICEF-supported health, social work and justice/law enforcement services, with 9,286 provided services with case management support; 2,832 of these children's cases were covered through an online case management system. Lack of computer literacy means most social workers perform case management on paper; UNICEF has initiated the redevelopment of the online system to make it more user-friendly. Ten per cent of social workers in the Department of Social Services were trained in case management and basic social services. UNICEF also supported 25 district and 50 *upazila* child welfare boards, all newly established, to mobile service providers and ensure that referral and linked services reached children receiving case management.

To help identify gaps in addressing protection needs of children affected by migration and trafficking, UNICEF commissioned a review of existing law and policies and the training curricula and job descriptions of the social service/law enforcement workforce. Identified gaps included a lack of legislative focus on prevention measures and insufficient services for children living on street and child survivors of trafficking. The study recommended development of comprehensive training for key actors in trafficking-prone areas. A UNICEF review of training curricula will conclude in early 2020. UNICEF has been supporting a cross-border mechanism to expedite repatriation of trafficking survivors between India and Bangladesh: 82 child survivors of trafficking were repatriated with the help of UNICEF-supported programmes in 2019.

MICS 2019 data suggest the decline in child marriage nationally is slow. However, district-level data show positive, if

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limited, changes in some districts where concerted efforts to end child marriage have been made by UNICEF, the United Nations Population Fund and development partners.

In 2018, MoWCA developed the National Plan of Action to End Child Marriage and UNICEF is now supporting costing and development of its monitoring and evaluation framework. This is an example of how UNICEF provides technical support to child-focused ministries for continuous policy review, upgrading policy in line with international standards and translating policies into action. The plan has since provided critical impetus for work by all partners.

Social mobilization and community engagement have encouraged families, communities and other key influencers to act as allies to end child marriage in Bangladesh's four Global Programme to Accelerate Action to End Child Marriage districts. Over 320,000 community members and local leaders were mobilized, leading 93 unions (local councils) to declare themselves 'child marriage-free'. Since its launch, the #RaiseTheBeat4ECM campaign has been viewed an estimated 186 million times across television, radio and social media; it received two international awards in 2019. A related education-entertainment drama series which promotes adolescent well-being has reached an estimated 50 million viewers across all media since its 2018 launch.

Sustained advocacy efforts with the Bangladesh Supreme Court to enable a more protective environment for children saw success in 2019, with a precedent established to release children in conflict with the law. Bangladesh has been selected as a potential pilot country for the Migration Multi-Partner Trust Fund initiative led by the United Nations Network on Migration, a forum that UNICEF uses to highlight issues affecting children in Bangladesh, including migration.

Every child lives in a safe and clean environment

UNICEF supported the development of the Water, Sanitation and Hygiene (WASH) in Health Care Facilities Strategy 2019–2023 endorsed by the Ministry of Health and Family Welfare (MoHFW). A model for scaling up WASH in health care facilities was also submitted, along with a costed implementation plan, for Government approval.

UNICEF continued to build NGO partners' capacity to scale up WASH models. As a result, nearly 195,600 people gained access to improved water sources through a Sida-funded project, and almost 362,900 people gained access to basic sanitation services with the strong involvement of the private sector, which trained over 500 local latrine producers. This approach will be scaled up to increase access to safe sanitation.

The four-year sanitation marketing systems (SanMarkS) project concluded in 2019: in total, 165,000 households purchased their own improved toilets through local entrepreneurs. Advocacy with the Government and private sector culminated in commitments to scale up sanitation marketing nationally and to reduce to zero the number of people at risk of arsenic-contaminated water. UNICEF facilitated the public-private partnership to expand pro-poor access to improved sanitation.

With UNICEF support, Dhaka North and Dhaka South City Corporations constructed new community toilets and repaired existing toilets to provide access to safe sanitation for 10,520 people living in low-income communities, and 23,760 community members were educated about good hygiene practices. UNICEF also progressed discussions with the Asian Infrastructure Investment Bank (AIIB) to support two *pourashavas* (municipalities) to sustain the results of the AIIB/World Bank-funded Bangladesh Municipal Water Supply and Sanitation Project. Following eight WASH Bottleneck Analysis Tool exercises conducted in 2018, UNICEF supported the Government to disseminate the results more widely.

Every child has an equitable chance in life

Local Government Division and nine city corporations organized coordination platforms to address child rights, and one city corporation in Dhaka began the process of child-friendly action planning. UNICEF has supported 9 of the 11 city corporations with integrated service delivery modelling based on a life-cycle approach, reaching more than 400,000 children; systematic assessment of the models is underway.

Completion of the Public Finance for Children learning programme led to a government report to support efforts to secure adequate, predictable and sustainable financing for children. Expenditure for children nationally has increased from 0.83 per cent of GDP in 2016 to 1.3 per cent in 2019. More than 260 micro-plans were developed with communities in 32 *upazilas* to advocate for unions and *upazila parishads* (councils) to undertake needs-based, child-focused programmes and to allocate sufficient budget to achieve results.

UNICEF supported the Government on early detection of disability among children. Seventy-two health workers/assistants and social workers received training on disability detection tools, and 3,000 children were screened, with susceptible children referred to *upazila* health complexes for diagnosis.

UNICEF reached people some 647 million times on social media, engaging on child rights 161 million times. Activities

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stimulated awareness of and action in priority areas including safe pregnancy and child survival (Every Child Alive), positive child nutrition practices (Unite for Nutrition), 30 years of the Convention on the Rights of the Child forums, and online protection and education. The UNICEF Bangladesh Facebook page has 7.5 million followers, with up to 1.5 million people engaging with child rights content each week. In November, UNICEF Bangladesh won a YouTube Silver Creator Award for reaching 100,000 subscribers.

U-Report was co-launched with the Government as an urban joint needs assessment tool to improve emergency preparedness and response. Guidance on communicating with communities in emergencies was included in the Government's Standing Order on Disaster Management, enacted in 2019 to strengthen engagement with, and accountability to, affected communities during disaster preparedness and response.

Child rights issues were incorporated into training courses for government officials and elected representatives, and over 2,000 local government functionaries were trained on child rights issues and child-focused planning. Four universities adopted curricula on social and behaviour change in support of child rights issues.

UNICEF Bangladesh has established a private sector engagement and resource mobilization team to support integration of the private sector into its country programme. To date, over 100 ready-made garment sector businesses have been engaged in integrating child rights into their operations, and major partnerships have been secured with national businesses that support on resource mobilization and programmatic scaling. In these ways, the country office develops and leverages resources and partnerships for children and harnesses the power of business and markets for children.

Rohingya response

UNICEF advocacy efforts were made more complex by the Rohingya response, given its urgency and scope. Advocacy in 2019 focused especially on birth registration and on challenges related to education provision.

In 2019, UNICEF and its sector and implementing partners maintained full coverage of life-saving services for Rohingya refugee children: nutrition treatment; primary health care; vaccination; and safe water and sanitation. This contributed to stabilizing rates of acute malnutrition and reducing the scale of disease outbreaks. Over 216,000 children (48 per cent girls) access education in 2,478 learning centres in Rohingya refugee camps. Education services focused in 2019 on improving quality (teacher training, learning materials), increasing access for girls and children with disabilities, and integrating education and child protection services. UNICEF provides nearly 80 per cent of the education sector response through 2,500 learning centres.

The UNICEF Adolescent Strategy for Rohingya and Host Community Response launched in April 2019 to provide 18,000 Rohingya and 7,600 host community adolescents with integrated vocational, literacy/numeracy, life skills and psychosocial support through 109 multi-purpose centres.

UNICEF scaled up host community interventions in collaboration with line departments, including to establish two new neonatal support units; ensure safe water for 400,000 people; and provide a second chance at education for 11,000 adolescents.

UNICEF provided emergency child protection and gender-based violence/in emergencies (GBV/GBViE) support to Rohingya refugee and host community adolescents. Over 21,900 women and adolescent girls (98 per cent refugees) were provided with GBV/GBViE prevention and response interventions through safe spaces for women and girls, dignity kits and GBV/GBViE awareness and risk mitigation; 116,395 Rohingya and host community members received messages on child protection and GBV/GBViE.

UNICEF scaled up host community interventions incorporating feedback from community groups and young people through Information and Feedback Centres.

Enablers

In 2019, the Operations team underwent strategic restructuring to ensure responsive, transparent and accountable internal governance, and drive change and accelerate delivery of results for children. The Annual Management Plan set out two management and five programme priorities to ensure results-oriented, efficient and effective management. UNICEF improved efficiency by enabling the new enterprise risk management strategy and establishing SMART controls and agile, simplified work processes. The country office worked with other United Nations agencies to implement the Harmonized Approach to Cash Transfers, and the new United Nations Sustainable Development Cooperation Framework including the Common Country Assessment and the Country Programme Document (CPD) preparation process.

UNICEF Bangladesh continued to deliver on its mandate to reach the most vulnerable women and children by ensuring

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timely disbursement of direct cash transfers (US\$80 million) to implementing partners and supplies (US\$19 million) for programme implementation by end-2019. UNICEF enhanced supply chain management for the Rohingya response by establishing its own warehouse in CxB with mobile inventory management. UNICEF managed supplies worth US\$13.88 million in UNICEF-controlled warehouses. Ad hoc pre-financing of US\$10 million was also provided to MoHFW to procure life-saving vaccines for the 2020 measles-rubella campaign. The country office continued to build on its fiduciary duty to donors by incorporating value-for-money principles into procurement processes and partnership management, strengthening the implementation of International Public Sector Accounting Standards. Price negotiation saved UNICEF US \$911,000 on institutional contracts alone.

An action plan was developed to implement the global anti-fraud strategy and UNICEF sought to mobilize all stakeholders to adopt zero tolerance to fraud and misconduct. Face-to-face anti-fraud trainings reached 500 government/civil society organization implementing partner staff, 250 vendors and 200 UNICEF staff.

Management continued to invest in staff well-being and building staff capacity to ensure the country office has an agile team that can respond to changing programming requirements and demonstrate the versatility needed to act as agents of change for children. The Human Resources (HR) function was reorganized as a business partner to boost effectiveness and service quality, increasing its capacity to remotely manage HR for CxB Field Office staff. The country office continued to excel in ensuring a gender-balanced workforce (52 per cent female) and prioritizing staff learning and career development (1,595 staff participated in 48 group trainings, and 75 in individual endeavours).

UNICEF Bangladesh also invested US\$3.7 million in constructing a new office building in Dhaka, which will realize annual rental cost savings of US\$514,000. Completion is expected by June 2020.

Lessons Learned and Innovations

Lessons learned

A high level of out-of-pocket expenditure (72 per cent) combined with a very low budget allocation for health (0.76 per cent of GDP) creates financial barriers to accessing health services for Bangladeshi families. UNICEF will support the analysis of health financing in the context of universal health coverage and facilitate discussions between the MoHFW, Ministry of Finance and Cabinet of Bangladesh.

Capacity building for KMC has been shifted to the district level using local facilitators, and community-level capacity building for comprehensive newborn care will be supported. It may be possible to leverage the Community-Based Health Care operational plan to scale up and improve community health programmes for MNCH. The Quality, Equity, Dignity initiative is being scaled up based on learnings from Kurigram district, building a system for quality improvement, with district plans and learning hub, through the partnership with the National Institute of Preventive and Social Medicine.

Although ECD is now well rooted in policy, a strong commitment to its institutionalization through ministry coordination will enhance various programmes and ensure proper integration of holistic child development.

The strong focus on ending child marriage has reduced focus on other harmful practices against children. Although child marriage remains at unacceptably high levels in Bangladesh, it is necessary to find a more balanced approach that simultaneously addresses other harmful practices.

Systems strengthening and capacity building are continuous processes that require sustained effort over time. It is critical to have a strategic and adequately resourced long-term plan when initiating any approaches or interventions. Actively engaging young people in exploring solutions to the problems they face is also crucial; respect for their views and insights can contribute to the sustainability of solutions.

A holistic approach that engages all community members (e.g., men, boys) is also vital for social norm change. A key lesson relates to the need to ensure advertising and promotional budgets to increase the reach of media programmes, especially in a saturated market like Bangladesh. This is crucial if results are to be generated at scale. Robust research is necessary to clearly define the aims and intended results of media initiatives.

Capacity building of child protection actors at all levels and advocacy for a strengthened child protection system and response at national, divisional and local levels will be important areas of focus in 2020. It will also be important to further harness the power of evidence to drive change – by building the evidence base on adolescents for better programming. UNICEF will also continue efforts to strengthen coordination between MoHFW and MoPME and build the capacity of the two ministries on adolescent nutrition programmes at secondary schools. MoWCA will be supported on adolescent nutrition interventions for adolescent clubs.

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Digital platforms represent an incredible opportunity to raise awareness of and engagement with child rights, but stringent cost-benefit analysis is needed to better prioritize investments in digital activities. UNICEF must secure the most cost-effective means of engaging with the most disadvantaged children and families across digital platforms to increase accessibility for target beneficiaries.

Implementing the development programme while continuing to support the humanitarian response to the Rohingya crisis remains a significant challenge. While progress has been made in integrating the humanitarian and development programmes, the urgency of humanitarian needs continues to distract attention from development efforts. There is a need to improve complementarity to achieve outputs without compromising either programme.

With the next CPD in development, it is crucial to ensure that cross-cutting areas are more strongly reflected within the programme cycle, both to protect the significant progress to date and to establish clear plans to scale up positive impacts. UNICEF's priorities should also be included within the GoB's next five-year plan, and UNICEF will undertake significant work in 2020 to ensure that key issues are adequately reflected and planned for. To fully realize UNICEF's outcome objectives, a continued focus on the many innovative partnerships established must be maintained and further supported at the highest levels of the country office. Efforts to support Bangladesh's resiliency to climate change should similarly be prioritized throughout the remainder of the current CPD and in the development of the next.

Innovations

The e-tracker for child immunization and maternal health within the DHIS2 platform, developed with UNICEF support, will be scaled up and the online micro-plans and real-time data monitoring systems will be used during the 2020 measles-rubella campaign. Involving senior obstetricians in PMTCT gave junior service providers the confidence to handle HIV-positive cases and work to reduce stigma and discrimination. A new technology for crude salt harvesting has been successful in producing high-quality salt, and a web-based management information system for the Salt Mill Owners Association is functional.

The planned curriculum reform began as business as usual, with primary and secondary levels of the education system developing distinct curriculum frameworks managed by two separate NCTB sections. UNICEF then took the initiative to initiate discussions, including with the chairman of NCTB, on the merit of a comprehensive approach. The process led to the country's first comprehensive curriculum framework and also to stronger relationships within NCTB.

Similarly, engaging adolescents in the design of SRHR education entirely changed the intervention. An e-learning course is now being co-created with adolescents to see the effects and impact on learning, and this innovation project will be a priority in 2020.

The successful SanMarkS project will be extended with support from the World Bank and the private sector, with the aim of motivating 12 million people to obtain basic sanitation by 2030.

In 2019, UNICEF supported the GoB to celebrate Global Handwashing Day, as part of the implementation of the 'three-star approach' to WASH in schools in 72 schools (30 primary, 42 secondary), with schools encouraged to report on handwashing events via U-Report, fostering innovation in programming and advocacy for children. Updates on participation were broadcast live at a national event attended by policymakers: 7.5 million children from 59,600 primary schools took part. The event demonstrated that handwashing at every school is possible using existing resources and the model can be used as part of the 'three-star approach' to WASH in schools. Menstrual Hygiene Day supported advocacy for age-appropriate MHM content in primary education.

Adolescent participation has been enhanced and taken to scale using innovative, community-based platforms including radio listener clubs, adolescent clubs and Community-Based Child Protection Committees. End Child Marriage messaging on multimedia and social media platforms had over 150 million views in 2019, and the UNICEF U-Report platform engaged over 280,000 adolescents in Bangladesh. An online monitoring system was developed to monitor effectiveness of adolescent clubs. Some 525,000 adolescents engaged in civic and policy discussions with parliamentarians through the Generation Parliament initiative – used by UNICEF to win support for the cause of children from decision-makers and the wider public in collaboration with the International Labour Organization, access to information (a2i), and Bangladesh Rural Advancement Committee (BRAC).

Operations led several innovative approaches in 2019 to achieve cost savings and support efficient programme delivery and collaboration across teams and locations. UNICEF Bangladesh attained 100 per cent coverage of videoconferencing equipment installation in 2019, inclusive of all field offices, saving on travel time and costs for meetings. The country office

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continued to 'green the blue' with a print-on-demand initiative that saved about 360,000 sheets of paper in 2019 – equivalent to 48 trees, 9,000 litres of water and 20,500 kWh of energy. UNICEF Bangladesh continues to promote collaboration and productivity, by migrating all its document management platforms into the enterprise content management platform and developing a new communication site within it. This 'one-stop shop' for inter-office collaboration, knowledge sharing, communication, key business tools and ICON will enhance staff efficiency – a good example of using versatile, safe and secure knowledge and information systems to enable change. Furthermore, the country office extended the communication site to other United Nations agencies as part of supply and logistics inter-agency knowledge and information sharing, both to manage long-term agreements and to support the Global Education Cluster in the Rohingya response.