



Bangladesh

Humanitarian Situation

Report No. 57



Reporting Period: 1 January to 30 June 2021

Highlights

- **Bangladesh continues to face complex humanitarian emergencies.** Over 884,000 Rohingya refugees are living in the world's largest refugee settlement. The COVID-19 pandemic situation is deteriorating and on 26 May 2021, the Cyclone 'Yaas' affected [1.3 million people including 9 people dead](#) on the west of Bangladesh. Millions of children and their families are likely to suffer from additional natural disasters such as cyclone and monsoon floods.
- **Globally, Bangladesh is among [the top 30 countries](#) in terms of confirmed COVID-19 cases as of 30 June.** The COVID-19 pandemic is worsening rapidly especially [in the border districts](#) and the daily positivity rate of COVID-19 varied due to the community transmission of the Delta variant. [About three percent of people](#) have been vaccinated so far, and the mass inoculation campaign stumbled due to suspension of vaccine supplies.
- **UNICEF and implementing partners have provided over 84,000 people including about 43,000 female with critical services following a massive fire at a Rohingya Camp in Cox's Bazar in March.** Furthermore, reconstruction of 3 learning centres and rehabilitation of 8 tube-wells completed and repair and reconstruction of 137 learning centres, 5 piped water networks, and latrines and bathing facilities are in progress.

Situation in Numbers



62.7 million

Children in need of assistance due to the impact of COVID-19 (all children under 18 years of age in the country: COVID-19 BPRP 2020)



173.7 million

People in need including both refugee and host communities (UNICEF HAC 2021)



459,701

Rohingya children in need of assistance (UNHCR, 31 March 2021)



884,041

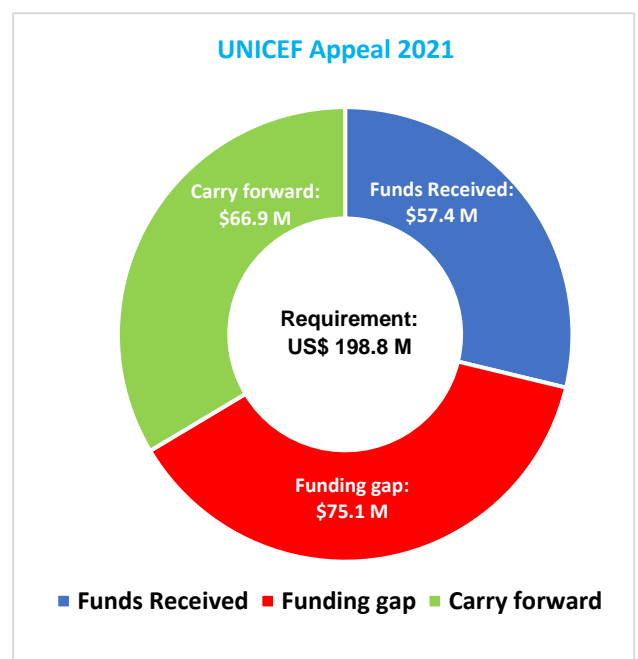
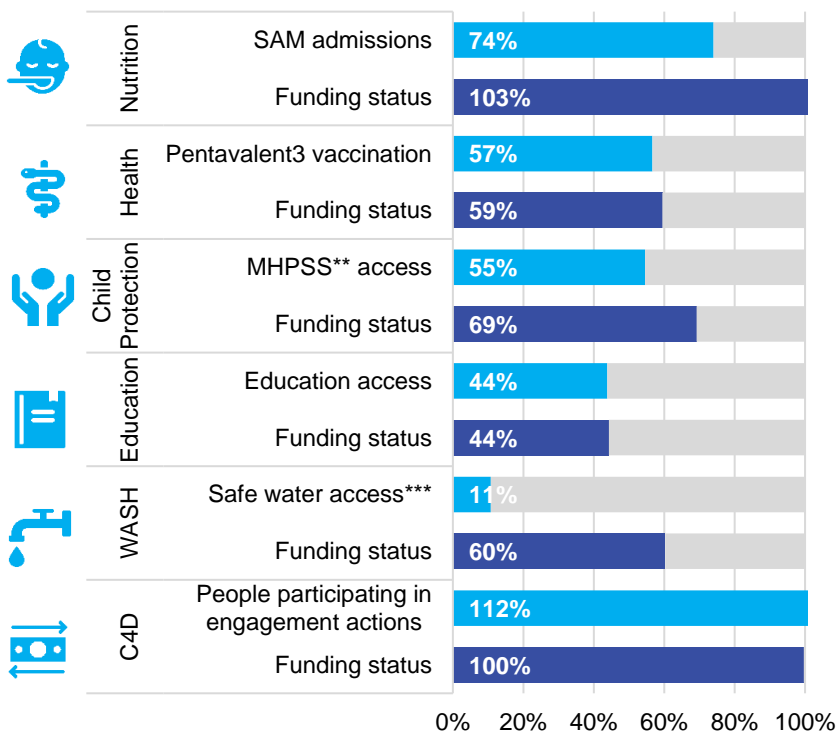
Total Rohingya population in need of assistance (UNHCR, 31 March 2021)



913,258

[Confirmed corona virus cases in Bangladesh](#) (as of 30 June 2021).

UNICEF's Response and Funding Status*



* Includes response in both camps and host communities and those affected by floods in other areas.

** Mental health and psychosocial support

*** Of the 60% WASH funds received, the majority was earmarked for the Rohingya refugee response, which is costly and therefore only 11% of the target (which includes Rohingya refugees and all Bangladesh communities nation-wide affected by COVID-19) was reached. UNICEF is seeking donor support to close the funding gap to ensure more of the millions of people targeted through the COVID-19 response can also be reached with safe water.

Funding Overview and Partnerships

UNICEF will revise its appeal from US\$ 198.8 million to US\$203.6 million due to deteriorating COVID-19 situation, requiring scale-up of preventive nutrition interventions in host communities and supporting peace building and social cohesion in the camps. With 62 per cent of funding requirements received, UNICEF wishes to express its sincere gratitude to Australia, Canada, Denmark, Education Cannot Wait, the European Union, GAVI, Germany, Global Partnership for Education, Japan, BMZ/KfW Development Bank, the Republic of Korea, Sweden, Switzerland, the United States (BPRM/USAID), the United Kingdom (FCDO), CERF, the World Bank, Liechtenstein, Romania, ADB, Islamic Development Bank and various UNICEF National Committees for their generous contributions to this response. At the same time, critical financial gaps in Education (56 per cent), Health (41 per cent) and WASH funding (40 per cent) are restricting UNICEF's ability to upgrade the concerned infrastructures for effective service delivery including actions to meet the specific needs of girls, women and people with disabilities. Flexible and multi-year donor funding in 2021 will be critical to provide essential support to Rohingya refugees and the most vulnerable children in the host communities.

Situation Overview and Humanitarian Needs

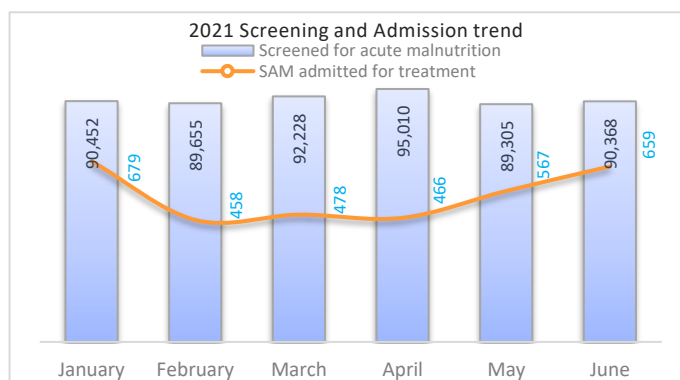
Bangladesh is hosting over 884,000 Rohingya refugees¹ from Myanmar in 34 camps in Cox's Bazar District. About 52 per cent of whom are children. While basic services have been provided, children still face disease outbreaks, malnutrition, inadequate educational opportunities and the risks related to neglect, exploitation and violence including gender-based violence (GBV) risks, child marriage and child labour. Besides, there are annual cycles of heavy monsoon and cyclones, and ensuing destructions and damages associated with them, which pose substantial risks to both Rohingya refugees and host communities. In addition, since the beginning of the last year, COVID-19 pandemic has been seriously impacting people's lives in both camps and the host communities. As of 30 June 2021, the number of confirmed COVID-19 cases in Bangladesh reached 913,258 (the daily case positivity rate was 25.13%) with 14,503 deaths². This includes 10,346 cases and 107 deaths in the host communities in Cox's Bazar District. There have been 1,799 COVID-19 cases and 20 deaths confirmed in the camps³. Furthermore, due to heavy rain, a number of UNICEF supported facilities were damaged at the Rohingya Camps, including 607 learning centres (LCs), 136 latrines, 27 bathing cubicles, 23 multi-purpose centres and social hubs and three information & feedback centres. Despite 104 LCs having been repaired, repairs and reconstruction works in the monsoon and fire affected camps have been temporarily suspended due to COVID-19 restrictions. In addition, Acute Watery Diarrhoea (AWD) cases increased significantly in the camps and host communities in the months of May and June (48%). Out of 537 admitted cases in Diarrhoeal Treatment Centre (DTC)/AWD Isolation Unit, 75 cases were Rapid Diagnostic Test positive and/or culture positive till the end of June 2021 in the Rohingya camps (53) and host communities (22) of Cox's Bazar, Ukhiya and Teknaf.

Summary Analysis of Programme Response

Nutrition

A total of 6,536 (3,759 girls) children were admitted for Severe Acute Malnutrition (SAM) treatment as of June 2021. Due to budget reduction and shortage of storage capacity at central medical store, government doesn't have preposition of therapeutic food. Besides, the scarcity of therapeutic food, trained staff turnover and community engagement are major challenges for improving the quality of SAM treatment. The SAM facility assessment will be conducted to track the progress, support National Nutrition Services, develop a strategy and improve the management of SAM services.

A total of 3,307 Rohingya refugee children including 2,087 girls and 29 with disabilities (51 per cent of targets) have been admitted for the treatment of SAM and 88.3 per cent were discharged as cured. UNICEF deployed 996 community-based nutrition volunteers (387 female) for regular and proactive screening of children and the timely detection of acute malnutrition and referral. During this reporting period, 91,170 children aged 6-59 months (45,220 girls and 130 children with disabilities) were screened monthly at community level.



¹ UNHCR as of 31 March 2021

² IEDCR as of 30 June 2021

³ Health Sector and WHO, Cox's Bazar as of 30 June 2021

UNICEF supported the government to organize [National Vitamin A campaign](#) targeting 23 million children and 21,095,312 children (92 per cent of targets) received [Vitamin-A](#). In Cox's Bazar, UNICEF reached 146,976 children including 72,702 girls (95 per cent of targets) during the campaign. The number of children aged 6 to 59 months targeted for receiving vitamin A supplementation will be fully achieved by the end of this year.

In the host community, UNICEF worked closely with the government facility-based nutrition programmes by providing funding, technical support and supplies to treat children with SAM with medical complications. 400 children aged 6 to 59 months (218 girls and 1 child with disabilities) were admitted to SAM units in the Upazila Health Complexes and District Hospital and were also provided with social protection support to facilitate their admission and treatment.

Nutrition sector provided 4,388 children under five (2,785 girls) with the SAM treatment service to be admitted among screened children. In the host community, out of all screened children, 739 children under five (438 girls) with SAM and 2,937 children under five (1,862 girls) with Moderate Acute Malnutrition (MAM) were admitted to the Outpatient Therapeutic Programme and Targeted Supplementary Feeding Programme respectively.

Health

National Deployment and Vaccination Plan. Bangladesh started vaccinations against COVID-19 on 7 February, as of 30 June 2021, 3,654,280 male (62 per cent) and 2,239,720 female (38 per cent) were vaccinated with the first dose which was 3.41 per cent of total population. In addition, 4,291,707 people (64 per cent male and 36 per cent female) were vaccinated with the second dose which was 73 per cent of the first dose recipients. Scarcity of vaccines for such a large population (including covering vulnerable people and high risk groups in remote areas and slum areas) is a major challenge for COVID-19 vaccination. Procuring vaccines through bilateral agreement and dose sharing through the COVAX facility will make vaccine available by the end of this year, and a community based approach of vaccination will cover the remote and high risk population. In addition, COVID-19 vaccination for Rohingya population is planned from 16 August 2021.

Continuity of Maternal Neonatal Child and Adolescent Health (MNCAH). UNICEF provided technical assistance to the Directorate General of Health Services and Directorate General of Family Planning to raise necessary measures such as monitoring of the key MNCAH statistics using dashboard, continuous hands-on case management & IPC and development of COVID-19 MNCAH plans. The COVID-19 pandemic and associated restrictions have impacted the access and utilization of critical MNCAH services, which was more than 50 per cent reduction compared to the first wave of COVID-19. The critical districts have been supported by deploying 14 specialised medical officers to ensure the continuity of essential MNCAH services and technical assistance for COVID-19 response.

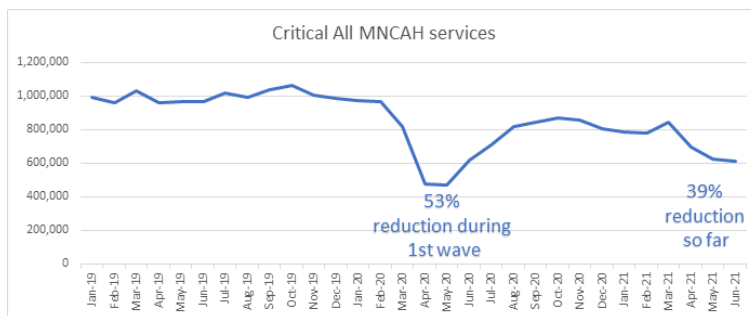


Figure 1 Reduction of all critical MNCAH services (ANC, facility delivery, PNC, EPI, IMCI services, Adolescents) at the government health facilities (source DHIS-2, DGHS, EmONC data set 12Jul 21)

During the reporting period, 4,592,580 children benefitted from Integrated Management of Childhood illness and 1,297,435 women were reached for prenatal, natal and postnatal services. In addition, 2,107,554 children (63 per cent of the target) were reached by the immunisation program. However, maternal and child health services declined over the same period due to movement restrictions in the COVID-19 pandemic situation.

As of June 2021, UNICEF and partners provided 78,258 (50,051 children under five, 47 per cent female) and 61,577 (21,126 children under five, 47 per cent female) primary health consultations in Rohingya refugees and Cox's Bazar host community respectively. In addition, 17,395 (48 per cent female) and 46,075 (49 per cent female) children aged 0-11 months have received Penta 3 vaccination in Rohingya refugee populations and Cox's Bazar host communities respectively.

UNICEF continues to support the operations of Diarrheal Treatment site at Leda in Teknaf Upazila to manage cases of AWD. A total of 904 cases of AWD was reported in Cox's Bazar (48 percent female). Of this number, 490 (50 percent female) were identified and managed from Rohingya refugee populations.

UNICEF is working with the Government of Bangladesh (GoB) and other partners to respond to COVID-19 pandemic in Cox's Bazar district. As of 30 June, there were 12,145 COVID-19 cases (1,799 Rohingya refugees). The

health sector is supporting 12 Severe Acute Respiratory Infections Treatment Centres (SARI ITC) for Rohingya refugees. Of this 12 SARI ITC's, UNICEF is supporting the operationalization of 1 SARI ITC at Teknaf with a bed capacity of 60. Bed occupancy was at 41 per cent, however, this has approached 100 per cent, resulting in the activation of an additional 20 standby beds.

Water, sanitation and hygiene (WASH)

UNICEF and the Department of Public Health Engineering provided 171,520 people (94,720 female) with access to safe water and 101,760 people (49,920 female) with functional latrines. 58 water connections have been repaired to ensure water supplies to handwashing stations, benefitting 30,000 slum dwellers with access to handwashing facilities in Dhaka city. The main challenge is that slum dwellers/low income community people are not fully aware of benefits of washing hands and mask wearing. Risk Communication and Community Engagement (RCCE), advocacy with different stakeholders such as Local Governmental Institutes and Civil Society Organizations should continue as they can further enhance the access to basic social services, reduce the transmission of COVID-19 and mitigate the impact on public health.

UNICEF and partners have continued to provide access to quality WASH services to 242,000 Rohingya refugees (51 per cent female and 1.2 per cent people with disabilities) in the eight refugee camps. These services are being continued through maintaining of 46 solar-powered piped water networks, 5,000 Tube wells, 4,000 tap stands and reservoir tanks, 15,000 latrines, 6,500 bathing facilities and 19,000 handwashing devices. However, due to increase in COVID-19 cases, countrywide lockdown with travel restrictions has impacted access to the refugee camps and continuity of delivery in WASH services. UNICEF worked closely with implementing partners to develop Business Continuity Plans focusing on capacity development of the Rohingya volunteers who are already active in the delivery of WASH Hygiene Promotion activities with minimal supervision.

In the host community, 102,000 people (43,860 female and 1,020 people with disabilities) have access to safe drinking water through the construction of 110 hand pumps and 6 water networks. 7,805 water points were regularly disinfected with chlorine solutions. Furthermore, 80,500 people (37,835 female and 805 people with disabilities) have benefited from improved sanitation through the construction of 6,331 new latrines, repairing of 14,928 existing latrines and 5,677 disinfected latrines.

UNICEF and partners reached 170,000 host community people (79,900 female and 1,700 people with disabilities) with key hygiene messages including 55,000 female (550 people with disabilities) on menstrual hygiene management. School-aged children residing at intervened communities have been prioritized as reaching children with comprehensive UNICEF programmatic support has been a main challenge due to school closures.

UNICEF is implementing activities in line with the WASH Sector AWD Preparedness & Response Plan for AWD Scenario 2 - situation escalates moderately. This includes activation of Joint Assessment Team in coordination with the Health Sector. This includes WASH assessments in identified high risk areas, a focus on water quality, disinfection of latrines, Faecal Sludge Management infrastructure through spray chlorination and an increase in community based hygiene promotion activities focussed on handwashing with soap and safe household water collection and management.

Education

UNICEF supported home-based learning to provide access to 1,034,218 children (517,109 girls) through TV and internet-based technologies and 136,214 children (68,588 girls) can access the integrated mobile phone based on early childhood education activities. In light of the recent surge in COVID-19 cases and deaths, the GoB has extended the ongoing closure of all educational institutions across Bangladesh and children have lost 53 per cent of school days (121 out of 230 annual allocations) until June 2021.

UNICEF has agreed with the Directorate of Primary Education to develop, produce and disseminate 150,000 printed learning materials for children who do not have access to digital remote learning opportunities. Furthermore, the primary sub-sector has prepared a communication plan that includes awareness materials on safe school reopening such as leaflets, posters and Meena Cartoon.

The prolonged closure of LC in Rohingya camps has disrupted learning for over 350,000 Rohingya children in Cox's Bazar in the first half of 2021. To minimize learning loss among the Rohingya children, UNICEF and partners continued to support the Caregiver-Led Education (CLE) while LCs remain closed. 435,348 workbooks were distributed this year enabling 190,663 Rohingya children (48 per cent girls) to engage in learning activities at home. As an alternate method of delivering learning in the camps, radio programmes were used for distance learning to reach 57,603 children

(28,433 girls) including 536 children with disabilities and their caregivers. Three radio programs were developed and broadcasted targeting learners, caregivers and teachers. Unfortunately, CLE has been blocked for the past three months with only 6,540 children being reached in camps intermittently, of a total 244,603 children reached for this reporting period.

The launch of the planned Myanmar Curriculum Pilot (MCP) has been interrupted by the lockdown in the camp. Although field implementation was restricted, UNICEF continued with the technical and preparatory work for the pilot. Some of the key preparatory activities completed during the reporting period including finalization of the 6th operational guidance note on Quality Assurance for MCP, finalisation of the MCP teacher pre-induction package, procurement of EdTech equipment including radio and tablets, new partnership development to support Rohingya Community Education Initiatives, mapping of potential learners and teachers for MCP and finalisation of the student placement test tools. Other major activities such as framework design for student assessment, student record of learning, planning for Myanmar Curriculum scale up and teacher selection and recruitment preparation are currently ongoing.

As of 30 June 2021, 607 LCs have been damaged in addition to the 140 LCs that were destroyed by the fire incident in March 2021, affecting four camps. Only 107 affected LCs have been repaired so far. With the new surge of COVID-19 across the country, all repair and reconstruction work for LCs have been suspended since new lockdown introduced by the government on 1 July 2021.

Child protection, GBVIE and PSEA

UNICEF supported the development of the Child Protection Emergency Coordination Platform where prevention and preparedness messages are channelled. 500 Youth Volunteers (300 female) have been trained on flood preparedness, helping them raise community awareness including prevention messages relating to child labour, abuse and all forms of Gender Based Violence (GBV). They will be able to support children with disabilities, women and elderly people with necessary protection measures. Social workers followed up with 123,756 (56,518 female) children in 52 upazilas including locations affected by floods and cyclones during the COVID-19 pandemic and provided 300,052 children (133,750 female) with psychosocial counselling to deal with stress and reduce conflict with peer and family members.

In Cox's Bazar, UNICEF has increased investment in community-based mechanisms, community groups and volunteers to bolster prevention as well as scaled up cross-sector initiatives to mitigate risk in programming. 2,295 individuals (98 per cent female and 7 per cent people with disabilities) accessed or were referred to psychosocial support, health, safety, and legal services in person or through remote case management. 4,027 female received dignity kits to facilitate dignified access to services. Through outreach, 33,072 persons (16,467 female) benefitted from Mental health and psychosocial support (MHPSS) in the camps and host communities.

Over 21,425 people (60 per cent female and 8 people with disabilities) have benefitted from increased awareness of Child Protection including GBV and Prevention of Sexual Exploitation and Abuse (PSEA) through community radio programs, open-microphone events and billboards. UNICEF and partners continue orientations on PSEA as well as providing information on confidential reporting and safe access to assistance. In the reporting period, 198 humanitarian workers (76 per cent female) were trained on GBV risk mitigation and PSEA including child safeguarding principles.

The Child Protection Sub-sector (CPSS) has made significant progress in the first half of 2021 where case management remained a critical activity with CPSS partners reaching 2,622 boys and 2,366 girls, including 480 children with disabilities. The CPSS places communities at the centre of its activities through strengthening 545 community-based mechanisms and the CPSS continues to build its camp level coordination through bi-weekly trainings and/or meetings with child protection focal points. Challenges remain in terms of access to the camps for critical child protection activities due to COVID-19 containment measures which are being addressed with remote case management guidance notes.

Communications for Development (C4D), Community Engagement and AAP

In 24 Rohingya refugee camps, a total of 552,734 people (324,848 female and 3,181 people with disabilities) have been engaged in two-way communications and dialogues on major disease outbreaks including COVID-19 and AWD through 274,798 inter-personal communication sessions. 124 advocacy meetings mobilized and engaged a total of 1,754 key influential actors such as Camp in Charge (CiCs), Majhis, religious and opinion leaders to make them advocate, and supportive and proactive during the disease outbreak campaigns. 1,967 adolescent boys and 1,831 girls

registered in 158 adolescents radio listeners clubs and participated in 10,222 Adolescents Radio Listeners Club sessions to engage their peers, parents and communities on key life-saving messages.

As part of Accountability to Affected Populations (AAP) framework, the UNICEF AAP Taskforce in Cox's Bazar has developed a strategy framework and monitoring tools for integrating and mainstreaming AAP to all UNICEF partners and programmes. A total of 33,066 Complaints, Feedback, Queries (CFQs) including 1,952 on COVID-19 has been recorded and referred to various service points, out of which 29 per cent got resolved and closed the feedback loop. 24 rumours and misinformation have been tracked and addressed by UNICEF C4D partners. Main rumours were on COVID-19 vaccination, isolation and referral, treatment etc.

UNICEF and partners supported the establishment of three Emergency Information and Feedback Centres (EIFCs) in the three fire affected camps. These EIFCs received and recorded a total of 231 queries on various services and facilities. Approximately 72,840 people (22,765 female) have been reached through loudspeaker messages on the broader protection and service point related issues in the fire affected camps.

In Cox's Bazar host community, UNICEF and partners have mobilized and engaged a total of 238,406 people (87,795 female) on key COVID-19 prevention and vaccination related messages and information. About 200,000 people (75,000 female) have been reached through three wheelers (Tomtom) based loudspeaker announcements with COVID-19 prevention and vaccination messages in six host community sub-districts. A total of 7,895 CFQs was registered and referred from 4,697 male and 3,198 female, and 42 per cent out of them got reported to be resolved. During the strict lockdown, smooth implementation of community engagement activities remains challenging. Alternative modalities such as dialogues among small group, maintaining preventive measures during interactions, more use of interactive programmes in regional and community radio and ICT need to be considered in the future.

Humanitarian Leadership, Coordination and Strategy

The humanitarian response to 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 (SEG) 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.

Human Interest Stories and External Media

UNICEF reiterated support for critical and unmet humanitarian needs of Rohingya refugee and affected host communities inclusive of those impacted by the fire incident. Communications work was constrained by limited access to the refugee camps. 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 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.

During the reporting period, UNICEF marked relevant international days, including [World Refugee Day](#) on social media highlighting its partnerships with key donors and need for sustained investments for refugee children.

Stories:

- What you need to know about a COVID-19 vaccine ([13 January 2021](#))
- A 'dry run' for COVID-19 vaccine delivery in Bangladesh ([25 February 2021](#))
- Junaid was separated from his family when fleeing raging fire in Rohingya refugee camps ([25 March 2021](#))
- Building back better: Saving vulnerable newborns with revitalised health services ([1 April 2021](#))
- Communities rising: Tackling COVID-19 and building back better ([29 April 2021](#))
- How parents can support their child through COVID-19 losses ([27 May 2021](#))
- 6 ways parents can support their kids through the COVID-19 outbreak ([13 June 2021](#))

Press releases/statements:

- Children cannot afford another year of school disruption ([12 January 2021](#))
- Open letter about reimagining the world after COVID-19, UNICEF's Executive Director highlights five lessons from the global pandemic ([17 February 2021](#))
- COVID-19: Schools for more than 168 million children globally have been completely closed for almost a full year ([3 March 2021](#))
- 10 million additional girls at risk of child marriage due to COVID-19 ([8 March 2021](#))
- Disruptions in health services due to COVID-19 "may have contributed to an additional 239,000 child and maternal deaths in South Asia" ([17 March 2021](#))
- Devastating fire displaces thousands in Rohingya refugee camps in Cox's Bazar ([22 March 2021](#))
- Statement by UNICEF Executive Director Henrietta Fore on the fire at Rohingya refugee camps in Cox's Bazar ([26 March 2021](#))
- Child immunization services affected by COVID-19 disruptions with millions of children at risk from deadly diseases ([26 April 2021](#))
- Statement by the UNICEF Representative in Bangladesh Tomoo Hozumi on the release of children from detention centres ([6 May 2021](#))
- Child labour rises to 160 million – first increase in two decades ([11 June 2021](#))
- ICC supports UNICEF'S COVID-19 relief efforts in South Asia ([17 June 2021](#))
- Billions of people will lack access to safe water, sanitation and hygiene in 2030 unless progress quadruples ([1 July 2021](#))

Summary of Programme Results*

Sector		UNICEF and IPs Response			Cluster/Sector Response ⁴		
Indicator	Disaggregation	2021 target ⁵	Total results	Change** ▲ ▼	2021 target	Total results	Change* ▲ ▼
Nutrition							
children aged 6 to 59 months with severe acute malnutrition admitted for treatment ⁶	Girls	6,779	5,846	▲ 2,527	6,796	3,223	▲ 1,680
	Boys	6,521	3,997	▲ 2,055	6,304	1,904	▲ 981
	People with Disabilities (PwD)	186	60	▲ 24	266	-	-
children aged 6 to 59 months receiving vitamin A supplementation every six months ⁷	Girls	10,080,330	72,702	▲ 72,702	75,400	72,702	▲ 72,702
	Boys	10,074,750	74,274	▲ 74,274	69,600	74,274	▲ 74,274
	PwD	282,171	-	-	1,778	-	-
Health							
children aged 0 to 11 months who have received pentavalent 3 vaccine ⁸	Girls	1,674,871	1,059,216	▲ 498,877			
	Boys	1,674,862	1,048,338	▲ 525,775			
	PwD	52,102	-				
health service consultations for children and women, including prenatal, delivery and postnatal care; essential newborn care; immunization; treatment of childhood illnesses; and HIV care ⁸	Girls	5,712,999	2,303,914	▲ 940,632			
	Boys	5,887,812	2,346,289	▲ 958,601			
	Women	3,633,443	1,325,642	▲ 852,693			
	PwD	213,280	58	▲ 56			
WASH							
people accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene ⁹	Girls	2,618,798	233,222	▲ 130,551	291,943	245,367	▲ 21,847
	Boys	2,174,453	195,078	▲ 99,838	305,419	256,529	▲ 22,932
	Men	2,312,900	333,192	▲ 213,533	244,355	237,654	▲ 21,599
	Women	3,427,000	365,935	▲ 233,978	283,699	206,206	▲ 17,894
	PwD	102,242	24,948	▲ 8,336	11,254	9,457	▲ 842
people accessing appropriately designed and managed latrines	Girls	314,058	178,708	▲ 95,093	291,943	263,376	▲ 7,497
	Boys	289,939	146,532	▲ 72,238	305,419	275,832	▲ 7,789
	Men	355,479	334,340	▲ 223,790	244,355	257,367	▲ 7,034
	Women	260,341	345,967	▲ 232,487	283,699	218,926	▲ 6,541
	PwD	27,867	22,833	▲ 12,043	11,254	10,155	▲ 289
Child Protection							
children and caregivers accessing mental health and	Girls	167,320	99,348	▲ 64,609	279,436	8,245	▲ 4,894
	Boys	218,080	128,065	▲ 78,650		8,664	▲ 4,893
	Men	85,293	38,237	▲ 25,312		-	-
	Women	79,307	34,402	▲ 22,697		-	-

* Includes response in camps, host communities, COVID-19 and national flood.

** Change since last report.

⁴ This covers Cox's Bazar level only. More detailed information is available in the next table below.

⁵ Targets have been updated as of 30 June 2021.

⁶ Cox's Bazar host communities and floods not counted into the overall target due to double counting.

⁷ The national results are not included and will be reported in the next situation report.

⁸ Cox's Bazar host communities not counted into the overall target due to double counting.

⁹ In 2020, WASH flood response is planned for 133,675 people.

psychosocial support	PwD	18,400	7,909	▲ 6,887	27,944	257	▲ 138
women, girls and boys accessing gender-based violence risk mitigation, prevention or response interventions	Girls	233,298	41,290	▲ 34,310			
	Boys	97,532	41,009	▲ 37,288			
	Men	40,200	31,977	▲ 26,977			
	Women	176,662	47,286	▲ 37,256			
	PwD	21,288	5,516	▲ 4,704			
Education							
children accessing formal or non-formal education, including early learning ¹⁰	Girls	423,855	180,390	▲ 1,229	217,926	-	-
	Boys	414,695	187,402	▲ 771	210,517	-	-
	PwD	14,291	2,316	-	N/A	-	-
girls and boys supported with distance/remote learning in emergencies ^{11 15}	Girls	1,247,119	545,542	▼ 5,108	N/A	67,257	▲ 40,882
	Boys	1,155,059	546,279	▼ 774	N/A	69,079	▲ 40,001
	PwD	13,835	536	▼ 734	N/A	2,042	▲ 1,983
C4D/ ACCOUNTABILITY MECHANISM							
people participating in engagement actions for social and behavioural change ¹²	Girls	9,888,300	1,158,093	▲ 335,664			
	Boys	10,085,700	1,729,145	▲ 808,098			
	Men	13,961,300	35,435,767	▲ 31,116,122			
	Women	13,714,700	14,996,909	▲ 6,088,149			
	PwD	8,000	320,981	▲ 158,315			
people who shared their concerns and asked questions/clarifications to address their needs through established feedback mechanisms ¹²	Men	514,200	941,319	▲ 653,840			
	Women	525,800	397,130	▲ 250,798			
	PwD	17,400	4,185	▲ 2,830			

¹⁰ Covers institution-based education ie school, learning centre, temporary learning centre or other physical spaces where formal or non-formal education.

¹¹ This indicator covers only non-institution-based education access.

¹² Cox's Bazar host communities and floods not counted into the overall target due to double counting.

Cox's Bazar level Summary of Humanitarian Programme Results

Indicator		UNICEF and IPs					Sector Response				
Sector	disaggregation	2021 Target		Total Results		Change since last report ▲▼	2021 Target		Total Results		Change since last report
		Refugee	Host Community	Refugee	Host Community		Refugee	Host Community	Refugee	Host Community	
NUTRITION											
Children aged 6 to 59 months with severe Acute malnutrition admitted for treatment	Girls	3,379	245	2,087	218	▲ 1,182	5,980	816	2,785	438	▲ 1,680
	Boys	3,121	255	1,220	182	▲ 727	5,520	784	1,603	301	▲ 981
	CwD	91	7	60	1	▲ 25	266	247	-	-	-
Children aged 6 to 59 months receiving vitamin A supplementation every six months	Girls	80,330	227,697	72,702	231,110	▲ 303,812	75,400	-	72,702	-	▲ 72,702
	Boys	74,750	236,985	74,274	236,108	▲ 310,382	69,600	-	74,274	-	▲ 74,274
	CwD	2,171	6,508	-	833	▲ 833	1,778	-	-	-	-
HEALTH											
Children aged 0 to 11 months who have received pentavalent 3 vaccine	Girls	15,258	39,036	8,495	23,296	▲ 14,900					
	Boys	15,251	39,984	8,900	22,779	▲ 14,901					
	CwD	427	1,066	-	-	-					
Number of health service consultations for children and women including prenatal, delivery and postnatal care; essential newborn care; immunization; treatment of childhood illnesses; and HIV care	Girls	76,678	58,657	27,182	7,163	▲ 13,567					
	Boys	78,443	61,075	30,441	6,392	▲ 18,156					
	Women	39,511	50,590	28,207	40,451	▲ 45,313					
	PwD	2,725	2,385	58	-	▲ 56					
WATER, SANITATION & HYGIENE											
People accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene.	Girls	63,954	19,728	63,954	21,728	▲ 12,518	230,573	61,370	183,997	61,370	▲ 21,847
	Boys	66,697	20,573	66,697	20,926	▲ 11,901	242,030	63,389	193,140	63,389	▲ 22,932
	Women	60,877	18,777	60,877	29,983	▲ 14,666	227,948	55,751	181,903	55,751	▲ 21,599
	Men	51,623	15,923	51,623	29,485	▲ 13,972	188,856	55,499	150,707	55,499	▲ 17,894
	PwD	7,295	2,250	12,100	372	▲ 256	8,894	2,360	7,097	2,360	▲ 842
People accessing appropriately designed and managed latrines	Girls	63,954	19,728	63,954	12,656	▲ 23,780	230,573	61,370	225,827	37,549	▲ 7,497
	Boys	66,697	20,573	66,697	14,653	▲ 25,261	242,030	63,389	237,048	38,784	▲ 7,789
	Women	60,877	18,777	60,877	27,030	▲ 34,003	227,948	55,751	223,256	34,111	▲ 7,034
	Men	51,623	15,923	51,623	26,120	▲ 30,537	188,856	55,499	184,969	33,957	▲ 6,541
	PwD	7,295	2,250	12,100	189	▲ 6,564	8,894	2,360	8,711	1,444	▲ 289
CHILD PROTECTION & GENDER-BASED VIOLENCE											
Children and caregivers accessing mental health and psychosocial support	Girls	38,610	12,870	12,301	3,393	▲ 11,557	221,255	58,181	7,857	388	▲ 4,894
	Boys	35,640	11,880	12,814	3,066	▲ 11,677			8,265	399	▲ 4,893
	Women	31,590	10,530	607	166	▲ 558			-	-	-
	Men	29,160	9,720	566	159	▲ 542	-	-	-		
	PwD	2,700	900	390	80	▲ 351	22,126	5,818	254	3	▲ 138
Number of women, girls and boys accessing GBV risk mitigation, prevention, or response interventions	Girls	8,331	4,000	6,062	1,348	▲ 4,315					
	Boys	632	500	2,718	818	▲ 2,912					
	Women	12,562	5,000	10,291	1,469	▲ 7,480					
	PwD	431	190	135	9	▲ 56					

People with access to safe channels to report sexual exploitation and abuse ¹³	Girls	185,900	90,435			-					
	Boys	171,600	83,479			-					
	Women	140,400	68,300			-					
	Men	152,100	73,992			-					
	PwD	13,000	6,324			-					
EDUCATION											
Children accessing formal or non-formal education, including early learning ¹⁴	Girls	122,000	36,400	111,802	-	-	190,285	27,641	-	-	-
	Boys	126,000	33,600	119,776	-	-	182,505	28,012	-	-	-
	CwD	2,480	1,400	2,316	-	-	N/A	N/A	-	-	-
Number of girls and boys supported with distance/remote learning in emergencies ¹⁵	Girls	36,600	14,560	28,433	-	▼5,108	N/A	N/A	53,181	14,076	▲40,882
	Boys	31,500	13,440	29,170	-	▼774	N/A	N/A	56,148	12,931	▲40,001
	CwD	1,362	560	536	-	▼734	N/A	N/A	1,502	540	▲1,983
C4D/ ACCOUNTABILITY MECHANISM											
People participating in engagement actions for social and behavioural change	Girls	117,000	27,000	55,259	35,989	▲50,511					
	Boys	117,000	27,000	45,872	29,191	▲39,772					
	Women	221,000	51,000	269,589	60,289	▲111,391					
	Men	195,000	45,000	182,014	36,643	▲78,121					
	PwD	6,500	1,500	3,181	710	▲1,926					
People who shared their concerns and asked questions/clarifications to address their needs through established feedback mechanisms	Women	20,800	5,200	19,840	3,198	▲8,828					
	Men	19,200	4,800	13,226	4,697	▲7,896					
	PwD	400	100	77	47	▲72					

¹³ Due to coronavirus pandemic, assessment has not done yet to get a comprehensive result.

¹⁴ Data from LCs were last collected before COVID 19 and school is closed since the beginning of the pandemic.

¹⁵ Data has been verified through the triangulation of multiple sources and found some duplication in previous report, that's why reduce 5,882 children

Annex B

Funding Status (as of 30 June 2021) *

Appeal Sector	Funding Requirements	Funds available*					Funding gap		
		Funds Received Current Year	Total	Resources available from 2020 (Carry-Over)			Total funds available	\$	%
		ORE	ORR		ORE	ORR			
Nutrition	20,688,000	1,307,237	6,923,504	8,230,741	4,150,239	8,929,445	21,310,425	-	-
Health	36,373,000	6,476,154	5,412,743	11,888,897	1,931,895	7,809,945	21,630,738	14,742,262	41%
Water, Sanitation and Hygiene	32,133,000	12,277,773	208,989	12,486,762	1,453,041	5,421,185	19,360,988	12,772,012	40%
Child Protection/ GBV	28,266,000	9,418,832	42,152	9,460,985	2,606,035	7,485,204	19,552,224	8,713,776	31%
Education	69,701,600	4,659,009	3,669,945	8,328,954	4,790,152	17,778,571	30,897,676	38,803,924	56%
Communication for Development	4,641,000	1,262,996	151,200	1,414,196	1,703,471	1,508,736	4,626,403	14,597	0.31%
Emergency Preparedness	7,000,000	5,556,387	-	5,556,387	962,138	405,535	6,924,061	75,939	1%
Total	198,802,600	40,958,388	16,408,534	57,366,922	17,596,971	49,338,622	124,302,514	75,122,511	38%

* As defined in the Humanitarian Appeal for 2021 (Jan – Dec 2021)

The next Situation Report will be issued on 28 October 2021

For general information regarding the actions being taken by UNICEF and other humanitarian community actors for Rohingya Refugee Emergency, COVID-19 response and the concerned resource requirements, please see the following documents.

- UNICEF Bangladesh [Humanitarian Action for Children \(HAC\)](#)
- UNICEF Bangladesh [Facebook page](#)
- Bangladesh [Rohingya Refugee Joint Response Plan 2021](#)
- UNICEF Response to the [COVID-19 Pandemic in Bangladesh](#)

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