

Bangladesh

Part 1: Situation update in the country

Bangladesh has achieved remarkable development progress in a comparatively short time, realizing considerable gains for children. Bangladesh succeeded in reaching a number of the Millennium Development Goals (MDGs) – especially reducing under-five mortality– and progress towards the Sustainable Development Goals (SDGs) is promising. But more must be done to ensure that no child is left behind in Bangladesh.

The Government of Bangladesh's seventh five-year plan (2016–2020) seeks to increase economic growth that is inclusive, pro-poor and adapted to an economy progressively powered by urban productivity and environmental sustainability. This lower-middle-income country's industrial sector continues to grow (although factory safety needs improvement): ready-made garments accounted for over 80 per cent of total exports in 2016/17. Although its Human Development Index ranking has improved, Bangladesh remains ranked at 136 of the 189 countries covered. Without concerted efforts to accelerate and consolidate social gains, Bangladesh risks missing a unique opportunity to fast-track inclusive economic growth resulting from the demographic dividend.

Areas of investment include strengthening child protection systems. Birth registration within 45 days is limited and structural gender and socio-cultural inequalities prevent the most disadvantaged children from accessing their rights. To reach the SDGs for health by 2030, targets and indicators are integrated in every operational plan. Health gains include a significant reduction in stunting and increased breastfeeding, but maternal and newborn care remains inadequate and malnutrition is widespread. Maternal and newborn deaths remained stagnant between 2010 and 2016, despite increases in care-seeking and deliveries in health facilities (Maternal Mortality Survey 2016). Education access and equity have improved vastly; 40 million primary and secondary students are now served by the complex education system. However, daunting challenges remain; most notably the need to improve student retention and the quality of education. In 2017 just one third of Grade 5 students were deemed proficient (or better) in numeracy and literacy (Ministry of Education 2017). The proportion of Grade 1 students who had attended pre-primary education (PPE) rose from 50 to 87 per cent from 2012 to 2016. Primary net enrolment has reached an impressive 97 per cent, with a gender parity and primary survival rate of 83 per cent in 2017. Yet secondary net enrolment rate is just 55 per cent overall, and only 63 per cent of enrolled students complete their secondary school certificate (Ministry of Education 2017). Bangladesh has the highest proportion of out-of-school children at the lower secondary level (46 per cent) in all South Asia (Bangladesh Bureau of Statistics).

General elections at the close of 2018 generated a period of uncertainty due to concerns over transparency. Rivalries between the Government and the main opposition, as well as other political parties, periodically led to strikes or blockades and violence. Rapid urbanization exerts

pressure on infrastructure and basic civic facilities. Of the total population of 160 million, around one third (53 million people) live in urban areas (over 60 per cent in slums) and the urban population is projected to more than double by 2050. Overall, 12.9 per cent of urban children are engaged in child labour, 23 per cent of whom live in urban slums – 4.7 per cent without parental care. The minimum age of criminal responsibility remains remarkably low, at nine years.

Bangladesh met the MDG target for stunting, but the pace of stunting reduction has slowed and the SDG target (25 per cent) may be missed; the stunting rate in urban slums is very high. Infant and young child feeding practices – particularly complementary feeding among children aged 6–23 months – are poor, slowing efforts to reduce stunting. Another risk factor for stunting is low birthweight, which can be caused by poor maternal nutrition. Malnutrition among women of reproductive age shows no improvement, with one third of pregnant women underweight and 42 per cent of ever-married women of reproductive age (15–49 years) anaemic. Adolescents remain underserved and actively seek information on health and well-being. To accelerate stunting reduction and reduce malnutrition among children, adolescents and women, the Government has emphasized health system-strengthening, to improve coverage and quality of nutrition services, and better intersectoral coordination, to expand coverage of nutrition-sensitive interventions.

Child marriage is a major cause of girls not enrolling in (or dropping out of) secondary education: it was identified as the main reason by 60 per cent of girls who did not enrol in Grade 9. Even in highly educated households, 37 per cent of girls are married before the age of 18, indicating that social norms may be more influential than economic constraints. Boys who drop out are typically put to work. Traditional notions of the age of childhood continue to underpin issues like child marriage and child labour. According to the 2017 effective coverage of basic social services survey, just one in four people in Bangladesh know that a child is anyone under the age of 18 (Bureau of Statistics 2013.)

The exodus of more than 700,000 Rohingya refugees from Myanmar to Bangladesh has created a dire humanitarian crisis in Cox's Bazar, one of the country's poorest-performing districts for child-related indicators. The affected population – including Rohingya refugees and host communities – currently numbers 1.2 million, 683,300 of whom are children. The Government of Bangladesh is focused mainly on meeting emergency needs and safe, voluntary, dignified and sustainable repatriation. On 23 November 2017, the Bangladesh and Myanmar governments agreed on the return of persons displaced from Rakhine State. The repatriation, planned to commence 23 January 2018, was delayed. Bangladeshi authorities have since announced plans to relocate 100,000 Rohingya refugees to the uninhabited river island Bhasan Char. The Government plans to spend US\$280 million on building housing and infrastructure in the area.

Bangladesh's well-developed banking system bolstered UNICEF programme implementation in 2018. Its unified interbank process enabled fast and seamless remittance of funds to suppliers, service providers and implementing partners. The floating exchange rate regime of its central bank allowed UNICEF to earn foreign exchange gains as it traded foreign currency for Bangladesh *taka* through competitive bidding. The comparatively stable and tractable inflation rate significantly boosted UNICEF's budgeting and fund management system. At the end of 2018, the UNICEF Bangladesh country programme reached its halfway point. During 2019 the secondary analysis of data, development of the situation analysis and United Nations Development Assistance Framework (UNDAF) will feed into the design of the next country

programme.

Bangladesh remains at risk for natural disasters, heightening the risk for communicable diseases: the increased incidence of diarrhoea, pneumonia and dengue fever is directly linked to the adverse effects of climate change. As well as experiencing cyclones, flooding, flash floods and heavy rainfall, Bangladesh is at increased risk of lightning, landslides and earthquakes with every year that passes. In 2018 flash floods alone affected 570,000 people (ACAPS Briefing Note, June 2018). Rapid urbanization and poor waste/sludge management and drainage systems exacerbate the situation, presenting greater challenges for disaster management.

Bangladesh is a leader in sanitation in South Asia. Innovative approaches implemented during the MDG era have drastically reduced open defecation from 34 to 1 per cent. (UNICEF/WHO JMP annual report, 2017). Yet, just 32.1 per cent of the population can access safely managed sanitation facilities. Dual water management problems exist: during monsoons, too much water; in the dry season, too little. While improved water sources mean that drinking water coverage stands at 97.7 per cent, only 55.7 per cent of the population has safely-managed water. Water quality, water systems and maintenance issues are major barriers to achieving the SDGs for water. Hygiene is often the 'weak link' in the water, sanitation and hygiene (WASH) sector; unsafe water or unhygienic sanitation facilities lead to a high disease burden. Bangladesh loses an estimated US\$4.23 billion annually due to inadequate WASH (World Bank 2012). Large-scale migration to urban areas places WASH services in slums under even greater pressure. WASH in schools has a significant positive impact on child health and on education outcomes, yet among schools in Bangladesh only 73 per cent have basic water facilities, 58 per cent have basic sanitation and just 44 per cent have basic hygiene facilities (<https://washdata.org/data/school>). Climate change also affects WASH services.

Although Bangladesh remains a low HIV prevalence country, the number of new cases identified continued to increase in 2018. Of 681 cases reported, 28 per cent were among women, 5.5 per cent among children and adolescents and 25 per cent among either external migrants or their spouses (Ministry of Health and Family Welfare AIDS/STD Programme). Alarming, 25 per cent of cases were among low-risk men and women, who then contribute to an increased number of children with HIV. External funding declined and the Government was slow to use allocated funds. Stigma and discrimination against people living with HIV are still prevalent.

Enterprise risk management (ERM) was a priority for UNICEF Bangladesh in 2018. A thorough risk assessment conducted identified several high-risk areas in its operating environment, including financial/fiduciary risk, climate change, epidemics, terrorism and civil unrest. An ERM action plan was put in place and monitored by the country management team. In addition, during 2018 UNICEF Bangladesh rolled out the anti-fraud strategy released that year by UNICEF Headquarters.

Part 2: Major results including in humanitarian action and gender, against the results in the Country Programme Documents

UNICEF supported Government efforts to strengthen national frameworks to monitor progress towards the SDGs, establishing baselines for indicators, developing a monitoring and evaluation framework and estimating investment gaps. UNICEF actively contributed to various

platforms under development by the Government and collaborated with others to accelerate progress on the SDGs. UNICEF adopted a systems-strengthening approach with line ministries/divisions and collaborated with the general economics division and Bangladesh Bureau of Statistics to support the collection of robust and timely data and analytics to inform the 7th five-year plan and monitor signs of change, to accelerate achievement of the SDGs. By mid-2019, a multiple indicator cluster survey will have produced estimates for 150 indicators, including 30 SDG indicators, up to the district level. UNICEF Bangladesh engaged in 52 evidence-generation activities in 2018.

UNICEF contributes to UNDAF goals in three outcome areas: Outcome 1 – People; Outcome 2 – Planet; and Outcome 3 – Prosperity. UNICEF co-chaired UNDAF Outcome 1 and significant progress was made around ‘people’, especially by providing technical support to operationalize the national action plan to end child marriage in conjunction with UN Women and the United Nations Population Fund (UNFPA). UNICEF also led the process of developing a standardized ‘adolescent package’ to strengthen adolescent participation. The WASH section represents UNICEF on Outcome 2, and UNICEF’s social policy, evaluation, analytics and research section contributed to Outcome 3.

UNICEF Bangladesh aligned its country programme with the UNICEF Gender Action Plan, 2018–2021, and continued to integrate gender results in and across programme areas. Designating the outcome on adolescents and ending child marriage a targeted priority (high-level result) significantly stepped up efforts to target adolescent girls. Other priorities included girls’ secondary education and skills, adolescent girls’ health and nutrition, and gender-based violence in emergencies (GBViE). Recruitment of sectoral gender specialists in WASH and GBViE and capacity building on gender programming tools sought to enhance institutional results for accountability and capacity.

The total value of supplies and services received by UNICEF Bangladesh in 2018 was US\$104.5 million (US\$22.8 million for the Rohingya response). The country office established an efficient supply chain management system with three warehouses and partner collaboration; the supply chain was optimized during the Rohingya response. UNICEF led a joint United Nations initiative to establish long term agreements (LTAs) for the provision of travel services. Meanwhile, UNICEF Bangladesh achieved procurement efficiencies by establishing 129 LTAs, saving \$1.1 million in 2018.

UNICEF Bangladesh disbursed almost US\$49.2 million in cash transfers to implementing partners. It significantly cut its payment processing lead time through business simplification and by adopting policies to support eco-efficiency, supply chain sustainability and environmental preservation. Efficiency gains improved significantly to meet the service-level agreement benchmark and submissions to the Global Shared Service Centre. In 2018 transaction processing time was 1.5 days (down from 2 days in 2017). UNICEF Bangladesh also made significant efforts to optimize the management of cash resources through two bank accounts (Bangladesh *taka* and United States dollars) in Dhaka and separate petty cash accounts for each field office.

UNICEF’s response to the Rohingya crisis achieved remarkable results for children and affected populations as a whole, especially in camp settings. The emphasis on WASH activities, particularly the establishment of diarrhoea treatment centres and the delivery of strong behaviour-change communication messaging to nearly 700,000 people helped to avert a potentially major cholera epidemic. UNICEF vaccinated more than 1 million people against

cholera in 2018 and provided 600,000 people with access to culturally appropriate latrines and hand-washing facilities. Over 149,000 refugees and host communities' children under five years (including new-borns) received primary health care at UNICEF-supported health facilities in Cox's Bazar in 2018. More than 1,400 learning centres were established, providing education opportunities for over 70 per cent of targeted school-aged children. Nutrition Action Week allowed for the screening of over 149,000 children; more than 1,000 children were referred for SAM treatment.

UNICEF Bangladesh also scaled-up efforts across all programme areas to provide children and adolescents with opportunities for a better future. With UNICEF support, Bangladesh's education sector developed a learning framework for preschool to Grade 8 for refugee children. More than 160,000 children benefited from UNICEF-supported psychosocial activities and nearly 40,000 adolescents received life skills-based education in camps. Twelve information feedback centres set up by UNICEF in camps recorded some 55,000 complaints, queries and requests for service referrals under a community accountability and information services project. The intensive UNICEF response included communication and advocacy via social media, provision of interviews and facilitation of visits by the media, UNICEF national committees and goodwill ambassadors. The social media campaign for one visit alone reached 4,817,500 people. A UNICEF field office with a dedicated operations team was established in Cox's Bazar to provide timely and effective support to the Level 3 emergency response, including through the forging of strong strategic partnerships with implementing partners.

UNICEF also solidified its national-level emergency preparedness in 2018. Emergency stocks to enable an immediate humanitarian response for 100,000 people to address WASH, nutrition, child protection and education needs were pre-positioned in UNICEF and government warehouses. UNICEF continued to lead the national WASH and nutrition clusters and co-lead the education cluster with Save the Children and the child protection sub-cluster with Plan International. These UNICEF-led clusters conducted sub-national orientation sessions to strengthen sectoral coordination in emergencies. Seven UNICEF field offices each developed an emergency preparedness and response plan, and at end-year were establishing contingency partnerships with civil society organizations (CSOs), to be activated during emergencies. A contingency plan for earthquakes was also under development at year's-end.

The human resources section provided critical support to attract, recruit and retain high-calibre candidates to address regular programming needs and the increased Rohingya response. Two reviews were conducted in 2018 to ensure optimum staffing levels for UNICEF Bangladesh and the Cox's Bazar field office; 107 new staff and 129 new consultants were hired. Extensive efforts to attract qualified female candidates resulted in a staff gender balance of 51 per cent female staff and 49 per cent male. The office made strenuous efforts to build capacity and new partnerships and to secure new funding. Significant fundraising achievements in support of the Rohingya crisis included major new funding sources as well as around US\$14 million in funding from UNICEF national committees in 2018. In total, more than US\$100 million was received through the Humanitarian Action for Children appeal in 2018.

Internally, UNICEF Bangladesh continued to undertake greening initiatives, increasing the use of solar energy and efficient LED lighting and cutting down on printing. Air quality monitoring devices and air purifiers were installed in offices and breathing masks given to all staff in response to the country's very high level of air pollution. UNICEF Bangladesh became plastic bottle-free in 2018.

Goal area 1: Every child survives and thrives

UNICEF launched its global 'Every Child Alive' campaign in 2018 to mobilize the public to urge governments to improve child survival efforts and secure donors for greater investment in mother and newborn health programmes. The Government of Bangladesh also implemented a national campaign on newborn health. Campaign messages disseminated through a drama series, public service announcements on radio and television and film showings in 'media dark' areas reached 10 million people.

UNICEF Bangladesh supported the ongoing evaluation of the country's special care newborn units (SCANUs) to examine their impact and the barriers and enablers for scaling up SCANUs nationwide. Findings from operations research on kangaroo mother care services will inform the design of a low-cost alternative to SCANUs to decongest existing units and complement existing maternal, neo-natal and child health (MNCH) services.

Maternal and perinatal deaths surveillance and response was implemented through UNICEF support in 22 of the country's 64 districts as a key strategy for reducing maternal and neonatal deaths. Data was integrated in the district health information system platform; the findings were used to inform quality improvement initiatives in health facilities. UNICEF's gender-sensitive fourth health, population and nutrition sector programme assessed 15 district hospitals for accreditation under the women friendly hospital initiative; five more were undergoing this process at year's end. Since the initiative was scaled up to 15 districts, satisfaction with services increased significantly and in some facilities the number of women receiving services doubled.

The quality of care model piloted in Kurigram resulted in meeting 80 per cent of the World Health Organization (WHO) standards for quality of care for every mother/every newborn. The model will be scaled up in eight more districts, and a set of national quality improvement guidelines was finalized in 2018.

The expanded programme on immunization (EPI) achieved the regional goal for rubella control, reaching over 3 million children under 12 months of age and 2.95 million children aged 12–24 months. An equity analysis revealed under-immunized communities in urban areas in Chittagong and Sylhet (including tribal and Haor area communities). Strategies to address this inequity were integrated into the national EPI plan and Gavi-related documents. The EPI system was strengthened by the addition of 12 district cold rooms and 18 district stores, as well as capacity building of personnel. An effective vaccine management improvement plan was developed for three city corporations. The vaccine independent initiative was endorsed and as a result, a credit line of US\$4.5 million was established with the Ministry of Health and Family Welfare (MoHFW) to mitigate funding gaps for procurement of life-saving vaccines. UNICEF supported finalization of the national immunization policy 2018 and Vaccination Act 2018, enshrining the right of all children to free, quality vaccination services and introducing vaccination checks at school.

Bangladesh's 170 newly established adolescent-friendly health service centres provided sexual and reproductive health and rights (SRHR) services to over 198,000 adolescents in 2018. At year's end the MoHFW was in the process of endorsing the national plan of action for adolescent health 2017–2030. Implementation research in progress in four districts will support the development of an effective model for adolescent-friendly health services.

UNICEF played a lead role in providing technical support for the country's national health management information system (HMIS) on: data visualization, including new data sets to better guide maternal, newborn, child and adolescent health programmes, and capacity building on data quality and use of divisional HMIS. The MoHFW initiated dashboards to review real-time progress on health and nutrition programmes, the SDGs, the sector programme and data on the Rohingya refugee emergency response. Data completeness is over 92 per cent, with 95 per cent of facilities reporting. UNICEF also supported capacity building on system configuration, in collaboration with the University of Oslo.

In 2018 UNICEF support facilitated HIV testing and counselling for 43,000 women who were pregnant in Chittagong, Cox's Bazar, Dhaka, Khulna and Sylhet. Forty women who were HIV-positive and pregnant were identified and given access to safe delivery services: 90 per cent received triple antiretroviral therapy for prevention of mother-to-child transmission (PMTCT) and 20 infants were declared HIV-free at 18 months. In May 2018 UNICEF and UNFPA initiated a partnership with Light House, a CSO, to facilitate access to PMTCT and SRHR services for 700 female sex workers in Mymensingh and Tangail via two brothel-based service points. Through its partners, UNICEF also reached 3,500 adolescent sex workers (82 per cent female), drug users living on the street, men who have sex with men and transgender individuals in Chittagong, Dhaka, Khulna and Sylhet. Among them, 41 per cent received sexually transmitted infection management, 52 per cent received HIV counselling and testing, 33 per cent were screened (and treated, if necessary) for tuberculosis and 26 per cent received life-skills education. Community-based PMTCT services for the migrant population of Kanaighat, Sylhet, continued to raise awareness on HIV/PMTCT and safe migration, reaching more than 13,400 returnee/would-be migrant community members in 2018. More than 3,800 pregnant women received HIV counselling and testing.

The Mothers@Work programme expanded rapidly, reaching 80 ready-made garment factories in 2018 (up from five in 2017). This rapid scale-up was facilitated by a partnership with the International Labour Organization (ILO) and its Better Work programme. Mothers@Work, which supports businesses to create enabling environments for maternity rights and breastfeeding among working mothers, demonstrates to businesses the value of investing in children. In 2018 the programme reached over 150,000 working mothers and 7,500 children under two years of age, and the exclusive breastfeeding rate increased from 17 to 72 per cent. UNICEF also developed a social and behaviour change communication (SBCC) strategy for breastfeeding and maternity protection in the workplace, which was rolled out in 40 ready-made garment factories.

UNICEF supported strengthening health facility-based breastfeeding counselling and support as part of the government-led initiative to improve the quality of care for MNCH and nutrition in Kurigram. With UNICEF support, coverage of breastfeeding support and counselling at health facilities was improved for antenatal care, time of delivery and post-natal care, with over 90 per cent of women attending breastfeeding counselling. Almost all babies born in health facilities (98 per cent) were breastfed within one hour of birth. Community-based breastfeeding support and counselling reduced gaps in health facility-based provision.

Nutrition Action Week enabled the screening of over 149,000 children, of whom more than 1,000 were referred for treatment of severe acute malnutrition (SAM), reducing the risk of mortality among these children. UNICEF also supported the Government and the Bangladesh Salt Mill Owners Association to increase access to adequately iodized salt. The New Salt Act 2018 was finalized and a universal salt iodization surveillance body established, supporting an

enabling environment for the production and use – particularly by pregnant women and young children – of iodized salt.

Through the national information planning unit, UNICEF engaged with districts to enhance evidence-based planning. Support to the national nutrition information system facilitated the dissemination of priority nutrition results and indicators for tracking the national nutrition plan of action. A prototype of Mukto, the multifunctional nutrition information visualization platform, was launched. Comprehensive competency-based training was rolled out in 38 districts, to 88,000 health workers. These achievements helped improve planning and quality of nutrition services.

A birth certificate is vital to realizing a child's right to an identity and to protection from abuse and exploitation. A 2018 pilot saw 2,000 health/family welfare assistants trained on the Government commitment to birth registration and on the registration process itself. As a result, birth registration within 45 days increased from 3 to 50 per cent in training locations. According to a 2018 survey report, the rate of birth registration within 45 days across Bangladesh as a whole rose from 3 to 25 per cent between 2013 and 2018. A 2018 amendment to the 2004 Birth and Death Registration Act simplified birth registration, and the Government declared 6 October to be 'birth registration day'.

Registration of women who are pregnant and newborns living in urban slums helped to find 'left-outs' and 'drop-outs'. Evening vaccination sessions to enable working mothers to overcome time barriers led to 10 per cent immunization coverage in such areas. A SCANU is being established in Mirpur, Dhaka, which had no facilities for sick and low birthweight babies. Capacity building was conducted with 100 service providers working in Dhaka North City Corporation primary health care centres.

Goal area 2: Every child learns

UNICEF support to the Government resulted in its renewed commitment to the delivery of early childhood care and development (ECCD) and school readiness services. This was reflected in its approval of the third phase of the early child learning and development project, aimed at strengthening coordination and implementation across ministries and agencies. Capacity building of ministry systems and mechanisms, including for service delivery in the most deprived districts and *upazilas* (sub-districts), will be a primary area of support during this phase.

The new primary sector plan– the Government's fourth primary education development programme (PEDP4)– further integrates PPE into primary education and provides for all 64,000 government primary schools to deliver PPE. This will considerably boost PPE access for children aged five years; children under five will continue to access services through home-based ECCD and day care centres. UNICEF support contributed to the enrolment of 74,600 children in 40 day care centres, 462 early learning centres and 4,000 para-centres in the Chittagong Hill Tracts.

UNICEF sensitized the education sector to the 'three-star approach' to WASH in schools, which was adopted as the WASH strategy for PEDP4. UNICEF also successfully advocated for PEDP4 to include a distinct programme component on social mobilization and community engagement, to improve primary education outcomes. A related media campaign was launched in late 2018 to promote school enrolment and stimulate demand for quality education.

School planning and management was strengthened in 1,210 primary schools serving over 250,000 children. As part of the school effectiveness initiative, which models child-friendly schools, 2,400 school management committee members and teachers were oriented on approaches to ensuring enabling learning environments, inclusiveness, governance and improved WASH in schools. Pedagogical training was provided for 2,500 teachers, and communication for development (C4D) interventions in 500 schools aimed to reduce the number of out-of-school children. The school effectiveness model will continue to demonstrate effective approaches to learning, while sharing experiences and advocating for system change.

UNICEF worked with the Directorate of Primary Education to strengthen national frameworks and approaches, including development of school and sub-district planning guidelines. This partnership will also ensure that the national curriculum and textbook board (NCTB) has strategic support for reforming the national primary curriculum. Providing curriculum support is a high priority for UNICEF due to concerns about low levels of learning across the education system.

UNICEF continued to invest in modelling how the system best supports out-of-school children. Using the ability-based accelerated learning model, nearly 13,400 out-of-school children (53 per cent girls) aged 8–14 years were enrolled in learning opportunities in 2018; an additional 85,000 out-of-school children continued to access services, with government support. As the Government continues to use the model as one approach to reaching its PEDP4 target for reducing the number of children not in school (1 million), UNICEF will support the Bangladesh non-formal education bureau to build its institutional capacity for planning, programming and information management, as well as quality assurance.

UNICEF worked closely with the Government, World Bank, Asian Development Bank and others to develop the five-year secondary education development programme (SEDP). The programme aims to improve equitable access to, and retention in, quality secondary education through interventions in areas such as curriculum revision, teacher education, pedagogy and assessment. SEDP also includes a component to keep adolescents in school, which covers gender-segregated toilets, menstrual hygiene management (MHM) facilities and education, SRHR and school safety. UNICEF is leveraging the partnerships developed as part of this sector-wide approach to strengthen the commitment of resources for skills-based education and alternative learning pathways for out-of-school adolescents.

Another area of strong partnership with the Government was focused on ensuring a robust framework for providing skills to adolescents. The multi-pronged approach by UNICEF and its partners included developing a comprehensive gender-responsive skills framework for adolescents and an e-learning course on life skills competencies; integrating life skills into the secondary curriculum, textbooks and teacher training; and piloting service-delivery models. One model, the alternative learning programme (ALP)– offering informal apprenticeships for adolescents (mostly vulnerable girls) – was selected by the ‘generation unlimited’ (GenU) initiative as a global solution for the provision of skills and employment opportunities. Implemented in partnership with BRAC, the influential Bangladeshi non-governmental organization (NGO), ALP had 1,750 adolescents (65 per cent girls) enrolled by years-end and plans to scale up efforts as part of GenU. ALP was highlighted globally as a best practice on the International Day of the Girl Child. UNICEF also supported the NCTB to develop a gender-sensitive e-learning course for students on critical skills for handling physical and psychosocial changes during puberty.

UNICEF contributed to interventions to support girls' retention and learning in secondary schools. This included WASH section actions that provided information on hygiene practices, (including menstrual health) to 19,000 adolescents (65 per cent female), and installed separate toilets for girls and boys in 35 schools. Operational research initiated in 2018 on keeping girls in school will complement other data-collection activities aimed at improving programming and advocacy. UNICEF supported the modelling of a gender-responsive adolescent nutrition programme in 40 adolescent clubs at secondary schools in UNICEF focus districts. Over 28,300 students (56.1 per cent female), nearly 1,200 adolescent peer leaders (71.6 per cent female) and around 800 teachers/school council members (27.3 per cent female) took part in nutrition education sessions, including those addressing specific issues related to adolescent girls' nutrition.

Goal area 3: Every child is protected from violence and exploitation

Child welfare boards operate in 24 districts. Basic child protection services determined by social work case management and provided to children in urban and rural areas in 2018 included literacy and psychosocial support, conditional cash transfers and family reintegration for children living on the street. Promotion of a national child helpline resulted in a three-fold increase in the number of calls received over one year. Call centre agents were trained on how to handle calls on online safety as part of the 'be smart use heart' programme, which ran online safety awareness sessions in schools nationwide. The Department of Social Welfare appointed three more call centre agents in response to increased demand for the helpline.

In March 2018 UNICEF organized a one-day online safety for children event involving 12,600 participants from 84 schools and 41 other organizations. UNICEF Bangladesh partnered with Grameen phone in June 2018 on another child online protection initiative, which directly trained 400,270 secondary school students (63 per cent girls) in urban and rural areas and 73,000 parents and teachers in child online protection and took the Internet safety message to more than 7 million people.

Children in conflict with the law have access to 15 court rooms at district and metropolitan courts that have been designed and renovated to be child friendly. Video conferencing was installed to connect child development centres with 69 courts, supporting law reform by addressing the issue of hearings being delayed due to lack of transportation and other logistical issues.

Major milestones were reached through UNICEF's end child marriage (ECM) programme. A national action plan to end child marriage was launched in August 2018 with UNICEF support. The award-winning trans-media 'raise the beat/dhol' campaign continued, reaching about 50 million people (over 25 million through social media alone), and won several awards, generating momentum. A related entertainment-education drama series on adolescent well-being and empowerment reached more than 1.5 million people and engaged 3.4 million people via social media. Some 50,000 adolescents were informed of the ECM helpline and 10,000 community members were educated on what to do when child marriage is suspected; the helpline received reports of 870 suspected cases and 150 child marriages were stopped. In collaboration with the Government, UNICEF released 'first-of-its-kind' data on the socio-normative dimensions of child marriage. The findings are being used to revise the ECM programme strategy.

Goal area 4: Every child lives in a safe and clean environment

During 2018 integrated service delivery quality and effective coverage of WASH systems (national and sub-national) were strengthened to support the well-being of children under five years and their mothers, including in urban low-income communities and in schools. UNICEF strengthened capacity and established partnerships with the Government, NGOs and academia to scale up successful WASH models, resulting in access for 113,400 people to improved water sources and 168,500 people to basic sanitation services. Some 10 million people received messages on key hygiene practices.

Using a community-led sanitation approach, UNICEF and the department of public health engineering jointly implemented the sanitation marketing systems (SanMarkS) project to meet the SDG sanitation target of reaching 28 million people. SanMarkS has shown that it is feasible to create demand for quality sanitation products while training small-scale entrepreneurs to meet this demand: over 9,000 units were sold, covering more than 40,500 people. In 2018 the SanMarkS scale-up strategy primarily built on the success of market-led approaches, focusing on strengthening supply chains, improving consumer demand and supporting an enabling environment. By mid-2019, the project target of 90,000 households is expected to have been exceeded by over 20 per cent.

Faecal sludge management is another critical area in terms of the SDG sanitation targets. UNICEF supported the Government and other stakeholders to address the emerging problem of faecal sludge through the development and dissemination of the Government-approved institutional and regulatory framework for faecal sludge management, launched in November 2017.

UNICEF collaborated with the Government, academia and the local NGO Asia Arsenic Network to operationalize the first manganese removal treatment unit in Bangladesh; findings showed that the technology is effective and scalable. In addition, the Government included managed aquifer recharge as a rural water supply option in its national action plan for SDG implementation based on operational research on the technology's use in coastal areas.

In relation to urban programming, UNICEF Bangladesh's C4D section worked closely with other sectors on community engagement, capacity building of service providers in community mobilization and disseminating prioritized behaviours and campaigns across eight city corporations, four of which partnered with UNICEF for the first time in 2018. To improve the hygiene situation, 11 government-owned radio stations disseminated key WASH hygiene messages year-round, reaching around 10 million people. An entertainment-education package was also developed for 10,000 mosques.

UNICEF sensitized stakeholders on MHM via rallies and workshops that reached over 19,000 policymakers and adolescents. The Ministry of Local Government, Rural Development and Cooperatives (MoLGRDC) asked UNICEF to lead the development of a national strategy on menstrual hygiene management (MHM). Through UNICEF support at 78 secondary schools, 19,160 students gained access to safe drinking water and hygienic toilets (gender-segregated, with MHM facilities). Menstrual hygiene corners were created and one female teacher per school was trained in positive hygiene practices.

UNICEF supported the MoLGRDC to initiate nationwide use of UNICEF's bottleneck analysis tool to identify gaps and steps required to meet the SDG targets for WASH. Around 800 national and sub-national WASH, education, health and nutrition professionals and

policymakers participated in workshops on evidence-based WASH life cycle approach programming in eight divisions. This represented the first time globally that the tool is being used comprehensively at the sub-national level, allowing for long-term and in-depth planning to strategically target WASH interventions for optimum results. The final report will be available in March 2019.

UNICEF continued to co-chair the local consultative group (LCG) for WASH, which supports effective sector coordination, experience-sharing and leveraging of technical assistance. In 2017, UNICEF began to support strengthening of the policy support branch of the MoLGRDC's local government division, the main entity implementing workshops on bottleneck analysis. In 2018 UNICEF played an active role in ensuring improved functionality of the LCG and provided leadership on strengthening the sector policy environment.

Goal area 5: Every child has an equitable chance in life

The Government began working with UNICEF in 2018 to implement a child-sensitive social protection system, particularly through Agamir shishu, a unified platform for government-run services. The Ministry of Finance is committed to increasing the proportion of investments for children from 14 to 20 per cent by 2020.

UNICEF advanced its capacity strengthening initiative to foster C4D social and behavioural change in the curricula and research of Bangladeshi academic institutions. Analysing the findings of a capacity assessment of these institutions, the C4D section adjusted the initial design of the intervention and established a formal partnership with the University Grants Commission of Bangladesh. This partnership opens up more opportunities for academics to be involved in C4D work to benefit the country. Thirty faculty members from 10 universities completed a C4D e-learning course guided by Ohio University and, as part of a workshop, drafted a competency-based C4D curriculum. Twenty faculty members attended another workshop on social-behavioural research relevant to the design of C4D programmes.

Working directly with local governments and strengthening the capacity of their staff represents an important shift toward sustainable programming from the previous country programme, in which NGOs were responsible for implementing activities. In 2018 UNICEF formalized partnerships with the local government division and eight city corporations under MoLGRDC to support capacity building and system-strengthening in child-responsive urban programming and various models of service delivery. Discussions were begun with the local government division on applying the child-friendly city framework; this approach will be explored further through direct support to city corporations in 2019/20.

The 'local governance for children' programme, endorsed by Bangladesh's cabinet division in 2018, continued to strengthen local mechanisms for evidence-based and bottom-up planning, as well as promote community engagement and planning around social and behaviour change. Twenty-one districts formed thematic groups on children to regularly review the situation of children and identify relevant actions. Local activities to promote systematic community engagement in local governance for children and foster social and behaviour change were initiated in 37 *upazilas* across 19 districts.

As a result of UNICEF Bangladesh's advocacy, the Government committed to implementing a results-based financing initiative with a total disbursement of US\$64 million (two disbursement-linked indicators relate to maternal nutrition and infant and young child feeding). This is the

country's first, and one of the world's biggest, pay-for-performance financing schemes. In partnership with BBS, UNICEF generated new evidence on equity in social services coverage for children and women. The country office conducted a situation analysis on disability-friendly health services with the Government, and is now piloting the mapping of disability-friendly services generally in Bangladesh. An evaluation of evidence-based district planning and budgeting found the approach to be effective in increasing the use and quality of MNCH services. Competency-based training will address another assessment's finding that supervision, mentoring and monitoring of health service providers trained in nutrition is too infrequent. Breastfeeding-friendly interventions in public facilities and private workplaces were evaluated for the first time.

Across UNICEF focus districts, 108,780 adolescents (80 per cent girls) participated in life skills and empowerment activities at 1,897 adolescent clubs. The NCTB endorsed the curriculum framework of the standardized adolescent empowerment package. Software was developed, and Ministry of Women and Children Affairs field officials trained in its use, to gather live geographical information system data from adolescent clubs. UNICEF accelerated its partnership with the Islamic Foundation of Bangladesh to promote the well-being of children. Forty religious scholars received orientation on a package of 15 essential practices, and training modules were developed for imams and mosque-based pre-primary schoolteachers to cascade the training to 1,000 imams.

Adolescent rights interventions delivered in 15 *upazilas* reached more than 320,000 adults and adolescents. About 2,550 adolescent girls and boys were trained on media participation through adolescent radio listeners clubs.

The South Asia Parliamentarian Platform for Children brought together 36 lawmakers from the region in Dhaka in May 2018. The Bangladesh Generation Parliament enabled children from across the country to meet parliamentarians – virtually or in person – and influence policymaking.

U-Report was launched in Bangladesh on 31 July 2018, recruiting over 56,000 U-Reporters (57 per cent aged 13–19 years; 33 per cent aged 20–24) during its first four months. Twenty polls sought opinions on adolescent priorities such as online safety and disaster risk reduction, and key results were shared with programme colleagues, leaders and decision-makers. Nearly 40,000 viewers watched a UNICEF Bangladesh interview with a leading female professional that was live-streamed on the International Day of the Girl Child. UNICEF Bangladesh launched its website in October 2018; the Meena game was downloaded 1 million times. By the end of 2018 UNICEF Bangladesh's Facebook page had reached 5.1 million users.

To mark World Children's Day in 2018, UNICEF Bangladesh organized three landmark events involving more than 7,000 children and engaging nearly 2 million more online. Also in 2018, UNICEF Bangladesh embarked on a private sector fundraising and engagement pilot exercise and established a private sector advisory board comprising 12 pioneering business and innovation leaders.

Part 3: Lessons learned and constraints

Partnerships in 2018 presented both challenges and advantages; working through effective partnerships continued to grant UNICEF Bangladesh myriad opportunities to improve the lives

of children. Often it was a partnership that helped the country office to overcome common constraints such as limited capacity or lack of coordination in relation to development or humanitarian efforts. In the context of the Rohingya crisis, frequent inter-agency collaboration, multi-sectoral interaction for joint supply chain mapping, use of a common logistics hub, establishment of storage outposts in and around camps, and use of LTAs for common service sharing were absolutely critical to overcoming supply chain management bottlenecks and ensuring rapid scale-up of the emergency response.

Bringing together key partners – both relevant ministries and development partners – in a national consultation to develop a new and unique programme, and building a strategic partnership with the ILO were key factors underlying the rapid scale-up of the Mothers@Work programme. Establishing other strong partnerships with garment/knitting associations could, however, have helped to increase programme uptake across the ready-made garment sector. From a strategic communication point of view, engaging a media agency to develop a brand using social and behaviour change approaches for the programme supported UNICEF's efforts to raise awareness about Mothers@Work among ready-made garment sector stakeholders.

Achieving the SDG targets for WASH is far more challenging than the equivalent MDG targets. More than 20 per cent of Bangladesh is rated as extremely or very hard to reach with water and sanitation services, affecting 28.6 million people. The situation in urban slums is particularly precarious, characterized by low access and a need for significantly improved faecal sludge and solid waste management practices. As a first step to identifying the right interventions and strategies, the bottlenecks analyses conducted in 2018 were critical. Preliminary findings from the workshops reveal that lack of knowledge about WASH and low access to improved WASH facilities are key factors that negatively impact on the health and nutrition status of people in Bangladesh. Other factors – including poverty, rapid urbanization, declining water levels and vulnerability to climate change/natural hazards– exacerbate an already challenging situation. Moving forward, consultations will be organized to build consensus about bottlenecks that are preventing the attainment of the SDG targets for WASH and to develop costed solutions for accelerating progress.

In the area of C4D, ongoing and consistent engagement with stakeholders and partners proved necessary to ensure sustainability and scale (especially with the Government), leverage resources and assure quality (as, for example, with the private sector). In particular, adopting a public–private partnership approach enabled UNICEF to expand the reach and intensity of media dissemination in 2018: UNICEF aired all newborn health and end child marriage campaign broadcasts on all channels in prime-time slots, and the adolescent empowerment entertainment-education drama series was telecast weekly on four channels, free of charge and at prime time. One important way to foster close relationships was arranging joint visits and assessments with partners to inform and accelerate programme implementation, as was the case with the partnership with Bangladesh's Islamic Foundation, which started off slowly. Sharing successes with partners publicly strengthens ownership: Government involvement and ownership of the end child marriage campaign increased significantly after the campaign won awards.

Behaviour change is a long-term and complex process that requires investment not only in intensive and repetitive messaging and dialogue, but also to ensure the availability of services and a supportive environment. Lack of access to services or inadequate service provision, combined with incomplete information, can breed resentment and mistrust, leading to myths, rumours and misconceptions. Communities should be able to provide feedback that is valued

and acted upon by service providers. Investment in feedback loops and grievance mechanisms are essential to fulfil the principle of accountability to affected populations and as a strategy to ensure the long-term effectiveness of efforts. Building the trust of communities in service providers, through dialogue and by engaging community leaders and influencers, is central to creating a supportive environment for sustainable behaviour change.

Lack of capacity remains a key challenge in several areas. It is a critical time for education reform, with important opportunities for change, and all three levels of the education system have developed strategic plans slated for implementation in 2018/19. The education system is struggling, however, to effectively operationalize multiple new strategies. This is made more difficult by frequent changes in key personnel in critical agencies: the knowledge gaps that result affect the pace and quality of implementation. This high turnover is a common phenomenon and reinforces the need to invest in system-strengthening. Similarly, challenges to strengthening the child protection system relate mainly to inadequate human resources – both in number and capacity. The child protection system mapping exercise that began in late 2018 will further guide the strengthening of government services and the development of costed action plans.

Insufficient coordination continues to pose a significant challenge, for example, among the multiple ministries with responsibility for education and skills-related services. UNICEF's work to support inter-ministerial coordination between MoWCA and 15 related ministries, showed that coordination support is most effective when built on interventions that are beneficial to all parties (e.g., generating evidence, modelling initiatives, building capacity). Furthermore, while schools are a platform for expanding the reach of the adolescent nutrition programme, barriers include education sector managers' lack of knowledge about the importance of adolescent nutrition, a limited budget allocation and poor coordination between relevant ministries and departments. UNICEF will support the strengthening of coordination between the MoHFW and the MoE and continue to explore partnerships with other national entities. Coordination is also lacking in nutrition system delivery for urban dwellers; development of a national urban nutrition strategy with clear accountability among ministries is required.

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