This report is produced by the Humanitarian Coordination Task Team (HCTT) of Bangladesh in collaboration with humanitarian partners. It covers the period from 4 to 10 September 2017. The next report will be issued on or around 18 September 2017.

Highlights

- According to the Ministry of Disaster Management and Relief (MoDMR) floodwaters have begun to recede from 28 out of the 32 flood-affected districts.

- An estimated total of 103,516 houses are reported to have been destroyed and 618,955 have been partially damaged; 145 persons are known to have lost their lives due to the floods.

- Over 650,000 hectares of standing crops have been damaged by the floods; the worst-hit crops are paddy (summer rice), jute (vegetable fibre), dhaincha (multipurpose legume) and vegetables.

Situation Overview

As of 10 September, the Government of Bangladesh reports an improvement in the situation and that floodwaters have started to recede in 28 out of the 32 flood-affected districts. However, there are still urgent humanitarian needs to be addressed with dire shortages of critical supplies, and crops and livelihoods reportedly severely damaged.

Access to the most affected areas in the northwest of the country remains a challenge as limited repairs to flood-damaged roads have taken place. More than 2,000 Medical Teams have been activated to support the health response and provide health education to flood-affected communities. The Directorate General of Health Services (DGHS) has activated a hot line (16263) for people to receive information on how to manage post-flood health problems. To date, there have been more than 13,000 cases of illness linked to the flood reported, including diarrhoea, respiratory infection, skin infection and eye infections. A web-based dashboard for disseminating information on the health situation as well as interventions in the flood-affected areas was developed (http://www.dghs.gov.bd/index.php/en/home/4601-health-situation-interventions-in-flood-affected-areas).
The Bangladesh Red Crescent Society (BRCS) has 1,200 volunteers on the ground helping in the worst-affected districts, providing food, water and relief items to the most vulnerable. The Bangladesh Red Crescent mobile medical teams hope to reach 30,000 flood survivors across the country to treat diseases caused by contaminated flood water.

HCTT partners are scaling up the emergency response in the flood-affected northern and central parts of Bangladesh. On 1 September 2017, the HCTT launched an Emergency Response Plan to complement the timely and effective response by the Government of Bangladesh. The plan is seeking USD $12 million to provide immediate humanitarian assistance to 330,000 people (45 per cent men, 55 per cent women, 51 per cent children) (66,000 HH) for the next six months (August 2017 – January 2018), primarily in the six most affected districts: Gaibandha, Dinajpur, Kurigram, Amalpur, Nilphamari and Sirajganj.

Funding

The Government has allocated 88.65 million BDT (USD $1.1 million), 27,207 MT of rice and 71,260 dry food packets to flood-affected districts. It has also allocated 31,980 bundles of Corrugated Iron (CI) sheeting and BDT 95.9 million (USD $1.2 million) for house reconstruction.

Iron Sheet 31980 Bundle and cash for housing 95940000 BDT (USD $1,184,444).

The UK-supported Start Fund has been activated in Bangladesh and a total of £659,306 (USD $850,505) has been awarded to ActionAid Bangladesh, Care International, Concern Worldwide, Handicap International, Relief International with HelpAge International, Save the Children and Plan International.

The International Federation of Red Cross and Red Crescent Societies (IFRC) launched an Emergency Appeal seeking CHF4.7 million (USD $4.9 million) to enable the Bangladesh Red Crescent Society (BDRCS) to deliver assistance and provide support to 20,000 families (100,000 people) for 12 months, with a focus on the following sectors: health, shelter (and non-food relief items), water, sanitation and hygiene promotion (WASH), food security and livelihoods (including unconditional cash) and disaster risk reduction (DRR).

Oxfam - Bangladesh has allocated more than 20 million BDT (USD $250,000) from its Humanitarian Response Grant Facilities (HRGF) under its IKEA funded ELNHA project and OXFAM Catastrophe Fund.

Canada has committed CAN$262,500 (USD $210,000) through the Canadian Humanitarian Assistance Fund to support Plan International in providing immediate assistance to over 10,000 people affected the monsoon floods in Bangladesh. Irish Aid has committed 100,000 Euros (USD $119,000).

Five INGOs (CARE, CBM, Oxfam, Plan International and Save the Children) have distributed multi-purpose cash grant (MPCG) to 8,130 households amounting to BDT 4,000 (USD $50) /HH1.

In support of the Government's swift response and to assist those who have been affected, the UN Central Emergency Response Fund (CERF) has allocated USD $2.4 million to support the humanitarian response. The CERF funding will allow agencies to scale up their responses and reach 100,000 people who have been most acutely affected by the flooding in the two most severely affected districts, Dinajpur and Jamalpur. The funding will be used to provide water and sanitation facilities, food assistance through cash transfers, health support for pregnant women and newborn babies, and emergency shelter kits.

An internal financial tracking system has been developed to monitor and track funding allocated to clusters for the flood-response efforts. The overall financial dashboard will be published by 13 September 2017.

1 Cash Working Group
Humanitarian Response

Early Recovery

Needs:
- As outlined in the HCTT Emergency Response Plan, a total of 2 million people need early recovery assistance and a total amount of USD $1.98 million is required to support the resumption of off-farm livelihoods, rebuild of critical infrastructure, and support environmental protection interventions.
- As flood waters begin to recede, affected people are suffering due to the damage to critical infrastructure. Community engagement through Cash for Work (CfW) activities needed to raise communities’ plinth/mound, connecting earthen roads, embankments etc.

Response:
- Government counterparts have inspected the affected areas and are providing support for CfW assistance.
- BRAC has provided early livelihood recovery to 4,216 households.

Gaps & Constraints:
- Due to several consecutive disasters occurring in 2017, cluster members are struggling to mobilize resources.

Education

Needs:
- A total of three million people need Education cluster assistance.
- At least 4,000 primary and high schools, colleges and madrasas in northern and northeastern districts of the country are affected by floods and require immediate repairs.
- More than 1,000 educational institutions have been closed either due to flooding or because they are being used as emergency shelters for displaced people. This is impacting the learning ability of students and is damaging the teaching learning material.
- The Government has suspended the Bachelor Degree examination and is planning to reschedule primary school level examinations.
- There are concerns for protection related issues, including school drop-outs and an increase in child labour and marriage.

Response:
- Education in Emergency (EiE) kits have been distributed by cluster partners in affected schools in Jamalpur.
- Almost all schools were opened on 10th September after the Eid holidays, with the only exception of a few severely affected schools that need urgent renovation work.
- The Directorate of Primary Education (DPE) has planned to allocate around BDT 30,000 to 250,000 for repairs at 2,810 schools in 30 districts.
- UNICEF has allocated USD $60,000 for immediate support to schools to create a proper learning environment (repairs, furniture, WASH facilities, school field maintenance, educational kits etc.).
- Plan International is implementing Education in Emergency (EiE) activities in 40 schools in Chilmari (20 schools) and Nageshwari (20 schools) Upazila of Kurigram district.
Food Security

Needs:

- Over 650,000 hectares of standing crops across 32 districts have been damaged; the worst-affected crops are paddy (summer rice), jute (vegetable fibre), dhaincha (multipurpose legume) and vegetables.
- Damage to agriculture will likely have an impact on the availability and price of food, with 1.5 million people in need of food assistance (immediate and short-term).
- 179,943 children under five and 90,568 pregnant and lactating women (PLW) need Targeted Food Distribution.
- Significant damage is reported to fishing infrastructures, fish cultures and livestock (disease, increase of the price of hay and fodder). The impact will only be fully understood when waters recede.
- Damage to agriculture is likely to have an impact on food security and access to daily labor opportunities for the most vulnerable.
- Department of Livestock Services is seeking emergency support from the Government for livestock feed for flood-affected livestock holders in greater Jamalpur, Dinajpur, Kurigram, Bogora and Netrokon districts. They also require FMD vaccine to mitigate spread of disease in livestock shelters, and post-flood rehabilitation assistance for small-holder farmers (restocking and interest-free loans)\(^2\)

Response:

- As of 10 September, 634,470 people (126,894 HH) targeted.
- Immediate food assistance was provided to more than three million people by the Government of Bangladesh (GoB) (2.8m people) and to nearly 405,000 people by WFP, BRAC, BDRCS, ADRA and Islamic Relief.
- Short-term food assistance (including Multi-Purpose Cash Grant - MPCG) was provided to 262,480 people by GoB (81,325 people), INGOs (Oxfam, WVI, Plan International, SCI, RI, IRB) and local NGOs (Caritas) and BDRCS.
- The Ministry of Agriculture will provide assistance to 0.6 million farmers with 5 kg seeds boro or 1 kg wheat seed or 2 kg maize seeds or 1 kg mustard oil or 1kg pulse seed, 20 kg DAP, 10 kg MOP and 10 billion BDT for the next crop.

Gaps & Constraints:

- Targeted food assistance for pregnant and lactating women and children under five is very limited.
- Limited SADD breakdown of beneficiaries.
- The FSC will launch a light phase 3 needs assessment, focusing on the loss and damage of the agricultural sector, including livestock and fisheries. The FSC is seeking more interest from organisations as, for now, the number of participants is too low to conduct a phase 3 assessment.
- 55 per cent is the funding gap as shown by the table below. The gap remains higher for livelihood.

<table>
<thead>
<tr>
<th></th>
<th>Budget Required</th>
<th>Mobilized</th>
<th>Budget Gap</th>
<th>% gap</th>
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<td>Total</td>
<td>5,500,000</td>
<td>2481543</td>
<td>3,018,457</td>
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<td>short term food assistance</td>
<td>4,500,000</td>
<td>1,599,441</td>
<td>2,900,559</td>
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<td>Livelihood</td>
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<td>297,746</td>
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<td>70%</td>
</tr>
</tbody>
</table>

\(^2\) DG communication with ECTAD/FAO project, 24/08/2017
Health

Needs:
- Immediate needs include Bleaching Powder, Cholera saline, Water Purifying Tablets, Anti-Snake Venom and other Emergency Drugs.
- Enhance disease surveillance and health promotion activities.
- Transport, speed boats and life jackets are required for the Rapid Response Teams and the Medical Teams.
- Repair to damaged more than 500 health facilities and replacement of damaged equipment.

Response:
- Monitoring the public health situation due to on-going flood through Health Emergency Operations Centre and Control Room (Hot Line +88 017 5911 4488) and daily Health Bulletin. More than 2,000 Medical Teams have been activated to tackle health problems and provide health education to flood affected communities. The Directorate General of Health Services (DGHS) has activated a hot line (16263) for people to receive information for managing post-flood health problems. A web-based dashboard for disseminating information on the health situation as well as interventions in the flood-affected areas was developed (http://www.dghs.gov.bd/index.php/en/home/4601-health-situation-interventions-in-flood-affected-areas).
- The World Health Organization (WHO) has already dispatched one supplementary kit (I/V saline, Inj. Antibiotics, painkiller, Salbutamol inhaler etc.) to Rangpur Medical Sub-Depot (MSD) and one basic kit (ORS, oral antibiotic, Zinc Sulphate, Benzyle benzoit etc.) to Dinajpur District Reserved Store (DRS).
- WHO has distributed 60,000 thousand IEC materials (Pictorial leaflets, Posters) to improve awareness in flood-affected areas.
- WHO Surveillance & Immunization Medical Officers (SIMO) are providing support to District Civil Surgeon Offices in disease surveillance and coordination of activities without hampering routine immunization activities.
- BRAC has distributed 37,555 packets ORS among the flood affected people in 20 Upazila under 11 districts (Thakurgaon, Panchagar, Naogaon, Jamalpur, Kurigram, Gaibandha, Sirajganj, Tangail, Manikganj, Rajshahi, Rajbari) and has provided 2,375 Health packages in Panchagar, Thakurgaon, Gaibandha, Rajshahi, Sirajganj and Naogaon districts.
- UNFPA has distributed 2,000 clean delivery kits, and is supporting sexual and reproductive health focused camps staffed by midwives and doctors in Kurigram, Jamalpur, Dinajpur, Lalmonirhat and Gaibandha.
- UNICEF is maintaining immunization centres in the affected areas, and sending awareness messages through the Divisional Commissioner Office of Rangpur and local level radios.
- Gonoshastho Kendra is providing health care support such as managing diarrhoea and other communicable diseases through mobile medical teams in five districts (Kurigram, Naogaon, Jamalpur, Gaibandha, Sirajganj).
- Terre des Hommes (TDH) is organizing BCC (Behavioural Change Communication) Sessions, providing outdoor services and distributing hygiene kits, ORS, WPT etc.
- World Vision is providing health care services to the flood affected people in ten Upazila in Dinajpur district.

Gaps & Constraints:
- Continuation of primary health care services to affected population including emergency obstetric and neonatal care services, immunization, mental health and psychosocial care support.
- Accessibility to health facilities; coordination and information management services.

Logistics

Needs:
- Approximately 11,000 km roads, 100 km rail lines and 457 bridges and culverts have been severely damaged and access remains difficult.
- The damaged roads and bridges/culverts need to be repaired fully to re-establish land communication and ensure access to the affected areas.
Response:

- Despite limited infrastructure facilities and poor road conditions, humanitarian agencies have completed the first round of food and non-food relief distributions in the affected areas.
- Markets have resumed but a slight increase in food prices has been recorded due to the Eid festival. It is expected that prices should stabilize in the next few days.
- The Railway Department has re-established major rail communications in the Western Railway Zone; however, some of the most severely damaged sections still need to be repaired.

Gaps & Constraints:

- Repair work of damaged roads is ongoing, but the pace should be increased. Severely damaged road conditions, especially in the Northwest, have not significantly improved due to limited repair works conducted.

Nutrition

Needs:

- Estimated 886,263 people need nutrition support, especially Pregnant and Lactating Women (PLW), under 5 children and adolescent girls. 275,691 adolescent girls and children aged 6-59 months require nutrition supplies (including Vitamin A and Deworming)
- Facility-based nutrition services (including community clinics) are not functioning as infrastructures are damaged and not accessible in the heavily inundated areas. Sunamgonj and Kurigram are identified as IPC level 4 districts where the nutrition status is chronically bad.
- Nutrition Behavior Change Communication (BCC) for malnutrition prevention.
- Estimated 362.32 children to be screened for severe acute and moderate acute malnutrition, and provided with counseling and support. An estimated 4,130 children require treatment for Severe Acute Malnutrition (SAM)
- 182,462 Pregnant and Lactating Women require infant feeding support and counseling
- 61,658 children aged 6-23 months require micro-nutrient supplements
- 74,099 adolescent girls require Iron-Folic Acid (IFA)

Response:

- Integrated SMART\(^3\) survey being conducted in Haor region (funded by UNICEF) and Kurigram (TDH).
- Coordination with GoB on nutrition supplies available in the facilities.

Gaps & Constraints:

- Lack of availability of nutrition-specific data.
- Limited funding.
- Limited skilled nutrition service providers.

Protection-GBV

Needs:

- An estimated 107,000 people require assistance from GBV cluster partners.
- Provision of emergency GBV case management services at identified entry points for service referral.
- Distribution of clothing, personal hygiene items, and torches to enhance personal dignity, safety, and mobility of women and girls.
- Identification of safe spaces for women and girls as entry points for GBV service referral.
- Establishment of community watch groups to monitor safety and security risks in settlement areas.

\(^3\) Standardized Monitoring and Assessment of Relief and Transitions

886,000
PLW, under 5 children and adolescent girls in need of nutrition assistance.

2,850 dignity kits
to women and girls
$615,000 required
to meet service needs of GBV survivors
Response:
- As of 10 September, 4,850 people reached by GBV cluster partners.
- Delivery of integrated GBV/sexual and reproductive health emergency mobile health services in 35 locations across Kurigram, Gaibanda, and Jalampur.
- Distribution of 2,850 dignity kits to women and girls in Gaibhandha, Kurigram, and Jamalpur, Dinajpur, and Sirajganj.

Gaps & Constraints:
- An estimated 105,000 people have not been provided with required assistance.
- GBV survivors are finding it difficult to access comprehensive care services at One Stop Crisis Centers (OCC) due to distance, terrain, lack of service awareness, and weak coordination of care at service delivery points.
- No identified service providers conducting GBV case management services to enhance linkages between law enforcement, legal, medical, and psychosocial support services for GBV survivors.
- No spaces for women and girls to access safe, confidential GBV survivor support services.
- Weak service provider networks to facilitate multi-sectoral GBV response at district level.

Child Protection

Needs:
- 50 per cent of the total flood-affected population are children exposed to protection risks.
- Limited access to child protection services for the most vulnerable children in the flood worst-affected areas. Child protection services are needed at the community level including case management for most affected children including referral of children victims of violence and abuse and separated children to relevant services through strengthening of the Community Based Child Protection Committees (CBCPC).
- Lack of playgrounds and child-friendly activities in the flooded area. This is creating a negative impact on the children's mental and physical health, resulting in children's loss of self-confidence and self-esteem.
- Government capacity needs to be built in case management to support children.
- Knowledge and capacity needs to be built in injury prevention and first response to prevent children from injury including drowning and snakebites.

Response:
- 22 Child Friendly Spaces (CFS) are operational in Kurigram under the Child Protection cluster.
- Transfer and distribution of Recreational Kits and CFS materials.
- Awareness raising programme of protection of children and adolescent regarding GBV and other forms of violence for 1,200 children approximately in three unions of Kurigram.

Gaps & Constraints:
- Breakdown of normal family care system and protection services in the worst affected areas for children.
- Lack of protection, mental health, psychosocial and recreational support for children.
- Systems to report and respond to separated/unaccompanied children or any other forms of violence and missing child in flood-affected areas are not in place.

Shelter

Needs:
- The latest Government figures show that 103,516 houses have been fully damaged, and 618,955 houses have been partially damaged.
- The total estimated people in need of emergency shelter assistance is 386,360 people.

4 Estimate based on results from the initial 72-hour rapid assessment, and only focusing on fully damaged houses.
Response:

- Cluster agencies are assessing, planning and beginning to scale-up operations.
- More than 60,000 people are already being targeted for emergency shelter relief, focusing mainly on in-kind distributions of tarpaulins and NFI packages.
- The cluster is tracking distribution of emergency shelter relief. Approximately 10,000 families have received tarpaulins and CGI.

Gaps & Constraints:

- An estimated 320,000 people still require shelter assistance as of 10 September. Families living close to riverbanks and on chars (river-islands) are the most vulnerable and have significant ongoing shelter needs.
- There is an urgent need for both geographical targeting of response focusing on both the poorest most geographically vulnerable as well as social vulnerabilities, such as widows, people with disabilities, female-headed households, and the elderly.

Water, Sanitation and Hygiene

Needs:

- Almost all flood-affected people (6.9 million) require some form of WASH assistance.\(^6\)
- More than three million people (children, women, adolescent girls, elderly, disabled) have special needs that require targeted WASH assistance.
- Due to the contamination of water sources - especially tube wells, which are the main source of safe water in affected areas - the affected population is using alternative and unsafe water sources, which may lead to an outbreak of water-borne diseases, and exacerbate any pre-existing health and nutrition issues.

Response:

- The Department of Public Health Engineering (DPHE), with the support of UNICEF and other WASH cluster partners, has reached 2.1 million people.\(^7\)
- DPHE has raised 2,294 tube-wells, repaired 10,814 tube-wells, disinfected 30,592 tube-wells, installed 379 new tube-wells, and constructed 836 latrines in flood shelters, distributed 1,069,855 water purification tablets, 5,401 kg of bleaching powder, 6,500 jerry cans, and 849 hygiene kits.
- In addition, DPHE mobilized five water treatment plants and have started producing safe water (2,000L/hour) in five districts (Jamalpur, Sirajgonj, Bgura, Kurigram, Gaibandha).
- Terre des Hommes (TdH) has also mobilized three mobile water treatment plants and distributed 26,484L purified water to 2,789 households and has distributed 3,000 hygiene kits to 3,000 families in Kurigram.
- The Bangladesh Red Crescent Society (BDRCS) with support from IFRC is distributing purified drinking water through five water purification units; a total of 46,760 liters have been distributed to approximately 30,000 people. BDRCS has distributed additional 14,000 water purification tablets, 6,000 units jerrycans and 40,000 sachets of Oral Rehydration Salt (ORS) to 4,000 families.
- BRAC has reached 28,100 people in 20 Upazila under 11 districts and distributed NFI. BRAC also installed 29 temporary latrines and 18 tube-wells in Jessore and Dinajpur districts.
- World Vision has distributed hygiene kits and disseminated hygiene messages to 3,439 HHs in five districts (Dinajpur, Joypurhat, Nilphamary, Nowgaon and Sunamgonj).
- Oxfam has distributed safe water to 1,500 HHs, distributed 3,295 hygiene kits in in 4 districts (Sirajgonj-1,000 HHs, Kurigram - 1,145 HHs, Dinajpur - 800 HHs and NilPhamari - 350 HHs) and 200 tube wells disinfected in Dinajpur and Nilphamari. Mobilising resources for more 2,360 HHs in these four districts.
- Save the Children has distributed 1,550 hygiene kits.

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\(^5\) DPHE Top Sheet 06/09/17
\(^6\) 72-hours NAWG
\(^7\) Mostly by DPHE with support from UNICEF; approximately 25,025 people by BDRC/IFRC; 28,000 people by TdH; 80,987 people by BRAC. Data from other partners not confirmed still to date
• Concern worldwide distributed 1,700 hygiene kit to 1,700 families in Lalmonirhat district.

Gaps & Constraints:
• An estimated 5.1 million people require WASH assistance as of 10 September.
• Insufficient funding. The Government of Bangladesh (DPHE) is responding with support from UNICEF but there are still huge gaps in terms of funding.
• Very few NGOs have started WASH response with their own resources mobilization or through the START fund.

Communication with Communities (CwC)

Needs:
• Estimated 6.9m require CwC support (all affected people need access to information and 2-way communication).
• Priority information needs remain around water (particularly purification) and shelter/accommodation, with people also becoming concerned about the welfare of livestock.
• Some affected people in temporary shelters have been told that they must leave the shelter by October, and are worried about where they will go.
• Some of those living in temporary shelters report that they are not able to enlist as beneficiaries for relief, because people living in the shelters are not eligible.
• A few people who feel that their situation (as a widow or a person with disabilities, for example) means that they should be a priority for relief, report difficulties in accessing their entitlement. Some also report difficulties in accessing regular social allowances following the flood.
• Mechanisms to collect and collate feedback from affected communities are growing, but are still far from comprehensive.

Response:
• The first Community Feedback summary – collating feedback from affected people across a range of different sources – was published on 3 September and is available here: https://app.box.com/s/1lybn4q7dibisvvx5xizfkyvnh0c
• ICCO Cooperation, with partner GUK, launched a mobile-enabled community feedback mechanism in Gaibandha district. Real-time feedback is available from https://rsrc.akvo.org/en/project/6416/
• Action Aid Bangladesh launched Participatory Video Monitoring and Evaluation as part of its response in parts of Jamalpur.
• Additional communication products continue to be added to the materials library, to further assist agencies to produce and use coordinated, practical and simple information to affected populations. All materials remain available here: https://app.box.com/s/zggjjcpqkcrn30y7p71f31u9x2i46v

Gaps & Constraints:
• CwC activity, while increasing in scope over the past week, remains sporadic and under-resourced. There is an unfunded need to increase coverage and transition CwC activities away from topics connected to immediate relief (e.g. water-borne disease and protection of vulnerable groups in temporary shelters) into longer-term efforts to support reconstruction and reestablishment of livelihoods.
• Comprehensive mechanisms to disseminate critical information are not yet established and there are significant geographical areas where information needs are not being met.
• Comprehensive two-way communication activities to solicit and collate community feedback are only established in a small number of areas.
• The Shongjog-operated Humanitarian Communications Agency remains available to support clusters to develop and implement integrated CwC and Community Engagement activities within their sectoral response.
General Coordination

An inter-cluster meeting took place in Dhaka on Sunday 10 September to take stock of the ongoing responses (floods and landslides), share updated information, and facilitate decision-making processes at during forthcoming HCTT. The meeting also provided the opportunity to discuss earthquake preparedness and cross-cutting issues (Gender, CWC, Cash assistance, Needs Assessment, Information Management).

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The Gender in Humanitarian Action (GiHA) working group, with the technical support of Senior GenCap Advisor, has finalized the development of the Gender Analysis framework for the HCTT Cluster Specific Gender Analysis for 2017 August Floods. The Purpose of the Gender Analysis is to assess the gender dimensions of the Cluster specific needs of flood affected populations. The gender analysis will also examine how gender dynamics (traditional norms, gender roles and gender inequalities) affected women’s, girls’, boy’s and men’s capacity to respond to the 2017 August Floods in Bangladesh and show how that relates to early recovering from the impact of 2017 August Floods. The framework which was sent out to clusters on Tuesday 5th September 2017 includes the tools with key questions for data collection. Gender analysis questions should be incorporated into specific Cluster needs assessments.

Support to other clusters is available with design and production of communication products (leaflets/posters, audio, video, face-to-face activities, etc.) as well as technical advice and support to agencies wanting to embed 2-way CwC activities within their response. Requests can be made via: https://docs.google.com/forms/d/e/1FAIpQLSdLHS5QARY5Fr90_gX07oG8Mo5hDc_pZAh4KoLM2n73A/viewform