
**Key Figures**

- **7.6 million** people affected
- **28** districts affected
- **583,402** number of houses destroyed or damaged
- **736,000** number of people targeted
- **9** districts targeted
- **$ 27M** funding requested (US$ millions)

**IMPACTED AREAS**

**INTRODUCTION**

Despite the delayed onset of the monsoon, heavy rainfall occurred during the first half of July which triggered widespread flooding. Floods damaged and destroyed vital infrastructures including 6,641 kilometers of roads, 1,275 bridges and culverts as well as 1,515 kilometers of embankments. With the support of the Ministry of Disaster Management and Relief (MoDMR), the humanitarian community conducted a Joint Needs Assessment (JNA). Among the 28 districts affected by the floods, the JNA report identified nine (9) most severely affected districts: Jamalpur, Kurigram, Gaibandha, Sylhet, Sirajganj, Tangail, Sunamganj, Bogura, Bandarban. In those districts, 85% of the overall displacement occurred equivalent to 261,499 persons including 57,406 school-age children (29,407 boys and 28,002 girls). Among the displaced population, 239,387 persons are still living in makeshift shelters (schools, colleges) or on embankments and some returned as water started to recede in their areas. Associated riverbank erosion permanently displaced more than 8,000 people equivalent to 1,654 households in Kurigram, Bogura and Tangail districts.

The Humanitarian Coordination Task Team (HCTT) met on 28 July 2019 to share the outcomes of the JNA. An inter-cluster meeting took place thereafter to plan for a coordinated response for complementing the Government-led response to the people in need. The humanitarian community agreed to pursue a 2-phase approach during a nine-month period: Immediate Humanitarian Assistance from August to November 2019 and, a Recovery phase from December 2019 to April 2020. Out of the 28 districts affected by the floods, nine (9) districts are prioritized due to the intensity and the severity of the impact of the floods combined with the level of vulnerability of affected communities in these districts: Bogura, Gaibandha, Jamalpur, Kurigram, Sirajganj, Sunamganj, Sylhet, Tangail and, Bandarban. The response integrates IFRC’s Emergency Appeal launched on 30 July 2019 and includes existing on-going emergency interventions from the I/N NGOs, UN Agencies and START Fund Bangladesh.

**STRATEGIC OBJECTIVES**

1. To provide life-saving assistance to those in life-threatening situations
2. To restore the safety and dignity of the most vulnerable populations
3. To rebuild livelihoods and to facilitate the recovery process

**FUNDING required between August 2019 and April 2020 (9 months)**

Complementing GoB’s efforts, the humanitarian community is seeking US$27 million to provide immediate humanitarian assistance to 736,000 persons (50% men, 50% women, 43% children) between August 2019 and April 2020.
To date, the national response interventions and preparedness efforts helped to prevent further loss of lives and to avoid further infrastructures damages and economic losses. However, the level of distress of the affected population is high. It is mostly due to the loss of assets and livelihoods combined with the lack of access to still-functioning markets and to public services such as education and health. Highly vulnerable persons in displacement situations are severely impacted (RCO Situation Update #1).

Considering that the monsoon season is still at an early stage, a further deterioration of the situation is possible (RCO Situation Update #2). Risks of landslides, flash floods, prolonged waterlogging situation are not excluded. There is a possibility of disease outbreak due to polluted waters and the disruption of the sanitation system. Would the situation deteriorate further, it will most likely extend and/or increase current displacement with the multi-sectoral risks associated with such situation (e.g. protection including cases of gender-based violence, hygiene, mental health, school drop-out) notably for children, women (including pregnant women and new mothers) as well as for people living with disabilities. National authorities continue to monitor the situation actively given that two more months of monsoon are expected (RCO Situation Update #3).

The MoDMR allocated rice and cash to all 64 districts of the country through its regular response mechanism. MoDMR made additional allocations to the 28 affected districts. As of August 4, 2019, MoDMR allocated 28,350 MT GR rice, 216.85 million cash (only cash, children food and fodder) and 118,000 packets of dry food. To address the distress of the displaced people MoDMR set up 8,500 tents to provide temporary shelter.

The National Disaster Response Coordination Centre (NDRCC) is working together with BMD and FFWC to provide timely flood forecasts, weather updates and to facilitate decision-making processes vis-à-vis the allocation of relief assistance by the MoDMR. The MoDMR is disseminating the warnings and the operational directives via the media (TV and radio) and it guides preparedness and response efforts. The Government-led response is implemented in the affected districts through Local Disaster Management Committees.

The National Health Emergency Operations Centre and Control Room under the Ministry of Health and Family Welfare (MoHFW) is monitoring the flood situation. More than 2,450 Emergency Medical Teams (EMTs) are working to respond and to prevent health issues using pre-positioned stocks of emergency drugs. The Ministry of Agriculture (MoA) initiated a 21.23 million BDT worth recovery program for 32,121 farmers to prepare seedbed and seedling in ten (10) districts.

The Department of Livestock Services (DLS) vaccinated 127,057 livestock and 388,176 poultry. Immediate treatment of 65,977 livestock and 295,701 poultry was also provided.

Mid-July, the UN Secretary-General, Mr. António Guterres expressed his sadness by the loss of life, displacement of people and destruction of property due to the heavy monsoonal rains and associated flooding across South and South-East Asia, most notably in India, Bangladesh, Nepal and Myanmar. He extended his condolences and solidarity to the families of the victims, to the Governments and people of the affected countries and wished those injured a speedy recovery. He also informed that the United Nations stands ready to work with the authorities in the affected countries as they respond to the humanitarian needs resulting from this ongoing monsoon season.

As recommended by the MoDMR which co-chairs the HCTT together with the UN, the clusters liaised closely with their national technical government partners in order to analyze jointly the situation and to identify possible areas where a complementary support from the humanitarian community would add-value to the government-led response. The information was triangulated with the views from the affected communities.

This document is aligned with the outcomes of an intense consultative process which aimed also at being realistic in terms of fundraising opportunities in order not to raise wrong expectations vis-à-vis the Government of Bangladesh and the affected communities.
RESPONSE PARAMETERS

HUMANITARIAN PRINCIPLES AND COMMITMENTS

The Response and Recovery Plan is developed in order to protect, to promote and to restore of the enjoyment of the right to life with dignity, the right to protection and security and the right to receive humanitarian assistance for the people targeted by the response.

All concerned stakeholders engage to abide by the Humanitarian Principles as well as do-no-harm and leave-no-one behind principles in planning, implementing and monitoring the projects linked to the HRP. To analyze the quality of the response as per the Core Humanitarian Standard (CHS) and the Sphere Standards, Sphere Community Bangladesh (SCB) will perform peer reviews of the response and provide recommendations for improvement when required. Their support will notably promote the accountability to affected and targeted populations.

Partners will engage with affected communities in the design, planning, management, implementation and evaluation of programmes. Partners are also committed to abide by the Fundamental principles of ethical reporting, notably when taking and using photographs in order not to do harm. Prevention and protection from Sexual Exploitation and Abuse (PSEA) will follow the Inter-Agency Standing Committee (IASC) plan for accelerating PSEA in humanitarian response at country level. IASC’s Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action will also be used.

In line with 2019 HCTT workplan, partners will also use the IASC Gender with Age Marker (GAM). The tool provides an automatic and objective calculation of the quality of humanitarian programming. The IASC GAM codes programs and projects on a 0-4 scale, based on responses to questions about 12 key gender equality measures. The GAM has a monitoring phase as well as a design phase. It examines levels of accountability, protection and addresses the concept of “leaving no one behind”.

Partners recognize that the HRP is an opportunity to make progress on the localization agenda following the commitments made at the World Humanitarian Summit in 2016. Generating an evidence base on localization is important in order to demonstrate that change is happening and its impact. Therefore, a Framework to measure localization will be developed to serve as a baseline against which progress will be assessed on a regular basis.

GUIDELINES

Partners commit to abide by the existing packages and guidelines on Multi-Purpose Cash Assistance (MPCA), the 2010 IASC Minimum Guidelines for Agriculture and Livelihood Interventions in Humanitarian Settings and the MoDMR Early Recovery Guiding Principles.

EFFECTIVENESS AND EFFICIENCY

Economy of scale, value for money, impact, sustainability should be sought and promoted including through the development of joint programmes. Resource mobilization efforts should be done jointly and be supportive of national/local stakeholders. A financial reporting tool is available here for facilitating the tracking of resources and related response activities.

COMMUNICATION AND ADVOCACY

During the 9-month implementation period of the response plan, the HCTT will issue a monthly SITREP to report and to update the international community on the needs, the response and gaps. The HCTT and its partners will advocate for issues directly related to the humanitarian response but also on addressing issues related to the causes of the disaster in order to help prevent future possible loss of lives. The HCTT will promote GoB’s leadership of the cluster/sector responses throughout the response.

CASH ASSISTANCE

HCTT Members agree that cash assistance needs to respect commonly agreed packages and guidelines and that interventions need to be discussed with and supported by Cluster/Sector Leads/Co-Leads.


http://www.savethechildren.org/atf/cf/%7B9def2ebe-10ae-432c-9b04-49126bb74a%7D/SCUS%20CHILD%20SAFEGUARDING%20POLICY%20W-ATTACHMENTS%20(11%2005%2015)%20DOC.PDF
IMPLEMENTATION AND COORDINATION

The Humanitarian Coordination Task Team (HCTT) will ensure the coordination and the follow-up of the implementation of the activities at the central level. Clusters and working groups will hold regular coordination meetings to track sectoral progress. The RCO will hold regular inter-cluster meetings and co-chair, together with MoDMR, HCTT meetings to report on progress. Nominated HCTT district focal points will liaise with concerned Deputy Commissioners on behalf of the partners of the response. Response partners will communicate with HCTT district focal points on their activities in order to facilitate coordination at local level. District focal points will work in close collaboration with the respective District Commissioners and help distinguish short-term and long-term needs and streamline communication to the HCTT. This area-based coordination arrangement will also have the advantage to provide both ways real-time information between the district authorities and the HCTT.

The NNGOs representatives at the HCTT recommended the following L/NNGOs to perform the role of district focal points for the humanitarian community.

1. Bandarban: Caritas Bangladesh
2. Bogura: Grameen Bikas Foundation (GBF)
3. Gaibandha District: Gana Unnayan Kendra (GUK)
4. Jamalpur District: Adarsha Polly Unnayan Songstha (APUS)
5. Kurigram District: Mahideb Jubo Somaj Kallayan Somity (MJSKS)
6. Sirajgonj District: Manab Mukti Sangstha (MMS)
7. Sunamgonj District: Efforts for Rural Advancement (ERA)
8. Sylhet District: Society for Sylhet resources advancement (SRAC)
9. Tangail: Palli Unnayan Sangstha (PUS)

HUMANITARIAN ACCESS

HCTT co-leads will support partners to receive relevant authorization to support response efforts if/when required.

Flooded houses in Kurigram. Source: [media](#).

MONITORING AND EVALUATION

Cluster/Sector Leads/Co-Leads will ensure the monitoring of their respective cluster activities based on their implementation plan that will include expected results and targets. Cluster/Sector Leads/Co-Leads will also take into account the feedback of communities in the monitoring of the implementation of their respective activities. The HCTT will also play a role in monitoring the response and provide appropriate guidance to the Cluster/Sector Leads/Co-Leads as well as the Gender in Humanitarian Action Working Group (GiHA) which will provide a Gender Impact Analysis.

An on-line 4Ws matrix is available [here](#) for the cluster/sector coordinators’ use to facilitate the monitoring of the response.
MULTI-PURPOSE CASH ASSISTANCE

Target beneficiaries:

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<th></th>
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<th>Male</th>
<th>Total</th>
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<tr>
<td>&lt; 18 years</td>
<td>35,600</td>
<td>30,400</td>
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<td>≥ 18 years</td>
<td>39,000</td>
<td>33,000</td>
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<td>74,600</td>
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Criteria of selection:

- Household affected and/or displaced due to a particular disaster;
- Household lives on day labor or charity and having no regular income;
- Female- headed poor households (including widow, divorced, separated, single women);
- Poor household having pregnant and lactating women, differently-abled, elderly, child headed and chronically sick.

**FUNDING REQUIRED:** $1,700,000

Rationale:

Multi-purpose Cash Grant (MPG) for one (1) month to 30,000 Households (HH) amounting to BDT 4,500/HH which is completely unconditional and unrestricted to meet immediate basic needs covering the different sectors such as food, shelter repair, hygiene, health, education, livelihood inputs, protection, nutrition, transports, other non-food items.

Objective:

To meet the immediate needs of the affected people regardless of sectors.

Top-priority activities to complement GoB’s efforts:

1. Cash Transfer to reduce the risk of adoption of negative coping mechanisms
RESPONSE BY SECTOR

CHILD PROTECTION

Target beneficiaries:

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<tr>
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<td>&lt;0-6 years</td>
<td>60,000</td>
<td>40,000</td>
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<td>7-10 years</td>
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<td>11-18 years</td>
<td>180,000</td>
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<td>320,000</td>
<td>220,000</td>
<td>540,000</td>
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Criteria of selection:

- Children with disabilities
- Single headed household (women)
- Families with children under 5 years old
- Separated children
- Children at risk of GBV

FUNDING REQUIRED: $150,000
Phase 1: $70,000; Phase 2: $80,000

Rationale:

Approximately more than 1 million children were displaced as the results of floods in Bangladesh (Ref: Estimated data from NDRCC affected population by using BBS district wise data). The amount of damage caused from a disaster can be overwhelming. The destruction of homes and separation from school, family and friends can create a great amount of stress and anxiety for children. Children with immense protection needs like children with disabilities are more vulnerable and consequent physical, psychological or emotional problems are immense. Children are more likely to develop emotional and mental health problems during emergencies, and very vulnerable to exploitation, abuse and neglect. Pursuant to the Joint Needs Assessment Monsoon Floods Phase 2 Report in Bangladesh, out of 114 population reported dead due to drowning, 36% are children under 5 while 41% 5-27 are adolescents.

The report further warns that children are susceptible to diseases and while schools remain closed for a long time and this may post lead to school drop outs, child labour, early marriage and children/adolescents may be exposed gender-based violence (GBV) while in shelters.

The communities affected by the floods have limited access to national services and thus require a need to promptly support the GoB to reach the most vulnerable in the 9 districts as listed above. The child protection cluster will work towards preventing and responding to abuse, neglect, exploitation and violence against children, in additional to current initial reports regarding the impact on children in the 9 districts, in times of crisis, children face an increased risk of all forms of violence and exploitation.

Cluster objectives:

Phase 1:

1. Children and adolescents will be protected from abuse, neglect, violence and exploitation
2. Ensure that children have access to services; health, education, nutrition, safe drinking water and hygiene, birth registration (where needed)
3. Strengthen referral case management system in the flood affected areas Restore dignity of girls and boys to reduce vulnerability and connect them with information and support services
4. Create and maintain Child database to support UASC

Phase 2:

1. Psycho-social support for the well-being of children and their caregivers affected by the floods
2. Continued use of adolescent clubs to disseminate emergency awareness building messages and lifesaving training through social workers at the community levels
3. Distribution of recreational kits
4. Child Protection in Emergency community based continue to hold working group meetings to monitor and provide updates on the impact of the current floods and appropriate responses.
5. Integrated repose mechanism for GBV prevention and responses for children and adolescents affected the floods

Planned local partners (not-exclusive list):

BRAC, RDS, and MMS, Base, GUK, SKS, NDP, Sabolombi, Solidarity, VARD, BACE, AFAD, LAMB, Accelerated protection of children project (APC), MoWCA
Planned international partners (not-exclusive list):
UNFPA, ActionAid, Care, Plan International Bangladesh, TDH - f, Save the Children, Oxfam, Help age International, Islamic Relief, World Vision and UNICEF

Targeted geographical areas: The nine (9) prioritized districts

Partners Access/presence in targeted areas:
Partners maintain a field presence in the affected areas. Relationships with other national and local actors in the target areas are in place to facilitate the Child Protection in emergencies response in targeted 9 flood affected districts.

Cluster/sector focal point:
Irene TUMWEBAZE
Child Protection National Cluster Coordinator
UNICEF Bangladesh
itumwebaze@unicef.org

People cross a flooded road in Jamalpur. Source: media.
Response by Sector

Early Recovery

Target beneficiaries:

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<th>Female</th>
<th>Male</th>
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<tr>
<td>&lt; 18 years</td>
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<td>3,593</td>
<td>8,644</td>
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<td>≥ 18 years</td>
<td>6,916</td>
<td>3,473</td>
<td>10,356</td>
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<td><strong>Total</strong></td>
<td>11,967</td>
<td>7,066</td>
<td>19,000</td>
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Criteria of selection:

- Flood affected families who are landless (<15 Dec. including homestead) with no/limited income option and whose income are mostly dependent on off-firm livelihoods
- The most affected HHs (Women Headed, Child Headed, Disabled People-headed, Old Aged Headed, large dependent family (+5 dependent/Earner)
- Socially marginalized, excluded communities including ethnic/religious minorities

Funding required: $3,100,000
Phase 1: $1,300,000; Phase 2: $1,800,000

Rationale:

- Based on Joint Needs Assessment and ER Cluster partners feedback, three main emergency support (Emergency Period -0-4 months and 5-9 months) have been identified which require rapid response. These are the (1) provision of emergency off-firm livelihoods to affected population (2) Urgent repair/restoration of damaged school ground/community connecting roads/growth centre/Bridges/Culvert/Embankments/Village Haats etc. (3) Quick support to Disaster management Committees, DRRO and PIO offices at union, upazilla and district level.

Rationale for Repair & reconstruction of Community Critical Infrastructure: According to Roads & Highways Department and LGED, approx. 122.48km roads including Kaccha/Earthen roads, which is the highest, are damaged in Gaibandha, while 102.40km was affected in Kurigram, 397 km in Jamalpur that need repair and reconstruction. Following NDRCC office database 32 bridges/culvert are destroyed in Jamalpur, 39 in Kurigram and 41 in Gaibandha Districts while 99 KM embankment are damaged in Gaibandha, 40 KM in Kurigram and 5.5 KM in Jamalpur Districts. In addition, critical infrastructure i.e School ground, community connecting roads, growth centre, village haats are badly damaged.

Therefore, immediate and urgent repair and/or restoration of damaged critical infrastructure (School ground, community connecting roads, growth centre, village haats, embankments, bridges, culverts, earthen roads) of Kurigram District, Gaibandha and Jamalpur Districts which rendered the affected areas inaccessible, impeded the timely delivery of emergency supplies and assistance to the affected population and have caused the inability and immobility of population to access critical and emergency medical and health services, inability of school children to go to school and have altered and caused the spiking of prices of food supplies and basic commodities in the District.

Rationale for Governance Interventions: From Governance point of view, Disaster Management Committees, DRRO and PIO offices play a significant role to produce D-Form and SoS form during and after disaster. In 2019 Floods, it was prominent that most of the PIO positions are vacant (around 100 out of 491 PIOs) and they have been under huge stress to provide disaster damage and response data due to human resources constraints at upazilla level.

Cluster objectives:

19,000 disaster-affected population have restored the damaged community critical infrastructures through Cash-for Work, # of women and men provided with emergency off-firm livelihoods support through emergency conditional startup grants and productive asset replacement and provided human resource support to disaster management committees PIO offices for better functioning.

Phase 1:

1. In kind support to purchase tools/equipment’s/ productive assets to resume off-firm livelihoods

Phase 2:

1. Restoring of damaged critical infrastructure i.e school ground/ village haats/growth centre/community connecting roads/ bridges/culverts/embankments/earthen roads and provision of Cash for Work
2. Quick Human Resource support to disaster management committees/DRRO/PIO offices for better functioning.
3. Provision of free skill trainings as per market demand and free supply of necessary
tools to the landless households would help in the early recovery of the affected.

4. An enhancement of the capacity of the disaster management committees including DRROs and PIOs for both short and medium term is required. To respond efficiently and effectively to the response, there is a need to substantiate their efforts with the help of human, technical and equipment resources.

5. There is need for provision of increased coping strategies for vulnerable and poorest segment of population in shape of interest free micro loans or cash grants for small entrepreneurship (advocacy).

Planned local partners (not-exclusive list):
Early Recovery Cluster has pre-qualified 79 NGO partners to be able to quickly contract initiate field level interventions and contract local partners when needed. Different ministries and relevant departments/directorate are also members of ER cluster including MoDMR, Water Development Board, DDM, LGED, LGD, DAE, DoLS etc

Planned international partners (not-exclusive list):
64 member organizations under Early Recovery Cluster including development partners (AusAid, DFID, ECHO, SDC), World Bank, UN agencies, INGOs

Targeted geographical areas: Kurigram, Gaibandha and Jamalpur

Partners Access/presence in targeted areas:
Early Recovery Cluster partners have strong presence in the targeted areas. ER cluster maintains a list of cluster members, duly endorsed by the MoDMR, through which specific projects/interventions are operationalized. ER cluster have ongoing capacity building interventions for cluster partners with close association of MoDMR. Around 18 NGOs out of 79 roster partners have strong local presence in the most affected nine districts. Couple of cluster partners have initiated recovery plan and going to extend coverage in the affected villages/unions.

Cluster/sector focal points:
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Disaster Response & Recovery Facility
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Arif Abdullah Khan
Programme Analyst
UNDP Bangladesh
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RESPONSE BY SECTOR

EDUCATION

Target beneficiaries:

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<th>Age Group</th>
<th>Female</th>
<th>Male</th>
<th>Total</th>
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<td>96,700</td>
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<tr>
<td>Total</td>
<td>96,700</td>
<td>96,700</td>
<td>193,400</td>
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Criteria of selection:
- Pre-primary and primary school age children (5-10 years old) in the most affected GPS and non-formal learning centres
- Education institutions with the worst infrastructure damage

FUNDING REQUIRED: $822,300
Phase 1: $612,300; Phase 2: $210,000

Rationale:
During floods in Bangladesh education process is disrupted due to the following key supply side barriers: School buildings are damaged/inundated or used as flood shelters. Protection related barriers like safety of children on the way to and from schools because of the disrupted communication channels and access roads also remain critical. Demand side economic and social and cultural barriers include negative coping mechanisms like child labour or child marriage that vulnerable households apply when dealing with economic losses during disasters. The graph represents loss of contact hours due to the closure of schools impacted by different types of disasters in Bangladesh over 5 years period.

Global evidence suggests the longer the period for resuming education process interrupted during emergencies and natural disasters, the higher risk of children dropping out of school. The reduced contact hours also contribute to the lower learning outcomes among students. With already alarming figures of out of school children in Bangladesh (more than 1 in 4 school age children – some 6.2 million currently are out of school) and low performance of students (only 25% of Grade 5 students reach the standards in Bangla and Math in 2013), the education should be given high and urgent priority in the current floods response.

Cluster objectives:
Phase 1:
1. Restore safe access to education for children in the flood affected areas in schools/learning centres (distributing EiE kits, alternative arrangement of classrooms, minor repair works of the damaged classrooms/buildings).
2. Prevent disaster linked school drop-out especially among children from the vulnerable families
3. Support evidence-based decision making for EiE block funds disbursement

Phase 2:
1. Support education authorities with education preparedness plans;
2. Support school infrastructure repair works
3. Improve school infrastructure damage assessment data collection and verification mechanisms

Planned local partners (not-exclusive list):
Directorate of Primary education and its district and upazila primary education offices, BRAC, Manob Mukti Shongstha (MMS), Centre for Natural Resource Studies, Friends in Village Development Bangladesh, Solidarity, World Vision

Planned international partners (not-exclusive list):
Save the Children, Plan International and UNICEF

Targeted geographical areas: The nine (9) prioritized districts

Partners Access/presence in targeted areas:
District and upazila primary education offices are available across all targeted areas. Partners have field presence as follow:
- Plan International- SOLIDARITY – Kurigram
- BRAC: Jamalpur, Kurigram, Sunamganj and Sylhet
- SCI – MMS- Sirajganj; SCI - Center for Natural Resource Studies- Maulvibazar; SCI - Friends in Village Development Bangladesh – Sylhet
- World Vision: Jamalpur and Bandarban
- UNICEF: Kurigram, Gaibandha, Sirajganj, Jamalpur, Tangail, Sylhet, Bandarban and Sunamganj

Cluster/sector focal points:
Saltanat Builasheva
Education Cluster Coordinator
UNICEF
sbulasheva@unicef.org

Jacklin Rebeiro
Co-lead Education Cluster
Save the Children
jacklin.rebeiro@savethechildren.org
Target beneficiaries:

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Female</th>
<th>Male</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; 18 years</td>
<td>30,978</td>
<td>32,572</td>
<td>63,199</td>
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<td>≥ 18 years</td>
<td>40,739</td>
<td>42,685</td>
<td>83,775</td>
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<td>Total</td>
<td>71,717</td>
<td>75,257</td>
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(*) In addition, 924 communities targeted for community-based Agriculture and Livestock interventions

Criteria of selection:
- Severity and impact of flood damage. Requirement of immediate lifesaving activities
- Integrated food security phase classification (IPC) level
- Poverty Level; consideration of the affected population living under the extreme poverty line
- Vulnerability analysis (to disaster, internal displacement, threats to livelihoods, gender)
- Agricultural land ownership (mostly focused on small-holder farmers or landless farmers)
- Reliance on day labor/casual labor
- Dependencies (persons with disabilities, elderly, HHs having Under-5-year-old children)
- Crop loss by House Hold (complete loss prioritized)
- Households with pregnant and lactating women, Women-headed Households

FUNDING REQUIRED: $6,422,569
Phase 1: $3,109,198; Phase 2: $3,313,371

Rationale:

The JNA Field Team report identified the Agriculture/Livestock sector as the most heavily impacted sector. An estimated 137,798 hectares of crops have been completely lost across the affected districts. Additionally, a total of USD 83 million in livestock poultry production has been lost as a direct result of the flooding. An estimated 307,646 people have been displaced, leaving their homes and livelihoods behind in floodwaters. Many of these vulnerable household are day laborers or non-agricultural laborers, living on day-to day income, and will require immediate and medium-term support to recover their livelihoods. The Government is actively responding to these needs; however, it is appreciative of assistance from the humanitarian community to address immediate food security and livelihoods needs at HH and community levels.

Cluster objectives:

Phase 1:
To save lives through appropriate Food Security interventions and immediate restoration of livelihoods: livelihood protection saves lives. 100% target of Food Assistance + 40% immediate Livelihood assistance.

Phase 2:
To recover from the stress caused by the flood on agriculture, livestock, access to food (physical & economic) and livelihood opportunities, which complement food insecurity and build resilience against future shocks. 60% of the livelihood activity + community activity.

Planned local partners (not-exclusive list):
GRAUS, SKS, BACE, EDG, MMS, FIVDB, GUS, GUK, PBK, VARD, POPI, ZHSMS, UP, RDRS, MJSKS, GNB, GBUS, GKS, UDPS, ESDO

Planned international partners (not-exclusive list):
FAO, WFP, AAB, ACF, BRAC, CWW, HKI, IRB, Oxfam, Plan, SCI, UP, WVI, Tdh

Targeted geographical areas: Gaibandha, Jamalpur, Kurigram, Sirajganj, Sunamganj and Bandarban.

Partners Access/presence in targeted areas:
All mentioned above has presence in the targeted area according to the last partner presence map.

Cluster/sector focal points:
Guy Onambele
Food Security Cluster Coordinator
Bangladesh Food Security Cluster (FAO/WFP)
guy.onambele@wfp.org

Mohammad Mainul Hossain Rony,
Information Management Officer, rony.hossain@fscluster.org

Bangladesh Food Security Cluster (FAO/WFP)
RESPONSE BY SECTOR

GENDER-BASED VIOLENCE

Target beneficiaries:

<table>
<thead>
<tr>
<th></th>
<th>Female</th>
<th>Male</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; 18 years</td>
<td>30,000</td>
<td>0</td>
<td>30,000</td>
</tr>
<tr>
<td>≥ 18 years</td>
<td>100,000</td>
<td>20,000</td>
<td>120,000</td>
</tr>
<tr>
<td>Total</td>
<td>130,000</td>
<td>120,000</td>
<td>250,000</td>
</tr>
</tbody>
</table>

Criteria of selection:

- Women and girls of reproductive age (15-49 years) severely affected by the flood
- Persons at disproportionate risk of GBV including women, adolescent girls, women headed household, women and girls with disabilities, sex workers and older women.

FUNDING REQUIRED: $3,000,000
Phase 1: $1,500,000; Phase 2: $1,500,000

Rationale:

Approximately 2,165,618 women of reproductive age (15-49) out of 3,808,431 total number of females, which is approximately 57% of the total affected female population by this disaster (JNA report 2019) and are at an increased risk of experiencing Gender Based Violence (GBV) as a result of the current Monsoon Floods. In emergencies, women and girls have an increased vulnerability to GBV due to loss of houses, livelihoods, restricted mobility and lack of privacy, disrupted services and weak protection. Access to lifesaving GBV care is severely compromised as systems to respond to GBV in flood-affected areas are reportedly not in place. Women and girls in the most severely-affected areas do not feel safe in the areas where they have moved since the floods which includes embankments, emergency ad hoc shelters, alongside roadways, school buildings, and under the open sky as there is insufficient access to safe water, sanitation facilities including lockable latrines and bathing spaces, limited light and separate space for women and girls to stay. An increased risk of GBV is linked to unsafe and distant temporary settlement locations.

Limited government services, poor access to information, terrain, remote service points, and low decision-making power among women had been major deterrents to help-seeking which is now exacerbated by this flood crisis. Inadequate or partial distribution of fuel, food, shelter and livelihood also increases vulnerability for women and girls who may be forced to trade sex or other favors in exchange for these items (IASC, GBV Guidelines, 2015).

All combined, institutionalized referral systems for providing assistance to survivors of GBV are broken in the affected regions. In this context, critical GBV services need to be in place in an urgent basis to save the life women and girls and minimize the impact of GBV. These services include the provision of GBV case management to ensure safe, timely access to life-saving services and information, including provision of health sector response (medical care, clinical management of rape etc) for GBV survivors.

Cluster objectives:

**Phase 1:**
1. Ensure survivors of GBV have safe access to case management, health care, basic psychosocial services and referral
2. Restore dignity of women and girls to reduce vulnerability and connect them with information and support services

**Phase 2:**
1. Development of mechanisms for GBV prevention and response that includes psychosocial and mental health support for women and adolescent girls affected by the floods
2. Support off-farm livelihood or cash grants to the affected families, especially the Female-Headed Households (FHHs) and female with disability
3. Integration and advocacy with other clusters and government for GBV prevention and response

Planned local partners (not-exclusive list): Base, GUK, SKS Foundation, NDP, Sabolombi, SOLIDARITY, VARD, BACE, AFAD, LAMB

Planned international partners (not-exclusive list): UNFPA, UN Women, ActionAid, CARE, Plan International Bangladesh, TDH, Save the Children, Oxfam, Help age International, Christian Aid, BRAC, ACF, Handicap International, MJF

Targeted geographical areas: The nine (9) prioritized districts

Partners Access/presence in targeted areas: Partners maintain a field presence in the affected areas. Relationships with other national and local actors in the target areas are in place to facilitate the GBV response in targeted 9 flood affected districts.

Cluster/sector focal point:

Sabina Parvin
Humanitarian Programme Officer
GBV Cluster Coordinator (acting)
UNFPA
parvin@unfpa.org

2 Target inclusive of adolescent girls (ages 15-18)
RESPONSE BY SECTOR

HEALTH

Target beneficiaries:

<table>
<thead>
<tr>
<th></th>
<th>Female</th>
<th>Male</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; 18 years</td>
<td>50,000</td>
<td>30,000</td>
<td>80,000</td>
</tr>
<tr>
<td>≥ 18 years</td>
<td>120,000</td>
<td>30,000</td>
<td>150,000</td>
</tr>
<tr>
<td>Total</td>
<td>170,000</td>
<td>60,000</td>
<td>230,000</td>
</tr>
</tbody>
</table>

Criteria of selection:

- Persons severely affected by the flood and those living in the most vulnerable areas
- Adolescents, women of reproductive age (12-49 years old) and pregnant women
- Indigenous people, other marginalized groups and people with disabilities

FUNDING REQUIRED: $3,500,000
Phase 1: $1,698,020; Phase 2: $1,801,980

Rationale:

According to National Health Emergency Operations Centre and Control Room’s report, a total of 119 people died and 21,388 people suffered from flood related diseases in affected districts. The emergency buffer stock is almost exhausted and 204 Community Clinics were inundated/damaged. There is a huge probability of water borne disease outbreak when flood water will be receding. At the same time, it is estimated that around 1, 900,000 of the affected people are women are of reproductive age, and that the number of pregnant women are 102, 6000. The most affected districts are amongst those with the highest poverty in Bangladesh, with many of the affected districts already having poorer reproductive health indicators than the national average prior to the floods. The displaced pregnant women urgently need life-saving maternal and newborn health services, including quality antenatal care, skilled birth attendance at delivery and postnatal care. It is highly important to prioritize SRH needs of a population, especially during humanitarian situations since this is an area that are many times overlooked, but when addressed properly saves lives.

Among the main challenges the affected people face when trying to meet their SRH needs is their inability to physical access health services due to landslides, road access issues and disruption of transportation services. Thus, it is important to focus a great deal on establishing referral pathways to ensure that women’s and girls’ critical needs for reproductive health can be met.

Cluster objectives:

Phase 1:
1. To provide emergency health care services to floods-affected population to prevent morbidity and mortality
2. To prevent unexpected maternal and newborn mortality and morbidity in nine severely flood affected districts
3. To provide quality clinical management of rape services to survivors in the flood affected districts

Phase 2:
1. To renovate damaged community clinics in affected areas
2. Strengthen referral pathways and ensure high quality midwifery led maternal health care facilities with appropriate supplies available

Planned local partners (not-exclusive list): DGHS, Lamb Hospital, Care Bangladesh

Planned international partners (not-exclusive list): Direct Relief

Targeted geographical areas: The nine (9) prioritized districts

Partners Access/presence in targeted areas: All partners have a presence in targeted districts

Cluster/sector focal points:

Hammam El Sakka,
Team Leader, WHO Health Emergency Programme
WHO
elsakkam@who.int

Asa Forsgren
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UNFPA
forsgren@unfpa.org

Muhammad Zahidur Rahim
National Professional Officer- EHA
WHO
rahimm@who.int

Murshida Akhter
Humanitarian Specialist
UNFPA
makhter@unfpa.org
RESPONSE BY SECTOR

NUTRITION

Target beneficiaries:

<table>
<thead>
<tr>
<th></th>
<th>Female</th>
<th>Male</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; 18 years</td>
<td>32,500</td>
<td>32,500</td>
<td>65,000</td>
</tr>
<tr>
<td>≥ 18 years</td>
<td>226,869</td>
<td>0</td>
<td>226,869</td>
</tr>
<tr>
<td>Total</td>
<td>259,369</td>
<td>32,500</td>
<td>291,869</td>
</tr>
</tbody>
</table>

Criteria of selection:

- Children under 5 with Moderate Acute Malnutrition (MAM) and Severe Acute Malnutrition (SAM).
- Pregnant and Lactating Women (PLW) with acute malnutrition
- Caregivers of children under five (for IYCF messaging and counseling)
- Adolescent girls

FUNDING REQUIRED: $992,000
Phase 1: $691,000; Phase 2: $301,000

Rationale:

Women and children are most vulnerable after any disaster. Nutrition is often overlooked during emergencies though people are at higher risk of undernutrition and micronutrient deficiencies during the emergency situation. In areas where nutrition status was poor before the emergency, people are even more vulnerable particularly women and children. Acute malnutrition weakens the immune system, which then becomes more susceptible to developing diseases that can be fatal. Young children and women who are pregnant and or lactating are most vulnerable to undernutrition as their bodies have greater needs for various nutrients. The sectoral intervention takes also into consideration the following key elements:

- Community-based nutrition services are not available in country and facility based treatment (including community clinics) are not limited, as infrastructures are damaged and not accessible in the heavily inundated areas.

Phase 1:

1. To provide emergency nutrition services to flood affected population in order to prevent Moderate and Severe Acute Malnutrition among under 5 children
2. To prevent excess child mortality and morbidity in flood affected areas due to flood consequences including malnutrition.

Phase 2:

1. To provide prompt and quality assistance to address nutritional needs of Pregnant and Lactating Women (PLW).

Planned local partners (not-exclusive list): BRAC, GUK

Planned international partners (not-exclusive list): IPHN, ACF, HKI, TDH, Plan International, WFP, Save the Children, UNICEF and other cluster partners.

Targeted geographical areas: The nine (9) prioritized districts

Partners Access/presence in targeted areas: The Nutrition cluster has strong presence in the affected area through member organizations particularly IPHN.

Cluster/sector focal point:

Mohammad Mainul Hossain Rony
Nutrition Cluster Coordinator a.i,
mohammad.rony@fao.org or mrony@unicef.org
RESPONSE BY SECTOR

SHELTER

Target beneficiaries:

<table>
<thead>
<tr>
<th></th>
<th>Female</th>
<th>Male</th>
<th>Total</th>
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<tbody>
<tr>
<td>&lt; 18 years</td>
<td>51,201</td>
<td>53,835</td>
<td>105,036</td>
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<tr>
<td>≥ 18 years</td>
<td>67,333</td>
<td>70,549</td>
<td>137,882</td>
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<tr>
<td>Total</td>
<td>121,459</td>
<td>121,459</td>
<td>242,917</td>
</tr>
</tbody>
</table>

Criteria of selection:

▪ People who lost their houses fully and partially.
▪ Female-headed households.
▪ Families with disabled and elderly persons.
▪ Landless/daily labour and small & marginal farmers.
▪ Families with children who have stopped going to school.

FUNDING REQUIRED: $4,983,211
Phase 1: $2,988,018; Phase 2: $1995193

Rationale:

Shelter is more than a roof over a head to cover people and protect them from the elements. In the worst affected 9 districts, approximately 473,522 houses affected; out of these 26,172 houses are completely collapsed/damaged while 447,350 are partially damaged. In addition to that river erosion due to flooding has been reported in Bagura, Kurigram, Sirajganj and Tangail. Approximately 1,654 houses were destroyed in riverbank erosion. The most vulnerable flood affected families with partially damage houses need repair assistance and who lost their entire houses are in need new shelter. Many floods affected people are still displaced and living in temporary shelters, school, embankment and road in Kurigram, Gaibandha, Jamalpur, Sirajganj, Tangail and Bogura. Displaced people living on the embankment, road and open space; need emergency shelter assistance. Moreover, shelter affected people are exposed to the monsoon rains and other weather elements of possible protection risks, especially for women and girls with special high risk of mud-built houses collapsing after the flood water recedes.

Cluster objectives:

Phase 1:
1. To provide shelter in pre-identified public buildings ‘community emergency shelter’ or other emergency shelters e.g. tents, shelter kits, suitable for accommodating family units ‘family emergency shelter’.

Phase 2:
1. To assist affected households to return to their own homes and to provide NFI’s and technical support.
2. To provide technical support on the design and the access to ‘low cost’ finance for facilitating self-building/repairs.

Planned local partners (not-exclusive list): CARITAS, BRAC, Action aid, DSK, ESDO, GUK, NPD, Practical Action, BDRCS

Planned international partners (not-exclusive list): UNDP, IFRC, UN Habitat

Targeted geographical areas: The nine (9) prioritized districts

Partners Access/presence in targeted areas: The Shelter cluster has strong presence in the targeted areas

Cluster/sector focal point:

Martin de Vries
Shelter Cluster Coordinator
IFRC
coord1.bd@sheltercluster.org

Arif Abdullah Khan
Programme Specialist (Climate change & Disaster Risk Management)
UNDP
arif.abdullah@undp.org
Target beneficiaries:

<table>
<thead>
<tr>
<th></th>
<th>Female</th>
<th>Male</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; 18 years</td>
<td>60,000</td>
<td>55,000</td>
<td>115,000</td>
</tr>
<tr>
<td>≥ 18 years</td>
<td>90,000</td>
<td>95,000</td>
<td>185,000</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>150,000</td>
<td>150,000</td>
<td>300,000</td>
</tr>
</tbody>
</table>

Criteria of selection:

- Severely flood affected Nine District where WASH identified as 1st/2nd/3rd priority needs
- Extreme poor population affected (lower poverty line)
- # of Female headed household affected
- % of disable people

**FUNDING REQUIRED:** $3,000,000

Phase 1: $750,000; Phase 2: $2,250,000

**Rationale:**

According to JNA finding, Local Government Ministry’s Flood monitoring cell and WASH Cluster members information, this is clearly identified and reported that safe drinking water, restoration of sanitation facilities, clean environment and availability of hygiene practice material is required. Unhygienic WASH facilities impose high risk after flood rather than during flood mostly to children, women and disable people. Proposed response plan basically focused to reduce unhygienic WASH facilities impact on most vulnerable people at flood affected area.

**Cluster objectives:**

**Phase 1:**

1. No evidence of open defecation is observed among affected population
2. All beneficiaries have access to adequate sanitation
3. 80% of these facilities are properly cleaned and maintained and have soap or ash inside
4. All beneficiaries receive water, sanitation and hygiene responses (from 1 or 2 agencies)
5. Ensure environmental Hygiene to control water borne victor related disease
6. These WASH responses are coordinated with other sectors

**Phase 2:**

1. Local authorities, national/international agencies and NGOs understand sustainable WASH interventions and coordination; ≥ 80% of affected beneficiaries are aware of planned interventions and are satisfied with proposed strategies and outputs; Project activities conform to WASH Cluster guidelines;
2. No outbreak of WASH diseases, All affected people have necessary NFIs to practice safe hygiene behaviours, ≥ 80% of affected people demonstrate key hygiene behaviours
3. All affected people have access to ≥ 7.5 L safe drinking water/day, ≥ 80% of beneficiaries have access to safe drinking water within 500m or 15 min from their dwelling
4. All water quality tests conform to safe to drink (meet basic Bangladesh standard)
5. No evidence of open defecation or children faeces can be observed in the beneficiary communities, All affected people have access to adequate permanent sanitation
6. 80% of these facilities are properly cleaned and maintained and have soap or ash inside
7. All affected Unions receive water, sanitation and hygiene responses
8. Responses are coordinated with other sectors

**Planned local partners (not-exclusive list):** Department of Public Health Engineering, Directorate of Primary Education, directorate of Secondary Education, Directorate of Health Services, UNICEF and National WASH Cluster Member NGO

**Planned international partners (not-exclusive list):** UNICEF and International WASH Cluster Member INGOs

**Targeted geographical areas:** Gaibandha, Kurigram, Sylhet, Jamalpur, Sunamganj and Sirajganj

**Partners Access/presence in targeted areas:** The WASH cluster has strong presence in the targeted areas

**Cluster/sector focal point:**

Moustapha Niang
WASH Specialist
UNICEF
mniang@unicef.org
<table>
<thead>
<tr>
<th>cluster</th>
<th>targeted population</th>
<th>Phase 1</th>
<th>Phase 2</th>
<th>Total</th>
<th>%</th>
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<tbody>
<tr>
<td>Food Security</td>
<td>146,974</td>
<td>3,109,198</td>
<td>3,313,371</td>
<td>6,422,569</td>
<td>23%</td>
</tr>
<tr>
<td>Health</td>
<td>230,000</td>
<td>1,698,020</td>
<td>1,801,980</td>
<td>3,500,000</td>
<td>13%</td>
</tr>
<tr>
<td>Early recovery</td>
<td>19,000</td>
<td>1,300,000</td>
<td>1,800,000</td>
<td>3,100,000</td>
<td>11%</td>
</tr>
<tr>
<td>Education</td>
<td>193,400</td>
<td>612,300</td>
<td>210,000</td>
<td>822,300</td>
<td>3%</td>
</tr>
<tr>
<td>CwG</td>
<td>138,000</td>
<td>1,700,000</td>
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<td>1,700,000</td>
<td>6%</td>
</tr>
<tr>
<td>Nutrition</td>
<td>291,869</td>
<td>691,000</td>
<td>301,000</td>
<td>992,000</td>
<td>4%</td>
</tr>
<tr>
<td>WASH</td>
<td>500,000</td>
<td>750,000</td>
<td>2,250,000</td>
<td>3,000,000</td>
<td>11%</td>
</tr>
<tr>
<td>Child protection</td>
<td>540,000</td>
<td>70,000</td>
<td>80,000</td>
<td>150,000</td>
<td>1%</td>
</tr>
<tr>
<td>GBV</td>
<td>200,000</td>
<td>1,500,000</td>
<td>1,500,000</td>
<td>3,000,000</td>
<td>11%</td>
</tr>
<tr>
<td>Shelter</td>
<td>242,917</td>
<td>2,988,018</td>
<td>1,995,193</td>
<td>4,983,211</td>
<td>18%</td>
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<tr>
<td>Total</td>
<td>14,418,536</td>
<td>13,251,544</td>
<td>27,670,080</td>
<td>100%</td>
<td></td>
</tr>
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</table>

![Proportion of funding requirements per sector](image1.png)

![Proportion of funding requirements per sector per phase of the response](image2.png)
TIMELINE OF KEY EVENTS

Monsoon Flood spell #1
Inter-cluster Meeting #1
CARE/DDM Trigger JNA
HCTT Meeting


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