



Parveen and her daughter Maria prepare nutritious Sehri and Iftar meals at home during Ramadan.
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UNICEF BANGLADESH Humanitarian Situation Report No. 71

unicef 
for every child

Reporting Period: 1 January to 31 March 2025

Situation in Numbers



3.2 million

Children (50 per cent of girls) in need of humanitarian assistance (UNICEF HAC 2025)



7.9 million

People (51 per cent female, 41 per cent children) in need including Rohingya refugees and host communities. (UNICEF HAC 2025)



562,785

Rohingya children (51 per cent of girls) require assistance. (UNHCR, 31 March 2025)



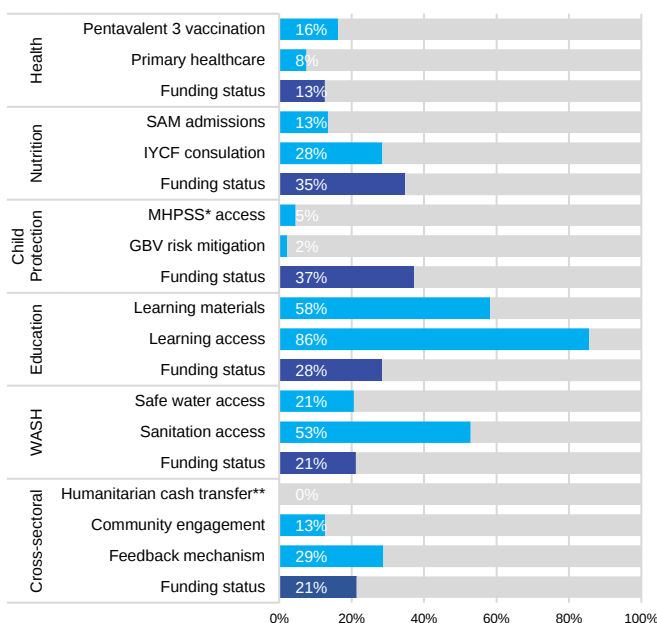
1,102,566

The total Rohingya population (51 per cent female) require assistance. (UNHCR, 31 March 2025)

Highlights

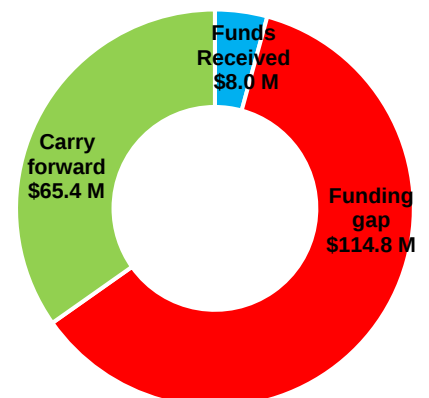
- Bangladesh continues to host 1,102,566 Rohingya refugees¹ (51 per cent children) from Myanmar in 33 densely populated camps across Cox's Bazar District, with 36,920 of the refugees living in Bhasan Char, Noakhali District (55 per cent children). A total of 93,522 new refugees have crossed the border since 2024, as the protracted Rohingya refugee crisis enters its eighth year with no durable solution in sight.
- During this quarter, UNICEF reached 20% of its HAC target, delivering multi-sectoral services to 418,557 people (244,396 children, 216,972 females, and 381,056 Rohingya refugees).
- Public health emergencies continue to impact on vulnerable populations. Up to 578,325 cases of Acute Watery Diarrhoea have been reported nationwide, representing a 2.2% decrease compared to the same period in 2024. Additionally, between 23 June 2024 and 1 March 2025, 581 cholera cases were reported in the Rohingya camps.
- UNICEF continues to provide access to quality WASH services in areas affected by the 2024 Eastern Flood during the early recovery phase, with a total of 56,446 people (28,500 females, 773 persons with disabilities) receiving quality WASH interventions (3.6 per cent of the target).
- In Cox's Bazar, the total enrolment in education facilities across Cox's Bazar (camps), Bhasan Char, and host community programmes reached 237,884 children.
- A significant funding gap of US\$114.8 million (61% of the 2025 HAC appeal) persists, restricting UNICEF's ability to fully meet the priority needs of vulnerable children, women, and persons with disabilities in Bangladesh.

UNICEF's Response and Funding Status^{2,3}



UNICEF Immediate Needs US\$188.2 M

Funding Status (in US\$)



¹ Government of Bangladesh/UNHCR Population Factsheet 31 March 2025: [GoB UNHCR Population Dashboard - March 2025-A3.pdf](#)

² The funding for child protection has been primarily allocated to Cox's Bazar. However, the low response percentage (2-5%) is due to the fact that there have been no major emergencies or crises triggering an immediate need for large-scale intervention in the child protection sector.

³ While the funding for education is low, the response percentage is high (87%). This is mainly linked to the Cox's Bazar response and the fact that education activities are closely tied to the academic calendar. With the start of the new school year, a significant portion of planned education activities were activated early in the year, leading to a high response percentage.

* Mental Health and Psychosocial Support (MHPSS)

** The households for the Humanitarian cash transfer instead of individual beneficiaries

Funding Overview and Partnerships

In 2025, UNICEF's Humanitarian Action for Children (HAC) requires US\$188.2 million to meet the critical needs of people, including women and children, affected by multiple shocks in Bangladesh. The funds will enable UNICEF, in partnership with the Government and Civil Society Organisations (CSOs), to deliver integrated services in WASH, Nutrition, Education, Child Protection, Health, and Social and Behaviour Change (SBC) services to protect children's rights in alignment with the Core Commitments of Children in Humanitarian Action across Bangladesh, including the refugee response in Cox's Bazar. In this reporting period, UNICEF Bangladesh Country Office has received US\$73.4 million (39 per cent of the funding requirements, including carry-over from 2024), leaving a funding gap of US\$114.8 million (61 per cent). This includes contributions from private and public sector donors who invest in both thematic and non-thematic programmes under this year's HAC.

UNICEF expresses gratitude to the World Bank, Japan, Denmark, Norway, European Union ECHO, Bureau of Population, Refugees, and Migration (BPRM), Bureau for Humanitarian Assistance (BHA), Foreign, Commonwealth and Development Office (FCDO), Global Partnership for Education (GPE), GAVI, UNICEF Gulf Area Office (GAO), UNOCHA CERF, USA NatCom, German NatCom, Australian NatCom, Education Cannot Wait (ECW), Swedish NatCom, and various other UNICEF National Committees and local donors for their generous contributions to this response. As Bangladesh is on track to be a lower-middle-income country by 2026, the operating environment remains challenging, with decreasing donor interest in the country. In 2025, UNICEF continues to manage challenges in order to efficiently respond to the needs of vulnerable communities, women and children. The current funding environment has become challenging with the suspension of foreign aid funding for humanitarian programming globally and decrease in allocations of ODA by governments. To ensure the growing needs are met, flexible and multi-year donor funding for the 2025 HAC will be crucial in providing required essential support to Rohingya refugees and the most vulnerable women and children in Bangladesh. UNICEF is actively working in diversifying its resource mobilisation efforts by engaging more with non-traditional donors, including private sector partners. Additionally, cost-efficient measures such as re-prioritising critical interventions, and optimising partnerships and the use of flexible resources are being explored. UNICEF also advocates with donors and partners for sustained, predictable funding.

Situation Overview & Humanitarian Needs⁴

Bangladesh currently hosts 1,102,566 Rohingya refugees⁵ from Myanmar across 33 camps in Cox's Bazar District and on Bhasan Char in Noakhali District, with children accounting for 51 per cent of them (55 per cent in Bhasan Char). As part of the Government of Bangladesh's relocation plan, 36,920 refugees had been relocated to the island as of February 2025. The humanitarian community continues to provide essential services in both locations. However, children remain at risk due to water-borne disease outbreaks, malnutrition, inadequate health facilities, lack of educational opportunities for adolescents, increased insecurity, and heightened risks of sexual exploitation and Gender-Based Violence (GBV). UNICEF has prepositioned emergency supplies to respond to an estimated 318,708 people, whilst facing gap of \$402,134 in prepositioned supplies multi-sectoral support to children affected by emergencies⁶. The recent cut in foreign aid funding will further worsen the already declining funding for the Rohingya refugee response.

The overall security situation in Cox's Bazar remains fragile, marked by cross-border tensions in the Teknaf-Naikhyongchari border areas, security incidents within the camps, and the Myanmar government's temporary suspension of cross-border trade, including restricting the transport of goods from Yangon to Teknaf, since 26 January 2025. Escalating conflict in Myanmar has triggered a new influx of refugees, with 93,522 new individuals have been recorded since 2024 (UNHCR)⁷. The newly arrived individuals are receiving life-saving assistance, including food, medical care, and access to UNICEF-supported facilities.

In Q1 2025, a total of 323 disaster events (both natural and human-made) were recorded across the 33 camps of Cox's Bazar, affecting 369 households and 1,844 people (including approximately 959 children). Among those affected, 59 were injured, 9 died and 1 was reported missing, while 525 people were displaced. Damage included 304 shelters, 9 learning centres, two health facilities, 16 WASH facilities and 13 other structures. Notably, 272 fire incidents and six landslides were reported during this period, affecting 1,764 people (917 children), with 18 injuries, three deaths and 521 people displaced. In Bhasan Char, 9 fire incidents were reported, though no casualties or damage.

Public health emergencies⁸ continue to pose significant threats to vulnerable populations in Bangladesh, particularly through recurrent disease outbreaks such as dengue. In Q1, 1,871 dengue cases have been reported—an increase of 9% compared to the same period in 2024, when 1,705 cases were recorded. The number of dengue-related deaths stands at 13, down from 22 for the same period in 2024, with a case fatality rate to 0.69 per cent, compared to 1.58 per cent the previous year. Meanwhile, 578,325 cases of Acute Watery Diarrhoea (AWD) have been reported nationwide, representing a 2.2% decrease compared to the same period in 2024. Additionally, between 23 June 2024 and 1 March 2025, 581 cholera cases were reported in the Rohingya camps. These outbreaks continue to place considerable strain on the health system underscoring the urgent need for sustained investment in preparedness.

⁵ UNHCR Population Factsheet 31 March 2025

⁶ Emergency Preparedness Factsheet March 2025

⁷ [GoB UNHCR Population Dashboard - March 2025-A3.pdf](#)

⁸ <https://dashboard.dghs.gov.bd/pages/index.php>

Summary Analysis of Programme Response⁹

Water, Sanitation, and Hygiene (WASH)

At National Level

- UNICEF continues to provide access to quality WASH services in areas affected by the 2024 Eastern Flood during the early recovery phase.
- Between January and March 2025, a total of 56,446 people (28,500 females, 21,811 children, 773 persons with disabilities) received quality WASH interventions (3.6 per cent of the target), including 21,723 people (10,968 females, 8,394 children, 298 persons with disabilities) receiving safe water, 2,174 (1,098 females, 840 children, 30 persons with disabilities) accessing appropriate sanitation services, 25,049 (12,647 females, 9,679 children, 343 persons with disabilities) reached through handwashing behavior change initiatives, and 7,500 people (3,787 females, 2,898 children, 103 persons with disabilities) receiving life-saving WASH supplies. These interventions respectively achieved 2.8 per cent, 1.7 per cent, and 3.8 per cent of the targets.
- During this early recovery phase, the UNICEF WASH section is establishing climate-resilient WASH facilities while promoting sustainable behaviour change to strengthen community resilience and link humanitarian efforts to long-term development. As part of its emergency preparedness efforts, UNICEF is working closely with the Department of Public Health Engineering (DPHE) to strengthen their understanding and capacity on Anticipatory Action for cyclones and monsoon floods in the Jamuna and Padma River Basins. Key preparedness activities include orientation sessions on Anticipatory Action (AA) for DPHE staff at both district and sub-district levels; selection and training of volunteers for early action; maintenance and dry-run testing of prepositioned Mobile Water Treatment Plants; mapping of evacuation points, shelters, and life-saving WASH distribution sites.

In Cox's Bazar (Rohingya and Host Community)

- A total of 288,026 Rohingya refugees living in camps (148,996 females, 2,844 persons with disabilities), 28,890 host community members (15,503 females and 192 persons with disabilities) and 18,912 refugees in Bhasan Char (9,702 females, 155 persons with disabilities) have accessed a sufficient quantity and quality of water for drinking and domestic needs (59 per cent of the target in camps, 55 per cent of the target in host community and 88 per cent of the target in Bhasan Char achieved).
- 292,526 refugees living in camps (148,785 females, 2,908 persons with disabilities), 42,049 host community members (22,593 females and 333 persons with disabilities) and 18,912 refugees in Bhasan Char (9,702 females, 155 persons with disabilities) have accessed appropriate sanitation services (83 per cent of the target in camps, 40 per cent of the target in the host community and 88 per cent of the target in Bhasan Char achieved).
- 213,385 refugees living in camps (107,922 females, 1,469 persons with disabilities), 64,744 host community members (40,638 females and 328 persons with disabilities) and 18,912 refugees in Bhasan Char (9,702 females, 155 persons with disabilities) have been reached with hygiene message on handwashing (44 per cent of the target in camps, 62 per cent of the target in host community and 88 per cent of the target in Bhasan Char achieved).
- 486,296 refugees living in camps (247,963 females, 23,244 persons with disabilities) and 18,912 refugees in Bhasan Char (9,702 females, 155 people with disabilities) have been reached with critical WASH supplies, especially soaps and menstrual hygiene management (MHM) kits among reproductive age women (101 per cent of the target in camps, 88 per cent of the target in Bhasan Char achieved).
- Several challenges were faced during this quarter. Delays are being experienced in land allocation for water networks in camps. UNICEF is coordinating with the camp management authorities and landowners to expedite the land allocation approvals. Additionally, delays in implementation have been experienced by UNICEF partners, impacting on timely completion of activities. UNICEF is providing continuous monitoring and review of programme implementation and support to implementing partners (IPs) to ensure they receive the approvals of the project documents from the Office of the RRRC.

Nutrition

At National Level

- Emergency nutrition response for the North-Eastern and Eastern floods continued into January and March 2025, respectively. During this period, 145 children aged 6-59 months (1.86 per cent of the target) with Severe Acute Malnutrition (SAM), including 85 girls, were admitted for treatment, and 6,653 primary caregivers (6.2 per cent of the target) of children under two received Infant and Young Child Feeding (IYCF) counselling.
- During the reporting period, 740,580 sachets of Small Quantity Lipid-based Nutrient Supplements (SQ-LNS) were administered to 9,658 children (4,780 girls) aged 6-23 months in eastern flood-affected areas.
- A SMART survey was conducted in five high-risk districts—Barguna, Patuakhali, Kurigram, Gaibandha, and Netrokona—with technical support also provided for similar surveys in six additional disaster-prone districts: Satkhira, Bagerhat, Bhola, Jamalpur, Sirajganj, and Noakhali. These efforts were coordinated with the Ministry of Health, involving the National Nutrition Services (NNS), Civil Surgeons, and Upazila Health and Family Welfare

⁹ Section updates at the national level include achievements related to Cyclones, Floods, Public Health Emergencies, and the Rohingya response. However, to specify the Rohingya response, a separate narrative is included under the section update.

Officers. The surveys served as preparatory work for the Integrated Food Security Phase Classification for Acute Malnutrition (IPC AMN) workshop, which included four days of training and four days of nutrition data analysis. The resulting IPC AMN report will support effective target setting during emergencies and serve as a key resource for fundraising.

- A Nutrition Cluster meeting was organized in early 3 March 2025, during where the SMART survey data from all 11 districts was validated by cluster members and endorsed by the Chair of the Nutrition Cluster (Line Director – NNS).
- Preparations for the first-ever IPC AMN in Bangladesh continued, with several coordination meetings held among key stakeholders including the Ministry of Food, NNS under MoHFW, WFP, FAO, and nutrition cluster members.

In Cox's Bazar (Rohingya and Host Community)

- In Cox's Bazar, 3,085 Rohingya refugee children under five (including 1,506 girls and 130 children with disabilities) received treatment for severe acute malnutrition (SAM) in Integrated Nutrition Facilities (21 per cent of the target). Between January and March 2025, 293 newly arrived children received SAM treatment. Additionally, in Bhasan Char, 126 children (including 47 girls and 2 children with disabilities) received SAM treatment (42 per cent of the target).
- In Cox's Bazar, 51,451 Rohingya pregnant and lactating women (PLWs) and caregivers of children 0-23 months (114 with disabilities) received counselling and messaging on infant and young child feeding (IYCF) (51 per cent of the target). In Bhasan Char, 98 mothers (none with disabilities) received similar counselling and messaging to promote optimal IYCF practices (2 per cent of the target)¹⁰.
- In host communities, 129 children (66 girls) with SAM and medical complications received life-saving treatment (13 per cent of the target¹¹). Additionally, 37,761 PLWs (18 with disabilities) received IYCF counselling and messaging (49 per cent of the target).

Health

At National Level

- UNICEF continues to support the "Reaching Every Mother and Newborn" (REMNI) programme in 10 upazilas as part of flood recovery efforts. In 2025, a total of 23,364 infants (11,601 girls, 320 children with disabilities) received the pentavalent vaccine (66.9 per cent of the target). Additionally, 8,379 pregnant women accessed antenatal care services in flood-affected areas through UNICEF-supported program (21.1 per cent of the target). Furthermore, 53,521 children under five (27,332 girls, 733 children with disabilities) received treatment for common childhood illnesses, including respiratory infections, diarrhoea, and pneumonia, under the Integrated Management of Childhood Illnesses (IMCI) program (77.1 per cent of the target).
- UNICEF has strengthened local medical procurement systems to ensure the timely delivery of supplies during emergencies. This includes visits to local pharmaceutical factories, signing agreements with local suppliers as part of preparedness and establishing a mechanism for the rapid delivery of critical medicines to high-risk areas during emergencies, thereby improving response time.
- As part of its Anticipatory Action approach, UNICEF is supporting cyclone preparedness efforts. This includes strengthening coordination with national and sub-national authorities, developing a prepositioning plan for essential supplies to be deployed within 72 hours of an expected cyclone, and ensuring the continuity of essential health services before, during, and after cyclones.
- UNICEF is also supporting CDC, DGHS with the rollout of digital platforms to strengthen communicable disease reporting in areas affected by natural disasters. These platforms aim to enhance community-based early warning systems, ensuring timely and accurate surveillance and enabling a more coordinated public health response during emergencies.
- Risk Communication and Community Engagement (RCCE) coordination is ongoing under the leadership of the CDC, DGHS, with UNICEF providing technical support.

In Cox's Bazar (Rohingya and Host Community)

- A total of 28,242 children aged 0 to 11 months (including 13,786 girls from both Rohingya refugee camps and host community) received the Pentavalent-3 vaccine (22 per cent of the target), covering all antigens in the routine immunization against vaccine-preventable illnesses.
- In addition, 43,700 service beneficiaries (26,024 females, 32,368 children under five) received quality healthcare services through medical consultations (16 per cent of the target) in UNICEF-supported health facilities.
- Quality antenatal care (ANC) services were provided to 10,296 pregnant women including adolescents (9.5 percent of the target) from UNICEF-supported health facilities.
- A total of 1,594 sick newborns (721 girls) received quality care in UNICEF-supported health facilities ((facilities (21 per cent against the target).

¹⁰ The progress of IYCF services is currently "Off Track" due to disruptions caused by the IYCF counsellor's vacancy and delays in the government recruitment process. UNICEF will expand the nutrition services at the community level by delivering IYCF messaging during the Vitamin A campaign. This complements the facility-based counselling services offered at the 20-bed hospital. During the campaign, the coverage will be further increased.

¹¹ SAM progress is slightly Off Track due to low admissions in some upazilas (Teknaf and Ramu), mainly caused by nurse vacancies linked to delays in government recruitment. The phase-out of the World Bank project has also reduced community screening and mobilization, likely affecting SAM case identification and referrals.

- As a part of UNICEF's efforts to establish a more efficient and effective digitalized primary healthcare system, six primary healthcare centres (PHCs) are in the process of installing a digital health platform. This system is implemented at the individual facility level and is designed to improve patient flow, maintain emergency health records and strengthen supply chain management.
- UNICEF supported a cholera vaccination campaign, reaching 1,426,958 people aged over 1 year (103 per cent of the target) with Oral Cholera Vaccines (OCV), along with community engagement activities to ensure uptake and awareness.
- Additionally, six UNICEF-supported PHCs have been equipped with environmentally friendly solar panels. These panels can generate clean, renewable energy, contributing to reduced air pollution and climate change mitigation.

Education

At National Level

- A total of 50 Education in Emergency (EiE) kits were distributed to 1,500 vulnerable children (796 girls and 704 boys, including 6 children with physical disabilities – 4 boys and 2 girls) enrolled in 13 Government Primary Schools in Dacope Upazila, Khulna district. These children are climate migrants affected by Cyclone Remal. The learning materials have been effective in accelerating learning and addressing gaps caused by learning disruptions.
- The Education Cluster organized meetings to prepare for preparedness for the 2025 emergencies and to kick-start the CCPM survey among cluster members. The Cluster coordinated with the Resident Coordinator's Office to assess the impact of foreign aid cuts on education cluster partners. The Education Cluster will also contribute to designing resilience-focused interventions for the upcoming Primary Education Development Programme-5 (PEDP 5).

In Cox's Bazar (Rohingya and Host Community)

- In Quarter 1, total enrolment across Cox's Bazar (camps), Bhasan Char (BC), and Cox's Bazar host community programmes reached 237,884 children (121,374 boys and 116,510 girls). In the camps, average attendance rates for Early Childhood Education, Primary and Secondary programmes stood at 88.26 per cent (87.95 per cent for boys and 88.58 per cent for girls). UNICEF's education programme was supported by 10,555 volunteers (4,676 female and 5,879 male). In Bhasan Char, UNICEF operates education services through 21 schools, and in Cox's Bazar across 31 camps via 4,521 learning facilities, including 3,086 learning centres. These facilities operate on a two-shift system, with teachers and facilitators covering multiple grades and subjects.
- In response to the devastating fire in Camp 5 in 2024, a new climate-resilient, steel-framed school was inaugurated in February 2025 by the UNICEF Representative, Refugee Relief and Repatriation Commissioner (RRRC) and Camp in Charge (CiC). The new structure is called Phoenix School and replaces 11 bamboo-and-tarpaulin learning centers destroyed by the fire and now provides a safe, protective learning environment for over 700 children in Grades 1-8. The school comprises 10 classrooms, three gender-segregated WASH blocks, one disability-friendly toilet, and two wash stations supplied by a deep tube well, all within a fenced compound. An 18-kW solar system powers lighting and fans, with backup storage sufficient for two days of operation.
- The design, development, and piloting phases of the Rohingya Learning Assessment were successfully completed in collaboration with ACER India. This involved the development, review and finalization of standardized competency tools for Grades 2, 4, 6 and 8 in Burmese, English and Mathematics. It also included performance standard setting, the creation of contextual questionnaires, and the development of a sampling framework. The assessment aims to measure learning outcomes through representative sampling, identify groups being left behind, examine barriers to learning, and propose evidence-based strategies for improvement. It focuses on assessing overall system performance and its contributing factors.

Child Protection, Gender Based Violence in Emergencies (GBViE)

At National Level

- The Child Protection Cluster has developed and finalized the Standard Operating Procedures (SOPs) and Disaster Preparedness Plan (DPP) for all cluster member agencies at both national and sub-national levels. These documents aim to standardize and harmonize emergency preparedness and response strategies across the child protection sector.
- A total of 6,027 dignity kits have been pre-positioned in UNICEF warehouses to support affected and vulnerable adolescent girls and women during upcoming emergencies through the case management services.
- The Child Protection Cluster Workplan for 2025 has been developed and endorsed by the cluster chair and member agencies.
- Efforts are underway to strengthen Child Protection in Emergencies Working Groups (CPiEWGs) in disaster-prone districts and link them up with District Disaster Management Committees (DMCs). A CPiEWG meeting was held in February 2025 in Chattogram, hosted at the Department of Women Affairs (DWA) office and chaired by the Deputy Director, DWA. The meeting focused on strengthening coordination for child protection preparedness and response in Chattogram, with an emphasis on enhancing collaboration with Disaster Management Committees (DMCs) and understanding the capacities of existing child protection and humanitarian actors.

- To strengthen data collection, reporting, and response mapping through the United Nations Resident Coordinator's Office (UNRCO)-led 5W system, an orientation session was conducted for national and sub-national child protection actors on information management and reporting.
- To enhance Inter-Cluster Collaboration, the Child Protection Cluster organized coordination meetings with the Shelter, WASH, Displacement Management and Education Clusters to promote the integration of child safeguarding and risk mitigation measures across the sectors.
- Guidance documents and checklists were developed by the Child Protection section and shared with respective clusters to support integrated response planning and implementation.
- As part of the emergency preparedness efforts, the Child Protection section has been incorporated into the Anticipatory Action (AA) framework initiative for flood response in the Padma Basin. This initiative aims to reduce the impact of predictable shocks by enabling early action based on risk forecasting and early warning dissemination.

In Cox's Bazar (Rohingya and Host Community)

- Child Protection in Emergencies is delivered as part of a broader "public health approach" that focuses on strengthening government-led child protection systems, ensuring sustainability, and cost effectiveness at the national level,
- Service delivery including Case Management, Psychosocial support, Life Skills-based learning, and Positive Parenting, is implemented through 91 multi-Purpose Centers, 7 Safe Spaces for Women and Girls, informal adolescent clubs, and mixed-method outreaches by government social workers, NGO caseworkers, and volunteers.
- A total of 36,463 children and caregivers (19,554 female and 391 persons with disabilities) in Rohingya camps; 2,667 children and caregivers (11,292 female and 3 persons with disabilities) in Bhasan Char; and 11,478 children and caregivers (6,461 female and 119 persons with disabilities) in host communities, have received Mental Health and Psychosocial Support (22 per cent, 13 per cent and 8 per cent of the target in Rohingya Camp, Bhasan Char and host communities respectively).
- A total of 10,274 children and caregivers (7,570 female and 26 persons with disabilities) in Rohingya camps; 283 children and caregivers (235 female) in Bhasan Char; and 2,586 children and caregivers (2,096 female and 13 persons with disabilities) in host communities are accessing GBV prevention, risk-mitigation, and response interventions (16 per cent, 7 per cent and 5 per cent of the target in Rohingya Camp, Bhasan Char and host communities respectively). UNICEF continues to provide leadership, technical support, and financing of the Child Protection Sub-Sector.
- 265 Community-Based Child Protection Committees are actively playing a key role as child protection monitors, referral catalysts, and community champions for children.
- Child rights monitoring, specifically around grave violations by armed forces and armed groups, is being scaled up through the Child Rights Monitoring Mechanism, supported by two new INGO partnerships established in Q1.
- Efforts are underway to improve children's access to child-friendly justice systems, including a dedicated study on how Rohingya children experience justice, and access remedies or redress for rights violations.
- The social service workforce is being strengthened through a dedicated group of 88 social workers from the Department of Social Services (DSS). UNICEF is supporting the establishment of the DSS Child Protection Units in every refugee camp to increase the visibility of social workers, improve coordination, and enhance case management outcomes. In addition, UNICEF's support has been extended to the deployment of up to 30 DSS social workers in Bhasan Char, with the aim of reaching more vulnerable children and improving cost-efficiency.

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

- The PSEA unit trained 114 staff from implementing partners and the third-party monitoring team in Cox's Bazar on PSEA and child-safeguarding.
- In coordination with the inter-agency PSEA network, key messages on PSEA were developed and disseminated across the camps as part of the fire response communication strategy.
- The plan for the scale-up of PSEA and Accountability to Affected Populations (AAP) is currently in its initial stage. The Standard Operating Procedures (SoP) for the Information and Feedback Centre (IFC) on PSEA have been finalized, and the development of a broader scale-up plan, along with a digitalized CFM is underway
- As co-chair of the inter-agency PSEA network in Cox's Bazar, UNICEF's PSEA Unit contributed to the Inter-Agency Risk Assessment on Sexual Exploitation and Abuse (IARA SEA) by leading all focus group discussions (FGDs) with children and providing technical assistance to the process.
- PSEA and child safeguarding indicators have been systematically integrated into all programme designs. To strengthen vendor accountability, a PSEA risk matrix has been included in all CRC submissions.

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

At National Level

- To strengthen preparedness and ensure an effective emergency response, a comprehensive, hazard-specific message repository has been developed and can be activated immediately during emergencies.
- UNICEF, as Co-Chair of the AAP Working Group, facilitated the review and revision of multi-hazard messages, including for cyclones, floods, earthquakes, and heatwaves, covering the preparedness, response, and recovery

phases. These messages, developed through inter-agency coordination, have been widely shared with AAP WG and ICCG members.

- Specific outreach on earthquakes and heatwaves included targeted dissemination in high-risk areas, collaboration with RCCE members, and the use of U-Report polls to generate actionable insights. These messages were disseminated through various channels including broadcast media, social media, CSO partners, and relevant government offices at district and divisional levels.

In Cox's Bazar (Rohingya and Host Community)

- In the Rohingya refugee camps, SBC, through its implementing partners, continued to implement community engagement activities promoting essential family and childcare practices, uptake of services, addressing harmful social norms, and preventing disease outbreaks including dengue and Acute Watery Diarrhoea (AWD)/Cholera, while also providing messaging on natural and man-made disasters such as cyclones, floods, landslides, and drowning. A total of 460,818 individuals (235,476 females, 7,983 persons with disabilities), representing 99 per cent of the targeted Rohingya refugee population, were reached through various SBC approaches.
- As part of the community feedback mechanism, 14 Information and Feedback Centers (IFCs) served as crucial channels for community complaints and feedback. Through the centers, UNICEF received and referred 38,704 complaints, feedback, and queries (21,675 from females and 1,887 from persons with disabilities), with 80 per cent of complaints successfully resolved, demonstrating the effectiveness of the support mechanisms. In the host community, UNICEF and its partners focused on community mobilization to promote positive and protective practices, increase service uptake, and address harmful social norms and practices. A total of 87,784 individuals, including 48,142 females and 1,580 persons with disabilities, were engaged in efforts to promote essential family and childcare practices, prevent disease outbreaks, and combat issues such as child marriage, violence against women and children, and support the promotion of girls' education.
- Through four IFCs, 5,776 individuals, including 4,116 females and 33 persons with disabilities, were referred to relevant government and non-government service providers for further assistance and support. These efforts underscore UNICEF's commitment to fostering community resilience and addressing the unique challenges faced by vulnerable and marginalized populations in the host community.

Humanitarian Cash Transfer (HCT)

- Leveraging its digital platform, the Humanitarian Cash Operations and Programme Ecosystem (HOPE), UNICEF has established a pre-crisis beneficiary database covering 133 upazilas across 16 flood-prone and 7 cyclone-prone districts. The database includes 109,095 households (HHs)—39,993 HHs in cyclone-prone areas and 69,102 HHs in flood-prone areas—pregnant and lactating women with children aged 0–2 years.
- A total of 200 volunteers and 45 staff from CSOs have been trained on HCT, PSEA, AAP, and grievance management, ensuring readiness for rapid response.
- The pre-positioning of a contract with the Western Union, as a Financial Service Provider (FSP) for cash transfers, is in the final stages of review and approval, which will further enable timely disbursement of emergency cash assistance.
- The Cash Working Group (CWG) has been reconstituted, and a review workshop was held on 10 March to assess progress on harmonization of cash packages and targeting criteria, and to identify inter-agency preparedness gaps. The workshop also outlined key preparedness actions for both the Dhaka CWG and the Inter-Cluster Coordination Group (ICCG).

Humanitarian Leadership, Coordination and Strategy

The Government of Bangladesh leads the Rohingya humanitarian response in Cox's Bazar and Bhasan Char. The National Task Force chaired by the Ministry of Foreign Affairs of Bangladesh provides oversight and overall strategic guidance for humanitarian response. In addition, the National Committee on Coordination, Management and Law and Order, led by the Ministry of Home Affairs (MoHA), has been formed in December 2020. The Office of Refugee Relief and Repatriation Commissioner (RRRC) manages and provides oversight to the day-to-day operations under the Ministry of Disaster Management & Relief (MoDMR). The Deputy Commissioner (DC) leads the civil administration and coordinates the responses to the needs of Bangladeshi communities during disasters and ensures security and public order. UNICEF leads the Nutrition and WASH Sectors and Child Protection Sub-Sector and co-leads the Education Sector with Save the Children in Cox's Bazar's Rohingya response and WASH and Education sectors in Bhasan Char, in coordination with the RRRC and the relevant government departments such as department of primary and mass education, department of public health and engineering (DPHE), Department of Social Services (DSS) and others. UNICEF is a core member of the Emergency Preparedness and Response Working Group (EPRWG), and Humanitarian Access Working Group (HAWG). UNICEF is also an active member of the UN-INGO-NGO Disaster Risk Reduction Working Group (DRRWG) which functions in the Office of District Relief and Rehabilitation Officer (DRRO) under the Office of Deputy Commissioner (DC) of Cox's Bazar.

UNICEF is one of the Strategic Executive Group (SEG) members with other UN agencies. The SEG provides overall guidance for the Rohingya humanitarian response and engages with the Government of Bangladesh at the national level. At the field level in Cox's Bazar, the ISCG Secretariat ensures the overall coordination of the response. UNICEF

sector coordinators (for WASH, Education, Nutrition and CP-subsector) are active members of the ISCG. The ISCG Principal Coordinator chairs the Refugee Operations and Coordination Team (ROCT), which brings together the Heads of operational UN Agencies, members of the international and national non-governmental organizations (NGOs), and donor representatives based in Cox's Bazar. The ISCG convenes the Inter-Sector Meeting to ensure intersectoral coordination in the response. The SEG Co-Chairs are leading a process to streamline the coordination system in Cox's Bazar that will be implemented in 2025. In 2022, the humanitarian community finalized a set of Principles of Rationalization that aim to ensure that all Rohingya refugees have equitable access to all basic services in a predictable, efficient, and timely manner and that the humanitarian community is transparent and accountable in its interventions. These principles have played a key role in shaping the strategic direction of the humanitarian response and directly informed the development of the 2025–26 Joint Response Plan. Launched on March 24, 2025, the 2025–26 Joint Response Plan seeks \$934.5 million to assist 1.48 million people, including 1.1 million Rohingya refugees and vulnerable host communities in Bangladesh. Coordinated by UNHCR, IOM, and 113 partners, the plan addresses ongoing displacement, limited self-reliance, and the urgent need for sustained international support.

UN Women, UNFPA, and UNICEF collaborate through the Gender in Humanitarian Action (GiHA), GBV Cluster, and Child Protection Cluster, sharing strategies, assessing tools, and implementing approaches to ensure the immediate safety and protection of women and girls in shelters. This collaboration aims to secure shelters and facilities against gender-based violence (GBV). Leveraging the AAP training conducted in 2024, UNICEF SBC section continued to co-lead the national AAP Working Group (WG) of the Inter-Cluster Coordination Group (ICCG) together with the BBC Media Action.

At the national level, the Inter-Cluster Coordination Group (ICCG), under the Humanitarian Coordination Task Team (HCTT), meets regularly to align its efforts with the Government of Bangladesh's response to the floods and cyclones. The UNRCO updated the Humanitarian Response Plan (HRP) in September 2024 to incorporate the flash floods in north- and south-eastern Bangladesh. The HRP remains adaptable, with goals and resources modified as necessary to prioritize the most affected populations and areas.

The Cluster Coordination Performance Monitoring (CCPM) Preliminary Report 2024 highlights that the clusters demonstrate strong coordination, service delivery, and accountability, with active participation from partners and authorities. Key achievements include good integration of cross-cutting issues and effective advocacy. However, common challenges include weak funding facilitation, limited partner support, and gaps in monitoring and reporting tools. There is a need for improved capacity-building, enhanced information management, and stronger visibility of performance outputs identified in the report.

Human Interest Stories and External Media

UNICEF developed communication and advocacy content, such as press releases, human interest stories, social media messaging, and multimedia assets to raise awareness on and encouraging continued support to respond to all six key programmatic areas¹² of responses for Rohingya and Bangladeshi children and communities, highlighted through the UNICEF Bangladesh website and social media channels. UNICEF Bangladesh is leading among all Country Offices globally in terms of digital media outreach, with over 12 million social media followers.

Stories:

- [Rebuilding Education for Climate and Disaster Resilience in Cox's Bazar](#)

Press releases/statements:

- [35 million children in Bangladesh had schooling disrupted by Climate Crises in 2024—UNICEF](#)

Social Media Posts:

- [How to stay safe during lightning?](#)
- [As climate change worsens – how does it impact children?](#)
- [Climate change is threatening the future of 20 million children in Bangladesh.](#)
- [33 years ago, a cyclone forced Ruma's family to migrate to Cox's Bazar, where safe water was scarce](#)
- [To stay safe in extreme heat:](#)
- [Stay safe in the heat!](#)
- [Keep your children safe in the heat:](#)
- [Expecting a little one? Here's how to stay safe in the heat:](#)
- [Heat exhaustion can be life-threatening! Know the signs & act fast](#)
- [To stay safe in extreme heat](#)

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

¹² They are health and nutrition, education, child protection, water sanitation and hygiene, HIV/AIDS, Social and behavioral change, and other salient child rights issues

- [UNICEF Bangladesh Humanitarian Action for Children Appeal \(HAC\)](#)
- [UNICEF Bangladesh Facebook page](#)
- [2025-26 Joint Response Plan | Rohingya Response](#)

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Annex A. Summary of Programme Results¹³

Sector		UNICEF Response in 2025			Cluster/Sector Response in 2025 ¹⁴		
Indicator	Disaggregation	Target	Total results	Change since last report ▲ ▼	Target	Total results	Change since last report ▲ ▼
NUTRITION							
Children 6-59 months with severe wasting admitted for treatment	Girls	12,582	1,619	-	7,289	1,518	-
	Boys	12,217	1,721	-	7,011	1,586	-
	Person with Disability (PwD) ¹⁵	340	132	-	282	132	-
Primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling	Women	313,940	89,310	-	136,800	79,470	-
	PwD ³	4,173	132	-	18,520	110	-
HEALTH							
Children aged 0 to 11 months who have received the pentavalent 3 vaccine	Girls	86,404	13,786	-			
	Boys	86,840	14,456	-			
	PwD ³	3,850	-	-			
Children and women accessing primary healthcare in UNICEF-supported facilities	Girls	162,111	14,692	-			
	Boys	172,482	17,676	-			
	Women	243,540	11,332	-			
	PwD ³	-	4	-			
Pregnant women including adolescents who received antenatal care (ANC) services in UNICEF-supported health facilities	Girls	-	176	-			
	Women	161,016	10,296	-			
	PwD	1,551	-	-			
Sick newborns who received quality care in UNICEF-supported health facilities	Girls	4,954	721	-			
	Boys	6,449	873	-			
	PwD ³	-	-	-			
Healthcare providers trained in detecting, referral and appropriate management of dengue cases	Men	514	-	-			
	Women	314	-	-			
	PwD ³	-	-	-			
WATER, SANITATION & HYGIENE							
People accessing a sufficient quantity of safe water for drinking and domestic needs	Girls	345,412	94,471	-	308,100	264,112	-
	Boys	357,511	93,224	-	322,716	276,622	-
	Men	510,033	79,158	-	313,743	269,245	-
	Women	517,619	90,698	-	274,547	234,364	-
	PwD	37,656	3,191	-	-	-	-
People use safe and appropriate sanitation facilities	Girls	138,138	94,504	-	308,100	272,260	-
	Boys	151,558	95,421	-	322,716	285,169	-
	Men	190,612	78,062	-	313,743	277,348	-
	Women	192,324	87,674	-	274,547	242,271	-
	PwD	20,494	3,396	-	-	-	-
People reached with handwashing behaviour-change programmes	Girls	317,995	66,005	-	264,823	-	-
	Boys	332,459	60,853	-	277,315	-	-
	Men	465,079	77,926	-	270,745	-	-
	Women	471,468	92,257	-	232,415	-	-
	PwD	23,008	1,952	-	-	-	-
People reached with critical WASH supplies	Girls	107,098	126,848	-	264,823	-	-
	Boys	122,339	132,548	-	277,315	-	-
	Men	140,770	114,995	-	270,745	-	-

¹³ This programme summary results include Flood, Cyclone, Public health emergency, Rohingya refugee, including Bhasan Char and Cox's Bazar host community response

¹⁴ Cluster/Sector response covers Cox's Bazar and Bhasan Char sector-level targets and results only.

¹⁵ There was a challenge to collect disaggregated data for persons with disabilities in the system.

Sector		UNICEF Response in 2025			Cluster/Sector Response in 2025 ¹⁴		
Indicator	Disaggregation	Target	Total results	Change since last report ▲ ▼	Target	Total results	Change since last report ▲ ▼
	Women	141,293	130,817	-	232,415	-	-
	PwD	20,346	23,399	-	-	-	-
CHILD PROTECTION & GENDER-BASED VIOLENCE							
Children and parents/caregivers accessing mental health and psychosocial support	Girls	262,165	15,334	-	42,791	6,558	-
	Boys	261,620	14,716	-	44,854	6,125	-
	Men	285,288	8,585	-	-	-	-
	Women	307,447	11,973	-	-	-	-
	PwD	18,657	513	-	900	74	-
Women, girls, and boys accessing gender-based violence risk mitigation, prevention, and/or response interventions	Girls	128,274	4,258	-			
	Boys	128,240	3,242	-			
	Women	344,088	5,643	-			
	PwD	9,383	39	-			
People who have access to a safe and accessible channel to report sexual exploitation and abuse by aid workers	Girls	329,542	-	-			
	Boys	319,616	-	-			
	Men	429,027	-	-			
	Women	441,584	-	-			
	PwD	29,126	-	-			
EDUCATION							
Children accessing formal or non-formal education, including early learning	Girls	134,563	116,510	-	238,049	156,424	-
	Boys	143,498	121,374	-	250,175	151,308	-
	Men	-	-	-	2,612	1,145	-
	Women	-	-	-	2,720	834	-
	PwD	2,890	1,547	-	14,806	3,310	-
Children receiving individual learning materials	Girls	201,631	117,306	-	238,049	38,299	-
	Boys	209,236	122,078	-	250,175	34,037	-
	Men	-	-	-	2,612	149	-
	Women	-	-	-	2,720	442	-
	PwD	4,709	1,553	-	14,806	959	-
CROSS-SECTORAL (HCT, SBC / ACCOUNTABILITY MECHANISM)							
Households reached with UNICEF-funded humanitarian cash transfers across sectors				-			
	Households	45,000	-				
People reached through messaging on prevention and access to services	Girls	846,247	126,045	-			
	Boys	837,887	123,664	-			
	Men	1,305,449	139,777	-			
	Women	1,349,279	159,116	-			
	PwD	65,195	9,563	-			
People with access to established accountability /feedback mechanisms (CFQ)	Girls	10,750	2,943	-			
	Boys	10,627	2,080	-			
	Men	59,914	17,459	-			
	Women	78,976	23,642	-			
	PwD	3,443	1,934	-			
People engaged in discussion and prevention actions on public health emergencies	Girls	133,142	126,045	-			
	Boys	140,123	123,664	-			
	Men	189,923	139,777	-			
	Women	212,374	159,116	-			
	PwD	15,008	9,563	-			

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

Sector		UNICEF Response in 2025					Cluster/Sector Response in 2025				
Indicator	Disaggregation	Target		Total Results		Change since last report ▲▼	Target		Total Results		Change since last report ▲▼
		Rohingya	Host	Rohingya	Host		Rohingya	Host	Rohingya	Host	
NUTRITION											
Children aged 6 to 59 months with severe acute malnutrition admitted for treatment	Girls	7,548	490	1,553	66	-	7,191	98	1,506	12	-
	Boys	7,252	510	1,658	63	-	6,909	102	1,579	7	-
	CwD	208	9	132	-	-	280	2	132	-	-
Primary caregivers of children aged 0 to 23 months receiving infant and young child feeding (IYCF) counselling	Women	105,700	7,300	51,549	7,761	-	104,700	32,100	50,186	29,284	-
	PwD	1,057	1,322	114	18	-	17,800	720	110	-	-
HEALTH											
Children aged 0 to 11 months who have received pentavalent 3 vaccine	Girls	19,505	44,216	4,323	9,463	-					
	Boys	18,813	44,950	4,449	10,007	-					
	CwD	905	2,318	-	-	-					
Children and women accessing primary health care in UNICEF-supported facilities	Girls	27,610	6,650	10,733	3,959	-					
	Boys	32,106	10,307	13,541	4,135	-					
	Women	40,208	151,332	2,628	8,704	-					
PwD	2,358	2,306	4	-	-						
Pregnant women including adolescents who received antenatal care (ANC) services in UNICEF-supported health facilities	Girls	-	-	176	-	-					
	Women	5,828	103,188	1,220	9,076	-					
	PwD	138	1,414	-	-	-					
Sick newborns who received quality care in UNICEF supported health facilities	Girls	199	2,796	118	603	-					
	Boys	315	4,142	150	723	-					
	CwD	-	-	-	-	-					
WATER, SANITATION & HYGIENE											
People accessing a sufficient quantity and quality of water for drinking and domestic needs	Girls	105,034	10,840	76,974	13,259	-	264,823	3,277	237,281	26,831	-
	Boys	119,966	12,462	77,836	11,232	-	277,315	5,401	248,474	28,148	-
	Women	138,513	14,601	81,724	2,244	-	232,415	2,132	208,243	26,121	-
	Men	137,987	14,617	70,404	2,155	-	270,745	2,998	242,587	26,658	-
	PwD	20,066	1,471	2,999	192	-	-	-	-	-	-
People accessing appropriate sanitation services	Girls	78,202	21,680	78,449	15,631	-	264,823	3,277	237,543	34,717	-
	Boys	89,120	24,924	81,648	13,357	-	277,315	5,401	248,748	36,421	-
	Women	102,373	29,201	80,038	6,962	-	232,415	2,132	208,473	33,798	-
	Men	101,805	29,235	71,303	6,099	-	270,745	42,998	242,855	34,493	-
	PwD	14,866	2,941	3,063	333	-	-	-	-	-	-
People reached with handwashing behaviour-change programmes	Girls	105,034	21,680	49,796	16,209	-	264,823	N/A	-	-	-
	Boys	119,966	24,924	48,784	12,069	-	277,315	N/A	-	-	-
	Women	138,513	29,201	67,828	24,429	-	232,415	N/A	-	-	-
	Men	137,987	29,235	65,889	12,037	-	270,745	N/A	-	-	-
	PwD	20,066	2,941	1,624	328	-	-	-	-	-	-
People reached with critical WASH supplies	Girls	105,034	2,064	126,848	-	-	264,823	N/A	-	-	-
	Boys	119,966	2,373	132,548	-	-	277,315	N/A	-	-	-
	Women	138,513	2,780	130,817	-	-	232,415	N/A	-	-	-
	Men	137,987	2,783	114,995	-	-	270,745	N/A	-	-	-
	PwD	20,066	280	23,399	-	-	-	-	-	-	-
CHILD PROTECTION & GENDER-BASED VIOLENCE											
Children and parents/caregivers accessing mental health and psychosocial support	Girls	62,338	48,431	11,450	3,884	-	31,648	11,143	5,441	1,117	-
	Boys	65,412	47,751	11,526	3,190	-	33,164	11,690	5,183	942	-
	Women	32,783	34,248	9,396	2,577	-	-	-	-	-	-
	Men	28,071	21,468	6,758	1,827	-	-	-	-	-	-
	PwD	3,772	4,253	394	119	-	700	200	66	8	-
Women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions	Girls	19,744	14,625	3,460	798	-					
	Boys	20,764	15,395	2,752	490	-					
	Women	28,301	20,442	4,345	1,298	-					
	PwD	1,376	1,413	26	13	-					
People who have access to a safe and accessible channel to report sexual exploitation and abuse by aid workers**	Girls	129,093	49,053	-	-	-					
	Boys	124,030	47,129	-	-	-					
	Women	141,015	60,153	-	-	-					
	Men	135,485	57,793	-	-	-					
	PwD	12,499	5,996	-	-	-					
EDUCATION											

Sector		UNICEF Response in 2025					Cluster/Sector Response in 2025				
Indicator	Disaggregation	Target		Total Results		Change since last report ▲▼	Target		Total Results		Change since last report ▲▼
		Rohingya	Host	Rohingya	Host		Rohingya	Host	Rohingya	Host	
Children accessing formal or non-formal education, including early learning	Girls	119,450	1,700	115,024	1,486	-	212,615	25,434	151,380	5,044	-
	Boys	129,050	1,300	120,712	662	-	223,131	27,044	147,250	4,058	-
	Women	-	-	-	-	-	815	1,905	636	198	-
	Men	-	-	-	-	-	884	1,728	965	180	-
	CwD	2,485	41	1,538	9	-	13,123	1,683	3,237	73	-
Children receiving individual learning materials	Girls	119,450	1,700	115,024	1,486	-	212,615	25,434	36,764	1,535	-
	Boys	129,050	1,300	120,712	662	-	223,131	27,044	32,943	1,094	-
	Women	-	-	-	-	-	815	1,905	442	-	-
	Men	-	-	-	-	-	884	1,728	149	-	-
	CwD	2,485	41	1,538	9	-	13,123	1,683	913	46	-
CROSS-SECTORAL (HCT, SBC / ACCOUNTABILITY MECHANISM)											
Households reached with UNICEF-funded humanitarian cash transfers across sectors	Households	-	5,000	-	-	-					
People reached through messaging on prevention and access to services	Girls	94,850	17,202	104,149	21,896	-					
	Boys	99,708	18,235	105,859	17,805	-					
	Women	144,836	38,548	132,870	26,246	-					
	Men	126,168	36,015	117,940	21,837	-					
	PwD	10,987	2,651	7,983	1,580	-					
People sharing their concerns and asking questions through established feedback mechanisms	Girls	3,570	300	2,616	327	-					
	Boys	3,580	300	1,968	112	-					
	Women	56,050	12,000	19,853	3,789	-					
	Men	41,800	7,400	15,911	1,548	-					
	PwD	2,478	482	1,901	33	-					
People engaged in discussion and prevention actions on public health emergencies	Girls	94,850	17,202	104,149	21,896	-					
	Boys	99,708	18,235	105,859	17,805	-					
	Women	144,836	38,548	132,870	26,246	-					
	Men	126,168	36,015	117,940	21,837	-					
	PwD	10,987	2,651	7,983	1,580	-					

¹⁴ Data for men is available but not covered by the HPM indicator "Number of women, girls, and boys accessing gender-based violence risk mitigation, prevention and/or response interventions"

* Rohingya column containing both Camp and Bhasan Char targets and progress

** PSEA HPM indicator status will be reported at the end of the year in the final SitRep

Annex B. Funding Status*

Appeal Sector	Funding Requirements*	Funds available						Funding gap	
		Funds Received Current Year (2025)		Total	Resources available from 2024 (Carry-Over)		Total funds available	\$	%
		ORE	ORR		ORE	ORR			
Nutrition	19,902,413	309,012	0	309,012	8,576,157	402,719	9,287,888	10,614,525	53%
Health	24,239,719	734,262	0	734,262	3,938,586	1,449	4,674,298	19,565,421	81%
Water, Sanitation and Hygiene	55,842,256	2,720,228	0	2,720,228	10,055,523	9,522,733	22,298,484	33,543,772	60%
Child Protection/GBV	26,514,089	0	0	0	4,495,401	6,935,493	11,430,893	15,083,196	57%
Education	43,392,978	1,236,052	0	1,236,052	6,641,400	8,424,774	16,302,227	27,090,751	62%
Cross-sectoral (SBC, HCT)	10,643,848	0	0	0	2,032,036	2,235,094	4,267,130	6,376,718	60%
Emergency Preparedness	7,705,408	2,992,636	0	2,992,636	2,184,710	357	5,177,703	2,527,705	33%
Total	188,240,711	7,992,191	0	7,992,191	37,923,812	27,522,619	73,438,623	114,802,088	61%

*As defined in the Bangladesh Humanitarian Action for Children Appeal for 2025, including the Recovery cost