



Mukarroma, 18 months old, and her family endured a sleepless night in the ashes of their shelter in the Rohingya refugee camps in Cox's Bazar. ©UNICEF/UN0798230/Spiridonova

UNICEF BANGLADESH Humanitarian Situation Report No. 63

Reporting Period: 1 January to 31 March 2023

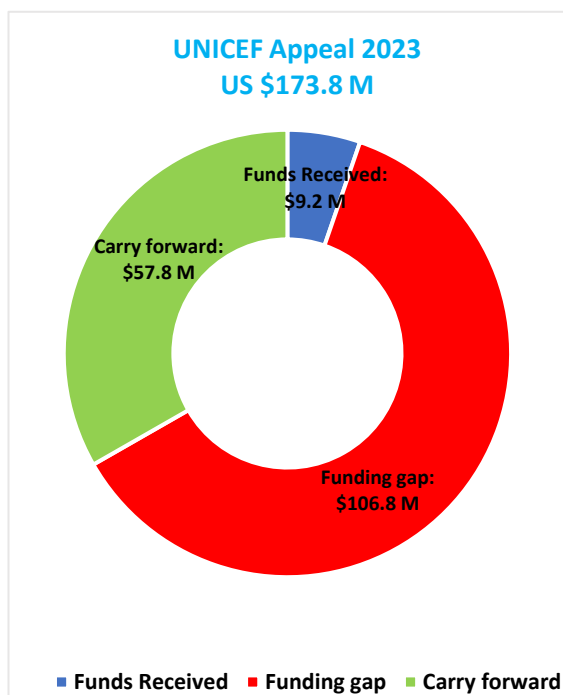
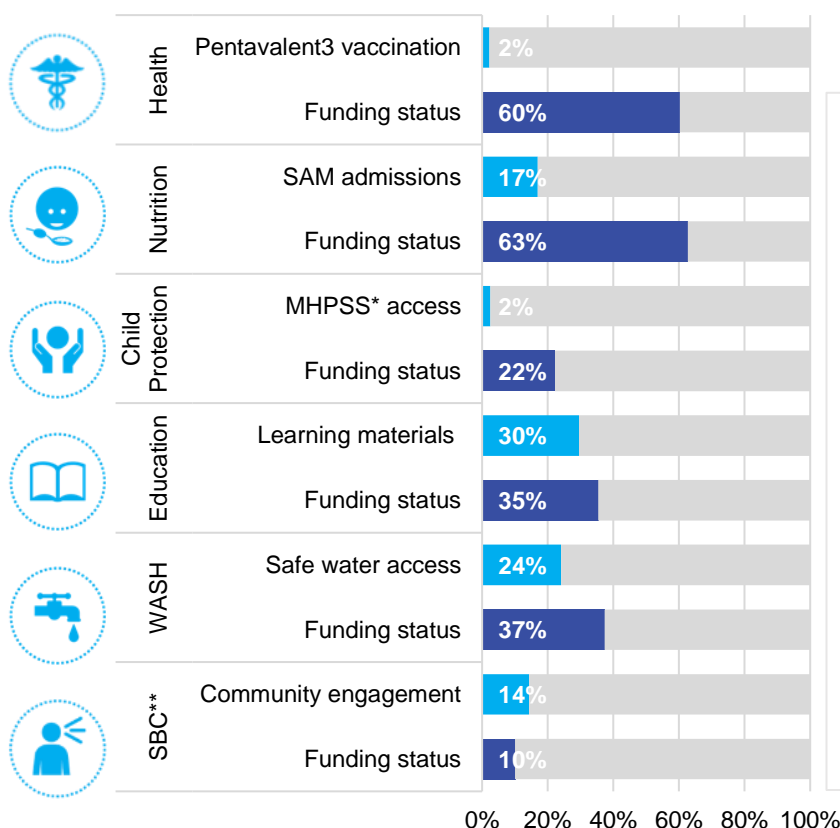
Situation in Numbers

Highlights

- During the reporting period, a devastating fire broke out in Rohingya refugee Camp 11, and 15,926 people including 8,122 children were affected, and 25 UNICEF-supported facilities were fully damaged. UNICEF has provided life-saving support to 8,070 people (1,440 female, 5,942 children) through a multi-sectoral response. Reconstruction of the fire-affected UNICEF-supported facilities is underway.
- With UNICEF support, 163,132 children (77,864 girls) are receiving education based on the Myanmar Curriculum (MC)¹ of their home country in Cox's Bazar Rohingya refugee Camps. A total of 9,470 children (4,779 girls) including 79 children with disabilities (35 girls) continue to receive their education in 28 schools in Bhasan Char.
- In February 2023, a Stabilization Center (SC)², infant and young child feeding (IYCF), and Early Childhood Care and Development (ECCD) corners were established in a 20-bed hospital to treat children with severe acute malnutrition (SAM) with complications and provide nutrition counseling to mothers and children in Bhasan Char. The security situation remains unpredictable and unstable in the Rohingya refugee camps thus constraining the delivery of humanitarian services.



UNICEF's Response and Funding Status



¹ Rohingya refugee children receive education based on the national curriculum of their home country Myanmar.

² Stabilization centre provides treatment for the most extreme cases of severe acute malnutrition.

* Mental health and psychosocial support ** Social and behaviour change

Funding Overview and Partnerships

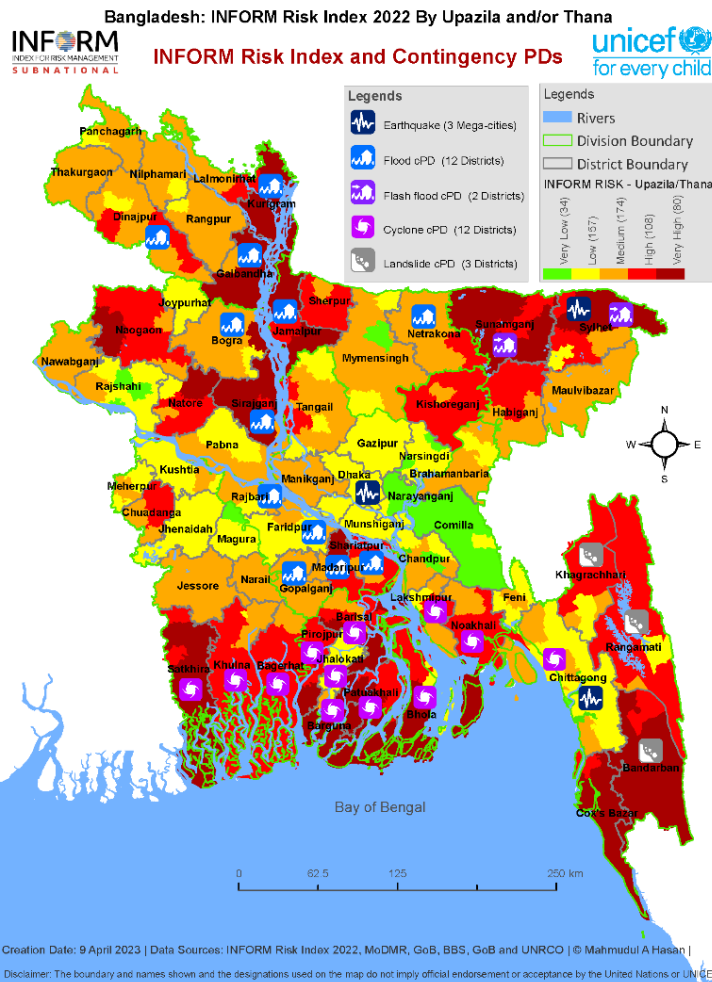
With 39 per cent of funding requirement received, UNICEF wishes to express its sincere gratitude to the Asian Development Bank, Australia (DFAT), Canada (GAC), Denmark, Education Cannot Wait, the European Union (ECHO, INTPA), Gavi, the Vaccine Alliance, Germany (BMZ/KfW Development Bank), Islamic Development Bank, Japan, the Republic of Korea, Switzerland (SDC), Thailand, the United Kingdom (FCDO), United States of America (BPRM, USAID, US Direct Mission), UNOCHA-CERF, the World Bank, and various other National Committees for their generous contributions to this response. At the same time, critical funding gaps in Child Protection (78 per cent), WASH (63 per cent), and Education (59 per cent) restricted UNICEF’s ability to meet all priority needs of girls, women and people with disabilities. It also negatively impacted and slowed the progress of service delivery and post-fire reconstruction of damaged facilities. Declining funding for Humanitarian Action in Bangladesh will not only increase the risks of human trafficking, gang violence, drug-related crimes, domestic violence and early marriage but also leave Rohingya children and youth vulnerable to being exploited by extremist groups³. Flexible and multi-year donor funding in 2023 will be critical to providing essential support to Rohingya refugees and the most vulnerable children in Bangladesh.

Situation Overview & Humanitarian Needs

Bangladesh continues to host 960,539 Rohingya refugees⁴ that came from Myanmar in 32 camps in Cox’s Bazar District and Bhasan Char of Noakhali District and about 52 per cent of them are children. As part of the Rohingya refugee relocation plan of Government of Bangladesh to Bhasan Char, 29,810 refugees were relocated to the island till 31 March 2023. Provision of basic services for the refugees in Bhasan Char has been ensured collectively by the humanitarian community. However, water-borne disease outbreaks, malnutrition, inadequate health facilities, lack of educational opportunities for adolescents, and the risks of exploitation and violence, including Gender Based Violence (GBV) are commonly faced by children.



On 9 March 2023, UNICEF personnel sort through emergency supplies at the warehouse in Cox’s Bazar for distribution to Rohingya refugee families displaced in the fire in the Rohingya refugee camps.
©UNICEF Bangladesh/2023/Sujan



On 5 March 2023, a devastating fire broke out in Balukhali Rohingya refugee Camp 11. Local firefighters and local authorities managed to contain the fire after three hours. Rohingya community volunteers under UNICEF and other agencies' programme were the first responders to the fire. 15,926 people (8,122 children) were affected out of which 5,274 people were displaced. 2,805 shelters were damaged and 155 facilities including learning centres, hospitals, health posts, information, and feedback centre, integrated nutrition centre, and multi-purpose centre were damaged. 1,050 WASH structures were also destroyed. These include water networks, faecal sludge treatment plants, material recovery facility, bathing cubicles, latrine doors and tube-wells with handpumps. 25 UNICEF-supported facilities were fully damaged, including 22 learning centres (LCs), one multi-purpose centre, one integrated nutrition centre and one information and feedback centre. 2,299 (1,141 girls) learners were directly affected by the fire incident. The layout and architectural designs for the fire affected facilities have been prepared, and reconstruction will be undertaken using ECHO and CERF funds.

³ Worrying decline in funding for Rohingya refugees: <https://www.thedailystar.net/views/editorial/news/worrying-decline-funding-rohingya-refugees-2160906>
⁴ Joint Government of Bangladesh – UNHCR Population Factsheet (as of 31 March 2023)

Summary Analysis of Programme Response

Nutrition

As of 31 March 2023, a total of 178 (116 girls) under the age of five with SAM out of 1,886 targeted were admitted in the SAM corners of flash flood affected areas in Sylhet, Sunamganj and Netrokona districts. Out of all admitted SAM children, 99 per cent of children were discharged as cured, one per cent of children defaulted completion of treatment, and the death rate was zero per cent. 2,737 caregivers of children under the age of two received group counselling on IYCF. Caregivers of children with SAM are unwilling to stay full time of treatment in the SAM corner due to their other priorities in their family like care of other siblings. Consultation and messages on the SAM treatment are ongoing.

To boost the immune system of children 6-59 months, the Biannual Vitamin A capsule supplementation campaign throughout the country reached 14,534,748 children aged 12-59 months and 1,901,367 children aged 6-11 months. The total reach is 16,436,115 children aged 6-59 months, representing 102 per cent of the annual target (16,118,927). Second round of Vitamin A capsule supplementation will be held in the 3rd quarter of this year.

In Rohingya refugee camps, a total of 1,404 children (762 girls, 30 children with disabilities) under the age of five with SAM, representing 19 per cent of the target of 7,500 children, were treated in 26 UNICEF-supported out-patient therapeutic programmes. The recovery rate (84 per cent) for SAM children exceeds the minimum SPHERE standard of >75 per cent whereas death (one per cent) and defaulter rate (0.0 per cent) were also well below the standards of <10 per cent and <15 per cent respectively. Similarly, across project sites, 12,694 pregnant and lactating women (PLW) and caregivers of children 0-23 months (four with disabilities), representing 25 per cent of the target of 51,808 mothers, were counselled on IYCF aiming to promote recommended optimal IYCF practices among the mothers to bring change in the care practices in terms of IYCF Practice in Emergency. In Host Communities, during the reporting period, 155 children (95 girls) with SAM and medical complications, representing 21 per cent of the target of 732 children, were counselled on IYCF. Similarly, 19,491 PLWs (14 with disabilities), representing 28 per cent of the expected target of 71,000 PLWs, were received need-based IYCF counselling. UNICEF provided technical support to 371 trained key Implementing partner (IP)'s staff and 325 volunteers through training on disability inclusion. In addition, IP's staff trained on modified Community Management of Acute Malnutrition (CMAM) guidelines to ensure admission of children with disability into CMAM. The nutrition project beneficiaries (i.e children under the age of five and PLWs) were screened for disabilities by trained service providers to ensure that they had equal access to preventive and curative nutrition services. If beneficiaries had disabilities, they were provided with a higher level of care through a cross-referral pathway between health and nutrition facilities. All facilities have been assessed and renovated to ensure that people with disabilities can easily access the nutrition facilities.

In Bhasan Char, UNICEF established a Stabilization Center in a 20-bed hospital, providing lifesaving treatment to SAM children with complications. UNICEF has supported the recruitment and training of all human resources needed for the Centre, including two Medical Officers, five Nurses, one Statistical assistant, one IYCF counsellor, and one ECCD Promoter. UNICEF provided necessary supplies (e. g. vitamin A, sanitizer, etc.), human resources, and technical support to implement the 1st round of the Vitamin A campaign and mass Mid Upper Arm Circumference (MUAC) screening from 27 March to 1 April 2023. Through this campaign, a total of 5,226 children aged 6-59 months were screened by MUAC for acute malnutrition detection and 5,192 children aged 6-59 months received Vitamin A supplementation.

Health

Towards ensuring fire safety and security, UNICEF contracted DeFire Bangladesh and supported the establishment of fire safety and security systems in 30 hospitals. A draft national guideline/ Standard Operating Procedures (SOPs) on fire safety and security in health facilities have been developed, procurement of fire extinguishers and equipment are ongoing, and 1,144 healthcare providers are trained on fire safety including fire drills. Oxygen infrastructure and preparedness supplies have also increased in health facilities through Government, UNICEF, and other partner support.

In Rohingya refugee camps and Bhasan Char, the Penta campaign and routine EPI were running simultaneously in March 2023 and the number of children who received the vaccines during the campaign was not recorded under the routine EPI to avoid duplication. As a result, Penta coverage in the routine expanded programme of immunization (EPI) shows less in March. UNICEF in collaboration with the Government and partners contributed to the implementation of the 2nd round of Oral Cholera Vaccine (OCV) campaign in Bhasan Char which achieved 99 per cent of the target (27,364 Rohingya refugees and 774 Bangladeshi nationals) aged above one year old. Similarly, the last round of the routine EPI accelerated intervention (3rd round of Pentavalent vaccine and 2nd round of Measles-Rubella (MR) vaccine) was completed in the Rohingya refugee camps. Cumulatively, as a result of 3rd round of the campaign, 103 per cent (218,833) of the targeted children aged six weeks to below seven years were vaccinated with 1st dose of Penta, 93 per cent (202,492) with 2nd dose and 75 per cent (140,875) with Penta 3rd dose. 99 per cent (183,797) of

targeted children aged six months to below seven years were vaccinated with the 1st dose of MR and 102,471 with the 2nd dose of MR⁵.

Through UNICEF-supported facilities in Rohingya refugee camps, 37,464 children (17,020 girls) and 15,046 women received primary healthcare services such as consultation of illnesses (diarrhoea/respiratory illness and immunization). In the host community, services were availed to 8,845 children (3,974 girls) and 25,949 women. Routine EPI services reached 491 children (251 girls) in camps with 3rd dose of Pentavalent, in addition to the Pentavalent vaccination campaign.

With UNICEF support, the development of the Reaching Every Pregnant Mother and Newborn (REM-N) strategy was initiated in Ramu Upazila to ensure quality antenatal care (ANC) services for pregnant mothers, and safe deliveries at union and Upazila level Health facilities. The strategy will also ensure timely referral after the initial stabilization of delivery cases with complications at the PHC level to reduce maternal and newborn deaths in Cox's Bazar through increasing institutional delivery. As part of capacity building of health service providers, the following series of trainings were conducted; training on Universal Precaution, training on HIV Testing & Counselling (HTC), training on Post Exposure Prophylaxis (PEP), and training on PMTCT and Syphilis Management for Medical Officer, Nurse, Laboratory Technologist, Midwife of four Upazila Health Complexes as well as refugee campsites health facilities.



Vaccination session during 3rd round Penta & 2nd round MR vaccination campaign for Rohingya refugees.

©Md. Erfan, Vaccinator, PHD PHC Camp 10

Water, Sanitation, and Hygiene (WASH)

The collective anticipatory action framework in Bangladesh supported by OCHA and CERF has been extended for two years and UNICEF will complement the anticipatory intervention with the provision of safe drinking water and hygiene promotion messages. UNICEF can reach 130,000 people in highly vulnerable five districts for floods in case the trigger events occur during this period. WASH section has been working closely with the Government of Bangladesh to increase its capacity including the management of contingency supplies.

Through UNICEF support, a total of 265,198 individuals (135,698 female and 1,723 people with disabilities) have access to a sufficient quantity of safe water for both drinking and domestic needs in Rohingya camps. Of these individuals, 79 per cent of refugees have access to treated/chlorinated water for drinking purposes. Both community water sources (tube wells) and household water quality have improved dramatically, with 100 per cent of community water sources and 95 per cent of households being free from E. Coli contamination. Furthermore, 260,737 Rohingya refugees (132,944 female and 1,711 people with disabilities) have access to functional sanitation facilities. Additionally, 60,000 women and girls in the reproductive age group have received Menstrual Hygiene Management (MHM) kits per sector standards, and 250,000 refugees have received monthly soaps (two bars of bathing and one bar of laundry soap) in the camps.

In Bhasan Char (BC), two critical WASH assessments (WASH baseline assessment and groundwater study) have been conducted through UNICEF direct support, and the results showed that fresh groundwater exists throughout the island at a depth of over 150 meters. The groundwater study report identified 1,244 unsecured boreholes, of which UNICEF's partner sealed and secured 445 boreholes through protection works, sanitary sealing, and capping to mitigate the risk of underground water contamination. The March report observed 19 per cent of bacteriological contamination (E. coli) at the source and 39 per cent at the household level. In addition, 15,029 Rohingya refugees (7,724 female and 171 people with disabilities) in BC have access to WASH services through direct UNICEF support. Furthermore, 29,458 refugees (15,500 female and 255 people with disabilities) have benefited from UNICEF support by establishing a water quality testing laboratory in BC and regularly monitoring drinking water quality.

In the host community, through constructing and upgrading family latrines, 42,542 individuals (21,432 female and 321 people with disabilities) now have access to basic sanitation facilities. Furthermore, with direct support from UNICEF, 5,852 people (2,902 female and 42 people with disabilities) now have access to safe water supply through the new installation and rehabilitation of water systems.

Education

During the reporting period, the education team invested in preparedness activities including the pre-positioning of Education supplies and the joint development of contingency partnerships⁶ for field offices. As part of pre-positioning, a total of 733 Education in Emergency (EiE) Kits are being distributed to warehouses and another 588 EiE kits are being procured. These kits are expected to reach 52,840 children during emergencies. Through the

⁵ source of data is the tally sheet of Upazila health complex.

⁶ Contingency partnerships are established with governments and/or CSOs in higher-risk countries, with simple activation protocols for rapid operationalization in response to natural disasters such as floods and cyclones

contingency partnerships, the education team is preparing to target more than 70,000 children (50 per cent girls) to ensure continuity of learning through functional learning spaces and supplies of education materials.

The roll-out of the Myanmar Curriculum (MC)¹ in Cox's Bazar Rohingya refugee Camps has enabled access to 163,132 children (77,864 girls) for Kindergarten (KG), grade one and two and secondary grades 6-9. In total, 211,657 learners (100,724 girls), including 462 children with disabilities across the 30 camps, have accessed MC, Alternative Learning Programme (ALP), Learners Competency Framework Approach (LCFA) and early learning approaches. Out of them, during the reporting period, 174,771 learners (85,591 girls) have received learning materials, including 1,354 children with disabilities (some of whom also received assistive devices such as walking crutches and wheelchairs). UNICEF provided emergency school-in-a-box kits and tents to re-establish learning for children impacted by the fire in Camp 11, which destroyed 22 LCs. To prepare for the 2023-24 academic year, UNICEF is leading the development of learning assessment tools for children in MC grades and placement tests for the out-of-school children in Cox's Bazar and Bhasan Char.



Nurul Amin, a child with a physical disability, studies in a UNICEF-supported learning centre in the Rohingya refugee camps.
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In Bhasan Char, 2,872 children (1,471 girls) are participating in MC classes for KG and grades one, two, three, and six across seven schools implemented through BRAC. 21 Rohingya teachers (six female) were trained in basic teaching. In addition, UNICEF as sector lead, also provided MC textbooks and learning materials to nine partners (out of ten) for 7,005 students (3,551 girls) in 22 Schools.

Child Protection, Gender Based Violence in Emergencies (GBViE)

During the reporting period, UNICEF reached 47,266 children (22,796 female) and their caregivers including 2,799 persons with disabilities with mental health and psychosocial support, and a total of 161,937 (94,027 female) including 439 persons with disabilities, accessed GBV risk mitigation, prevention and response interventions through the development of awareness of violence against children and GBV, and popularization of Child Help Line 1098, rescue and recovery support by the volunteers in the flood and climate change-affected/vulnerable locations in collaboration with the Ministry of Home Affairs (MOFA), the Ministry of Women and Children Affairs (MoWCA), and the Department of Social Services (DSS) in the floods and cyclone-prone districts. In collaboration with the MOFA, MoWCA, and DSS, UNICEF provided technical support to the National Child Protection Cluster Coordination co-led by UNICEF and MOWCA where the emergency preparedness 2023 work plan was finalized.

In Cox's Bazar and Bhasan Char, with UNICEF support, a total of 58,265 beneficiaries (32,735 female, 795 people with disabilities) were reached during the reporting. UNICEF has continued a systems-strengthening approach to preventing and responding to abuse, exploitation, violence, and neglect of children while balancing the immediate humanitarian needs that prevail. This means that child protection concerns are not addressed in silos, and that interventions address the range of laws, policies, and services needed to support prevention and response to child protection risks.

In Cox's Bazar, 29,818 Rohingya refugee children (including adolescents) and caregivers (14,659 female, 460 people with disabilities) are accessing community-based Mental Health and Psychosocial Support (MHPSS) delivered through structured sessions in multipurpose centres and unstructured modalities as part of outreach work, social media, and the Child Helpline. In Bhasan Char, 2,878 Rohingya refugee children and caregivers (1,751 female, 49 people with disabilities) are accessing MHPSS. In the host community, 8,998 children and caregivers (4,961 female, 134 people with disabilities) are similarly accessing MHPSS. In Cox's Bazar, 11,801 Rohingya refugees (9,358 female, 147 people with disabilities) are accessing GBV prevention, risk mitigation or response interventions. In the host community, 2,584 people (2,006 female, 2 people with disabilities) are accessing specialized case management, referral pathways, and PSS, delivered by specially trained staff focusing on GBV. In addition, 2,186 (3 people with disabilities) men were reached through GBV prevention, risk mitigation or response interventions in Rohingya refugee camps, host community and Bhasan Char.



Children displaced in the fire in the Rohingya refugee camps play at a UNICEF temporary child friendly space on 9 March 2023.
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Prevention of Sexual Exploitation and Abuse (PSEA) and Child Safeguarding

The UNICEF PSEA team has trained 115 staff (56 female) from UNICEF Implementing Partners, 70 support staff (five female) from third-party vendors and ten recently newly recruited UNICEF staff (five female) on PSEA and Child Safeguarding. Among those 195 staff, 67 staff (26 female) have been provided a training of trainers (ToT) on PSEA, Child Safeguarding, and the Victim Assistance Protocol. UNICEF Implementing partners have trained 13,554 staff including volunteers (6,158 female) and PSEA awareness reached 55,413 (23,190 female) beneficiaries in Rohingya Camp, Host Community, and Bhashan Char.

The UNICEF PSEA team continued to strengthen the capacity of the civil society organizations (CSOs) for following proper SEA investigation procedures including reporting, investigating, monitoring, and improving a responsive system through the mentorship program for 48 participants from 24 organizations. The UNICEF PSEA team is coordinating and supporting the Inter-agency PSEA network both at the national and Cox's Bazar level on a regular basis for establishing and improving contextualized referral system. PSEA capacity assessment has been started by the PSEA team for all the CSOs in the moderate and low-risk status. Field-based monitoring is ongoing to check the credibility, safety, and accessibility of the community-based reporting mechanism.

The UNICEF PSEA team is advocating for SOPs on operating Community Complaint and Feedback boxes including improving the collective process of receiving, recording, referring, and recalibrating response action through the Inter-agency PSEA Network and Accountability to Affected People (AAP) Working Group. UNICEF is responding to all the SEA and Child Safeguarding allegations maintaining the confidentiality of reporting, ensuring the provision of victim assistance including the safety and security of survivors, providing counselling, physical treatment, and legal services through various service providers.

Social and Behaviour Change (SBC), Community Engagement & Accountability, and Humanitarian Cash Transfer (HCT)

As part of preparedness, emergency message booklets and megaphones have been prepositioned to procure and distribute. There is also a plan to organise the training at the national level on SBC and community engagement in emergencies for the emergency focals, counterparts and implementing partners of contingency partnerships. To reach people through appropriate and useful messages on prevention and access to services during emergencies, existing emergency SBC messages will be reviewed and updated in a participatory way.

In Rohingya refugee camps, a total of 361,233 people (131,576 female, 3,532 people with disabilities) have been engaged in two-way communications through house-to-house visits on various lifesaving issues, vaccinations of Penta/Td and Measles and Rubella (MR), Scabies, Nipah virus, fire safety, and disaster risk reduction. As the Information and Feedback Centre (IFC) in camp 11 was gutted in the recent devastating fire on 5 March 2023, in response, UNICEF and its partner established one Emergency IFC in the fire-affected camp and continued emergency information services to the fire-affected population. In addition, through 14 IFCs in camps, UNICEF received and referred 28,164 complaints, feedback, and queries (CFQs). The majority of them were on health, non-food and WASH facilities, and 85 per cent of them were resolved. In Cox's Bazar host community, UNICEF and its partners mobilized and engaged a total of 95,486 people (33,504 women and 457 people with disabilities) through house-to-house visits, group sessions, on various lifesaving and Nipah virus-related messages and information. Through four IFCs, a total of 7,170 CFQs were received and referred, and 62 per cent of the feedback loops were closed.

28 UNICEF staff completed a five-day face-to-face HCT training conducted from 19-23 March 2023. Representatives from all programme sections and field offices were trained by the HCT trainer from HQ. In addition, stand-by partners for HCT have been identified and agreements will be in place this year.

Emergency Preparedness

As a part of Disaster Preparedness and Risk Reduction, the risk analysis in the Emergency Preparedness Platform was updated in March 2023 in consultation with Resident Coordinators Office (RCO). The Emergency Preparedness and Response Plans in seven field offices were also reviewed and updated. 11 contingency Programme Documents (PDs) are ready to be activated for cyclones, floods, and earthquake response and additional 16 contingency PDs will be in place this year. In response to cyclones and floods, about \$1.8 million worth of supplies have been prepositioned and about \$177,000 are in the pipeline.

In Cox's Bazar, a PD with Bangladesh Red Crescent Society (BDRCS) was activated to enhance the fire safety capacity of UNICEF and BDRCS has supported facilities in 12 Rohingya camps. On the National Disaster Preparedness Day 2023 in March 2023, UNICEF supported District Relief and Rehabilitation Officer under the District Commissioner's Office of Cox's Bazar to organize an essay competition among school children and a simulation on fire and cyclone in the premise of Saikat Balika Bidyalay of Cox's Bazar to enhance awareness on disaster preparedness and knowledge on emergency response. The Fire Service Department of Cox's Bazar, and Red Crescent Youth wing of BDRCS provided technical support during the simulation. More than 100 girls and boys from nine schools participated in the essay competition and nine of them received recognition in three categories. The simulation exercise was observed by more than 400 students, teachers, and volunteers.

Humanitarian Leadership, Coordination and Strategy

The Government of Bangladesh leads and coordinates the Rohingya humanitarian response in Cox's Bazar and Bhasan Char. The National Task Force chaired by the Ministry of Foreign Affairs of Bangladesh provides oversight and strategic guidance for overall response. In addition, the National Committee on Coordination, Management and Law and Order, led by the Ministry of Home Affairs (MoHA), was formed in December 2020. The Office of Refugee Relief and Repatriation Commissioner (RRRC) manages and provides oversight of the day-to-day operations under the Ministry of Disaster Management & Relief (MoDMR). The Deputy Commissioner (DC) leads the civil administration and coordinates the responses to the needs of Bangladeshi host communities, including during natural disasters, and to ensure security and public order. UNICEF leads the Nutrition and WASH Sectors and Child Protection Sub-Sector and co-leads the Education Sector with Save the Children in Cox's Bazar's Rohingya response and WASH and Education sectors in Bhasan Char, in coordination with the RRRC and the relevant government departments. UNICEF actively participates in the Emergency Preparedness and Response Working Group (EPRWG), and Humanitarian Access Working Group (HAWG) which functions under Inter Sector Coordination Group (ISCG) and in Disaster Risk Reduction Working Group (DRRWG) which functions under the Office of District Commissioner. A new sector (Livelihood and Skill Development) was set up in January 2023.

The Strategic Executive Group (SEG) provides overall guidance for the Rohingya humanitarian response and engages with the Government of Bangladesh at the national level. At the field level in Cox's Bazar, the ISCG Secretariat ensures the overall coordination of the response. The ISCG Principal Coordinator chairs the Refugee Operations and Coordination Team (ROCT), which brings together the Heads of operational UN Agencies, members of the international and national non-governmental organizations (NGOs), and donor representatives based in Cox's Bazar. The ISCG convenes the Inter-Sector Meeting to ensure intersectoral coordination in the response. The SEG Co-Chairs are leading a process to streamline the coordination system in Cox's Bazar that will be implemented in 2023. In 2022, the humanitarian community finalized a set of Principles of Rationalization that aim to ensure that all Rohingya refugees have equitable access to all basic services in a predictable, efficient, and timely manner, and that the humanitarian community is transparent and accountable in its interventions. This exercise has informed the JRP 2023 and will continue to be applied in the coming years⁷.

Human Interest Stories and External Media

UNICEF developed communication and advocacy content raising awareness on and encouraging continued support to respond to all six key programmatic areas⁸ of response 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 outreach, with over 14 million followers and readers on digital media.

Stories:

- [Children living and working on the street need our empathy and support](#) (27 March 2023)
- [Furious fire leaves 6,000 Rohingya refugee children without shelter in Bangladesh refugee camps](#) (8 March 2023)
- [Surviving poverty, floods, and malnutrition in Bangladesh](#) (7 March 2023)
- [Bangladeshi children and youth share their journey to better mental health](#) (16 February 2023)
- [A UNICEF economic empowerment programme reunites children with their families](#) (11 January 2023)

Press releases/statements:

- [New report details shocking deprivation of children living on the street](#) (10 April 2023)
- [UNICEF launches first large-scale fundraising campaign in Bangladesh](#) (22 March 2023)
- [Survey confirms devastating impact of digital divide on children's learning during COVID-19](#) (16 March 2023)
- [Malnutrition in mothers soars by 25 per cent in crisis-hit countries, putting women and newborn babies at risk](#) (7 March 2023)
- [Statement by UNICEF Representative in Bangladesh, Mr. Sheldon Yett, on the fire in the Rohingya refugee camps](#) (6 March 2023)
- [UNICEF concerned that more than half of children with disabilities in Bangladesh do not go to school](#) (24 January 2023)
- [Mobile app helps adolescents access public health services](#) (17 January 2023)

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](#)
- [Bangladesh 2023 Joint Response Plan Rohingya Humanitarian Crisis](#)

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⁷ bangladesh_2023_jrp_rhc_appeal_en

⁸ They are health and nutrition, education, child protection, water sanitation and hygiene, HIV/AIDS, Social and behavioral change, and other salient child rights issues

Annex A. Summary of Programme Results*

Sector		UNICEF and IPs Response			Cluster/Sector Response ¹		
Indicator	Disaggregation	2023 target	Total results	Change** ▲ ▼	2023 target	Total results	Change** ▲ ▼
Nutrition							
Children aged 6 to 59 months with severe acute malnutrition admitted for treatment	Girls	5,260	972	-	6,824	1,346	-
	Boys	4,913	755	-	7,176	1,202	-
	Person with Disability (PwD)***	200	30	-	151	27	-
Primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling	Women	200,508	32,185	-	96,000	18,739	-
	PwD***	3,938	18	-	1,007	210	-
Health							
Children aged 0 to 11 months who have received pentavalent 3 vaccine	Girls	513,452	11,232	-			
	Boys	498,622	11,630	-			
	PwD***	27,777	-	-			
Children and women accessing primary health care in UNICEF-supported facilities	Girls	985,617	20,994	-			
	Boys	958,464	25,315	-			
	Women	220,528	41,067	-			
	PwD***	57,821	29	-			
WASH							
People accessing a sufficient quantity of safe water for drinking and domestic needs ²	Girls	267,371	73,449	-	302,896	243,082	-
	Boys	281,061	75,754	-	318,720	255,777	-
	Men	309,140	64,001	-	267,928	215,111	-
	Women	331,638	72,875	-	306,980	246,334	-
	PwD	27,694	1,936	-	12,963	-	-
People use safe and appropriate sanitation facilities	Girls	123,246	81,234	-	302,896	290,464	-
	Boys	129,487	83,859	-	318,720	305,654	-
	Men	119,571	71,809	-	267,928	256,550	-
	Women	133,527	81,406	-	306,980	294,471	-
	PwD	8,559	2,203	-	12,963	2,631	-
Child Protection							
Children and parents/caregivers accessing mental health and psychosocial support	Girls	777,884	28,006	-	27,362	10,893	-
	Boys	805,577	29,663	-	28,480	10,436	-
	Men	978,098	15,130	-	-	-	-
	Women	1,025,345	16,161	-	-	-	-
	PwD	95,612	3,442	-	1,550	148	-
Women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions	Girls	519,187	76,020	-			
	Boys	329,549	70,931	-			
	Women	633,116	29,371	-			
	PwD	41,070	588	-			
People who have	Girls	406,052	-	-			

* Includes response in Rohingya refugee camps, Cox's Bazar host communities, national floods, and national cyclones.

** As this is the first Bangladesh Humanitarian Situation Report of the year 2023, So no change.

*** There was a challenge to collect disaggregated data by the person with a disability in the system.

¹ Cluster/Sector response covers Cox's Bazar sector-level targets and results only. More detailed information is available in the next table below.

² WASH cluster has revised the indicator measurement to focus on quality, which contributed to a reduction in the result. To measure this water indicator, WASH Sector is considering '% of Household-level water sample tested with 0 E. Coli' and this is from the round of reporting Jan-dec 2022, we have found 89% of HH water sample tested 0 E. coli and we have used this one. However, there are 17,521 tube wells have been constructed in the field, but it is not considered in the calculation for the camp beneficiaries.

access to a safe and accessible channel to report sexual exploitation and abuse by aid workers	Boys	397,850	-	-			
	Men	524,873	-	-			
	Women	559,597	-	-			
	PwD	52,834	-	-			
Education							
Children accessing formal or non-formal education, including early learning	Girls	168,765	106,681	-	223,567	160,579	-
	Boys	173,369	115,769	-	216,299	170,289	-
	Men	-	-	-	7,247	1,934	-
	Women	-	-	-	10,573	2,712	-
	PwD	5,984	1,578	-	13,731	2,512	-
Children receiving individual learning materials	Girls	168,765	87,062	-	223,567	157,146	-
	Boys	173,369	90,581	-	216,299	167,808	-
	Men	-	-	-	7,247	1,903	-
	Women	-	-	-	10,573	2,616	-
	PwD	13,261	1,389	-	13,731	784	-
HCT / SBC / ACCOUNTABILITY MECHANISM							
Number of households reached with UNICEF-funded humanitarian cash transfers across sectors	Households	12,000	-	-			
People reached through messaging on prevention and access to services	Girls	1,573,844	116,343	-			
	Boys	1,611,068	94,842	-			
	Men	74,719	81,257	-			
	Women	54,986	164,277	-			
	PwD	56,566	3,989	-			
People with access to established accountability /feedback mechanisms (CFQ)	Men	3,847	13,363	-			
	Women	12,000	21,971	-			
	PwD	1,573,844	187	-			

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

Indicator		UNICEF and IPs					Sector Response				
Sector	Disaggregation	2023 Target		Total Results		Change since last report ▲▼	2023 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	3,958	358	762	95	-	5,592	1,232	1,156	190	-
	Boys	3,596	374	642	60	-	5,908	1,268	1,084	118	-
	CwD	136	11	30	0	-	115	36	22	5	-
Primary caregivers of children aged 0 to 23 months receiving infant and young child feeding (IYCF) counselling	Women	51,808	71,000	12,694	19,491	-	85,000	11,000	13,213	5,526	-
	PwD	725	1,037	4	14		850	157	131	79	
HEALTH											
Children aged 0 to 11 months who have received pentavalent 3 vaccine	Girls	15,183	41,026	375	10,857	-					
	Boys	15,990	43,320	384	11,246	-					
	CwD	312	2,362	-	-	-					
Children and women accessing primary health care in UNICEF-supported facilities	Girls	51,608	19,524	17,020	3,974	-					
	Boys	56,521	23,320	20,444	4,871	-					
	Women	46,758	74,314	15,118	25,949	-					
	PwD	1,549	3,280	29	-						
WATER, SANITATION & HYGIENE											
	Girls	75,125	13,152	71,791	1,658	-	229,716	73,180	183,544	59,538	-

People accessing a sufficient quantity of safe water for drinking and domestic needs ²	Boys	78,996	13,715	73,986	1,768	-	241,957	76,763	193,325	62,452	-
	Women	72,941	12,518	71,631	1,244	-	234,350	72,630	187,244	59,090	-
	Men	62,961	10,615	62,819	1,182	-	196,775	71,153	157,223	57,888	-
	PwD	2,517	1,400	1,894	42	-	9,028	3,935	-	-	-
People use safe and appropriate sanitation facilities	Girls	75,125	13,152	70,090	11,144	-	229,716	73,180	223,578	66,886	-
	Boys	78,996	13,715	73,577	10,282	-	241,957	76,763	235,494	70,160	-
	Women	72,941	12,518	70,578	10,828	-	234,350	72,630	228,086	66,385	-
	Men	62,961	10,615	61,521	10,288	-	196,775	71,153	191,516	65,034	-
	PwD	2,517	1,400	1,882	321	-	9,028	3,935	878	1,753	-

CHILD PROTECTION & GENDER-BASED VIOLENCE

Children and parents/caregivers accessing mental health and psychosocial support	Girls	72,837	24,444	7,521	2,849	-	20,522	6,840	7,759	3,134	-
	Boys	67,234	22,563	7,548	2,608	-	21,360	7,120	8,080	2,356	-
	Women	67,234	22,563	8,889	2,112	-	-	-	-	-	-
	Men	62,062	20,828	8,738	1,429	-	-	-	-	-	-
	PwD	3,933	1,320	509	134	-	1,250	300	148	-	-
Women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions ³	Girls	9,226	2,901	4,251	1,049	-					
	Boys	5,972	1,878	2,443	578	-					
	Women	8,730	2,745	5,107	957	-					
	PwD	349	110	147	2	-					
People who have access to a safe and accessible channel to report sexual exploitation and abuse by aid workers	Girls	144,247	82,711	-	-	-					
	Boys	133,151	76,349	-	-	-					
	Women	199,197	114,221	-	-	-					
	Men	183,875	105,434	-	-	-					
	PwD	18,377	10,680	-	-	-					

EDUCATION

Children accessing formal or non-formal education, including early learning	Girls	97,760	6,032	102,195	4,486	-	181,093	42,474	155,191	5,388	-
	Boys	102,104	6,293	112,334	3,435	-	175,379	40,920	166,167	4,122	-
	Women	-	-	-	-	-	8,460	2,113	2,409	303	-
	Men	-	-	-	-	-	6,461	786	1,738	196	-
	CwD	1,999	345	1,497	81	-	11,142	2,589	2,365	147	-
Children receiving individual learning materials	Girls	97,760	6,032	87,062	-	-	181,093	42,474	155,191	1,955	-
	Boys	102,104	6,293	90,581	-	-	175,379	40,920	166,167	1,641	-
	Women	-	-	-	-	-	8,460	2,113	2,409	207	-
	Men	-	-	-	-	-	6,461	786	1,738	165	-
	CwD	1,999	345	1,389	-	-	11,142	2,589	716	68	-

SBC / ACCOUNTABILITY MECHANISM

People reached through messaging on prevention and access to services	Girls	148,101	27,000	94,803	21,540	-					
	Boys	156,703	27,000	75,403	19,439	-					
	Women	217,602	51,000	130,773	33,504	-					
	Men	181,506	45,000	60,254	21,003	-					
	PwD	7,261	2,190	3,532	457	-					
People with access to established accountability /feedback Mechanisms (CFQ)	Women	26,000	7,000	17,484	4,487	-					
	Men	24,000	8,000	10,680	2,683	-					
	PwD	2,325	219	183	4	-					

**** Refugee column containing both Camp and Bhasan Char target and progress

Annex B. Funding Status*

Appeal Sector	Funding Requirements*	Funds available					Funding gap		
		Funds Received Current Year (2023)		Total	Resources available from 2022 (Carry-Over)		Total funds available	\$	%
		ORE	ORR		ORE	ORR			
Nutrition	22,026,730	0	0	0	2,989,708	10,817,026	13,806,734	8,219,996	37%
Health	25,698,388	1,588,235	0	1,588,235	6,397,297	7,504,999	15,490,531	10,207,857	40%
Water, Sanitation and Hygiene	32,430,036	3,304,703	0	3,304,703	1,606,757	7,195,482	12,106,943	20,323,093	63%
Child Protection/GBV	33,930,737	1,363,416	0	1,363,416	1,256,920	4,923,177	7,543,513	26,387,224	78%
Education	46,269,606	2,844,459	0	2,844,459	5,089,101	8,460,767	16,394,326	29,875,279	59%
Cross-sectoral	6,482,690	0	0	0	147,835	505,073	652,908	5,829,782	90%
Emergency Preparedness	7,000,000	58,119	0	58,119	947,470	0	1,005,589	5,994,411	86%
Total	173,838,186	9,158,932	0	9,158,932	18,435,087	39,406,525	67,000,544	106,837,642	61%

*As defined in the Bangladesh Humanitarian Action for Children Appeal for 2023

³ 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"