



Reporting Period: 1 January to 31 December 2020

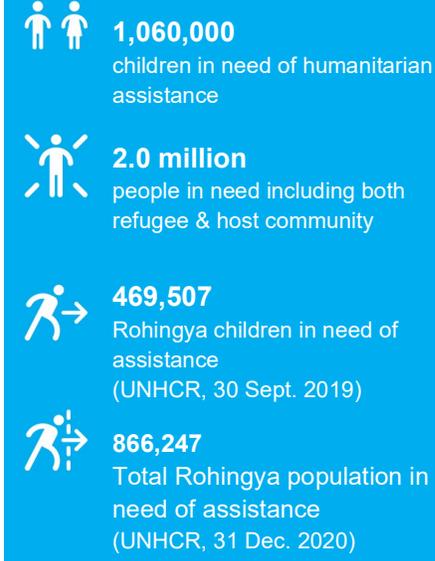
# Bangladesh

## Humanitarian Situation Report No. 55

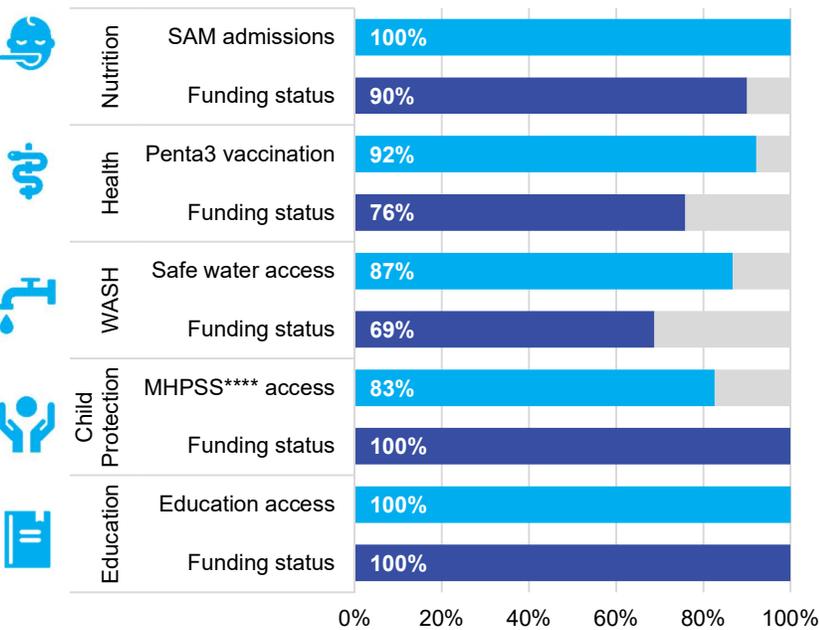
### Highlights

- With the generous support of its donors, UNICEF supported the Government of Bangladesh and other humanitarian actors to prevent and respond to the direct and indirect impact of COVID-19 in the Rohingya camps and host communities. This response included accelerate risk communication and hygiene promotion; the delivery of \$4.5 million in personal protective equipment and medical supplies to NGO and government health facilities and the establishment of a severe acute respiratory infection isolation and treatment centre.
- By adapting modalities and intensifying outreach, the government, UNICEF, and partners were able to return critical health, nutrition and child protection services to pre-pandemic levels by the third quarter of 2020. UNICEF and partners provided health care consultations to 265,000 persons, treated nearly 7,500 children for severe acute malnutrition and ensured psychosocial support for 103,000 children.
- Government schools across the country as well as Learning Centres in the Rohingya camps remained closed from March through the end of the year, disrupting structured learning programme for nine months and increasing child protection concerns including child marriage and child labour. While remote learning modalities were introduced, the most vulnerable children could not easily access these modalities equally.

### Situation in Numbers

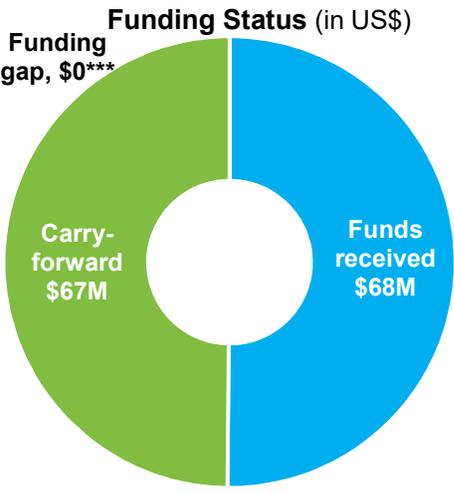


### UNICEF's Response and Funding Status\*\*



### UNICEF Appeal 2020

## US\$ 135.3 million



\*Funding available includes: funds received in the current year; carry-over from the previous year; and repurposed funds with agreement from donors.  
 \*\* Includes response in both camps and host communities, and the national flood response  
 \*\*\* While some programmes were fully or over funded, others remained under-funded.  
 \*\*\*\* Mental health and psychosocial support

## Funding Overview and Partnerships

With 100 per cent of funding requirements received<sup>1</sup>, UNICEF wishes to express its sincere gratitude to Australia, Canada, the Centers for Disease Control and Prevention (CDC), Denmark, Education Cannot Wait, the European Union, GAVI, Germany, Global Partnership on Education, Japan, BMZ/KfW Development Bank, the Republic of Korea, Sweden, Switzerland, the United States, the United Kingdom, King Abdullah Foundation, CERF, the World Bank and various UNICEF National Committees for their generous contributions to this response. However, key gaps in WASH funding (31 per cent) are compromising UNICEF's ability to upgrade infrastructure, including to meet the unique needs of girls, women and people with disabilities. Flexible and multi-year donor support in 2021 will be critical to provide essential Rohingya and vulnerable Bangladeshi children.

## Situation Overview & Humanitarian Needs

Cox's Bazar District is hosting over 866,000 Rohingya refugees from Myanmar, 52 per cent of whom are children.<sup>2</sup> The Government of Bangladesh sought refugees to move to the remote island of Bhasan Char on voluntary basis in December 2020, and over 3,400 refugees moved to the island by the end of the year<sup>3</sup>. The UN has not participated in this relocation process and has been pursuing a dialogue with the Government regarding the implementation of necessary safety and security assessments. Access to safe piped water networks has increased from 45 to 63 per cent of refugees in UNICEF-supported camps in 2020. Prevalence of severe acute malnutrition (SAM) as measured through door-to-door mass screening was 1.7 per cent of children under 5. The first case of COVID-19 was confirmed in Bangladesh on 8 March 2020, reaching 512,496 confirmed cases by the end of the year, with 7,531 deaths<sup>4</sup>. On 23 March 2020, the first case was identified in Cox's Bazar District, which increased to 4,968 with 72 deaths by 30 December 2020<sup>5</sup>. The majority of cases (74 per cent) in the district were male which is same as the national trend. On 24 March, the Refugee Relief and Repatriation Commissioner (RRRC) reduced operations in the camps to essential services only, then further to critical services only on 8 April to reduce the risk of transmission of COVID-19 in the camps and the UN and the humanitarian community cooperated for that<sup>6</sup>. The decision involved the closure of learning centres (LCs) and suspension of all group-based activities. The latter activities which slowly restarted in October. LCs did not reopen in 2020. There have been 367 COVID-19 cases confirmed in the camps and 10 people have died<sup>7</sup>.

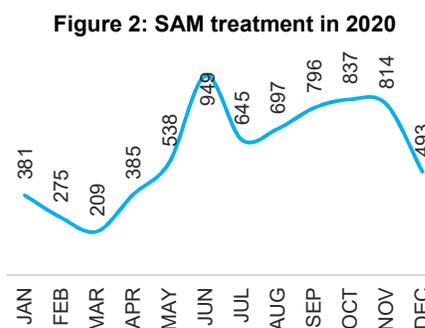
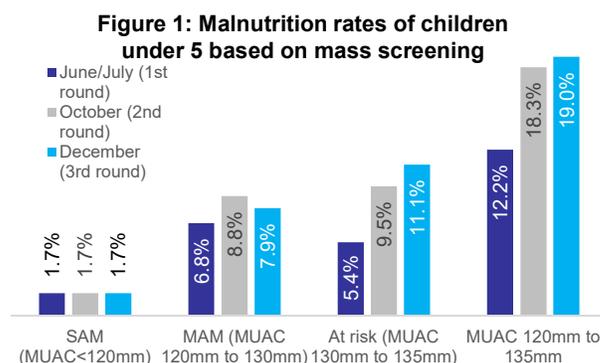
## Summary Analysis of Programme Response

### Nutrition

A **Nutrition Sector rationalization exercise** at the end of 2019 saw the total nutrition facilities reduced from 106 to 45, with each site treating children with SAM and moderate acute malnutrition (MAM); delivering infant and young child feeding (IYCF) counselling; and distributing blanket supplementary food. An arrangement has been made for single NGO partner to deliver all the nutrition services in one camp, and UNICEF and WFP work with the same implementing partner in a given camp.

To measure the impact of the COVID-19 pandemic on malnutrition rates, UNICEF and Sector partners undertook three rounds of house-to-house mass screening. A SAM prevalence of 1.7 per cent was found in each rounds. The increase in children at-risk of acute malnutrition from 5.4 to 11.2 per cent reflects a worsening situation as COVID-19 impacts the underlying causes of malnutrition, including food security. Fifty-five per cent of mothers in camps reported having to feed their children less diverse foods while 46 per cent reported food shortages and feeding less food to their children<sup>8</sup>.

Measures imposed to prevent COVID-19 restricted the number of nutrition staff from 10 to 3 per facility (increased to 5 in October), constraining active case finding. To compensate, UNICEF partners increased from 194 to 609 Rohingya



<sup>1</sup> While some programmes were fully or over funded, others remained under-funded.

<sup>2</sup> UNHCR, [Operational Portal](#), 31 December 2020.

<sup>3</sup> Al Jazeera, [Bangladesh moves nearly 2,000 Rohingya refugees to remote island](#), 30 December 2020.

<sup>4</sup> Institute of Epidemiology, Disease Control and Research (IEDCR), [Bangladesh Coronavirus. \(COVID-19\) Update](#), 30 December 2020. Note that some variance exists between IEDCR data on a day-to-day basis as IEDCR reports data to WHO.

<sup>5</sup> WHO Cox's Bazar Data Hub, [COVID-19 Dashboard](#), 30 December 2020. Required granularity of data not available from IEDCR.

<sup>6</sup> ISCG, [2020 COVID-19 RESPONSE PLAN Addendum to the Joint Response Plan 2020](#).

<sup>7</sup> WHO Cox's Bazar Data Hub, [COVID-19 Dashboard](#), 30 December 2020. Required granularity of data not available from IEDCR.

<sup>8</sup> UNICEF remote monitoring data.

community nutrition volunteers (142 females) and trained 94,376 mothers and caregivers to screen their children for malnutrition. Twenty-three per cent of the total referrals for treatment were made by mothers and caregivers. **SAM admissions** increased in May after an initial drop in March and April, with 7,019 Rohingya refugee children (4,454 girls, 34 with disabilities) admitted for SAM treatment in 2020, 117 per cent of the annual target<sup>9</sup>. Of the children with SAM admitted to UNICEF-supported facilities, 86.2 per cent were discharged as cured (SPHERE standard >75 per cent) with a default rate of 0.5 per cent. There was a gradual improvement in programme quality from April (76.7 per cent cured) to December 2020 (91.1 per cent cured).

When group gatherings were suspended in April and May, **IYCF counselling** dropped by 50 per cent. UNICEF trained 54 nurses, who were given the extra task of one-to-one IYCF counselling. Through these efforts, 23,547 caregivers of children 0-23 months (47 per cent of the annual target) received IYCF counselling. UNICEF and partners also provided 84,169 adolescent girls and 28,660 pregnant and lactating women with iron folic acid (IFA) to prevent anemia.

UNICEF shifted from a facility-based to a house-to-house approach to safely run the semi-annual **vitamin A supplementation** campaign. The first round in June/July 2020 reached 155,080 children (76,195 girls, 132 with disabilities) or 97 per cent of all refugee children aged 6-59 months. The second round in December reached 96 per cent of children 6-59 months (49 per cent female).

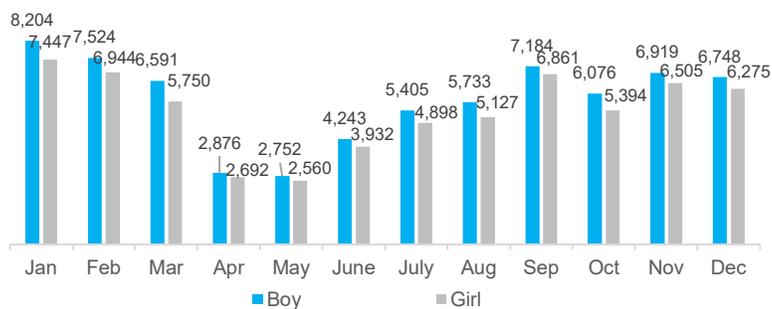
**Host Community:** UNICEF provided financial and technical support to the Civil Surgeon's Office to increase from one to four nurses in the Ramu, Pekua and Teknaf and Cox's Bazar Sadar SAM Units and initiated targeted cash assistance for children admitted for SAM treatment. In 2020, 474 children (251 girls, 0 with disabilities) with SAM and medical complications were treated. This was only 79 per cent of the target due to access constraints early in the pandemic. Financial support to SAM Unit inpatients increased recovery rates from medical complications (19 to 45 per cent) and treatment completion (8 to 52 per cent). Meanwhile, in Ramu, Pekua, Teknaf and Cox's Bazar Sadar, UNICEF trained 124 community nutrition workers on the COVID-19 modified guidelines on SAM treatment, IYCF and early childhood development. These volunteers reached 19,271 pregnant and lactating women (96 per cent of the annual target) and 19,995 adolescent girls (99.9 per cent of the annual target) with IFA and nutrition education.

**Nutrition Sector:** The Nutrition Sector promotes expanding inclusive nutrition services integrated with other cross-cutting programmes in the Rohingya camps. This includes coordinating with Site Management and Site Development Sector to include nutrition facilities in their [field monitoring](#); adopting and using Child Protection Tip Sheets to help nutrition service providers refer cases through the protection focal point network and improving utilization of antenatal care and nutrition service utilization among malnourished pregnant and lactating women with the Health Sector Sexual and Reproductive Health Team.

## Health

UNICEF and partners provided 265,837 **primary health consultations** in 2020, including 134,640 for children under 5 (64,385 girls, 26 with a disabilities) through 13 health facilities<sup>10</sup> in the Rohingya refugee camps. The most common reasons children came for treatment were cough and cold (38 per cent), diarrhoea (7 per cent) and pneumonia (3 per cent). In addition, 191 Rohingya newborns (71 girls, 48 per cent of the annual target), received advanced neonatal care. The target was not reached due in part to COVID-19 movement restrictions and long-standing difficulties in the referral pathway. UNICEF is working to improve neonatal care within the camps to compensate. Disability-friendly services were introduced in five primary health centres, including ramps, wheelchairs and accessible toilets and the coordination of peer groups to support patients with disabilities.

Figure 3: Consultations for children under 5



In terms of **maternal health**, 4,147 Rohingya women had at least four antenatal care visits, 1,896 deliveries were conducted and 2,502 Rohingya mothers received at least one post-natal care service. Prevention of mother-to-child

<sup>9</sup> This over-achievement can be tied to the alternative methods of proactive case finding, as well as the three rounds of mass screening.

<sup>10</sup> Based on the Health Sector rationalization exercise, which aimed to unify health services and reduce duplication of services, UNICEF decreased from supporting 14 to 13 health facilities in camps in 2020.

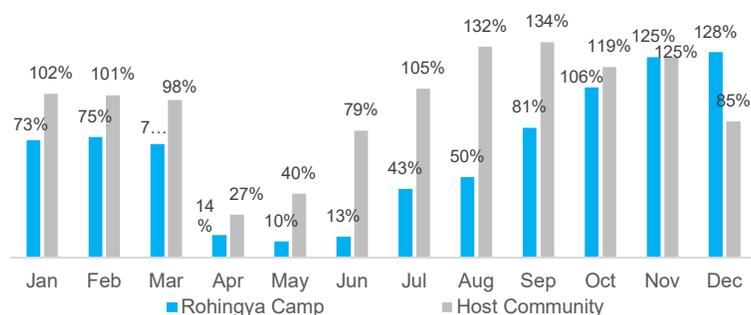
transmission of HIV (PMTCT), HIV testing and counselling services were extended to five additional health facilities in 2020, for a total of 20<sup>11</sup>, with 22,826 pregnant Rohingya women tested and counselled.

April and May saw a 65 per cent reduction in consultations as patients refrained from visiting health facilities due to fear of infection and movement restrictions. All 571 UNICEF-supported health workers (349 females) were trained on infection prevention and control (IPC) for COVID-19 and 187 health workers (128 females, 100 per cent of target) received training on COVID-19 case management. Strong IPC measures and physical distancing were ensured inside the health facilities including handwashing stations, screening corners and separate entrances and exits. Personal protective equipment (PPE) and medical supplies worth \$4.5 million were distributed to camp and government health facilities. 205 community health workers visited 37,149 households in the camps to identify potential COVID-19 cases and deliver prevention messages. The volunteers identified 1,581 people (420 females) with mild COVID-19 symptoms and 3 with severe symptoms, who were referred to health facilities.

The UNICEF-supported **severe acute respiratory infection isolation and treatment centre (SARI-ITC)** opened in August 2020, operating 24 hours a day. With 103 active beds, 5,018 patients (2,834 females, 1 other gender, 8 with a disability) were treated in 2020, including 45 Rohingya patients. Of 1,967 COVID-19 tests collected, 42 tested positive.

A total of 19,873 children under 1 year (9,815 girls) in the camps received three doses of pentavalent vaccine<sup>12</sup> (68 per cent of annual target), a key proxy indicator for complete routine immunization. During initial stage of the pandemic, immunization sessions were halted. UNICEF helped develop an immunization strategy for Rohingya children, shifting all vaccinations into health facilities with full IPC measures. Along with social mobilization and intensified follow up by community health workers, this strategy helped improve vaccination rates starting in July; children receiving their third dose of pentavalent increased from 13 per cent of the monthly target in June to 128 per cent in December. With 2,446 suspected cases of Measles reported in 2019, a Measles-Rubella immunization campaign was conducted in January 2020, vaccinating 292,394<sup>13</sup> (101 per cent of target) Rohingya children between 6 months and 10 years. A second round of oral cholera vaccination (OCV) campaign was conducted in February 2020, after a first round in December 2019, with 179,891 (104 per cent of target) Rohingya children vaccinated.

**Figure 4: Coverage of pentavalent 3**



UNICEF is supporting the COVID-19 Deployment and Vaccination Plan for Rohingya refugees to be included in the National Deployment and Vaccination Plan for COVID-19. Planning, budgeting, prioritization and a categorization list of humanitarian workers have been completed.

UNICEF-supported **Diarrhoeal Treatment Centres** managed 2,455 patients (895 Rohingya) in 2020 including 1,290 children under 5 (542 girls). In 13 sentinel sites in Ukhiya and Teknaf, 2,306 rapid diagnostic tests (RDTs) and culture tests were done with 12 RDT positive and 2 culture positive results for cholera, but no outbreak.

**Host Community:** Focusing on health systems strengthening, UNICEF funded 243 health workers, immunization workers and non-technical positions in the District Hospital and eight Upazilla Health Complexes. This supported 45,367 consultations, including 8,205 for children under 5 as well as 76,812 children (37,354 girls) aged 0 to 11 months who reached with a third dose of pentavalent vaccine (101 per cent of the HAC target<sup>14</sup>); 2,063 women who attended four antenatal care visits; 292 deliveries, 390 women who attended post-natal care; and 8,373 pregnant women who received HIV testing and counselling. The Ukhiya, Teknaf, Chakaria and Ramu Newborn Stabilization Units and Special Care Newborn Unit treated 4,473 newborns (1,727 females).

UNICEF extended technical and operational support to the government health facilities to respond to the COVID-19. A 10,000 L oxygen plant was installed in the District Hospital, enabling 24/7 oxygen supply to increase the chance of

<sup>11</sup> PMTCT is supported in 5 primary health care centres and 5 health posts supported by UNICEF as well as 3 UNHCR supported facilities; 1 maternity centre run by Friendship, 1 Save the Children primary health care centre, 3 IOM facilities and 2 Relief International facilities. UNICEF provides training, follow up, monitoring and supplies to these facilities.

<sup>12</sup> Pentavalent vaccine includes diphtheria, pertussis, tetanus, hepatitis B and Haemophilus influenzae type b

<sup>13</sup> Government does not maintain gender-disaggregated data for campaigns

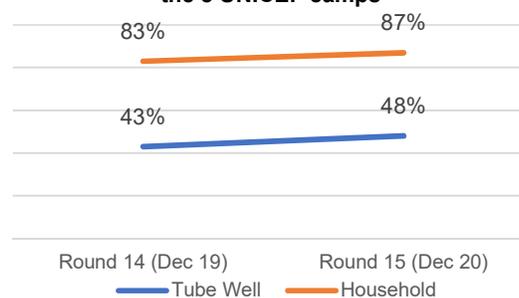
<sup>14</sup> UNICEF vaccinated 76,812 children for 101 per cent of the HAC target (75,600) or 93 per cent of the DHIS 2 target (82,594). The latter was reported in the COVID-19 sitrep.

survival of severely sick and premature newborns, as well as patients with respiratory illnesses. The Hospital admitted 480 patients with COVID-19 in 2020. 263 health workers (89 females) were trained on COVID-19 IPC. The isolation and treatment corners in Ukhiya, Teknaf, Chakaria and Ramu health centres were supported with oxygen concentrators, oxygen cylinders, soap, hand sanitizer and salaries for support staff, along with food costs for patients. Eight Upazilla health complexes and 18 community clinics were provided with PPE, oxygen cylinders, electric nebulizers and other supplies.

## WASH

Throughout 2020, UNICEF provided **safe water** for all 242,000 refugees (123,420 females, 12,100 with disabilities, 100 per cent of annual target) in the eight camps under the UNICEF WASH area of responsibility. Through the construction and upgrade of 14 water supply networks, access to piped, chlorinated water increased from 45 to 63 per cent of refugees in the eight camps during the year. Full coverage is expected by the end of 2021. The remainder of refugees access water through 4,894 tube wells. The Department of Public Health Engineering (DPHE), WHO and UNICEF monitor water quality across all 34 camps. The December 2020 water quality report<sup>15</sup> indicated an improvement compared to 2019 (see Figure 5), though 48 per cent of water at household-level shows some level of contamination. Surveillance data is used to adjust programming aimed at improving household water quality.

**Figure 5: Contamination-free water in the 8 UNICEF camps**



UNICEF and its partners operate 15,000 latrines, providing **safe sanitation** in the eight camps at an average of 17 people per latrine against the WASH Sector standard of 20 people per latrine and an improvement from 18 people per latrine in 2019. Eighty-five per cent of the latrines are functional<sup>16</sup>. UNICEF constructed 82 accessible latrines for people with disabilities in 2020 bringing the total to 282. In addition, 553 latrines were adapted with improved gender and inclusion features in line with the WASH Sector Gender, GBV and Inclusion Roadmap, for a total of 908. To maintain latrine functionality, UNICEF operates 88 faecal sludge management (FSM) systems (10 new FSMs in 2020). UNICEF regularly evaluates FSM efficiency to ensure they meet national environmental standards. UNICEF also operates eight material recovery facilities and three plastic recycling plants to manage solid waste in the eight camps.

**Hygiene promotion** was accelerated in response to COVID-19 through innovative approaches for community engagement which adapted Community-Led Total Sanitation (CLTS) for refugee camps. UNICEF partners also taught 1,603 resource children (779 girls) to share key hygiene knowledge with their family and friends. These approaches helped increase handwashing at critical times, including by 70 per cent after defecation and by 52 per cent after sneezing or coughing<sup>17</sup>. UNICEF also provided soap for 242,000 refugees in line with the WASH Sector standard, 90 per cent of which was accessed through e-vouchers in partnership with WFP and UNHCR. 4,100 handwashing devices were installed next to latrines and in public spaces. Ninety-eight per cent of refugees report having increased their handwashing practices since the start of the COVID-19 pandemic<sup>18</sup>.

To ensure the continuity of critical WASH services in the camps, 1,445 Rohingya volunteers (437 females) were trained and provided with PPE as part of the COVID-19 Business Continuity Plan. These volunteers were able to maintain WASH services at scale despite access restrictions to the camps.

**Host community:** UNICEF, DPHE and NGO partners provided improved access to safe water for 145,798 people (69,964 females, 2,186 with disabilities) in Cox's Bazar District through the construction of 59 new hand pumps and 3 water distribution networks and the rehabilitation and disinfection of 7,492 water points. Improved access to safe sanitation was ensured for 197,310 people (93,711 females, 2,960 with disabilities) through the construction of 24,513 latrines and rehabilitation and disinfection of 9,897 latrines. 150 of these latrines were constructed in highly vulnerable Arayon communities of Bangladeshis displaced internally by previous emergencies such as cyclones and floods. The remaining latrines were constructed by the communities themselves under the CLTS programme; 35,500 people (16,658 females, 533 with disabilities) are now living in 71 open defecation free communities after participating in CLTS. UNICEF also reached 223,558 people (117,585 females, 3,360 with disabilities) with key messages to improve their hygiene behaviours.

Upazilla	Sadar	Ukhiya	Teknaf	Ramu	Chakaria	Pekua	Moheskhal	Kutubdia
Water	1,272	34,742	12,283	4,470	32,643	42,946	10,984	6,458
Sanitation	7,467	57,468	36,472	5,650	50,492	17,108	22,453	200

<sup>15</sup> 15<sup>th</sup> Round WHO DPHE Water Quality Survey. December 2020

<sup>16</sup> EIMS Monitoring Survey – October 2020

<sup>17</sup> Participatory Community Monitoring, October 2020

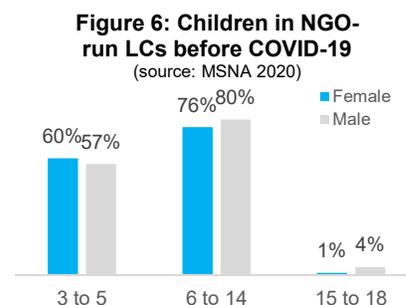
<sup>18</sup> Joint Multi Sector Needs Assessment ISCG. October 2020

Twenty schools identified as in critical need of WASH infrastructure were equipped with accessible and gender-segregated latrines, handwashing facilities, drinking water and hygiene promotion. This will benefit 12,642 students (6,422 girls, 47 female teachers, 180 children with disabilities) once schools reopen. UNICEF also provided improved WASH facilities in two health care facilities in Moheskhal and Pekua which will benefit a catchment population of 49,963 (24,542 females, 750 people with disabilities).

**WASH Sector:** A significant part of the work done by the WASH Sector in 2020 focused on the COVID-19 response as WASH was identified as one of the three priority sectors in the fight against the pandemic. Over the past year and despite geographical disparities and challenges, 842,520 beneficiaries have been reached with critical WASH services. Eighty-eight per cent of the refugee population reported having enough water to meet all domestic needs and 99 per cent are using sanitation facilities<sup>19</sup>. Other priorities in 2020 included developing Hygiene Promotion and Solid Waste Management Strategies to strengthen coordinated activities in 2021. The WASH Sector has also been working on reinforcing decentralized coordination both in host communities and camps.

## Education

Before LCs were closed in March, 231,578 children aged 3 to 14 (111,845 girls 110 per cent of annual target<sup>20</sup>) were participating in education in line with the Learning Competency Framework and Approach (LCFA). According to the 2020 Multi Sectoral Needs Assessment, 76 per cent of girls and 80 per cent of boys aged 6 to 14 were attending NGO-run LCs. The proportion of children in Level 2 had increased from 25 to 33 percent in 2020 as children who demonstrated a higher level of competencies were promoted from Level 1 to 2.



With LCs closed, UNICEF has supported **caregiver-led home-based education**

to allow children to continue learning using the education materials they have at home. Eighty-six per cent of children who were attending LCs before they closed are reported to be participating in remote learning, with those who are not participating facing challenges including a lack of learning materials (40 per cent); support (24 per cent); and guidance (20 per cent)<sup>21</sup>. To complement caregiver-led, home-based learning, caregivers, students and teachers benefited from weekly radio programmes aired since November 2020. In 2021, UNICEF will distribute 130,000 radios to expand the reach of the radio-based education programmes in the camps.

UNICEF supported the Education Sector to develop guidelines for the **safe reopening of LCs** and procured hygiene and cleaning supplies for its 2,539 LCs and 657 government schools. Education partners are setting-up handwashing stations in all LCs by the end of February 2021 and planning capacity development for teachers on handwashing practices while maintaining minimum physical distancing in the LCs.

In January 2020, the Government of Bangladesh granted approval for the **Myanmar Curriculum Pilot (MCP)** in the camps. Key milestones reached in 2020 include the development of five technical guidelines, signing agreements with six implementing partners and Rohingya community education networks; assessment of learning facilities, development of an MCP learning competency framework; and printing of teaching and learning materials for 10,000 students and 250 teachers. Partners have identified interested children who will sit the placement test as soon as permission is received. The aim is to transition all the children from the LCFA to the Myanmar Curriculum in the coming years.

The **Teacher Professional Development Framework** was finalized in March 2020 together with subject-based teacher training modules. 170 Master Trainers (32 females) from the Sector were identified to support and mentor teachers and trained via an e-learning platform for training teachers and Master Trainers. An e-monitoring platform was also developed to track teacher performance indicators.

Out of 2,539 UNICEF-supported LCs, 1,319 were **damaged during the pre-monsoon and monsoon** seasons. Out of these, 1,225 were repaired and the remaining 94 will be repaired pending access approvals from the RRRC.

## Host Community:

UNICEF supported all 657 government primary schools through the School Effectiveness Grants in the 2019-2020 academic year, benefiting 372,334 students (182,344 girls, 872 children with a disability). The grants were used by School Management Committees (SMCs) to procure play classroom supplies, repair and maintain classrooms and

<sup>19</sup> ISCG, Multi-Sector Needs Assessment: Rohingya refugees, July-August 2020.

<sup>20</sup> This target was overachieved as UNICEF took over support from LCs which had lost funding support.

<sup>21</sup> ISCG, Multi-Sector Needs Assessment: Rohingya refugees, July-August 2020.

toilets, and fix boundary walls. Training initiatives for SMCs benefited 2,376 members (832 female) from the 657 SMCs. UNICEF also supported seven out of eight upazillas to develop Upazilla Primary Education Plans.

UNICEF renovated the Cox's Bazar Primary Teachers Institute (PTI) and hired 11 short term instructors, allowing a doubling of enrollees. Furthermore, UNICEF together with government constructed (73) and rehabilitated (33) 106 primary classrooms; one Upazilla Education Office; and two Upazilla Resource Centres. Forty-six schools received WASH in Schools support will benefit 35,274 children (18,694 girls) including installation of handwashing devices, upgrade of WASH facilities and training on hygiene promotion. Schools supplies were provided for 36,150 students and 5,448 out-of-school children (2,960 girls) aged 8 to 14 years were enrolled in 100 Ability-Based Accelerated Learning centres in Cox's Bazar Sadar, Ramu and Chokoria as a part of remedial package to help them to get back to school.

**Education Sector:** Before LCs were closed in March, Education Sector partners were reaching 354,496 Rohingya children and youth aged 3 to 24 years (49 per cent girls) through 6,251 learning facilities. The Sector developed a [COVID-19 Response Strategy](#) and [Caregiver-Led Education Guideline](#) to maintain learning, and advocated for the use of education technology in the camps. A [Back to Learning Guideline](#) was developed as part of efforts to restart structured education, along with a catch-up package to narrow the learning gap for children. The Sector also led preparations for the MCP .

## Child Protection

The psychosocial wellbeing of Rohingya children and their families has been under significant strain due to the impact of COVID-19 combined with continued displacement and deprivation. UNICEF provided individual and family-based structured and unstructured **psychosocial support** to 83,383 children (41,096 females, 2,725 with disabilities) in camps and 19,845 children (9,810 females, 258 with disabilities) in the host communities to rebuild hope and enhance resilience, positive coping and effective social functioning. During field monitoring visits, children exhibited increased optimism and reported engagement in constructive activities like helping their families or remote learning.

UNICEF emphasized quality **case management**, supporting government and partners with trained personnel. The most recent upgrade of the interagency Child Protection Information Management System has been rolled out to facilitate better identification, care planning and follow up. 3,663 children (1,947 females, 366 with disabilities) benefitted from comprehensive case management services in 2020, out of which 3,230 were from the camps (1730 females) and 433 from the host communities (217 females).

**Positive parenting sessions** for 45,225 parents and caregivers (22,240 females) in camps and 16,555 in host communities (7,759 females) helped empower caregivers to provide a nurturing and enabling family environment. Parents self-reported that as a result of the parenting sessions they are able to better deal with parenting concerns such as misbehaviour, crying, sleeplessness and toilet training in developmentally appropriate and realistic ways.



UNICEF-supported **Community-Based Child Protection Committees** (CBCPCs) played a significant role during the COVID-19 lockdown, undertaking information and awareness sessions at community-level and responding to protection concerns. In 2020, 408 CBCPCs with 5,410 members (2,527 female) were active in camps and host communities and provided referrals for 1,266 children (590 girls, 39 with disabilities, 949 Rohingya).

UNICEF and partners provided **life skills** training for adolescents aged 10 to 18 years through 132 multipurpose centres (MPCs) and 453 adolescent clubs through March 2020. Of the 9,577 adolescents (4,283 females) enrolled at the beginning of the year, only 20 per cent were able to complete the life skills course. The adolescents who did not complete the sessions were still engaged in COVID-19 risk mitigation and as social change agents to sensitize their peers, family and the community members on protection issues.

Through 15 UNICEF supported safe spaces in the camps and 3 in host communities, women and girls accessed gender-based violence (**GBV**) **prevention and response services**. This included 15,731 girls and women in camps (6,529 girls, 9,158 women, 44 with disabilities, 136 per cent of annual target) and 6,073 in host communities (2,429 girls, 3,440

women, 4 with disabilities, 129 per cent of annual target<sup>22</sup>). During the COVID 19 pandemic, safe spaces remained open for individual services to respond to the escalating GBV incidents, including child marriage and intimate partner violence. 71,114 women, men, boys and girls in camps and 15,079 in host communities were reached with messaging on GBV awareness and countering negative social norms during the COVID-19 pandemic. Additionally, 15,175 women and adolescent girls received dignity kits to facilitate their dignified access to services and 4,047 (2,641 female) frontline workers were trained on case management, psychosocial support and GBV risk mitigation, as well as protection from sexual exploitation and abuse.

**Host Community:** In addition to the services detailed above, UNICEF worked with government to strengthen the Child Protection System. UNICEF supported the Office of the Registrar General to improve the Birth and Death Registration Information System (BDRIS) by upgrading its software and providing technical equipment and training to 158 staff (3 female) to accelerate the resumption of birth and death registration in the district. The Government launched the upgraded BDRIS in October 2020. Birth and death registration has now restarted in 53 of 75 unions and municipalities and will gradually restart in all locations. The registrations of 451 children under 5 year (2 within 45 days of birth; 55 under 1 year and 394 under 5 years) were completed by the end of 2020 (gender disaggregation not available).

UNICEF is working closely with Children Courts to develop their non-custodial systems and to promote family and community-based care for children in the justice system from the Rohingya and host communities. A consultation on non-custodial measures for the children in conflict with law under Children Act 2013 was organized jointly with Supreme Court Special Committee for Child Rights (SCSCCR). UNICEF ensured the participation of 40 participants (4 female) from the Judiciary, Police and DSS in Cox's Bazar. This support is enhancing coordination among the different actors in child protection system. Twenty-three children (all male) were granted bail by the Virtual Court under COVID-19 and reintegrated with parents or guardians in Cox's Bazar. UNICEF is working closely SCSCCR and DSS to support the children and their families meet their immediate basic needs and prevent re-offending.

**Child Protection Sub-Sector (CPSS):** CPSS has continued to place communities at the centre of the child protection response through capacity building and community engagement, including developing tip sheets, guidelines and tools to allow Child Protection actors to continue safely during COVID-19. Mainstreaming child protection in other sectors, including Health, Shelter/Non-Food Item, Nutrition, WASH and Food Security/Livelihoods, was done through tailored guidance. Case Management continued to be an interagency focus through remote and direct case management and ensuring maximum coverage with minimum presence. Case Management coordination between child protection and GBV has been scaled up both at Cox's Bazar and field levels.

### **Integrated Adolescent Programme (Education and Child Protection)**

The 132 UNICEF MPCs (28 in host communities) reached 18,914 adolescents in camps (12,681 girls) and 2,384 adolescents (1,621 girls) aged 15 to 18 years with an integrated package of life skills, literacy numeracy and vocational skills. With group sessions suspended due to COVID-19, MPCs hosted essential child protection services such as case management and psychosocial support. With the Youth Working Group, UNICEF led the adaptation of the COVID-19 Adolescent Kit to the Cox's Bazar context for adolescents in both host and refugee communities. The COVID-19 Adolescent Kit, accessed by 17,414 adolescents (9,515 girls, 34 adolescents with a disability) is part of an education package response targeting adolescents and including literacy and numeracy and life skills, adapted to the context of the COVID-19 pandemic. Adolescents were trained on mobile repair, dress making and solar panel repair to enable them gain practical skills for improving their employability and entrepreneurship.

### **Communications for Development (C4D), Community Engagement & Accountability**

Through 747 Rohingya community mobilization volunteers (285 females) including model mothers, youth volunteers and religious leaders, 473,044 refugees (148,027 women, 100,856 girls) were reached twice a month with correct and appropriate key life-saving messages, including on COVID-19. In addition to the on-going COVID-19 risk communication campaign, six campaigns were held to support vitamin A supplementation (two campaigns), OCV, Measles and Rubella, Routine Immunization and World Breastfeeding Week. A study to identify the barriers to routine immunization in 26 Rohingya camps revealed that 92 percent people knew about the importance of vaccination but 44 per cent did not know the vaccination schedule, and 56 per cent could not name a vaccine-preventable disease.

UNICEF partnered with radio and local media to extend its messaging through weekly radio shows and public service announcements on lifesaving behaviors and services. A radio listenership survey commissioned by Bangladesh Betar revealed that 62 per cent of Rohingya and 66 per cent of Bangladeshi listeners think that radio programmes convey

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<sup>22</sup> UNICEF was able to over-reach its targets for GBV services in camps and host communities as small group sessions were able to restart in August, earlier than for many other services.

clear messages on issues regarding women and children. Adolescent radio listener clubs (ARLCs) engaged 2,525 adolescents (1,515 girls) to improve their understanding of COVID-19, disease outbreaks, nutrition and mental health.

Fourteen Information and Feedback Centres (IFCs) provided information and referrals, and recorded community complaints, feedback and queries (CFQs) in the camps. In 2020, these IFCs received 80,337 CFQs (46,619 from women), of them 7,766 complaints, 15,533 feedback and 57,014 pieces of queries. Ninety-five per cent visitors reported that their previous CFQs were resolved. Most CFQs were on health, non-food items, shelter and WASH.

**Host Community:** With the support from UNICEF, Bangladesh Betar and Community Radio Naf broadcasted 216 magazine programmes and 162 live phone-in programmes on COVID-19, health, education, nutrition and menstrual hygiene. UNICEF and partners also facilitated 153 ARLCs with 3,825 adolescents (2,295 girls) on issues including COVID-19, climate change, child marriage, health and nutrition. Through four IFCs established in host community, a total of 17,434 CFQs were collected, recorded and referred immediately to the local authorities and service providers for resolution.

## Humanitarian Leadership, Coordination and Strategy

The humanitarian response for the Rohingya refugee crisis is facilitated by the Inter Sector Coordination Group (ISCG) in Cox's Bazar. The ISCG Secretariat is guided by the Strategic Executive Group that is designed to be an inclusive decision-making forum consisting of heads of humanitarian organizations. On the government side, a National Task Force, established by the Ministry of Foreign Affairs, has been leading the overall coordination of the Rohingya crisis. Since the August 2017 influx, the Ministry of Disaster Management and Relief (MODMR) has been assigned to coordinate the Rohingya response with support from the Bangladesh Army and Border Guard Bangladesh. At the Cox's Bazar level, the Refugee Relief and Repatriation Commissioner continues to be responsible for day-to-day coordination of the Refugee operation, while the Deputy Commissioner is responsible for the development of the Bangladeshi community throughout the district of Cox's Bazar. UNICEF leads the Nutrition and WASH Sector and Child Protection Sub-Sector and co-leads the Education Sector with Save the Children, in coordination with the concerned government counterparts.

## Cyclone Amphan and Monsoon Flood Response

**Cyclone Amphan** made landfall in south western Bangladesh on 20 May 2020, affecting 10 million people in 19 districts and displacing 100,000 people. The Government of Bangladesh evacuated 2.4 million people to 12,078 cyclone shelters. In consultation with MODMR, the Humanitarian Coordination Task Team (HCTT) developed a US\$25 million [Humanitarian Response Plan \(HRP\)](#) for Cyclone Amphan targeting 700,000 people<sup>23</sup>. As cluster lead, UNICEF coordinated preparedness and response actions across Education, Child Protection, Nutrition and WASH. The CERF Secretariat approved a US\$ 5 million allocation for Amphan response, of which UNICEF received US\$ 1.25 million achieving the following results:

- 181,921 people (78,251 female) reached with child protection messaging and 10,968 children (5,776 girls) provided with alternative care
- 102,392 (50,765 girls) children under 5 screened and 514 children (298 girls) treated for SAM
- 284,075 people (151,637 female) reached with hygiene messages

2020 saw the **country's second-worst floods** since 1998, with waters at dangerous levels for 63 days affecting 5.5 million people in 33 districts. The flooding killed 257 people and displaced 211,859 families, with 94,414 people evacuated to 1,525 shelters. In line with the [Contingency plan for climate-related disasters in the time of the COVID-19 pandemic](#), an [HRP for Monsoon Floods](#) was developed for US\$ 40 million targeting 1,093,091<sup>24</sup> people in 7 prioritized districts in Northern Bangladesh. UNICEF supported cluster coordination and strengthened the national preparedness and response capacity in line with the Localization Agenda. UNICEF partners identified 7,638 children (3,917 girls) for SAM treatment, provided access to child protection service hubs for 6,586 children (3,580 girls) and distributed education in emergencies supplies to 38,400 children. The distribution of education materials was constrained by school closures.

## Human Interest Stories and External Media

Throughout 2020, UNICEF reiterated the needs of Rohingya refugee and affected host community children. Communications work was constrained by limited access to the refugee camps. However, UNICEF, taking all precautions, was able to generate content to highlight progress, achievements and challenges through human-interest stories, shared with the donors during reporting periods, and content published on digital media platforms. UNICEF

<sup>23</sup> Men: 203,713; Women: 205,158; Boys: 144,943, Girls: 146,186, including 213,545 people with disabilities

<sup>24</sup> Men: 300,383; women: 308,325; boys: 239,040, girls: 245,344, including 32,985 people with disabilities

developed and published communications and advocacy content keeping COVID-19 in mind, raising awareness, and encouraging continued support to tackle the pandemic. All six key programmatic areas supporting Rohingya and Bangladeshi children and their families were highlighted through the UNICEF Bangladesh website and social media channels. UNICEF Bangladesh is currently leading all UNICEF country offices globally in terms of outreach, with over 10 million followers and readers on social media and website.

#### External Media:

- Interview on rte on COVID19 ([link](#))
- A podcast featuring two UNICEF UK Goodwill Ambassadors, singer Jessie Ware and actor Michael Sheen discussing their work with UNICEF and particularly the situation in the Rohingya refugee camps which they visited in 2018. The podcast can be found at the following [link](#).
- BBC TV Interview on Cyclone Amphan impact in Cox's Bazar and Bangladesh, May 23.
- The COVID-19 threat to the developing world ([link](#))
- Coronavirus, After Delay, Arrives in Bangladesh's Refugee Camps ([link](#))
- UNICEF Executive Director Henrietta Fore's remarks at the Conference on Sustaining Support for the Rohingya Refugee Response ([link](#))
- A press release points out Rohingya children had been already facing immense challenges in attaining education but COVID-19 further disrupted their limited opportunity and they are now facing the brunt of the health crisis ([link](#))
- A press release on COVID-19 Isolation and Treatment Centre opens for Bangladeshi communities and Rohingya refugees in Cox's Bazar ([link](#))
- A press release on the National Launch of 'Minimum Standards for Child Protection in Humanitarian Action' in Dhaka and Cox's Bazar, jointly with UNHCR ([link](#))

#### Articles:

- UNICEF Supply Division published a [story](#) on the disability friendly latrines project.
- UNICEF's engagement of religious leaders in the fight to contain the spread of COVID-19 in the Rohingya refugee camps and at national level ([link](#))
- Knowledge as a tool for empowerment for Rohingya refugee women and girls ([link](#)).
- Malnourished Rohingya children at heightened risk during pandemic ([link](#))
- In search for education for Rohingya children ([link](#))
- Courageous health workers on the frontline in a time of deadly COVID-19 ([link](#))
- Expanding education for Rohingya refugee children in Bangladesh ([link](#))
- Rohingya and Bangladeshi girls bond in UNICEF Safe Spaces ([link](#))
- Rohingya parents of six daughters share concerns for 2020 ([link](#))
- Preventing a silent crisis for Rohingya women and girls during COVID-19 pandemic ([link](#))
- Marking three years of the Rohingya refugee crisis, UNICEF celebrates the courage, resilience and strength of Rohingya children ([link](#))
- The important of promoting knowledge as a tool for empowerment for Rohingya refugee women and girls ([link](#))
- A page on social hubs: supporting Rohingya and Bangladeshi youths to coexist and gain skills ([link](#))
- A page on preparation and response to COVID-19 in Cox's Bazar ([link](#))
- Rohingya children become hygiene promotion ambassadors during COVID-19 response in Cox's Bazar ([link](#))
- A photo essay on Vitamin-A campaign for Rohingya children goes door-to-door due to COVID-19 ([link](#))
- A story on Rohingya and Bangladeshi adolescents share hopes for their communities ([link](#))

#### Video

- UNICEF supply division released a [video](#) on the disability friendly latrines.
  - A video was published on World Refugee Day showing how UNICEF and its partners are on the front-line delivering critical services for Rohingya refugees during COVID-19. ([link](#))
  - Young Rohingya adolescents discuss their ideas and dreams of home on World Refugee Day. ([link](#))
  - "Stay home diaries" following Rashed (14) and his daily life in the Rohingya camps during COVID-19 ([link](#)).
  - A video on the impact of a multi-purpose centre for an adolescent girl from the Chakma community ([link](#))
  - A story of friendship between a Rohingya and a Bangladeshi girl ([link](#))
  - The dangers associated with lockdown measures for Rohingya women and girls during COVID-19 pandemic ([link](#))
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## Annex A

### Summary of Programme Results

	UNICEF and IPs					Sector Response				
	2020 Target		Total Results		Change since last report	2020 Target		Total Results		Change since last report
	Refugee	Host Community	Refugee	Host Community		Refugee	Host Community	Refugee	Host Community	
<b>NUTRITION</b>										
Number of children aged 6 to 59 months affected by SAM who are admitted for treatment	6,000	600	7,019	474 <sup>ii</sup>	4,611	9,300 <sup>iii</sup>	1,400	14,041	933	8,960
Children aged 6 to 59 months who received vitamin A at least once in the year	145,000	46,100	155,080	48,563 <sup>iv</sup>	26,274	160,026	46,100	154,445	48,563	26,274
<b>HEALTH</b>										
Children aged 0 to 11 months who have received Pentavalent 3 vaccine	29,300	75,600	19,873	76,812 <sup>v</sup>	33,795					
Sick newborns treated	400	3,950	191	4,007 <sup>vi</sup>	2,488					
<b>WATER, SANITATION &amp; HYGIENE</b>										
People accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene	241,754	96,290 <sup>vii</sup>	241,754 <sup>viii</sup>	51,496 <sup>ix</sup>	37,845 <sup>x</sup>	840,000	705,003 <sup>xi</sup>	648,545	561,755 <sup>xii</sup>	416,350
People benefiting from functional latrines to agreed standards	241,754	135,850 <sup>xiii</sup>	241,754 <sup>xiv</sup>	99,456 <sup>xv</sup>	86,927 <sup>xvi</sup>	840,000	510,000 <sup>xvii</sup>	671,420	286,880 <sup>xviii</sup>	223,550
<b>CHILD PROTECTION &amp; GENDER-BASED VIOLENCE</b>										
Children accessing psychosocial support services	100,000	25,000	83,383 <sup>xix</sup>	19,845 <sup>xx</sup>	24,525 <sup>xxi</sup>	117,627	11,375	46,829	8,932	19,324
Children and women accessing GBV risk mitigation, prevention and response interventions	11,600	4,900	15,731	6,073	11,943 <sup>xxii</sup>					
<b>EDUCATION</b>										
Children accessing quality education	210,000	83,750 <sup>xxiii</sup>	231,578 <sup>xxiv</sup>	88,589 <sup>xxv</sup>	38,401	315,017 <sup>xxvi</sup>	488,333 <sup>xxvii</sup>	323,857 <sup>xxviii</sup>	116,491 <sup>xxix</sup>	87,352
Adolescents aged 15 to 18 years accessing secondary education	10,000	5,000	- <sup>xxx</sup>	- <sup>xxxi</sup>	-	49,864	1,652	-	-	-
Adolescents aged 15 to 18 years and youth aged 19 to 24 years accessing vocational skills training	21,500	10,500	18,914	2,384	3,200					
<b>C4D/ ACCOUNTABILITY MECHANISM</b>										
People reached through messaging and dialogue (house to house) on key life-saving behaviours and referrals to services with a focus on health, nutrition, WASH, education and child protection	473,044	227,125	473,044 <sup>xxxii</sup>	227,125 <sup>xxxiii</sup>						
People accessing mechanisms to voice their needs/concerns, including feedback and complaint mechanisms	40,000	10,000	80,337 <sup>xxxiv</sup>	17,434 <sup>xxxv</sup>	50,266					

## Annex B

### Funding Status\*

Appeal Sector	Funding Requirements	Funds available*					Funding gap	
		Funds Received Current Year		Total	Carry-Over ORE	Carry-Over ORR	\$	%
		ORE	ORR					
Nutrition	14,230,000	3,559,603	2,649,655	6,209,258	1,671,278	4,970,020	1,379,445	10%
Health	15,180,000	5,318,872	934,663	6,253,535	1,001,683	4,295,723	3,629,059	24%
WASH	30,000,000	10,677,428	2,690,804	13,368,232	3,806,085	3,787,594	9,038,089	30%
Child protection/GBV	17,000,000	8,234,678	5,406,799	13,641,477	1,943,617	3,606,084	-	-
Education	47,000,000	8,986,146	5,984,185	14,970,331	7,161,712	35,279,808	-	-
Communication for development	3,150,000	1,412,132	728,237	2,140,369	458,236	413,667	137,728	4%
Emergency preparedness	8,700,000	11,179,150	67,118	11,246,268	224,410	192,775	-	-
<b>Total</b>	<b>135,260,000</b>	<b>49,368,009</b>	<b>18,461,461</b>	<b>67,829,470</b>	<b>16,267,022</b>	<b>52,545,670</b>	<b>0</b>	<b>0%</b>

\* As defined in the revised Humanitarian Appeal of January 2020 for a period of 12 months (Jan-Dec 2020)

UNICEF Bangladesh HAC: <https://www.unicef.org/appeals/bangladesh.html> UNICEF Bangladesh Facebook:

<https://www.facebook.com/unicef.bd/>

Bangladesh Joint Response Plan 2020: <https://www.humanitarianresponse.info/en/operations/bangladesh>

UNICEF Response to the COVID-19 Pandemic in Bangladesh: <https://dashboard.unicefbangladesh.org>

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<sup>i</sup> The host community results for Cox's Bazar District cover only Ukhia and Teknaf Upazilla, except where noted. For water, sanitation and access to education, it also includes the flood response.

<sup>ii</sup> Includes six upazillas' data because the target has been set considering these upazillas

<sup>iii</sup> Sector target has been revised due to COVID-19

<sup>iv</sup> Coverage from the National Vitamin A Campaign in the host community conducted in October 2020

<sup>v</sup> Includes six upazillas' data because the target has been set considering these upazillas.

<sup>vi</sup> Including Cox's Bazar Sadar along with Ukhia and Teknaf Upazillas. Inclusive of the Chakaria and Ramu units, 4,473 newborns were treated as reported in the narrative.

<sup>vii</sup> Includes 35,000 for Teknaf and Ukhia and 61,280 for the national flood response.

<sup>viii</sup> Based on coverage surveys indicating adequate safe, functional water sources for all refugees in the eight UNICEF-supported camps.

<sup>ix</sup> Includes 47,025 in Teknaf and Ukhia and 4,471 reached by UNICEF in the flood response. The over-achievement in Teknaf and Ukhia is due to the additional focus on ensuring the availability of water for IPC and other needs considering COVID-19.

<sup>x</sup> Including people served with new water options and water options rehabilitated, repaired or where the water source was disinfected.

<sup>xi</sup> Includes 285,000 people in Ukhia and Teknaf Upazillas by the Cox's Bazar WASH Sector and 420,003 flood-affected Bangladeshis across the country targeted by the national WASH Cluster in the monsoon HRP.

<sup>xii</sup> Includes 280,155 from Teknaf and Ukhia and 281,600 from the WASH Cluster national flood response.

<sup>xiii</sup> Includes 115,000 for Teknaf and Ukhia and 20,850 for the WASH Cluster national flood response.

<sup>xiv</sup> Based on coverage surveys indicating adequate functional latrines for all refugees in the eight UNICEF-supported camps.

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- xv Includes 93,940 in Teknaf and Ukhia and 5,516 from the UNICEF flood response. The under-achievement in Teknaf and Ukhia relates to CLTS efforts were delayed by five months due to lockdowns and restrictions on group meetings. The national flood response was under-resourced.
- xvi Including people served with new household-based latrines and the repair, rehabilitation and disinfection of existing latrines.
- xvii Includes 285,000 people in Ukhia and Teknaf Upazillas hosting Rohingya refugees targeted by the Cox's Bazar WASH Sector and 225,000 flood-affected Bangladeshis across the country targeted by the national WASH Cluster in the monsoon HRP.
- xviii Includes 99,600 from Teknaf and Ukhia and 187,280 from the national WASH Cluster flood response.
- xix Target was reset at mid-year based on the level of need at that time. As the COVID-19 situation normalized, including a fairly low number of cases and deaths, fewer children presented in need of psychosocial support services.
- xx Target was reset at mid-year based on the level of need at that time. As the COVID-19 situation normalized, including a fairly low number of cases and deaths, fewer children presented in need of psychosocial support services.
- xxi Includes COVID-19 response result outside the JRP area, leading to a higher result than the sector.
- xxii Includes lifesaving services, dignity kits and skills development.
- xxiii Includes 50,000 in Teknaf and Ukhia and 33,750 for the national flood response.
- xxiv Includes children aged 3 years enrolled in learning facilities.
- xxv Includes 50,189 children who benefitted from the distribution of school effectiveness grants to all government primary schools in Ukhia and Teknaf Upazillas and 38,400 children reached in the national flood response.
- xxvi Includes 35,363 children who are 3 years of age
- xxvii Includes 43,547 children in Ukhia and Teknaf Upazilas aged 4 to 14 years targeted by the Cox's Bazar Education Sector and 444,786 flood-affected Bangladeshi children across the country targeted by the national Education Cluster in the monsoon HRP.
- xxviii Includes 15,007 children who are 3 years of age
- xxix Includes 30,341 children in Teknaf and Ukhia and 86,150 children reached through the Education Cluster flood response.
- xxx This target was based on the MCP which was delayed due to the closure of LCs.
- xxxi Secondary school support, including construction/rehabilitation in host communities was delayed as schools were closed throughout the year.
- xxxii Population was fully covered with multiple rounds of campaigns due to COVID-19 and other priorities.
- xxxiii Population was fully covered with multiple rounds of campaigns due to COVID-19 and other priorities.
- xxxiv COVID-19 and its socioeconomic impacts generated a lot of concern, leading to additional CFQs.
- xxxv COVID-19 and its socioeconomic impacts generated a lot of concern, leading to additional CFQs.