



## 1. GLOBAL OVERVIEW

On 13 May 2020, the United Nations Secretary General urged governments, civil society, health authorities and others to come together urgently to address the mental health dimension of this pandemic. Given that the current health crisis contains the seeds of a major mental health crisis, he urged governments, civil society, health authorities and others to urgently address the mental health dimension of this pandemic.<sup>1</sup> To minimize the mental health consequences of the pandemic, three actions were recommended – (a) apply a whole-of-society approach to promote, protect and care for mental health, (b) ensure widespread availability of emergency mental health and psychosocial support, and (c) support recovery from covid-19 by building mental health services for the future.<sup>2</sup>

In remarks echoed by the President of General Assembly, the Secretary General called for religious leaders to promote non-violence and reject xenophobia, racism and all forms of intolerance arising from COVID-19 and appealed to them to condemn the increasing violence against women and girls. He asked religious leaders to use their networks to support governments to promote WHO public health measures and urged them to work with education providers to find solutions that support the continuity of education.<sup>3</sup>

In a discussion of measures taken upon coming out of lockdowns, the United Nations High Commissioner for Human Rights on 14 May<sup>4</sup> noted that steps need to be in place for those most vulnerable, including residents and staff of care homes, psychiatric institutions, drug treatment centers, prisons and others, and to monitor health data from deprived areas, e.g. urban informal settlements. Never has it been so clear that it is important for all that no one is left out of social protection schemes.

On the occasion of International Day against Homophobia, Transphobia and Biphobia (IDAHOBIT), 17 May, the United Nations High Commissioner<sup>5</sup> and the Human Rights Council's Independent Expert on

<sup>1</sup><https://www.un.org/en/coronavirus/mental-health-services-are-essential-part-all-government-responses-covid-19>

<sup>2</sup>[https://www.un.org/sites/un2.un.org/files/un\\_policy\\_brief-covid\\_and\\_mental\\_health\\_final.pdf](https://www.un.org/sites/un2.un.org/files/un_policy_brief-covid_and_mental_health_final.pdf)

<sup>3</sup><https://www.un.org/sg/en/content/sg/statement/2020-05-12/secretary-generals-remarks-high-level-video-conference-entitled-the-role-of-religious-leaders-addressing-the-multiple-challenges-of-covid-19-delivered>

<sup>4</sup><https://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=25886&LangID=E>

<sup>5</sup><https://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=25891&LangID=E>

protection against violence and discrimination based on sexual orientation and gender identity<sup>6</sup> recalled that the pandemic has heightened the vulnerability of LGBTI people and their exposure to additional stigma, discrimination and violence; they called for States to empower communities who are left behind to participate in decision-making relating to the response. United Nations Human Rights issued a briefing note [here](#) and [video](#).

The [Global Nutrition Report 2020](#), released on 12 May, emphasized the heightened significance of nutritional well-being for all, particularly the most vulnerable, in the face of this new global threat. The need for more equitable, resilient and sustainable food and health systems has never been more urgent. It calls for strengthened coordination, alignment, financing and accountability from all sectors of society to address the diverse challenges posed by COVID-19.<sup>7</sup>

IOM reported on migration-related socio-economic impacts of COVID-19 in developing countries, noting that declining remittances and increasing rates of returning migrants will place heavy economic and labor market burdens on developing countries. Remittances represent over 10% of GDP for 30 countries in the world, and over 5% of GDP for an additional 27 countries.<sup>8</sup>

The United Nations Technology Bank, together with the UNDP, UNCTAD and the WHO, launched the Tech Access Partnership (TAP) on 13 May as part of a coordinated approach to strengthen developing countries' responses to COVID-19 and increase their access to lifesaving health technologies. TAP's key functions will include – (a) product information, (b) technical guidance, and (c) partnerships. The initiative is guided by the 2030 Agenda for Sustainable Development and the UN's call for shared responsibility and solidarity during the COVID-19 crisis.<sup>9</sup>

In the World Economic Situation and Prospects mid-year report, UNDESA projects that the global economy will contract by 3.2% this year and is expected to lose nearly US\$8.5 trillion in output over the next two years, wiping out nearly all gains of the previous four.<sup>10</sup> The report finds that lockdown measures are heavily impacting global employment and incomes, pushing an additional 34.3 million people into extreme poverty in 2020, with African countries accounting for 56% of the increase.<sup>11</sup> The report also assesses the breadth and limitations of current policy responses adopted by governments around the world and provides a useful basis to understand the policy choices available to different categories of countries – e.g. developed, commodity dependent, LDCs, SIDS.<sup>12</sup>

A new report released by the Asian Development Bank (ADB) on 15 May placed the losses that the global economy could suffer as a result of the COVID-19 pandemic in the range of \$5.8 trillion to \$8.8 trillion — equivalent to 6.4% to 9.7% of global gross domestic product (GDP).<sup>13</sup> The potential economic impact on Asia and the Pacific is estimated at \$1.7 trillion (6.2% of regional GDP) under a 3-month containment scenario and \$2.5 trillion (9.3% of regional GDP) under a 6-month containment scenario, with the region accounting for 30% of the overall decline in global output. Government policy responses — such as direct

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<sup>6</sup><https://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=25889&LangID=E>

<sup>7</sup><https://globalnutritionreport.org/reports/2020-global-nutrition-report/2020-global-nutrition-report-context-covid-19/>

<sup>8</sup>[https://www.iom.int/sites/default/files/documents/05112020\\_lhd\\_covid\\_issue\\_brief\\_0.pdf](https://www.iom.int/sites/default/files/documents/05112020_lhd_covid_issue_brief_0.pdf)

<sup>9</sup><https://unctad.org/en/pages/newsdetails.aspx?OriginalVersionID=2371>

<sup>10</sup>[https://www.un.org/development/desa/dpad/wp-content/uploads/sites/45/publication/WESP2020\\_MYU\\_Key-messages.pdf](https://www.un.org/development/desa/dpad/wp-content/uploads/sites/45/publication/WESP2020_MYU_Key-messages.pdf)

<sup>11</sup>[https://www.un.org/development/desa/dpad/wp-content/uploads/sites/45/publication/WESP2020\\_MYU\\_Press-release.pdf](https://www.un.org/development/desa/dpad/wp-content/uploads/sites/45/publication/WESP2020_MYU_Press-release.pdf)

<sup>12</sup>[https://www.un.org/development/desa/dpad/wp-content/uploads/sites/45/publication/WESP2020\\_MYU\\_Report.pdf](https://www.un.org/development/desa/dpad/wp-content/uploads/sites/45/publication/WESP2020_MYU_Report.pdf)

<sup>13</sup><https://www.adb.org/news/covid-19-economic-impact-could-reach-8-8-trillion-globally-new-adb-report>

income and revenue support—could soften the COVID-19 impact by as much as 30%–40%, reducing the global economic loss to \$4.1 trillion–\$5.4 trillion (4.5%–5.9% of global GDP).<sup>14</sup>

As of 18 May 2020, the Global Humanitarian Response Plan (GHRP) has received USD 1.01 billion against the total requirement of USD 6.64 billion.<sup>15</sup> The largest contributors were Germany (USD 179.5 million), the USA (USD 134.7 million), the UK (USD 119.7 million), Japan (USD 85.0 million), and World Bank (USD 50.7 million). As of 18 May 2020, WHO’s Solidarity Response Fund had mobilized USD 212.5 million from more than 373,000 donations.<sup>16</sup> WHO reported USD 3.3 billion in total support committed or disbursed for the COVID-19 response.<sup>17</sup>

## 2. HEALTH EMERGENCY RESPONSE

This sitrep complements the WHO sitreps which provide detailed information on the COVID-19 Health Emergency Response including on case management and infection control, surveillance and laboratory support, contact tracing and points of entry. WHO sitreps are accessible [here](#). Separate sitreps are issued by the Inter-Sector Coordination Group (ISCG) on the COVID-19 response in the Rohingya settlement and host communities in Cox’s Bazar district. ISCG sitreps are available [here](#).

### 2.1 Risk Communication/Awareness and Community Engagement (RCCE) Pillar

Risk Communication and Community Engagement (RCCE)	Number of people reached on COVID-19 through messaging on prevention and access to services	94,109,886 <sup>a</sup>
	Number of people engaged on COVID-19 through RCCE actions	50,587,081 <sup>b</sup>
	Number of people sharing their concerns and asking questions/clarifications for available support services to address their needs through established feedback mechanisms	2,741,847 <sup>c</sup>

<sup>a</sup>Estimated numbers of a2i are used to avoid double counting – Reach/partners is as follows Social media (UNICEF (37.6 million); Mosque Miking (UNICEF via Imam Association - 47.6 million); a2i - (94.10 million) - HDM, i-talk, corona info and others; Newspapers, You tube, WebTV, TV, 333, Corona info website, Corona BD apps and other partners apps; Grameenphone – 76 million; Robi – 50 million;

<sup>b</sup>Total reached in May 2020

<sup>c</sup>Through the Corona helpline 333, Corona info website, Corona BD apps, and UNICEF CAP and C4D feedback mechanism

**2.1.1. RCCE 4Ws Monitoring Matrix:** The who does what, where and when (4Ws) Monitoring Matrix has been used to provide key information in terms of which organisations are carrying out which RCCE activities in which locations and in which period. The updated 4Ws matrix has enabled RCCE partners to update their 4Ws data and check a real time visual dashboard on Google Drive at any time.

As of 14 May, the visual dashboard shows RCCE activities by topic, dissemination channel, audience, and language (see [link](#)).

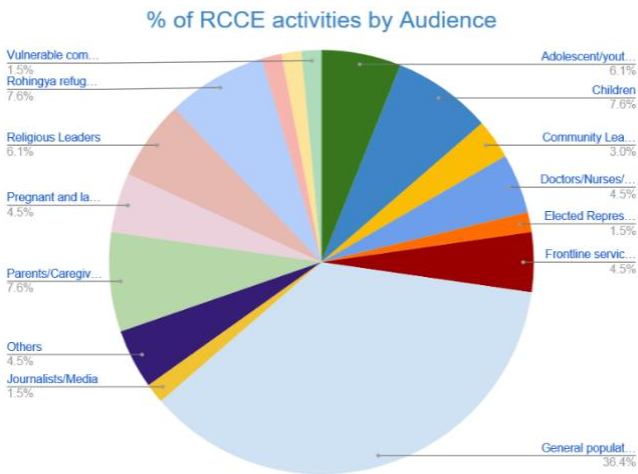
<sup>14</sup><https://www.adb.org/sites/default/files/publication/604206/adb-brief-133-updated-economic-impact-covid-19.pdf>

<sup>15</sup><https://fts.unocha.org/appeals/952/summary>

<sup>16</sup><https://covid19responsefund.org/>

<sup>17</sup><https://covid-19-response.org/donor-overview>

-Topic: 70% of the RCCE activities contain “General awareness (e.g. what is coronavirus? How does it spread?)” as the primary topic of their RCCE activities, followed by mental health (6%) and social distancing (4%).



- Dissemination Channel: Social media has been used most (28.3%) for the RCCE activities, followed by community miking (26.5%) and websites/portals (15.6%).

- Audience: 36.4% of the RCCE activities have targeted general population while some are targeting specific audience groups such as parents/caregivers (7.6%), children (7.6%), and religious leaders (6.1%).

- Language: Most of the RCCE partners use one or multiple languages for their RCCE activities - standard Bangla (76%), English (17%), local dialect (6%), and others (1%).

### 2.1.2. Evidence update:

U-Report rapid assessment survey on socioeconomic impact of COVID-19- The RCCE pillar conducted a rapid assessment survey focusing socioeconomic impact on risk communication among adolescents, youth and community members. This survey was administered through Facebook Messenger, WhatsApp and SMS, and facilitated by the U-Report mobile-based messaging platform making it accessible for people without computers or smart phones. Between 27 April and 8 May, 115,325 respondents participated in the survey representing all eight divisions of the country and include 62% rural and 38% urban respondents (12% urban slums). 40% of the respondents are 15-19 years old while 49% are 20-24 years old. The following are the key findings:

- The biggest concern under the lockdown situation are: Food (42%), Health (19%), Study (17%), Job/Finance (16%) and Violence (1%). (The government food assistance number (i.e., 333#2), COVID19 helplines (i.e., 333, 16263, 10655), and violence helpline (i.e., 1098, 109, 333) were provided to the respondents.) Food is bigger concern in urban slums (51%) than in urban (40%) and rural (44%) areas. Female are more concerned about health (23%) than male (17%).
- 87% of the respondents reported their income has fallen since February (68% of respondents' income fell significantly while 19% reported somewhat reduced). The financial situation is severe in urban slums (91%) compared with the rates in urban (86%) and rural (89%) areas.
- 80% of the respondents are worried about not having enough food in the coming weeks. (86% in urban slums, 78% in urban, 82% in rural areas).
- 12% of the respondents know a friend or family member who is infected by COVID19. Among them, 38% did not know how to help the person infected by the virus. Some 25% gave food and masks, 18% took the infected person to a hospital, and 6% told them the COVID19 helpline number.
- 77% of the respondents did not know where to call for help in case of someone experiencing violence. (The violence helpline (i.e., 1098, 109, 333) was provided to the respondents.)
- 12% of the respondents know a child, friend, sibling or themselves who is hit or abused by their family member. The percentage of knowing someone who is hit or abused is higher among urban slum dwellers (16%) and females (14%).

The RCCE team is continuing to refine the messages to address the areas of concerns identified through the survey: focus on messaging on emergency helpline numbers; prepare messages to specific target groups (e.g., women, adolescent girls, frontline service providers); make the linkage with service delivery related information; address fears and concerns of affected population and advocating to increase access to safety nets for vulnerable communities.

**2.1.3. Communication Materials:** The Directorate General of Health Services (DGHS) is in the process of hiring a RCCE Brand Ambassador to appear in communication and community engagement activities such as TV spots, radio spots, public events, outreach visits etc. Hiring a communication agency for message dissemination and community engagement was also discussed in the Working Group. DGHS also launched a guidance document on dos and don'ts targeting a range of audiences with the gradual ease of lockdown.<sup>18</sup> Messages developed by RCCE partners will be in line with this guidance document to ensure consistency and coherence.

- a2i finalized a set of messages on stigma, hygiene, and helplines for Union Parishod (UP) Chairmen and Upazila Nirbahi Officers (UNOs), which will be disseminated by them at local level; videos on what to do in the mosques, shopping malls, during Eid etc. have also been developed; entrepreneurs of Union Digital Centres (UDCs) have also been engaged.
- WHO and ILO arranged a Working Group/Task Force meeting to discuss the 1st draft of messages for frontline service providers (tea and RMG sectors) in line with available national guidelines; tea sector messages were developed in consultation with ILO, UNFPA, UN WOMEN, and UNICEF; RMG sector messages were developed by ILO in consultation with BGMEA, BKMEA, DIFE, MoL&E and in line with OSH guidance.
- Following MoRA directives on resuming mosques for prayers, UNICEF arranged a small group meeting to finalize messages for religious leaders, Mosque Management Committees, and worshippers; finalized messages were uploaded on RCCE secure drive for partners and shared with UNICEF field office colleagues. The RCCE Shared M&E Framework was presented to partners to finalize an agreed upon for effective monitoring and reporting.
- UNDP launched a "Digital Khichuri Challenge" campaign in collaboration with UNICEF to counter rumours and misinformation that include a series of videos, fact checking, quiz on digital literacy, peace talk café, comic series, Facebook live sessions etc.
- Grameen Phone and Robi launched the 2nd round of mobile pre-call notifications messages; they will share the coverage numbers.

**2.1.4. Misinformation and Rumour Tracking:** Out of 26 misinformation links the RCCE team had reported to Facebook, 12 major misinformation links were removed. This also included links to both profile and page post links. Some duplicated content has not been removed and will be re-reported. Examples of misinformation removed from social media over the past few days – (a) ingesting saline, vinegar and pennywort will cure COVID-19, (b) ingesting a mixture of garlic, ginger, black cumin, pepper and cloves can cure COVID-19, (c) inhaling hot ethanol fumes is a cure for COVID-19 – research by Bangladesh Agricultural University Professor of Microbiology, (d) ex-MP advises surgery involving dissecting the lungs and cleaning with hand sanitizer/alcohol/soap to treat COVID-19, (e) Islamic dua that can prevent COVID-19, and (f) claiming and peddling a medicine the narrator has manufactured has cured COVID-19.

- 16 UNICEF volunteers from across Bangladesh have been selected and oriented on misinformation tracking on social media platforms. They will help expand the purview of our misinformation

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<sup>18</sup>[https://dghs.gov.bd/images/docs/Notice/08\\_05\\_2020\\_covid\\_19\\_technical\\_instructions.pdf](https://dghs.gov.bd/images/docs/Notice/08_05_2020_covid_19_technical_instructions.pdf)

monitoring to Facebook Groups, Profiles and Pages by reporting misinformation links on a weekly basis, amplifying official sources, directing community members to accurate information on online platforms and via district-based information hubs.

- Digital Khichuri Challenge winners have also created a video series and static posts building awareness on negative impact of spreading fake news and creating panic, and countering fake news; Facebook groups where advice is given on suspected fake news; a comic series Positive Bangladesh to counter misinformation, Facebook Live sessions with migrant workers and quiz shows to tackle fake news.

## **2.2 Preserving Stability and Addressing Social Tensions Pillar**

**2.2.1. LNOB, Essential services, livelihoods and social safety nets:** This week, 398,000 people (231,039 women) were reached through UNICEF-supported interventions including repairs of 3,591 handpumps, chlorination of 146 piped water systems, distribution of 65,279 bars of soap, and construction of 395 handwashing devices in public places by Department of Public Health and Engineering (DPHE) and UNICEF. This week, DPHE and UNICEF conducted a special meeting with 64 districts executive engineers on cyclone and flood preparedness for the 1st cycle of cyclone season (April-May 2020) and on Flash Floods considering COVID-19. The following extra measures are to be taken to mitigate natural disaster impact on WASH services amidst the COVID-19 pandemic situation:

- Each district will conduct a drill to ensure that field level Mobile Water Treatment plants are functional, all spare parts of mobile water treatment plant, handpumps, latrine slabs, rings are pre-positioned, and emergency response teams are ready to respond immediately if any cyclone or flash flood occurs.
- All districts will complete their inventory and DPHE Head Quarters and UNICEF will complete the gap analysis at the national level by 21 May to share with WASH stakeholders for further actions.

The proportion of children screened for malnutrition in Integrated Management of Childhood Illness (IMCI) nutrition corners has declined to 31% in April – a 4% decrease from the previous month. The Severe Acute Malnutrition (SAM) admission is declining steeply and only 50 children with SAM were admitted in April compared to 279 children in March.

To mitigate the learning loss of an estimated 35,000 trainee teachers and to ensure they successfully complete their Diploma in Primary Education (DPED) timely, UNICEF is supporting the National Academy of Primary Education (NAPE) to consider remote learning options.

The National Curriculum and Textbook Development Board (NCTB) met virtually this week to review the Early Childhood Development (ECD) curriculum, drafted with the support of UNICEF. Finalization of the curriculum is one of the critical activities for two-year preschool education (PPE), aiming to support quality learning of 3.5 million pre-school children in the country.

UNESCO is supporting the Ministry of Primary and Mass Education (MOPME) in collaboration with Access to Information (a2i) in radio and mobile-based distance learning for primary level students, with a focus on the hard-to-reach areas. Learning sessions are being developed around the core subjects from grades one to five. In addition, on-line capacity building for the radio professionals and teachers will be organized to make the radio and mobile-based learning more interactive and interesting. This initiative is a support to the COVID-19 Educational Response Plan prepared by MOPME in collaboration with the LCG Working Group on Education and the Education Cluster.

The MOPME and Ministry of Education (MoE) in close collaboration with a2i recorded and disseminated four streams of classes (primary, secondary, Technical and Madrasah) through different platforms. Several organizations such as Bangladesh Technical Education Board (BTEB), DSS, Bureau of Manpower Employment and Training (BMET), Bangladesh Industrial Technical Assistance Center (BITAC), Department of Youth Development (DYD) and Underprivileged Children's Education Programme (UCEP) have come together to launch remote learning through using Facebook based live classes, television and such other social platforms. a2i reports that this initiative provided continuity of learning opportunity for an estimated 27 million children, which is around 60% of the total school-going children in the country. However, monitoring the access and the quality of remote learning remains a challenge. In this regard, a2i and Education cluster members formed a Research and Monitoring working group to monitor access to remote learning.

UNICEF, ILO, UN Women and UNFPA initiated joint advocacy to strengthen coordination between Bangladesh Tea Association (BTA), Bangladesh Cha Sramik Union (BCSU) and local government institutions to respond to COVID-19, particularly in the area of health and social protection for tea workers. The aim is to ensure health care and social transfer support for the workers and their families, especially pregnant and lactating mothers, from the government. The project is supported by the United Nations Joint SDG Fund that seeks to incentivize and enable new and innovative development approaches.<sup>19</sup>

UNDP launched an online marketplace, Anondomela, in partnership with a2i's Ekshop. The marketplace directly connects small and microenterprises with buyers. This will help local businesses and promote buying/selling of local goods for the upcoming Eid.

UNDP has transferred Tk 1500 cash each to 1209 poor families in Kurigram's sadar upazila. This transfer has been implemented through the direct engagement of Eco-Social Development Organization (ESDO) a CSO of the Strengthening Women's Ability for Productive New Opportunities (SWAPNO) Project with guidance from Kurigram District Administration.

IOM continues to provide support and counselling to callers to the hotline for migrants, accessed through [www.probashihelpline.com](http://www.probashihelpline.com). During the reporting week, an additional hotline was featured on the site to provide direct telemedicine advice and COVID-19-related health information. Most of the callers are from Gulf Cooperation Council (GCC) countries and Malaysia, and as communities in these countries are observing Ramadan, free food is regularly delivered to some migrant communities, which resulted in a decline in requests for food assistance on the helpline.

**2.2.2. Human rights and Rule of Law:** UNICEF continued to work with the Supreme Court Committee of Child Rights and the Ministry of Law to explore options within the law so that children may be released and unified with their families. As a result of GoB approval of the ordinance, UNICEF has supported in setting up a virtual court system where 30 judges were trained on the use of virtual court processes. Bangladesh held its first virtual court for children this week and 50 children (46 male and 4 female) were granted bail by the end of last week. The virtual court processing for children will continue throughout the country.

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<sup>19</sup> <https://www.jointsdgfund.org/who-we-are>

UNICEF is working with Department of Social Services (DSS) to ensure children are assessed and reunited with their parents or caregivers once granted bail. A robust case assessment will be conducted, and some children may need a reintegration package to assist them to settle in the community.

### 3. COMPLEMENTARY SUPPORT TO THE HEALTH EMERGENCY RESPONSE

During the past week, the Humanitarian Coordination Task Team (HCTT) continued to provide complementary support to the Health Emergency Response. In parallel, the Needs Assessment Working Group issued three updates and anticipatory impact analysis on Cyclone Amphan which are available [here](#).

#### 3.1. Child Protection cluster

Child Protection cluster members organized Facebook live sessions on ending Violence Against Children, positive parenting tips and general COVID-19 prevention among children. These first sessions were viewed live by more than 14,000 viewers. Save the Children International reached 14,768 community people including 8,750 children through awareness messages regarding COVID-19, associated child protection risks and how to address them, positive parenting, psychosocial support and education, through mobile phone, online platform and social media.

The UNICEF-supported Child Helpline 1098 received 9,910 calls between April 30 and 13 May. It helped, notably, to rescue 459 children from extreme violence, separation, homelessness, child marriage and exploitation. Last week, the cross-border reunification of a Bangladesh child from India was supported. Additional workforce is required to assist in identification of children at risk and in supporting referral pathways.

Save the Children International supported 59 children to receive appropriate child protection services through remote case management. Moreover, 1,032 most vulnerable community people including 273 children received food, cleanliness materials and other logistic support.

#### 3.2. Education cluster

See section 2.2.1

#### 3.3. Gender-based Violence (GBV) cluster

GBV cluster members organized orientation sessions on protocols for helpline counsellors, COVID-19 case management and psychosocial support. Those were developed by ACF based on the global guidance from WHO and the Inter-Agency Standing Committee (IASC). Organizations such as BRAC, UNFPA and the Bangladesh Red Crescent Society (BDRCS), which are offering counselling, psychosocial and case management services remotely will be able to use these protocols. ACF extended its training offer to these service providers.

WFP's conditional cash transfer programme in Khulna and Rangpur divisions integrate protection measures through a feedback and complaint mechanism. Beneficiaries are sensitized on their rights and entitlement and encouraged to report through a toll-free hotline number on fraudulence, sexual



exploitation and abuse. Through this approach, cash transfers targeting women and female-headed households are enhancing access to protection services and support to respond to the specific needs of women during COVID-19.

### **3.4. Sexual and Reproductive Health (SRH) working group**

UNFPA is supporting DGHS together with the Obstetrical and Gynaecological Society of Bangladesh (OGSB) is deploying midwifery roaming teams for dedicated COVID-19 hospitals in Dhaka, Upazila health Complexes (UHC) and District Hospitals (DH) to ensure uninterrupted maternity care services. The deployed midwives will support the respective health facility/hospital for 14 days and then rotate to another location. UNFPA has also supported the DGHS to recruit 60 laboratory technicians to various Medical College Hospitals.

Last week, Save the Children conducted 3,343 telephone calls with pregnant women living in seven districts (Brahmanbaria, Habiganj, Manikganj, Noakhali, Lakshmipur, Feni and Chandpur). The healthcare staff provided antenatal care as well as pregnancy counselling and encouraged them to seek health services at their health care facility or hospital. In Sylhet, midwives are providing distance support to pregnant mothers, and project service providers are sharing telemedicine information, such as hotline numbers to beneficiaries having questions related to COVID-19, which is supported by DGHS. Plan International Bangladesh is providing health support including family planning counselling in Rangpur, Lalmonirhat and Hatibandha.

### **3.5. Water Sanitation and Hygiene (WASH) cluster**

During the reporting period, WASH Cluster members distributed 8,700 hygiene kits to vulnerable communities mostly in COVID-19 hotspots districts including Cox's Bazar, Barisal, Chittagong, Comilla, Noakhali, Manikganj, Tangail, Kishorgonj, Mymensingh, Jessore, Jhenaidah, Khulna, Satkhira, Bogra, Naogaon, Rajshahi, Pabna, Sirajganj, Dinajpur as enhancing hygiene practices at personal and community levels contribute to the prevention of COVID-19. Oxfam Bangladesh distributed hygiene kits for 1,536 marginalized youth. In addition, it distributed 150 protective equipment for the youth volunteers, local government and administration officials, eight disinfection sprays and 16 bleaching machines to union level youth groups in Rajshahi and Rangpur through Rangpur Dinajpur Rural Service (RDRS).

World Vision distributed 512 sets of handwashing devices in sub-districts of Bagerhat, Mymensingh, Rajshahi and Netrokona districts. In the Chattogram Hill Tracts, Save the Children installed 27 handwashing stations at Kutubdia, Naikhongchari, Lama and Alikadam Upazila. It also distributed hygiene kits among 450 households. With the local scouts and other youth groups, they organized disinfection campaigns and raised public awareness about handwashing and hygiene practices. They also provided orientation to 250 service providers (nurses and midwives) on hand washing and proper use of PPE in several districts-Cox's Bazar, Barisal, Chittagong, Comilla, Noakhali, Manikganj, Tangail, Kishorgonj, Mymensingh, Jessore, Jhenaidah, Khulna, Satkhira, Bogra, Naogaon, Rajshahi, Pabna, Sirajganj, Dinajpur.

More than six million people were reached across the country with key COVID-19 prevention and hygiene messages by the WASH Cluster Members through different online platforms and direct community engagement programs this week. Cluster members distributed 80,000 bars of soap and constructed 750 handwashing stations in public places such as markets, clubs, mosques and roads. In addition, maintenance works of water points are ongoing to ensure continuity of water supply.

Furthermore, WASH cluster members are working closely with their Government lead, the Department of Public Health Engineering (DPHE) regarding contingency planning at field level on the looming climate-related disasters. DPHE will organize a drill in each district to ensure field level Mobile Water Treatment Plants are functional, all spare parts, handpumps, latrine slabs, rings are pre-positioned, and emergency response teams are ready to respond immediately if any cyclone or flash flood occurs.

## 4. CROSS-CUTTING ISSUES

### 4.1. Gender

The LCG-WAGE Development Partners held their second meeting on Thursday 14 May since the onset of COVID-19. The government/MoWCA is briefed of these meetings and estimates to be ready to participate at the end of May. Meanwhile, development partners are sharing information on ongoing activities and planning joint advocacy messaging on gender equality issues. During the meeting, UN Women briefed DPs on the United Nation's approach to gender equality work in the COVID-19 response.

The UN in Bangladesh is in the early stages of setting up a network of PSEA focal points, which will straddle the development-humanitarian nexus. The network focus on promoting collaboration among agencies and streamlining the United Nation's messaging on PSEA to increase transparency, as called for by the Secretary General.

### 4.2. Leaving No One Behind through respect for human rights

Quality and accessibility issues relating to the right to health, combined with stigmatization and discrimination continues to be an issue for poorer as well as more affluent Bangladeshis, with fresh deaths reported among police, health workers and civil servants.<sup>20</sup> The Health Ministry has allocated BDT 41.5 crore for a temporary Covid-19 isolation center at the International Convention City Bashundhara (ICCB)<sup>21</sup>, and although an increasing number of hospitals are now providing testing facilities, many are struggling to carry out COVID-19 tests as hundreds of people with symptoms rush to the facilities.<sup>22</sup>

The Anti-Corruption Commission (ACC) received a report indicating that locally influential people and some government officials have been involved in irregularities in rice procurement and taking bribes from farmers. In April, 15 cases were filed by ACC against 20 people, including 14 local representatives for alleged misappropriation of subsidised rice for the poor and vulnerable.<sup>23</sup>

#### Other useful updates and sources

- Human rights in the context of the COVID-19 pandemic:  
<https://www.ohchr.org/EN/NewsEvents/Pages/COVID-19.aspx>
- BRAC: <http://www.brac.net/covid19/index-en.html>

<sup>20</sup><https://www.dhakatribune.com/health/coronavirus/2020/05/09/food-ministry-additional-secy-dies-of-covid-19>

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