Bangladesh Country Office

Humanitarian Situation Report No. 74

unicef
for every child

Reporting Period: 1 January to 31 December 2025

Highlights

- Nearly 1.2 million refugees live in highly congested camps in Cox's Bazar, with over 140,000 new arrivals since late 2024 further straining services.
- Armed violence remains a major protection concern for Rohingya children in 2025, with widespread violations including recruitment, abduction, killing and maiming, sexual violence, and attacks on education facilities.
- Floods, urban fires, cold waves and public health emergencies continue to impact the most vulnerable in Bangladesh.
- Despite funding constraints, UNICEF reached over 597,000 people with multisectoral life-saving support, including 331,000 children, 47 per cent of the revised HAC target.
- Global donor shifts in 2025 required difficult prioritization of core life-saving services. With the revised appeal only 72 per cent funded, a funding gap of US$ 40 million threatens the continuity of essential services for Rohingya children.

Situation in Numbers

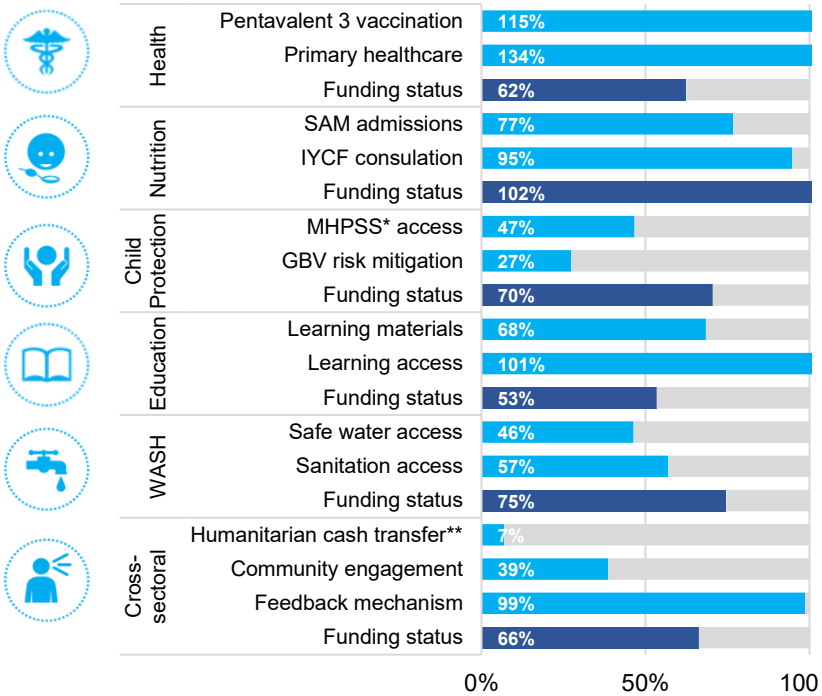
3.3 million
children in need of humanitarian assistance
(UNICEF Revised HAC 2025)[2]

8.1 million
people in need
(UNICEF Revised HAC 2025)

603,734
Rohingya children require assistance
(UNHCR, 31 December 2025)

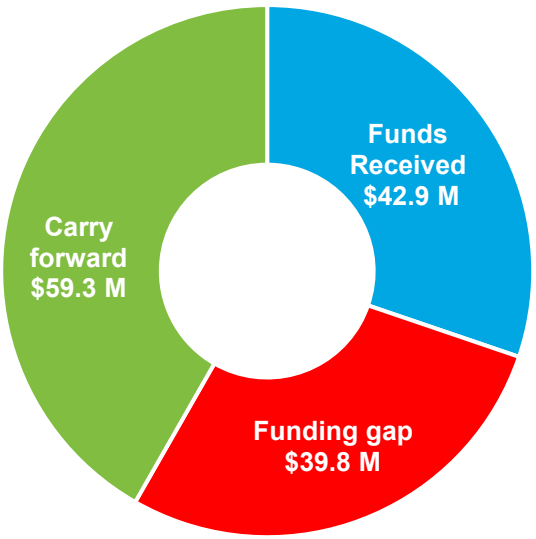
1,177,962
total Rohingya population require assistance
(UNHCR, 31 December 2025)

UNICEF's Response and Funding Status[1]



UNICEF Appeal 2025
US$142 M

Funding Status (in US$)



[1] The 123 per cent over-achievement in the number of children and women accessing primary healthcare is attributed to the additional support provided through the ECHO-funded 2024 Eastern Floods early-recovery intervention.
[2] Bangladesh Appeal (2025) (Rev.1Sep2025) / General - HAC
* Mental Health and Psychosocial Support (MHPSS)
** The households for the Humanitarian cash transfer instead of individual beneficiaries

Funding Overview and Partnerships

Humanitarian needs in Bangladesh remained acute throughout 2025 as pressure on global aid resources intensified. Rohingya refugees and climate-affected communities continued to face compounding risks, while declining international assistance threatened the continuity of essential services across health, nutrition, education, water, sanitation and hygiene (WASH) and child protection. In response, UNICEF, together with humanitarian partners, prioritized available resources to safeguard critical life-saving interventions for women and children, while continuing and initiating cost-saving measures to maximize efficiency and sustain core services.

The 2025 Humanitarian Action for Children (HAC) appeal was revised in the second half of the year to reflect the evolving funding environment and sharpen the focus on Priority 1 life-saving needs, particularly for Rohingya refugees[3]. As part of the revised appeal, UNICEF sought US$142 million to address urgent humanitarian needs arising from the protracted refugee crisis, recurrent climate-related hazards and public health emergencies. In partnership with the Government and civil society organizations, UNICEF continued to deliver integrated, multi-sectoral assistance across WASH, nutrition, education, child protection, health, social and behavior change, and humanitarian cash transfers.

UNICEF expresses its sincere gratitude to all donors for their generous contributions. As of 31 December 2025, UNICEF Bangladesh received a total of US$102 million (72 per cent of the 2025 revised HAC appeal), leaving a funding gap of US$40 million (28 per cent). UNICEF thanks both public and private donors, including Australia, the European Union (ECHO), Education Cannot Wait, GAVI, Germany, the Global Partnership for Education, Japan, Norway, Switzerland (SDC), the Republic of Korea, the United States Government, the United Kingdom (FCDO), UNOCHA CERF, the World Bank, and the UNICEF National Committees in Canada, Denmark, France, Germany, Japan, Luxembourg, Switzerland, the United Kingdom and the United States of America, as well as local donors, for their continued support to vulnerable children, including Rohingya refugees.

Situation Overview & Humanitarian Needs

The protracted Rohingya refugee crisis in Bangladesh remains a major global humanitarian priority. By the end of 2025, approximately 1.2 million Rohingya refugees were living across 33 congested camps in the world's largest refugee settlement in Cox's Bazar and Bhasan Char.[4] New arrivals continue as conflict, insecurity and persecution continue to drive an increasing number of asylum seekers from Myanmar into Bangladesh. Since late 2024, more than 140,000 new arrivals completed biometric registration, enabling them to access humanitarian assistance[5]. Conditions in the camps remained challenging, with constrained access to essential services including education, protection, health care, water and sanitation, heightening risks for women and children and reinforcing the sustained need for humanitarian assistance to preserve basic living conditions and dignity.

In 2025, UNICEF worked with other agencies through the Joint Response Plan (JRP) to safeguard essential services for Rohingya refugees. The aim was to maintain life-saving assistance in a cost-effective way while moving toward a more sustainable system. This meant reorganizing priorities, improving coordination, accountability to affected populations (AAP), localization, and working closely with the Bangladeshi government, development actors and donors. In education, however, the temporary closure of learning facilities and reduction in classroom hours/school days, reduced learning hours for children.

The situation of armed violence continued to impact children in the Rohingya refugee camps. Serious child rights violations perpetrated by armed groups have been documented through the Child Rights Monitoring Mechanism throughout the reporting period. In 2025, 2,200 incidents affecting 2,900 children were reported. Recruitment and use of children by armed groups was the most frequently reported violation, with 663 incidents affecting 929 children, most of whom were boys. Abduction or kidnapping accounted for 652 incidents affecting 735 children. A total of 52 children were reported to have been killed and 528 injured due to the actions of armed groups. Reports of sexual violence are a serious concern, with 254 children reported to have been affected. Two incidents involving attacks on or use of learning centres, schools and other facilities serving children were reported, affecting three boys. Four incidents of denial of humanitarian access were reported.

Humanitarian conditions in Bangladesh are further compounded by recurrent natural and human-induced shocks. Even though no major floods or cyclones were experienced in 2025, numerous other incidents were reported. In 2025, 2,900 incidents, including fires, drowning, windstorms, floods, landslides and lightning, were recorded across Cox's Bazar camps, affecting 24,000 households and 115,400 people[6]. These incidents resulted in 43 deaths, 284 injuries, five missing persons and secondary displacement of up to 10,900 individuals. In Bhasan Char, 227 hazard-related incidents affected 382 households and 1,300 people, resulting in nine deaths, including three children.

Public health emergencies[7] continued to pose significant risks for the most vulnerable in Bangladesh. In 2025, 103,000 dengue cases were reported nationwide, with 413 deaths, representing a 28 per cent decrease compared to 2024. The

[3] The appeal prioritized life-saving interventions under Priority 1, emphasizing rationalized, cost-efficient, and localized delivery. Priority 1 interventions are defined as activities that are life-saving or critical activities that are absolute red flags for funding gaps. Funding breaks would result in death or severe harm/risks to refugees. It was aligned with the prioritized Joint Response Plan (JRP) 2025 for the Rohingya refugee response, and the Humanitarian Response Plan (HRP) 2024-2025 for Cyclone and Monsoon Floods.
[4] GOB-UNHCR Population Dashboard 31 December 2025
[5] Document - Joint Government of Bangladesh - UNHCR Population Dashboard Bhasan Char as of December 2025
[6] IOM BANGLADESH - NEEDS AND POPULATION MONITORING (NPM)
[7] https://dashboard.dghs.gov.bd/pages/index.php

reduction coincided with strengthened prevention and response efforts, including UNICEF-supported Health and SBC interventions aimed at improving early detection, community awareness, and care-seeking behaviours. In the Rohingya camps, 9,500 dengue cases and six deaths were recorded. Acute watery diarrhoea (AWD) also remains a major concern, with 1.8 million cases reported nationwide in 2025. In the camps, 103,900 AWD cases were reported alongside 59 confirmed cholera cases, highlighting persistent WASH and public health vulnerabilities.

A mild cold wave towards the end of the year increased health risks nationwide. According to the Directorate General of Health Services (DGHS), between 1 November and 31 December 2025, over 102,000 cases of cold-related acute respiratory infections and diarrhoeal diseases were reported, resulting in 48 deaths. Children under five and those in inadequate shelter conditions were particularly exposed to seasonal climate variability.

A fire in the Korail informal settlement in Dhaka affected more than 2,600 vulnerable households. UNICEF responded to a request from the Government, providing emergency assistance in coordination with national authorities to 10,400 people with WASH, child protection and health interventions, and demonstrating continued readiness to support government-led responses to localized but high-impact urban emergencies. A moderate earthquake in November 2025 (of magnitude 5.7) and a minor one in December 2025 (4.1 magnitude)[8] underscored persistent seismic risks and the potential for a larger-scale event with significant humanitarian consequences.

In 2025, the humanitarian community, including UNICEF, focused on delivering Priority 1 life-saving services in Cox's Bazar, Bhasan Char and climate-affected areas nationwide. By the end of the year, UNICEF reached 47 per cent of its revised HAC 2025 target (74 per cent for the Rohingya response), delivering multi-sectoral assistance to 597,000 refugees and other affected populations. Significant unmet needs persist, particularly in education, WASH and nutrition services, underscoring the need for sustained humanitarian engagement and sufficient funding to prevent deterioration in the wellbeing of children and vulnerable communities.

Summary Analysis of Programme Response[9]

Water, Sanitation, and Hygiene (WASH)

In 2025, a total of 510,200 people (46 per cent of the target), including 337,000 Rohingya refugees in Cox's Bazar and Bhasan Char, accessed a sufficient quantity of clean water for drinking and domestic use.

In Cox's Bazar (Rohingya and Host Community)

In Cox's Bazar, 316,000 Rohingya refugees accessed safe water, basic sanitation and essential hygiene services across the camps. In response to the Teknaf water crisis, 149,000 refugees and 10,000 host community members received emergency water supply through water trucking. Hygiene support included monthly soap distributions to 569,000 refugees and menstrual hygiene management kits for 173,000 women of reproductive age.

Among host communities, 108,700 people were provided with safe and reliable water supply, while 81,800 people benefited from improved sanitation services. Hygiene behavior change activities reached 129,500 people, while 19,600 women of reproductive age received menstrual hygiene management support. WASH services were strengthened in public institutions, benefiting 43,400 students in 287 schools and 45,800 people, including patients, caregivers and health staff, in 134 health care facilities across the district. Funding constraints limited WASH service quality and coverage, affecting the ability to meet national standards for water quality, gender-segregated and disability-inclusive sanitation, and adequate menstrual hygiene management facilities. As a result, services remained below overall demand in both refugee camps and host communities.

At National Level

UNICEF implemented the eastern floods response and recovery project in Feni and Noakhali, and a flood response in Hatiya, reaching 36 per cent of the annual WASH national target for national emergencies, including floods, cyclones and public health emergencies. As part of the eastern floods' response and recovery, UNICEF supported the construction of climate-resilient WASH infrastructure, including deep and raised tube wells, solar-powered piped water networks, twin-pit and disability-friendly latrines to enhance resilience of the disaster impacted communities. These interventions provided access to safe drinking water to 64,600 people, including 27,500 children, improved sanitation for 7,700 people (including 931 persons with disabilities) and reached 47,600 people through hygiene promotion activities delivered through schools and community sessions.

Following the Korail fire, UNICEF provided emergency WASH assistance to 10,400 people[10], which included the distribution of 5,000 jerry cans and deployment of six mobile toilets. The response was delivered through coordinated inter-agency action with WFP and UNFPA, and in close coordination with local authorities and other service providers.

[8] Bangladesh Meteorological Department, November 2025.
[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.
[10] NAWG Assessment, 27 November 2025

Emergency preparedness was strengthened through the rollout of the Digital Supply Management System jointly with the Department of Public Health Engineering (DPHE), enhancing real-time tracking, transparency and accountability of emergency WASH supplies stored in 35 warehouses across disaster-prone districts. Capacity strengthening activities were conducted across 41 disaster-prone districts, and warehouse renovations in Natore and Bandarban Hill districts are underway to reinforce the decentralized response capacity.

UNICEF continued to co-lead the WASH Cluster with DPHE, strengthening coordination, localization and integrated preparedness. Key achievements included contributions to the Humanitarian Preparedness and Response Plan, district-level coordination in cyclone-prone areas, contributing to the revised humanitarian coordination architecture following the global humanitarian reset, and inter-cluster coordination with GBV and Food Security clusters. The Cluster Coordination Performance Monitoring exercise was activated to identify priorities amid funding constraints and inform actions to improve service delivery.

Nutrition

In 2025, nutrition response and recovery interventions reached 287,300 children and caregivers (86 per cent of the target), including 102,000 (35 per cent) Rohingya refugees with severe acute malnutrition (SAM) treatment for children 6-59 months and infant and young child feeding (IYCF) counselling for primary caregivers of children 0-23 months.

In Cox's Bazar (Rohingya and Host Community)

In Cox's Bazar, 12,900 Rohingya refugee children under five, including 6,300 girls and 514 children with disabilities received SAM treatment in integrated nutrition facilities (89 per cent of the target). Additionally, in Bhasan Char, 397 children, including 183 girls, received SAM treatment (132 per cent of the target). A total of 83,800 Rohingya pregnant and lactating women and caregivers of children 0-23 months received counselling and messaging on IYCF, reaching 83 per cent of the target. In Bhasan Char, 4,900 mothers received similar counselling and messaging to promote optimal IYCF practices (104 per cent of the target). In host communities, 968 children (545 girls) with SAM and medical complications received life-saving treatment (97 per cent of the target) and 121,300 mothers received counselling and messaging to promote optimal IYCF practices (157 per cent of the target)[11].

In 2025, nutrition service delivery continued without major operational disruptions, as adequate supplies and operational funding had been secured. Services such as the management of severe wasting, maternal nutrition and IYCF counselling at integrated nutrition facilities and stabilization care were able to continue without interruptions. However, due to prioritization, UNICEF had to scale down capacity-building activities, such as refresher training, selected monitoring and quality-improvement initiatives, and awareness-raising activities such as the World Breastfeeding Week. While these reductions did not significantly affect service delivery, they may impact longer-term service quality, resilience and system strengthening.

At National Level

UNICEF supported life-saving nutrition interventions at the national level in collaboration with the Ministry of Health and Family Welfare, the National Nutrition Services and the Institute of Public Health Nutrition. A total of 420 children aged 6-59 months with severe wasting, including 218 girls, were admitted for treatment, representing 58 per cent of the target. In parallel, 62,600 primary caregivers of children aged 0-23 months received IYFC counselling, achieving 86 per cent of the target, contributing to prevention of malnutrition and improved caregiving practices.

To strengthen evidence-based planning and emergency nutrition prioritization, a SMART survey was conducted in 11 high-risk districts, informing Bangladesh's first-ever IPC Acute Malnutrition analysis, completed in April 2025. The analysis identified a high risk of acute malnutrition among up to 1.6 million children under five, with several districts and Rohingya refugee camps classified as IPC AMN Phase 3 (Serious). Key drivers of acute malnutrition include poor dietary diversity, high prevalence of diarrhoeal diseases and inadequate WASH services. Findings were disseminated through a high-level national workshop held on 29 October 2025, providing critical data for emergency target-setting and resource mobilization.

Nutrition coordination and preparedness were strengthened through the Cluster coordination, including the Coordination Performance Monitoring report with key preparedness actions for cyclone and monsoon responses. In December 2025, a training on nutrition in emergencies was conducted for 33 participants from government, UN agencies, INGOs and NGOs, covering screening, identification and management of severe acute malnutrition, as well as cross-cutting issues including PSEA, accountability to affected populations and cluster coordination mechanisms.

Health

In 2025, 301,000 women and children, (134 per cent of the target), including 3,800 persons with disabilities and 94,700 (31 per cent) Rohingya refugees accessed primary healthcare through UNICEF-supported facilities.

[11] The overachievement was driven by stronger service delivery, improved reporting, and higher demand. New Upazila managers and permanent staff boosted performance and data accuracy, while new medicines and ongoing community awareness efforts increased clinic visits. WFP and IMCI-N programmes, along with seasonal disease outbreaks, also contributed to higher attendance.

In Cox's Bazar (Rohingya and Host Community)

In 2025, UNICEF supported the delivery of essential immunization and maternal and newborn health services, with a focus on sustaining routine services and strengthening system resilience. By the end of December, 116,800 children aged 0-11 months, including 57,200 girls, received Pentavalent-3 vaccination, achieving 92 per cent of the annual target. In addition, 131,300 people accessed quality healthcare services through medical consultations in UNICEF-supported facilities (131 per cent of the annual target).

Quality antenatal care services were provided to 26,900 pregnant women, including adolescents, achieving 100 per cent of the target. Newborn resuscitation and stabilization were provided to 6,300 sick newborns (2,900 girls) across six UNICEF-supported 24/7 health facilities, reaching 80 per cent of the target. Notably, 1,100 sick Rohingya newborns representing 18 per cent of all treated cases, were successfully treated in the Special Care Newborn Unit and in the six Newborn Stabilization Units (NSUs), demonstrating the impact of UNICEF's maternal and newborn health interventions.

Vaccination campaigns complemented routine services. The typhoid conjugate vaccine campaign reached 424,200 children in the Rohingya camps and 14,200 children in Bhasan Char, achieving coverage of over 85 per cent of the target population aged 9 months to under 15 years. A dissemination workshop in Cox's Bazar shared campaign results and introduced human papillomavirus vaccination into routine immunization, alongside the use of the Open Smart Register Platform for digital record keeping in the camps. Following a fire that destroyed the health post in Camp 4 in late December, UNICEF provided emergency support through the provision of a power generator, enabling rapid restoration of essential life-saving health services.

Funding constraints and insecurity continued to affect health service delivery. Budget shortfalls resulted in healthcare workers in six primary healthcare centres receiving only half of their salaries for two months. At the same time, critical infrastructure improvements such as fireproofing of health facilities and replacement of obsolete biomedical waste management systems could not be implemented. Insecurity after dark increased personal safety risks for night shift health workers. Approximately one in five Rohingya refugees is living with Hepatitis C, and the high cost of treatment remains a major unmet health need. In addition, the arrival of more than 140,000 Rohingya refugees since 2024, many of whom were unvaccinated, heightened the risk of preventable disease outbreaks and placed further pressure on already stretched health services.

At National Level

UNICEF implemented the eastern floods recovery interventions, reaching more than 150,000 people, including 89,500 children under-five receiving Integrated Management of Childhood Illness services, 50,700 infants completing Penta-3 vaccination and 20,600 pregnant women accessing antenatal care. In addition, 116 pregnant and lactating women received safe delivery and postnatal care referred by the humanitarian cash assistance programme. Over 200 union-level health facilities and community clinics were repaired or renovated, and maternal, newborn and child health services were delivered across 10 flood-affected Upazilas through the Reaching Every Mother and Newborn (REMN) Lite programme, strengthening routine service delivery capacity.

UNICEF's Health Emergency Preparedness and Response programme focused on strengthening health system resilience through post-emergency recovery, while maintaining readiness to respond to new health shocks. In response to the Cyclone Remal and the eastern floods of 2024, recovery efforts in Feni, Noakhali and coastal districts prioritized the restoration and institutionalization of routine maternal, newborn and child health services. These efforts, led by the government through the REMN approach, were completed in mid-2025.

Dengue preparedness and response remained a priority in 2025, particularly in Barishal Division, which experienced the highest disease burden in the country. Clinical readiness was strengthened through training of 700 doctors and nurses on national dengue management guidelines, alongside dengue death reviews and data analysis to support accountability and rapid corrective actions at the facility level. Surveillance and coordination were reinforced through an upgraded dengue dashboard with real-time indicators. At the community level, social and behaviour change activities and youth-led engagement reached over 5,500 people through school sessions, community dialogues and cleaning campaigns, promoting household-level prevention of dengue.

In response to a COVID-19 surge, UNICEF supported the DGHS with 81,100 rapid antigen test kits and strengthening coordination, alongside prevention messaging that reached nearly 500,000 people, while maintaining continuity of essential health services.

Education

In 2025, UNICEF supported a total of 254,300 children (101 per cent of the target), including 2,700 children with disabilities, to access formal or non-formal education, including early learning. Of these, 252,000 (99 per cent) were Rohingya.

In Cox's Bazar (Rohingya and Host Community)

Throughout 2025, UNICEF continued to deliver education services for Rohingya refugees and host community children, reaching 254,300 children, including 123,600 girls, despite severe funding constraints that delayed the reopening of all

primary grade classes for up to four months. UNICEF reprogrammed funds and secured additional support, enabling learning facilities to reopen and operate for most of the year.

Funding shortfalls required careful prioritization of activities to safeguard essential services. As part of cost-saving measures, the engagement of host community volunteer teachers with UNICEF´s implementing partners was discontinued, which led to protests and disruption over several months. Mitigation measures were implemented, including offering 1,179 former volunteers access to a three-month functional English and occupational training course, which 181 completed. The former teachers were also invited to sit an independent English competency assessment with Bangladesh Open University. A total of 99 former volunteers passed the assessment of whom 70 rejoined the programme in 2026. Despite disruptions, progress was recorded in girls' education, with the number of adolescent girls in secondary education increasing from 17 to 29 per cent of the total over the past three years, (from 1,803 girls in Grades 6-9 in 2022, to 6,493 in 2025). This shows progress in girls' retention in school as, initially, secondary grades were a barrier for girls but now more girls complete primary and start Grade 6, the first class of secondary education, compared to the past. In addition, 500 adolescent girls and their caregivers participated in a pilot programme to strengthen girls' agency and support retention in education, with evidence generation ongoing.

UNICEF continued to strengthen inclusive and quality education. A total of 2,200 children were identified as living with disabilities through structured screening and assessment, strengthening referral and inclusion mechanisms. Teacher capacity was strengthened through a training programme developed in collaboration with the Asian University of Women, targeting Rohingya and Bangladeshi volunteers and implementing partner staff. In 2025, 742 volunteer teachers, including 646 Rohingya refugees, were trained on the Myanmar Curriculum subject knowledge and subject specific pedagogies for Grades 3–5.

To support evidence-based programming, UNICEF, in partnership with the Australian Council for Educational Research (ACER) India, completed the first Rohingya Learning Assessment in Cox's Bazar and Bhasan Char. The assessment engaged over 15,000 learners, teachers and education personnel across Grades 2, 4, 6 and 8, generating critical evidence on learning levels and barriers that will inform programme adjustments and learning recovery efforts in 2026.

At National Level

Education services in Bangladesh continued without major disruption, allowing UNICEF to focus on preparedness, anticipatory action, and targeted support for the most vulnerable children. Early in the year, 50 education in emergency (EiE) kits were provided to 10 primary schools in Dacope Upazila, reaching around 1,500 children from cyclone-prone and extremely poor communities. UNICEF coordinated with government and partners to rapidly distribute 70 EiE kits, supporting 2,100 affected learners affected by the fire in Korail.

A key achievement in 2025 was progress in strengthening preventive school safety practices. As a result of sustained advocacy, the Directorate of Primary Education (DPE) issued advanced heatwave protection guidance to schools in northern districts and dengue prevention instructions ahead of peak transmission periods, marking a shift from reactive to anticipatory preparedness. UNICEF supported the development of the School Risk and Vulnerability Assessment Tool and Guidelines, as well as a learning continuity model for emergencies. To strengthen future response capacity, 1,350 EiE kits and 200 learning kits were pre-positioned in strategic locations nationwide.

Child Protection and Gender Based Violence

In child protection, 229,200 children, adolescents, and caregivers (47 per cent of the target), including 2,800 persons with disabilities accessed community-based mental health and psychosocial support, of whom 166,700 (73 per cent) were Rohingya.

In Cox's Bazar (Rohingya and Host Community)

During the year, 212,000 children and caregivers benefited from psychosocial support services, including 159,600 in the Rohingya camps, 7,100 in Bhasan Char, and 45,400 in the host communities. In addition, 48,200 children and women accessed gender-based violence (GBV) prevention, risk-mitigation and response services, including 37,700 in the Rohingya camps, 1,100 in Bhasan Char and 9,400 in host communities. These interventions addressed widespread mental health and psychosocial needs and contributed to reducing risks of violence.

UNICEF continued to deliver child protection and GBV services in humanitarian settings as part of the broader child protection programme in Bangladesh. In Cox's Bazar and Bhasan Char, life-saving services for Rohingya refugee children were anchored in systems-strengthening approaches, supporting resilience and bridging humanitarian and development interventions to promote more sustainable outcomes for all children.

The response focused on the provision of integrated services, comprising case management, psychosocial support, life skills-based learning, and guidance on positive parenting to caregivers. These services were delivered through 92 multi-Purpose Centers, 10 safe spaces for women and girls, 316 informal adolescent clubs, and mixed-method outreach by government social workers, NGO caseworkers, and volunteers. In parallel, 321 Community-Based Child Protection Committees played an active role in identifying child protection concerns and referring children to case workers for case management and other support.

UNICEF continued to provide leadership, technical support, and financing for the Child Protection Sub-Sector, while strengthening the social service workforce. The deployment of DSS social workers and the establishment of 11 Child Protection Units significantly strengthened referral systems and improved children's access to specialized protection services. Government social workers were also deployed on rotation to Bhasan Char, contributing to longer-term system strengthening through a nexus approach.

At National Level

UNICEF, in partnership with the DSS and the Ministry of Social Welfare, provided Mental Health and Psychosocial Support Services (MHPSS) to 17,000 people, including children, adolescents and caregivers, in response to the flash floods in June. The response reached 12,000 women and girls and 260 persons with disabilities and strengthened community-based coping mechanisms, while enhancing the capacity of government and NGO social workers to deliver structured psychosocial support in line with the Child Protection Minimum Standards. Additionally, 36,000 children were reached with MHPSS via the 1098 Helpline in emergency and climate-affected areas.

In collaboration with the Ministry of Women and Children Affairs (MoWCA) and DSS, UNICEF supported GBV risk mitigation, prevention, and response interventions reaching 11,000 individuals, including 9,000 women and girls and 150 persons with disabilities. Activities included dissemination of lifesaving information on referral pathways, case management, capacity building of case workers, and strengthening of survivor-centred response services within national and sub-national systems. Additionally, more than 240,000 women and children participated in harmful practices prevention support in Child Protection Community Hubs in emergency and climate-affected areas, with a focus on GBV and the prevention of child marriage.

Following the Korail fire, UNICEF provided emergency family kits to 2,000 affected households, reaching an estimated 10,000 people, to support them meet their immediate needs, including basic household items, clothing and hygiene materials. The response was delivered through a coordinated inter-agency action with WFP and UNFPA, and in close coordination with government counterparts. Child protection case management was initiated to assess needs and facilitate referrals to appropriate protection services.

UNICEF continued to support government-led Child Protection in Emergencies coordination at national and sub-national levels, maintaining cluster mechanisms and working through the Humanitarian Coordination Task Team to strengthen inter-cluster collaboration. Coordination between Child Protection in Emergencies Working Groups and District Disaster Management Committees was enhanced to integrate child protection priorities into local contingency plans. In June 2025, preparedness actions and capacity gaps were reviewed through a coordination meeting in Sylhet ahead of the upcoming monsoon season.

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

In 2025, a total of 157,600 people (5,600 with disabilities and 99 per cent of the target), including 120,700 (77 per cent) Rohingya refugees shared their concerns and asked questions through established feedback mechanisms.

In Cox's Bazar (Rohingya and Host Community)

UNICEF-supported SBC interventions reached 486,000 Rohingya refugees across the camps and an additional 10,000 people in Bhasan Char, achieving 100 per cent of the annual target. The reach included 12,200 persons with disabilities. Activities such as household visits, group sessions and community consultations promoted essential family and childcare practices, routine and typhoid conjugate vaccine uptake, prevention of disease outbreaks including dengue and AWD/cholera and strengthened community resilience to natural and human-induced hazards. Community feedback and accountability mechanisms remained strong. Through 14 Information and Feedback Centres, 120,700 complaints, feedback items and queries were received, including 67,100 from women and girls, and 4,900 from persons with disabilities. Approximately 90 per cent of the cases were resolved, contributing to increased transparency and trust.

In host communities, UNICEF and partners reached 129,800 people, including 2,800 persons with disabilities, achieving 106 per cent of the target through community engagement activities. Interventions promoted positive family care practices, prevention of AWD and dengue, and addressed harmful social norms such as child marriage and violence against women and children, with a strong focus on girls' education and gender equality. Referral pathways were strengthened through four information and feedback centres in host communities, which referred 21,900 individuals to government services, including 13,500 women and 519 persons with disabilities, improving access to essential services and supporting resilience among vulnerable host community members.

Security and funding constraints disrupted SBC activities, as recurrent insecurity limited field access and reduced community engagement, while funding shortfalls led to delays or suspension of follow-up actions and reduced distribution of hygiene-related messaging and supplies. These challenges affected outreach, continuity and monitoring of SBC interventions.

At National Level

UNICEF's SBC and Community Engagement & Accountability work focused on supporting agile, community-centered emergency response while strengthening preparedness and accountability to affected people. Lifesaving messages on cyclones, floods, heatwaves and lightning were developed and validated in advance with key government and civil society partners, enabling their immediate dissemination when emergencies occur. UNICEF strengthened accountability to affected populations by capacitating 75 government and civil society partners on core AAP principles and, as co-lead of the AAP Working Group, supported Nutrition Cluster partners to advance people-centred approaches.

Community listening on dengue, floods and fire outbreaks generated real-time insights into community concerns and information needs, directly informing adaptive SBC actions. In partnership with the Centers for Disease Control, UNICEF supported the Risk Communication and Community Engagement coordination on dengue prevention at national and sub-national levels. In Barisal, Rangpur, Chittagong and Mymensingh Divisions, youth volunteers, religious leaders, community media and civil society partners mobilized communities through dialogue sessions, interpersonal communication and local outreach sessions. As a result, 504,100 people were reached with key dengue prevention messages, strengthening community awareness, preparedness and collective action.

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

In 2025, UNICEF led the Inter-Agency PSEA Network in conducting the first national SEA Risk Assessment in Bangladesh, covering seven divisions, 13 districts and six Rohingya camps. The assessment generated detailed risk profiles and informed targeted mitigation measures, strengthening programme safety and safeguarding across humanitarian operations.

UNICEF completed 100 per cent of PSEA capacity assessments for partners using the UN PSEA Harmonized Toolkit, strengthening safeguarding systems through engagement with civil society organizations. In Cox's Bazar, 520 individuals were trained on PSEA and child safeguarding, including 362 staff from implementing partners and 158 UNICEF staff. In coordination with the Inter-Agency PSEA Network, training of trainers on the UN Victim Assistance Protocol was conducted for 25 participants, strengthening sustainable victim support capacity.

End-year PSEA monitoring indicated that 793,500 people, including 381,400 children, across the Rohingya camps, Bhasan Char and host communities in Cox's Bazar had access to safe reporting channels. All sexual exploitation and abuse cases were reported to the Office of Internal Audit and Investigation, and 100 per cent of survivors received victim-centered assistance. In parallel, UNICEF worked to strengthen the AAP and PSEA action plan and advanced the development of digital Complaint, Feedback and Response Mechanism.

Humanitarian Cash Transfer (HCT)

In 2025, UNICEF provided multi-purpose cash transfers under the Mother and Child Benefits Program of the MoWCA to 1,675 flood-affected households across six flood-affected Upazilas in Cumilla and Noakhali, reaching 5,100 people, including 131 persons with disabilities. The response prioritized pregnant and lactating women with children aged 0-4 years, including 116 breastfeeding mothers who received targeted support. Each household received 6,000 Bangladeshi Taka (approximately US$50) via mobile money, covering approximately 60 per cent of the Minimum Expenditure Basket, and reinforcing linkages between cash assistance, antenatal care and facility-based deliveries during emergencies. The goal of the program is to provide shock-responsive social protection to vulnerable women during disasters.

National preparedness for cash-based assistance was strengthened through the expansion of the Humanitarian Cash Operations and Programme Ecosystem (HOPE) database, which now includes 120,600 pre-identified households across 133 Upazilas in 16 flood-prone and seven cyclone-prone districts. Inter-agency coordination was reinforced through the reconstitution of the Cash Working Group and through a successful national workshop to harmonize priority actions for 2025 and beyond.

During this reporting period, up to 355 personnel, including volunteers and CSO staff, were trained on HCT protocols, PSEA and grievance management. AAP was strengthened through 90 community meetings and door-to-door consultations involving more than 1,100 community members, alongside post-distribution monitoring to ensure transparency, inclusion and alignment with community needs.

Humanitarian Leadership, Coordination and Strategy

To address the urgent funding gaps, the humanitarian community launched a JRP prioritization exercise in mid-2025, identifying Priority 1[12] life-saving activities for implementation during the second half of 2025. To address additional humanitarian pressures, a Flash Appeal was launched on 15 July 2025 to respond to the urgent needs of newly arrived Rohingya refugees. In line with the JRP prioritization, UNICEF and partners realigned programming to safeguard critical cross-sectoral Priority 1 interventions, reprogramming available resources to sustain life-saving activities in Education, WASH, Child Protection, Health and Nutrition. As of 31 December 2025, the revised JRP was 46 per cent funded, with US$434.5 million received against the required US$964 million[13].

[12] Priority 1 needs are defined in the prioritized 2025 Joint Response Plan as humanitarian activities budgeted at the absolute minimum required to save lives through basic assistance/services. https://data.unhcr.org/en/documents/details/117794, pg. 4

[13] Rohingya Refugee Response Bangladesh: JRP 2025-26 – Funding update.

UNICEF has worked to significantly reduce costs and increase sustainability by integrating health and nutrition programming and merging the coordination of health and nutrition volunteers on one common platform. A humanitarian reset was undertaken, prioritizing cost-efficiency for the Rohingya refugee response. A lighter ISCG Secretariat structure and streamlined national coordination architecture have been put in place to improve efficiency and localization. Measures such as double hatting of roles, integrated service delivery, co-location of services, and greater engagement of Rohingya refugees aim to enhance sustainability, strengthen local ownership, and ensure a more cost-effective response.

The Government of Bangladesh continues to lead the Rohingya humanitarian response in Cox's Bazar and Bhasan Char. The National Task Force, chaired by the Ministry of Foreign Affairs, provides strategic oversight, while the Ministry of Home Affairs chairs the National Committee on Coordination, Management and Law and Order. The Office of the Refugee Relief and Repatriation Commissioner manages daily refugee response operations under the Ministry of Disaster Management and Relief. The Deputy Commissioner of Cox's Bazar leads the civil administration, coordinating responses for host communities and maintaining law and order.

UNICEF leads the Nutrition and WASH sectors and the Child Protection Sub-Sector and co-leads the Education Sector with Save the Children in Cox's Bazar and Bhasan Char. Coordination is maintained with relevant government departments, including the DPHE, the DSS, and the DPE. UNICEF is also an active member of key coordination bodies, including the Core Technical Task Team of the Emergency Preparedness and Response Working Group, the Humanitarian Access Working Group, and the UN-INGO-NGO Disaster Risk Reduction Working Group. UNICEF co-leads the Risk Communication and Community Engagement Technical Working Group in Cox's Bazar, contributing to disease prevention and strengthened community engagement.

At the national level, UNICEF continues to co-lead the Nutrition, Education, and WASH clusters and the Child protection sub-cluster, and co-leads AAP Working Group with the BBC Media Action, under the Inter-Cluster Coordination Group. UNICEF also works closely with UN Women and UNFPA through the Gender in Humanitarian Action, GBV Cluster, and Child Protection Cluster to ensure the safety and dignity of women and girls in shelters and community spaces. In addition, UNICEF coordinates closely with other UN agencies in delivering services for the Rohingya refugees. In addition, UNICEF, UNFPA and WFP collaborated closely during the Korail fire emergency response, maximizing impact while minimizing duplication in the response.

UNICEF is a member of the Strategic Executive Group (SEG), which provides overall direction for the Rohingya humanitarian response and engages with the Government of Bangladesh at the national level. At the field level, the ISCG Secretariat ensures inter-sectoral coordination through the Inter-Sector Meeting and the Refugee Operations and Coordination Team. The SEG Co-Chairs are currently leading a process to streamline the coordination architecture in Cox's Bazar, in line with the 2025 rationalization principles and the broader humanitarian reset.

Human Interest Stories and External Media

UNICEF developed communication and advocacy content, such as press releases, human interest stories, social media messaging, and multimedia assets to raise awareness on and encouraging continued support to respond to all six key programmatic areas[14] 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 12.5 million social media followers.

Stories:

- Rebuilding Education for Climate and Disaster Resilience in Cox's Bazar
- A Path to Safe Water in a Changing Climate
- 5 things UNICEF has been doing on Menstrual Hygiene Management in Bangladesh
- From Flood to Future: Resilience through Every Drop of Water
- A Father's Story of Farid, Feni and Floods
- Chikungunya explained: Risks, Symptoms and Prevention
- Dengue: How to keep children safe

Press releases/statements:

- 35 million children in Bangladesh had schooling disrupted by Climate Crises in 2024—UNICEF
- Toward a Climate-Resilient Bangladesh: NDC 3.0 Puts Children's Rights at the Heart of Action

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

[14] They are health and nutrition, education, child protection, water sanitation and hygiene, HIV/AIDS, Social and behavioural change, and other salient child rights issues

- 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
- Feeling high fever, body ache, rash or nausea?
- A mother's first priority in a crisis?
- 🚨 Dengue cases are rising across Bangladesh
- Fires. Floods. Landslides.
- The first climate-resilient school in the camps
- Swiss Development and Cooperation helping protect children & families from the impacts of climate change
- Heavy rain in remote areas of Nijhum Dwip
- Emergency supplies prepositioned in multiple divisions in Bangladesh
- Water crisis in Tekna
- Access to safe drinking water in Noakhali and Feni
- Devastating fires in the Rohingya refugee camps
- Preparation goes a long way during an earthquake
- 🚨 Heat exhaustion can be life-threatening! Know the signs & act fast
- Video: Climate Change for children (MoEFCC)
- Video: Climate Justice by Porag

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

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

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Annex A. Summary of Programme Results[15]

Sector		UNICEF Response in 2025			Cluster/Sector Response in 2025[16]		
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	9,712	7,276	▲1,835	7,289	6,429	▲1,691
	Boys	9,403	7,392	▲1,773	7,011	6,627	▲1,642
	Person with Disability (PwD)[17]	262	516	▲127	282	514	▲169
Primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling	Women	287,752	272,607	▲24,797	136,800	146,157	▲12,353
	PwD[3]	3,814	289	▲29	18,520	18,917	▲1,011
HEALTH							
Children aged 0 to 11 months who have received the pentavalent 3 vaccine	Girls	72,794	82,296	▲14,231			
	Boys	72,994	85,195	▲14,654			
	PwD[3]	1,156	1,093	-			
Children and women accessing primary healthcare in UNICEF-supported facilities	Girls	84,242	125,860	▲9,130			
	Boys	92,278	135,277	▲11,794			
	Women	47,926	40,114	▲5,261			
	PwD[3]	-	3,759	-			
Pregnant women including adolescents who received antenatal care (ANC) services in UNICEF-supported health facilities	Girls	-	908	▲261			
	Women	58,087	46,537	▲23,048			
	PwD	425	1	-			
Sick newborns who received quality care in UNICEF-supported health facilities	Girls	3,462	42,334	▲40,177			
	Boys	4,962	42,238	▲39,712			
	PwD[3]	-	-	-			
Healthcare providers trained in detecting, referral and appropriate management of dengue cases	Men	137	345	▲345			
	Women	84	355	▲355			
	PwD[3]	-	-	-			
WATER, SANITATION & HYGIENE							
People accessing a sufficient quantity of safe water for drinking and domestic needs	Girls	248,422	134,301	▲14,275	308,100	273,543	▲1,811
	Boys	254,393	127,788	▲12,672	322,716	286,516	▲1,899
	Men	288,553	116,874	▲8,832	313,743	278,592	▲1,800
	Women	309,388	131,234	▲8,831	274,547	243,622	▲1,763
	PwD	44,946	4,719	▲279	-	-	-
People use safe and appropriate sanitation facilities	Girls	182,750	117,765	▲9,131	308,100	279,556	▲1,414
	Boys	191,827	115,785	▲8,577	322,716	292,818	▲1,483
	Men	184,028	93,937	▲3,255	313,743	284,659	▲1,405
	Women	202,487	105,320	▲3,161	274,547	249,167	▲1,376
	PwD	39,572	3,868	▲222	-	-	-
People reached with handwashing behaviour-change programmes	Girls	201,877	93,574	▲12,572	264,823	289,542	▲289,542
	Boys	210,585	81,638	▲9,399	277,315	298,388	▲298,388
	Men	213,814	89,633	▲4,230	270,745	251,337	▲251,337
	Women	232,861	110,978	▲5,370	232,415	295,527	▲295,527
	PwD	38,229	2,227	▲140	-	-	-

[15] This programme summary results include floods, cyclones, public health emergencies, Rohingya refugees, including Bhasan Char and Cox's Bazar host community response

[16] Cluster/Sector response covers Cox's Bazar and Bhasan Char sector-level targets and results only. UNICEF's achievement is higher compared to the cluster/sector achievements because UNICEF's covers all Upazilas of Cox's Bazar, while the cluster/sector has targeted only two upazilas.

Sector		UNICEF Response in 2025			Cluster/Sector Response in 2025[16]		
Indicator	Disaggregation	Target	Total results	Change since last report ▲▼	Target	Total results	Change since last report ▲▼
People reached with critical WASH supplies	Girls	144,005	152,317	▲3,420	264,823	280,202	▲280,202
	Boys	150,520	158,965	▲3,481	277,315	288,762	▲288,762
	Men	127,790	146,280	-	270,745	243,230	▲243,230
	Women	145,690	148,007	▲712	232,415	285,994	▲285,994
	PwD	37,039	48,055	▲3,748	-	-	-
CHILD PROTECTION & GENDER-BASED VIOLENCE							
Children and parents/caregivers accessing mental health and psychosocial support	Girls	122,204	73,409	▲19,279	42,791	25,027	▲1,612
	Boys	122,948	68,665	▲19,434	44,854	22,489	▲1,165
	Men	117,716	34,234	▲8,321	-	-	-
	Women	128,515	52,869	▲12,861	-	-	-
	PwD	8,541	2,798	▲ 918	900	857	▲ 67
Women, girls, and boys accessing gender-based violence risk mitigation, prevention, and/or response Interventions	Girls	57,222	25,361	▲8,202			
	Boys	57,375	16,496	▲5,610			
	Women	149,472	30,288	▲9,574			
	PwD	4,166	405	▲112			
People who have access to a safe and accessible channel to report sexual exploitation and abuse by aid workers	Girls	234,920	187,393	▲187,393			
	Boys	226,830	194,046	▲194,046			
	Men	281,684	193,976	▲193,976			
	Women	291,324	218,123	▲218,123			
	PwD	22,481	19,382	▲19,382			
EDUCATION							
Children accessing formal or non-formal education, including early learning	Girls	120,524	123,632	▲6,067	238,049	159,768	▲ 185
	Boys	131,430	130,697	▲8,233	250,175	153,541	▲41
	Men	-	-	-	2,612	1,641	▲ 5
	Women	-	-	-	2,720	997	▲ 9
	PwD	2,570	2,690	-	14,806	3,738	-
Children receiving individual learning materials	Girls	182,226	124,428	▲6,067	238,049	146,170	▲3,502
	Boys	191,910	131,401	▲8,233	250,175	142,413	▲2,851
	Men	-	-	-	2,612	849	▲164
	Women	-	-	-	2,720	676	▲196
	PwD	4,244	2,696	-	14,806	3,627	-
CROSS-SECTORAL (HCT, SBC / ACCOUNTABILITY MECHANISM							
Households reached with UNICEF-funded humanitarian cash transfers across sectors	Households	24,200	1,675	-			
People reached through messaging on prevention and access to services	Girls	680,803	251,488	▲43,574			
	Boys	669,765	258,683	▲52,316			
	Men	1,026,281	386,866	▲53,291			
	Women	1,062,260	433,884	▲61,047			
	PwD	53,282	17,164	▲ 568			
People with access to established accountability /feedback mechanisms (CFQ)	Girls	9,947	9,730	▲1,026			
	Boys	9,725	8,578	▲1,271			
	Men	60,247	60,005	▲10,457			
	Women	79,816	79,303	▲15,601			
	PwD	5,278	5,572	▲1,021			
People engaged in discussion and prevention actions on public health emergencies	Girls	151,247	146,505	▲3,807			
	Boys	151,986	154,636	▲11,374			
	Men	196,571	191,050	▲18,541			
	Women	216,828	217,592	▲15,554			
	PwD	15,984	15,658	▲1,190			

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	6,513	545	▲1,835	7,191	98	6,330	99	▲1,691
	Boys	7,252	510	6,767	423	▲1,773	6,909	102	6,553	74	▲1,642
	CwD	208	9	516	-	▲127	280	2	514	-	▲169
Primary caregivers of children aged 0 to 23 months receiving infant and young child feeding IYCF) counselling	Women	105,700	77,300	88,653	121,389	▲24,797	104,700	32,100	111,419	34,738	▲12,353
	PwD	1,057	1,322	271	18	▲29	17,800	720	18,154	763	▲1,011
HEALTH											
Children aged 0 to 11 months who have received pentavalent 3 vaccine	Girls	19,505	44,216	16,725	40,524	-					
	Boys	18,813	44,950	17,257	42,277	▲ 14,654					
	CwD	905	-	-	-	-					
Children and women accessing primary health care in UNICEF-supported facilities	Girls	26,452	6,650	37,017	8,073	▲9,130					
	Boys	29,943	10,307	45,575	9,164	▲11,794					
	Women	9,998	17,128	12,153	19,361	▲5,261					
	PwD	1,792	467	5	-	-					
Pregnant women including adolescents who received antenatal care ANC) services in UNICEF-supported health facilities	Girls	-	-	908	-	▲261					
	Women	5,745	21,142	5,667	20,286	▲2,464					
	PwD	136	290	1	-	-					
Sick newborns who received quality care in UNICEF supported health facilities	Girls	372	2,796	599	2,262	▲704					
	Boys	521	4,142	632	2,801	▲907					
	CwD	-	-	-	-	-					
WATER, SANITATION & HYGIENE											
People accessing a sufficient quantity and quality of water for drinking and domestic needs	Girls	141,941	10,840	85,055	36,649	▲14,275	264,823	43,277	236,487	37,056	▲1,811
	Boys	148,147	12,462	84,241	31,194	▲12,672	277,315	45,401	247,642	38,874	▲1,899
	Women	142,910	14,601	89,697	21,532	▲8,831	232,415	42,132	207,547	36,075	▲1,763
	Men	125,007	14,617	77,926	19,332	▲8,832	270,745	42,998	241,775	36,817	▲1,800
	PwD	36,759	1,471	3,012	664	▲279	-	-	-	-	-
People accessing appropriate sanitation services	Girls	141,941	21,680	86,248	30,609	▲9,131	264,823	43,277	239,715	39,841	▲1,414
	Boys	148,147	24,924	89,527	25,368	▲8,577	277,315	45,401	251,022	41,796	▲1,483
	Women	142,910	29,201	90,251	13,627	▲3,161	232,415	42,132	210,380	38,787	▲1,376
	Men	125,007	29,235	80,324	12,199	▲3,255	270,745	42,998	245,075	39,584	▲1,405
	PwD	36,759	1,471	3,076	704	▲222	-	-	-	-	-
People reached with handwashing behaviour-change programmes	Girls	141,941	21,680	50,640	42,934	▲12,572	264,823	-	289,542	-	▲289,542
	Boys	148,147	24,924	49,426	32,212	▲9,399	277,315	-	298,388	-	▲298,388
	Women	142,910	29,201	75,900	35,078	▲5,370	232,415	-	295,527	-	▲295.527
	Men	125,007	29,235	70,333	19,300	▲4,230	270,745	-	251,337	-	▲251,337
	PwD	36,759	1,471	1,637	590	▲140	-	-	-	-	-
People reached with critical WASH supplies	Girls	141,941	2,064	152,317	-	▲3,420	264,823	-	280,202	-	▲280,202
	Boys	148,147	2,373	158,965	-	▲3,481	277,315	-	288,762	-	▲288,762
	Women	142,910	2,780	148,007	-	▲712	232,415	-	285,994	-	▲285,994
	Men	125,007	2,783	146,280	-	-	270,745	-	243,230	-	▲243,230
	PwD	36,759	280	48,055	-	▲3,748	-	-	-	-	-
CHILD PROTECTION & GENDER-BASED VIOLENCE											
Children and parents/caregivers accessing mental health and psychosocial support	Girls	43,637	21,794	52,337	14,833	▲19,279	31,648	11,143	18,825	6,202	▲1,612
	Boys	45,788	21,488	52,517	12,794	▲19,434	33,164	11,690	17,522	4,967	▲1,165
	Women	22,948	15,412	36,098	10,552	▲12,861	-	-	-	-	-
	Men	19,650	9,661	25,728	7,189	▲8,321	-	-	-	-	-
	PwD	2,640	1,914	2,115	415	▲918	700	200	713	144	▲67
Women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions	Girls	11,846	5,850	6,842	2,682	▲627					
	Boys	12,458	6,158	11,866	1,875	▲5,610					
	Women	16,981	8,177	20,057	4,871	▲9,574					
	PwD	826	565	194	58	▲112					
	Girls	129,093	49,053	155,302	32,091	▲187,393					

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	
People who have access to a safe and accessible channel to report sexual exploitation and abuse by aid workers**	Boys	124,030	47,129	160,008	34,038	▲194,046					
	Women	141,015	60,153	155,046	63,077	▲218,123					
	Men	135,485	57,793	132,162	61,814	▲193,976					
	PwD	12,499	5,996	15,562	3,820	▲19,382					
EDUCATION											
Children accessing formal or non-formal education, including early learning	Girls	113,459	1,700	122,146	1,486	▲6,067	212,615	25,434	154,317	5,451	▲185
	Boys	124,871	1,300	129,818	879	▲8,233	223,131	27,044	149,273	4,268	▲41
	Women	-	-	-	-	-	815	1,905	790	207	▲9
	Men	-	-	-	-	-	884	1,728	1,456	185	▲5
	CwD	2,383	41	2,681	9	-	13,123	1,683	3,532	206	-
Children receiving individual learning materials	Girls	113,459	1,700	122,146	1,486	▲6,067	212,615	25,434	140,719	5,451	▲3,502
	Boys	124,871	1,300	129,818	879	▲8,233	223,131	27,044	138,145	4,268	▲2,851
	Women	-	-	-	-	-	815	1,905	469	207	▲196
	Men	-	-	-	-	-	884	1,728	664	185	▲164
	CwD	2,383	41	2,681	9	-	13,123	1,683	3,421	206	-
CROSS-SECTORAL HCT, SBC / ACCOUNTABILITY MECHANISM											
Households reached with UNICEF-funded humanitarian cash transfers across sectors	Households	-	4,200	-	-	-					
People reached through messaging on prevention and access to services	Girls	107,312	22,845	107,698	23,101	▲37					
	Boys	109,222	20,584	110,004	27,580	▲6,982					
	Women	146,845	40,993	147,128	41,060	▲6,600					
	Men	130,976	37,855	131,173	38,027	▲10,643					
	PwD	11,667	2,947	12,240	2,755	▲568					
People sharing their concerns and asking questions through established feedback mechanisms	Girls	5,430	750	7,260	802	▲1,026					
	Boys	5,330	600	6,436	609	▲1,271					
	Women	61,220	12,450	59,846	12,658	▲15,601					
	Men	46,520	7,700	47,159	7,873	▲10,457					
	PwD	4,398	518	5,023	519	▲1,021					
People engaged in discussion and prevention actions on public health emergencies	Girls	107,312	22,845	107,714	23,228	▲180					
	Boys	109,222	20,584	110,211	28,734	▲8,343					
	Women	146,845	40,993	149,765	43,884	▲12,061					
	Men	130,976	37,855	133,852	40,933	▲16,228					
	PwD	11,667	2,947	12,510	3,107	▲1,190					

[1] 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)[18]		Total funds available	$	%
		ORE	ORR		ORE	ORR			
Nutrition	15,689,508	7,431,689	0	7,431,689	8,576,157	0	16,007,846	-	0%
Health	13,566,847	4,535,380	0	4,535,380	3,938,586	1,470	8,475,436	5,091,411	38%
Water, Sanitation and Hygiene	43,786,504	12,073,319	3,496,259	15,569,578	10,055,523	7,075,192	32,700,292	11,086,212	25%
Child Protection/GBV	17,949,161	1,121,457	0	1,121,457	4,495,401	7,034,618	12,651,476	5,297,686	30%
Education	40,653,949	3,059,350	6,870,280	9,929,630	6,641,400	5,116,806	21,687,836	18,966,112	47%
Cross-sectoral SBC, HCT)	6,592,493	54,000	158,593	212,593	2,032,036	2,125,130	4,369,759	2,222,734	34%
Emergency Preparedness	3,794,273	4,125,050	0	4,125,050	2,184,710	362	6,310,123	-	0%
Total	**142,032,735**	**32,400,246**	**10,525,132**	**42,925,378**	**37,923,812**	**21,353,578**	**102,202,769**	**39,829,966**	**28%**

*As defined in the Revised Bangladesh Humanitarian Action for Children Appeal for 2025, including the Recovery cost and carryover from 2024.

[18] The carryover from 2024 is approximately $59.3 million, which is 66 per cent of the total available funds for 2025.