



## 1. GLOBAL OVERVIEW

On 28 May, the Secretary-General and the Prime Ministers of Canada and Jamaica convened a virtual High-Level Event on “Financing for Development in the Era of COVID-19 and Beyond”.<sup>1</sup> The event brought together over 50 heads of State and Government, heads of international institutions and leading voices from the business community to advance concrete financing solutions to the COVID-19 development emergency and its impacts on the most vulnerable. Six urgent areas of action were explored to mobilize the financing needed for the response and recovery. They are expanding liquidity across the global economy; addressing debt vulnerabilities; stemming illicit financial flows; increasing external finance for inclusive growth and job creation; and strategies for countries to recover better, achieve the SDGs, address climate change and restore the balance between the economy and nature.<sup>2</sup> The United Nations Secretary-General called for immediate and collective actions on these six areas.

Thirty countries and numerous international partners have underlined the need to make tests, treatments and other technologies to fight COVID-19, available to people everywhere. They have signed up to support the COVID-19 Technology Access Pool ([C-TAP](#)), a sister initiative to the [ACT Accelerator](#), established last month, to speed up development of vaccines and other tools against the pandemic. WHO has described C-TAP as “a one-stop shop” that will be voluntary and based on the principle of solidarity.<sup>3</sup>

ILO’s latest analysis of the labor market impact of COVID-19 exposes the devastating and disproportionate effect of the pandemic on young workers, and details measures being taken to create a safe return to work environment.<sup>4</sup> According to the [ILO Monitor: COVID-19 and the world of work. 4th edition](#) released on 27 May, youth are being disproportionately affected by the pandemic, and the substantial and rapid increase in youth unemployment seen since February is affecting young women more than young men. Pointing to fears of “a lost generation” who face permanent exclusion from labor markets, the ILO chief cautioned that as the world recovers from the pandemic, a lot of young people are going to be left behind. He called for getting the health response right, getting the social economic response right and building back better.<sup>5</sup>

<sup>1</sup><https://www.un.org/en/coronavirus/financing-development>

<sup>2</sup>[https://www.un.org/sites/un2.un.org/files/pressrelease\\_hle\\_ffd\\_vfinal.pdf](https://www.un.org/sites/un2.un.org/files/pressrelease_hle_ffd_vfinal.pdf)

<sup>3</sup><https://news.un.org/en/story/2020/05/1065132>

<sup>4</sup>[https://www.ilo.org/global/about-the-ilo/newsroom/news/WCMS\\_745879/lang--en/index.htm](https://www.ilo.org/global/about-the-ilo/newsroom/news/WCMS_745879/lang--en/index.htm)

<sup>5</sup><https://news.un.org/en/story/2020/05/1064912>

The Human Rights Council issued a Presidential Statement<sup>6</sup> on 27 May, urging States to ensure to respect, protect and fulfill human rights during the pandemic<sup>7</sup>. The United Nations Human Rights Office issued guidance<sup>8</sup> on the important role of civic space during the pandemic, noting that civil society is instrumental in creating trust and it also serves as a platform to debate and inform better responses.

UNCTAD and the five United Nations regional commissions have joined forces to help governments and businesses in developing countries keep transport networks and borders operational and facilitate the flow of goods and services, while containing the spread of the novel coronavirus. The project launched this month will implement United Nations solutions, standards, guidelines, metrics, tools and methodologies to help developing countries build transport, trade and logistics resilience in the wake of COVID-19.<sup>9</sup>

The latest policy brief issued from UNDESA on 28 May highlighted the need for businesses and investors to adjust to a world of increasing uncertainty or mounting risks due to COVID-19. It stresses that the businesses can no longer focus only on short-term financial returns to be viable; they must anticipate and prepare for future risks, including growing risks from climate change and unsustainable practices.<sup>10</sup>

The World Bank, in collaboration with the Government of Colombia, is developing a prototype dashboard that helps policy makers on a near real-time basis monitor the interplay of virus spread, health sector readiness to address new clusters of infections, and the readiness of economic sectors to operate safely as governments around the world are facing an unfortunate tradeoff between containing the spread of the virus and enabling economic activity to resume.<sup>11</sup>

The joint IMF-World Bank staff position note issued on 21 May made a set of high-level recommendations that can guide national regulatory and supervisory responses to the COVID-19 pandemic and offered an overview of measures taken across jurisdictions to date. The position note calls for timely, targeted and well-designed regulatory and supervisory actions to maintain the provision of critical financial services, particularly to households and firms that are affected most, while mitigating financial risks, maintaining balance sheet transparency, and preserving longer-term financial policy credibility.<sup>12</sup> The IMF has further emphasized the importance of accurate and timely economic data for informing policy decisions, especially when the crisis has disrupted the production of many key statistics impeding the ability of governments to properly monitor the recovery.<sup>13</sup>

A new information note published by the WTO Secretariat on 29 May points to the importance of services to broader economic activity and its role in connecting supply chains and facilitating merchandise trade as services account for most of women's employment globally and a great share of micro, small and medium-sized enterprises activity, disruptions in the supply of services also have an impact on social and economic inclusiveness.<sup>14</sup> The report suggests that services sectors, and the creation of conditions conducive to trade in services, will be key to the recovery from the economic

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<sup>6</sup> <https://undocs.org/A/HRC/43/L.42>

<sup>7</sup> <https://www.ohchr.org/EN/HRBodies/HRC/Pages/NewsDetail.aspx?NewsID=25914&LangID=E>

<sup>8</sup> <https://www.ohchr.org/Documents/Issues/CivicSpace/CivicSpaceandCovid.pdf>

<sup>9</sup> <https://unctad.org/en/pages/newsdetails.aspx?OriginalVersionID=2377>

<sup>10</sup> <https://www.un.org/development/desa/dpad/publication/un-desa-policy-brief-77-how-can-investors-move-from-greenwashing-to-sdg-enabling/>

<sup>11</sup> <https://blogs.worldbank.org/latinamerica/when-and-how-safely-reopen-economy-how-better-data-can-help>

<sup>12</sup> <https://www.imf.org/en/Publications/Miscellaneous-Publication-Other/Issues/2020/05/20/COVID-19-The-Regulatory-and-Supervisory-Implications-for-the-Banking-Sector-49452>

<sup>13</sup> <https://blogs.imf.org/2020/05/26/keeping-economic-data-flowing-during-covid-19/>

<sup>14</sup> [https://www.wto.org/english/news\\_e/news20\\_e/serv\\_29may20\\_e.htm](https://www.wto.org/english/news_e/news20_e/serv_29may20_e.htm)

slowdown as the crisis is further underscoring the importance of online services, as well as the broader infrastructural role of financial, transport, distribution and logistics services in facilitating merchandise trade and economic growth.<sup>15</sup>

The Asian Development Bank (ADB) released a study which maps supply chains for critical products in the global response to the novel coronavirus disease (COVID-19) pandemic, clearing the way for the identification and removal of blockages in their production and distribution.<sup>16</sup> The interactive maps will enable banks, investors, governments, and healthcare professionals to pinpoint key companies in the supply of portable ventilators, N95 respirators, face shields, goggles, aprons, surgical masks, and gowns.<sup>17</sup> The mapping project feeds data that already exists from many sources into an algorithm that sorts the information by applying various industry and product codes - a future phase of this initiative will look at blockages at ports, tariff requirements, and other impediments to the efficient functioning of supply chains for these critical goods.

As of 30 May 2020, the Global Humanitarian Response Plan (GHRP) received USD 1.17 billion against the total requirement of USD 6.71 billion, which is 17.5% of the appeal.<sup>18</sup> The largest contributors were Germany (USD 185.6 million), the United States of America (USD 183.6 million), the United Kingdom (USD 126.1 million), and Japan (USD 106.8 million). As of 30 May 2020, WHO's Solidarity Response Fund had mobilized USD 214.5 million from more than 389,000 donations.<sup>19</sup> WHO reported USD 4.05 billion in total support committed or disbursed for the COVID-19 response.<sup>20</sup>

The Executive Board of the International Monetary Fund (IMF), on 29 May, approved a disbursement of SDR 177.77 million (about US\$ 244 million or 16.67 percent of quota) under the [Rapid Credit Facility \(RCF\)](#), and a purchase of SDR 355.53 million (about US\$ 488 million or 33.33 percent of quota) under the [Rapid Financing Instrument \(RFI\)](#) to Bangladesh to help finance the health, social protection and macroeconomic stabilization measures, meet the urgent balance-of-payments and fiscal needs arising from the COVID-19 outbreak, and catalyze additional support from the international community.<sup>21</sup> It is expected that the IMF's emergency financial assistance will help cover the financing gap and support the Bangladesh government's effort to contain the adverse impact of the outbreak and catalyze additional support from the international community.<sup>22</sup> The European Union has allocated Euro 334 million for COVID-19 in Bangladesh. The response will include mitigation of the socioeconomic impact of the pandemic, strengthening health system, support to Rohingya refugees and support to the ultra-poor and vulnerable families.<sup>23</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

<sup>15</sup>[https://www.wto.org/english/tratop\\_e/covid19\\_e/services\\_report\\_e.pdf](https://www.wto.org/english/tratop_e/covid19_e/services_report_e.pdf)

<sup>16</sup><https://www.adb.org/news/adb-study-maps-supply-chains-key-products-covid-19-response>

<sup>17</sup><https://www.adb.org/multimedia/scf/#/>

<sup>18</sup><https://fts.unocha.org/appeals/952/summary>

<sup>19</sup><https://covid19responsefund.org/en/>

<sup>20</sup><https://covid-19-response.org/donor-overview>

<sup>21</sup><https://www.imf.org/en/Topics/imf-and-covid19/COVID-Lending-Tracker#APD>

<sup>22</sup><https://www.imf.org/en/News/Articles/2020/05/29/pr20226-bangladesh-imf-exec-board-approves-us-732m-disbursement-to-address-the-covid19-pandemic>

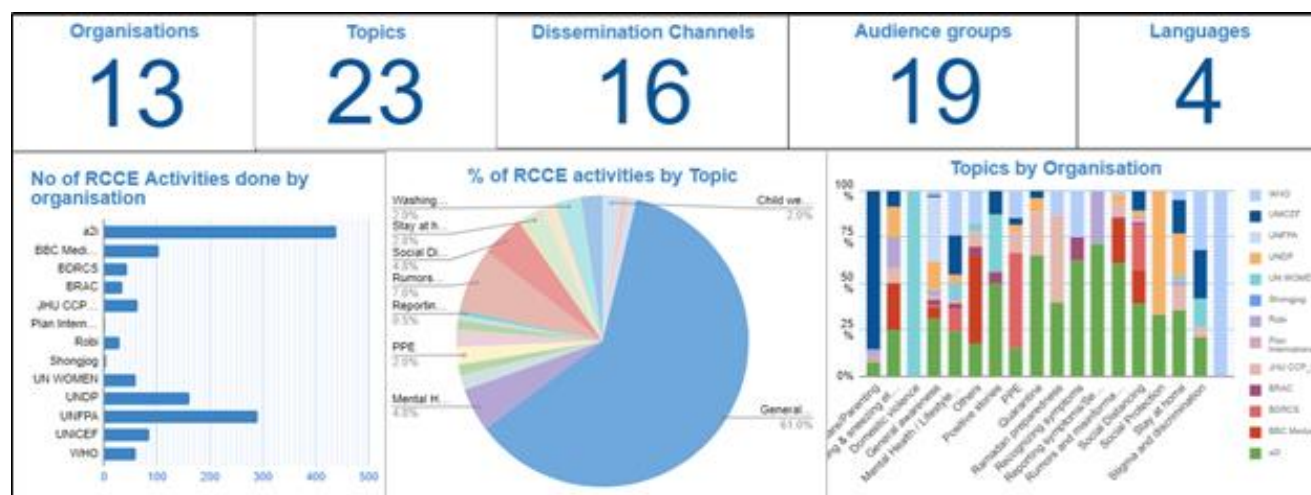
<sup>23</sup><sup>23</sup>[https://eeas.europa.eu/delegations/bangladesh/79691/team-europe-mobilising-over-%E2%82%AC-334-million-around-bdt-31-billion-fight-against-covid-19-and-its\\_en](https://eeas.europa.eu/delegations/bangladesh/79691/team-europe-mobilising-over-%E2%82%AC-334-million-around-bdt-31-billion-fight-against-covid-19-and-its_en)

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

Number of people reached on COVID-19 through messaging on prevention and access to services	76,000,000
Number of people engaged on COVID-19 through RCCE actions	50,312,083
Number of people sharing their concerns and asking questions/clarifications for available support services to address their needs through established feedback mechanisms	4,794,461

**2.1.1. RCCE 4Ws Monitoring Matrix:** The 4Ws Monitoring Matrix has been used to provide key information in terms of which organisations (who) are carrying out which RCCE activities (what) in which locations (where) and in which period (when). The 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 31 May, the visual dashboard shows RCCE activities by Topic, Dissemination Channel, Audience, and Language (see [link](#)).



In anticipation of lifting of the nationwide lockdown and reopening of mosques for Ramadan prayers, RCCE activities on social distancing, washing hands, and Ramadan preparedness have increased to promote messages including “wear a mask” and “social distancing” over the last two weeks. With regards to a growing concern over the harmful impact of stigma towards patients and symptomatic people, many RCCE activities have sought to counter the stigma and discrimination (e.g. “let’s fight together” audio-visual by USAID-Johns Hopkins University).

Most of the messages were disseminated through social media and community miking, however, the use of telecom and helpline numbers has increased over the last two weeks. Robi, a2i, and UNDP have been actively using these channels to reach the general population, especially those who do not have internet access. While most of the RCCE activities target the general population, specific audience groups including patients/symptomatic people, frontline service providers (e.g. police officers) have been targeted to deliver tailored messages on reporting, mental health and personal protective equipment (PPE). Most of the RCCE activities use standard Bangla (74%) while using English occasionally for social media posts and local dialects for specific target groups.



**2.1.2. Evidence update: Corona Kotha<sup>24</sup> information bulletin:** The [third edition of Corona Kotha](#) highlights perception and concerns about COVID-19 among the people living in rural areas, as well as concerns of people with disabilities. The article pointed out that rural people tend to believe that COVID-19 is a disease of people living in urban areas. They often think that performing ablutions and prayers keep them safe from infections. Social expectations of visiting others' homes make it difficult to limit physical distancing. Key concerns around COVID-19 include: lack of drinking water; difficulties and fears about safe delivery (childbirth) at health facilities; difficulties with using mobile phone information services; disruption in continuous education and mental health issues due to uncertainty for students appearing Higher Secondary Certificate exams; and gender based violence and malnutrition among women. People with disabilities shared their concerns around becoming more financially vulnerable, deprived and excluded from aid distribution, challenges of seeking regular treatment, and lack of information.

The RCCE pillar conducted a rapid assessment survey focused on Ramadan practices 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 21 – 27 May, 481,042 respondents (60% rural and 39% urban respondents, 10% from urban slums) participated in the survey representing all eight divisions of the country. The following are the key findings:

- 83% of respondents who are observing Ramadan and who joined Jumma prayers at a mosque last week, reported that the Imam shared messages related to COVID19 during Khutba.
- 54% of the respondents wear a mask in the mosque while performing the prayer. 43% do not wear masks while performing the prayer at the mosque.
- 49% of the respondents bring their own prayer mat when they go to the mosque. 48% do not bring their own prayer mat.
- Only 10% of the respondents accurately understand the physical distance requirement of 6 feet during a group prayer. 18% did not know about physical distancing for a group prayer.

The RCCE pillar is collecting inputs from frontline social workers on issues and impacts of COVID-19 on their daily work. This survey was administered through SMS and facilitated by the U-Report mobile-based messaging platform making it accessible for people without computers or smartphones. The survey started on 17 May and is still open. Between 17 and 28 May, 265 social workers participated in the survey representing all divisions. The following are the preliminary findings as of 28 May:

- 37% of social workers were contacted by more than 10 children or families with children per day, 27% were contacted by 5-10 children or families per day, 26% were contacted by less than 5 children or families.
- Social workers use phone calls (48%), home visit (28%) and social media (14%) as the main mediums of communication.
- 56% of social workers reported that there are emerging issues shared by children or their family members. The main issues were food shortage (56%), health issues (16%) and increased violence at home (11%).
- 69% of social workers referred families to access services for their children. Types of services referred to were food (37%), medical (25%), child helpline (22%), shelter (7%), legal (7%).

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<sup>24</sup>This regular bulletin is being published by Shongjog (the national platform for community engagement and accountability), with inputs from a range of organisations who are collecting spontaneous questions and feedback related to COVID-19 from local communities around the country. Analysis has been done by BBC Media Action and Bangladesh Red Crescent Society on behalf of Shongjog.

Based on the above findings, the RCCE pillar proposed to intensify social and behavior change communication interventions conducted by the partners as a consolidated strategic communication campaign mode. The campaign is scheduled to be launched in June and will continue over a period of at least one month. The high intensity, multi-media campaign will build on the past successes and extensively guided by evidence, existing as well as new rapid assessments. One of the key departures from earlier approaches is to ensure a standard campaign theme, consistent emotional pitch and common branding across all messages and materials produced by the RCCE partners.

**2.1.3. Communication Materials and Dissemination Update:** Around 150 people from diverse backgrounds attended a virtual discussion on the gendered impacts of COVID-19 organized by UN Women on 19 May 2020. Shoko Ishikawa, UN Women Country Representative chaired the webinar while Dr. Abul Hossain, Deputy Secretary, Ministry of Women and Children Affairs and Project Director for Multisectoral Programme on Violence Against Women; Nobonita Chowdhury, Director, Gender Justice Diversity & Prevention of Violence Against Women initiative, BRAC; Dr. Nazeen Ahmed, Senior Research Fellow, Bangladesh Institute of Development Studies; and Shampa Goswami, Executive Director, PreronaNari Unnayan Sangothon from Satkhira spoke as panelists. As moderator of the discussion, Dilruba Haider of UN Women, presented the key findings from the Rapid Gender Analysis of the impacts of COVID-19 produced by Gender in Humanitarian Action Working Group (GiHA) of the Humanitarian Coordination Task Team (HCTT), an interagency working group co-chaired by the Department of Women Affairs and UN Women.

The Rapid Gender Analysis was an attempt to identify the immediate impacts of COVID-19 on pre-existing social and economic vulnerabilities of women, girls and gender diverse groups, and the challenges faced by them in accessing public services and facilities, and therefore, to make recommendations for gender sensitive response. The analysis identified critical areas that are entrenching inequity and rendering women, children and other gender groups more vulnerable: lack of access to basic services like health care, nutritional services, maternal health care and health care for survivors of Gender-based Violence (GBV); protection against GBV; massive loss of livelihoods; unequal unpaid and care work burden; lack of access to information leading to stigmatization; and lack of women's and their agencies' engagement in decision making processes of COVID-19 response. The participants and the discussants stressed the importance of gender sensitive responses to the COVID-19 crisis which is disproportionately affecting women, girls and gender diverse groups.

UNICEF provided support to the development of a mobile phone conversation script and a text message to be sent to adolescents. This week 550 adolescent Peer Leaders and club members have been reached and followed-up with COVID-19 messages by 49 Child Rights Facilitators (CRFs) through virtual (Messenger, Facebook, "Imo" app and others) modalities. UNICEF conducted a case management training virtually for 67 of the planned 3,000 social workers and psychosocial counsellors. The training covered areas of strengthening referral pathways for cases received from Child Helpline (child marriage, child exploitation and abuse, GBV) and other child help desks across the districts.

**2.1.4. Misinformation and Rumour Tracking:** In the latest reporting period, 61 new misinformation links on Facebook have been collated and shared with Facebook for removal, currently pending review. From the RCCE group's analysis of the 61 links, the top misinformation narratives are as follows:

### Misinformation Narratives

OBJECTIVE	MAJOR NARRATIVES	# OF POSTS
Downplaying the risk	COVID-19 is not contagious	<b>21 (34%)</b>
	COVID-19 will be gone within a few weeks	
	Religious leaders encouraging people to visit mosques, shake hands, and not wear masks	
	Undermining seriousness of COVID-19 to positive patients. Only treatment they will need is ...	
Spreading fear/panic	China purposefully spread COVID-19	<b>4 (6.5%)</b>
	Religious leader claims 6 billion people will die from COVID-19, coronavirus came to earth with 6 missions, etc.	
	Fake forecast on how 60 million people will die from COVID-19	
Fake remedies & dangerous treatments/cures	ISO certified fabric that can repel COVID-19 and other viruses	<b>36 (59.5%)</b>
	Herbal cures	
	Homeopathic cures	
	Potentially hazardous: soap, hot fumes, alcohol	
	Religious leaders sharing cures specified in religious texts	

UNICEF is working with its volunteer group to track rumours and misinformation.

Top COVID-19 information channels in Bangladesh are growing and are presently as follows:

ORGANIZATION	PLATFORM	FOLLOWERS	INCREASE IN PAST WEEK
UNICEF Bangladesh	Facebook	8.5 million	0.1%
a2i	Facebook	1.2 million	0.7%
BRAC	Facebook	1.14 million	0.1%
<b>Directorate General of Health Services</b>	<b>Facebook</b>	<b>1.18 million</b>	<b>4.9%</b>
UNDP Bangladesh	Facebook	741 k	1.4%

In addition, the Disinformation Monitor by SecDev detected 27 false or misleading posts related to COVID-19 in Bangla from 20-26 May that attracted 209,085 interactions, representing a significant decline in audience engagement with disinformation posts after a spike last week.

False claims seeking to provoke anger against government and public health authorities resonated strongly with audiences this week. These posts received 58% of total engagement. Posts that downplayed the risks of COVID-19 drew 29% of interactions.

## 2.2 Logistics and Procurement Pillar

The Resident Coordinator has officially appointed WFP and UNICEF as Supply Coordinators for the supply chain portal in Bangladesh. The Supply Coordinators are responsible for validating and prioritizing

national supply requests by ensuring that requests are in line with a coordinated national approach for the procurement of critical items such as PPEs and other medical supplies from the Global Supply Chain Platform for the COVID-19 response. The Coordinators are currently drafting a local SOP on how to use the Global Supply Chain Portal. The reporting rate for the Supply Inventory Dashboard is now at 97% percent covering 639 out of 658 facilities.

### 2.3. Preserving Stability and Addressing Social Tensions Pillar

**2.3.1. LNOB, Essential services, livelihoods and social safety nets:** On 12 May, the Ministry of Expatriates' Welfare and Overseas Employment (MoEWOE) convened the first meeting of the working committee on “welfare and re-integration of returnee Bangladeshi workers from different countries due to the coronavirus pandemic”. The working committee is led by MoEWOE and includes participants from the Ministries of Foreign Affairs (MoFA), Home Affairs (MoHA), Health and Family Welfare (MoHFW), United Nations agencies and representatives from the donor community. MoEWOE announced that the Wage Earners Welfare Board (WEWB) will provide a one-time payment of BDT 5,000 (USD 59) in financial support to all returning migrants, and BDT 300,000 (USD 3,535) to families of migrant workers whom have died as a result of COVID-19 complications.

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, a total of 1,457 migrants were provided with telemedicine support, and 5,388 received general information on COVID-19 resources and support in the countries from which they were calling. One of the initiatives of the helpline is to engage the diaspora in assisting stranded migrants. Towards this end, during the reporting week a total of 800 migrants received food support from diaspora communities in the Kingdom of Saudi Arabia, United Arab Emirates, Bahrain, Oman and Malaysia.

During the reporting period, IOM released a snapshot of internal migration based on key-informant interviews with representatives from the local administration, local government, civil society organizations and the media. The findings indicated that a total of 620,220 internal migrants returned to their districts of origin between 30 March and 15 April 2020. Out of the 29 districts, Satkhira recorded the highest number of internal return migrants with 9% of the total returns. The top three districts of origin for female internal migrants were Cumilla, Natore, and Pabna. The findings indicated that Dhaka was the most reported district of departure and a total of 82.1% of migrants were male.

IOM is tracing migrants that returned to Bangladesh through ten reintegration service centres to determine their level of vulnerability and to provide them with COVID-19-related information and counselling assistance on how to cope with the adverse impacts of the pandemic, including mobility restrictions and unemployment. From 23 March to 16 May, a total of 856 migrants were traced. Vulnerable migrants will be identified through a rapid needs assessment to be completed once the Government-mandated general holidays end. From June 2020, IOM will provide immediate financial assistance (a one-time cash grant of BDT 5,000 per person), immediate medical and psychosocial support through tele-counseling and tele-medicine support, and reintegration assistance to vulnerable returning migrants identified during the needs assessment.

A group of scientists carried out a rapid exploratory study<sup>25</sup> of the localized nature of fear and stigma related incidences in Bangladesh, to investigate their sources, and to recommend possible culturally informed and socially relevant measures to mitigate these phenomena. They identified eight distinct phases from the start of the Covid-19 period, e.g. stigma of ‘foreign’ elements during a false sense of security period, fear of returning migrant workers, fear of loss of class status and lack of food,

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<sup>25</sup> <https://en.prothomalo.com/opinion/analysis/fear-and-stigma-in-the-context-of-corona-epidemic-in-bangladesh>



discrimination against Covid-19 patients and health workers. The study revealed that there was an experience of loss in transparency and accountability, which leads to mistrust. The authors noted that while fear cannot be abolished, the State can address it by being transparent, kind and positive.

On 19 May, a local platform was formed by the United Nations and its implementing partners (Oxfam, Village Development Bangladesh, Indigenous Peoples Development Services and the Centre for Injury Prevention and Research) to facilitate the implementation of COVID-19 response plan in select tea gardens for improved coordination.

In collaboration with Islamic Foundation and several private sector actors, a2i has started the development of a platform to collect Zakat (faith-based charity) in the month of Ramadan to crowd fund support to millions of poor and vulnerable people. At the third meeting of UNDP's Private Sector Platform, industry leaders alongside senior officials of UNDP came up with action plans for handling the COVID-19 outbreak.

Development partners, including EU, DFID, WB, ADB, GIZ, DFAT and United Nations agencies met on 20 May and agreed to develop a common narrative around social protection focused on response to COVID-19. The exercise would guide to develop a common goal and better coordination among the development partners. Two sub-groups namely: the ready-made garments (RMG) subgroup and budget support group were formed to facilitate better coordination and to reduce overlaps among the development partners.

Dispatch of life saving food and nutrition kits to treat children with severe acute malnutrition (SAM) was initiated on 11th of May. Some 94% of SAM management units countrywide have been stocked with these essential items which will last for at least five months and can be used to treat around 3,000 children with SAM.

### **2.3.2. Human rights and Rule of Law:**

Civil society organizations (CSOs), human rights defenders, United Nations and various embassies have engaged in advocacy to call out increasing constraints on freedom of expression and related issues of censorship and self-censorship, and request a review of current practices and legislation. It was suggested that continued advocacy and monitoring is needed, as is support and funding for NGOs who document the situation and report on it. There are two NHRC writ petition processes underway that will focus on availability of relief, and secondly, on healthcare access, which have also been the focus of discussion in the public sphere.

Through UNICEF's support, virtual children courts were conducted by district government officials. This week, 247 children were granted bail. UNICEF supported the reintegration of 174 children where it was safe for them to be reunified with their families and provided psychosocial support (PSS) to the children and their families. 73 children remain in detention centres until their safety can be assured. UNICEF continues to provide technical support to the Ministry of Law with both virtual courts and reintegration of children.

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

During the past two weeks, the Humanitarian Coordination Task Team (HCTT) continued to provide complementary support to the Health Emergency Response. In parallel, the humanitarian community

finalized the [Joint Needs Assessment related to the impact of Cyclone Amphan](#) as well as the [Humanitarian Response Plan](#).

### **3.1. Education cluster**

The Directorate of Primary Education (DPE) has transferred the second quarterly stipend to 14 million primary school students. The DPE's stipend project for Primary Education provides a minimum of BDT 50-150 per student per month for pre-primary to primary grades. The stipend is transferred through the children's mothers' mobile banking. In the context of COVID-19 outbreak, the DPE also provided a onetime stipend of BDT 1,000 each for all primary school students. In the previous week, DPE distributed fortified biscuits to the families of the targeted children supported by WFP's school meal project.

Starting 15 June, UNESCO Institute of Statistics (UIS) will conduct an analysis of data on out-of-school children. Plan International is also conducting a gender transformation study which includes education indicators. The study will provide evidence on the challenges that girls are facing for continuity of learning. BRAC is piloting a tele-learning project in evening hours for marginalized children of 50 schools in Dhaka and Chittagong areas, as their parents (having mobile) are out of the home throughout the day. UNESCO, UNICEF, WFP and the World Bank at the global level have jointly developed a framework on school re-opening. UNICEF has translated it in Bangla and shared with education ministries to contextualize and implement.

Campaign for Popular Education (CAMPE) completed a rapid survey of the NGOs/education partners' response to the COVID-19 crisis. The NGO partners surveyed were supporting 2.8 million learners of different age groups affected by COVID-19. Of the responding NGOs 56% are supporting and following-up on telephones with students on their continuity of learning, 32% are conducting awareness campaign using local cable networks, and 14% are providing supplementary materials through remote-based platforms. The survey also highlighted challenges such as an increase in dropouts, not completing the syllabus, escalation of violence against children, tension among teachers for timely salary and the limited capacity of using Information and Communications Technology (ICTs) to support children.

Save the Children initiated a quick survey in two Upazilas (Madariganj of Jamalpur district and Rajarhat of Kurigram district) to assess the access of children through different platforms. Initial findings suggest that children in remote communities have limited access to televised classes, and they prefer mobile-based remote learning.

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

Midwives across the country have reported instances of pregnant mothers being denied entry to health facilities. Last week in Gaibandha, a pregnant mother gave birth on the street after being unable to provide a COVID-19 negative certificate. Furthermore, data from UNFPA and the Obstetrical and Gynecological Society of Bangladesh show that the number of antenatal care visits, facility deliveries and caesarian sections have steadily decreased between 2019 and 2020.

As part of the COVID-19 response to ensure continuity of emergency obstetric and newborn care (EmONC) services, UNFPA has supported the Directorate General of Health Services (DGHS) by distributing newborn Ambu bags, goggles, gloves and reusable face masks to Upazila Health Complexes and District Hospitals country wide. All 64 districts were covered.

In the Rangpur division, Lamb hospital has provided multipurpose cash to around 130 families including families with women of reproductive age and pregnant women living in hard to reach areas. Save the

Children continued their Maternal and Newborn Care Strengthening Project (MaMoni MNCSP) in ten districts (Habiganj, Baria, Manikganj, Noakhali, Lakshmipur, Chandpur, Feni, Madaripur, Faridpur and Kushtia) where project staff are providing technical as well as psychosocial support to health care workers in light of COVID-19. During the last week, 590 phone calls were made.

### 3.3. Water Sanitation and Hygiene (WASH)cluster

UNICEF and the Department of Public Health Engineering (DPHE) continued to monitor and collect situation updates from 64 district engineers. Hygiene awareness, installation of handwashing stations in public places and the maintenance of water points continued<sup>26</sup>.

WASH Cluster members continued working to enhance hygiene practices at personal and community level, also helping to prevent COVID-19. In the last two weeks cluster members installed 590 handwashing devices in public places in Chandpur, Feni, Gaibandha, Khulna and Jashore. During the reporting period, cluster members distributed more than 15,000 hygiene kits.

Among them, World Vision Bangladesh distributed 11,060 hygiene kits to children and women in Mymensingh, Netrokona, Sherpur, Tangail, Nilphamari, Thakurgaon, Naogaon, Rajshahi, Dinajpur, Gopalganj, Barishal, Pirojpur, Borguna, Bagerhat, Satkhira, Dhaka, Gazipur, Chattagram, Comilla, Sunamganj and Sylhet district. They also distributed 2,110 sets of handwashing devices (20 litrebucket with lid and tap) in Mymensingh, Netrokona, Nilphamari, Thakurgaon, Naogaon, Rajshahi, Dinajpur, Gopalganj, Barishal, Pirojpur, Borguna, Bagerhat and Satkhira district. Oxfam in Bangladesh provided hygiene kits to 1,137 people including 65 persons with disabilities through their partner (MMS) in Sirajganj (Chouhali, Tarash). Through this distribution, accessibility of hygiene items was ensured for the poor people specially women headed household of the remote char of Sirajganj.

Oxfam has distributed Hygiene kits for 2,269 marginalized youths, 220 PPE for youths' volunteers, local government and administration and 12 disinfectant spray machines to the Union level youth groups in Barisal and Khulna through their partners (CODEC, WAVE Foundation). Practical Action Bangladesh distributed hygiene material to 1,086 family of waste and sanitation workers. Muslim Aid similarly distributed hygiene package most vulnerable among 75 households in Dhaka and Jashore districts.

## 4. CROSS-CUTTING ISSUES

### 4.1. Gender

On May 27, UN Women launched the global [Shadow Pandemic](#) public awareness campaign, focusing on the global increase in domestic violence during the [COVID-19 health crisis](#). Oscar-winning actor Kate Winslet narrates the [60-second film](#) that urges people to act to support women if they know or suspect someone is experiencing violence, to educate themselves about the services available; and if they think that someone is in trouble, to check in on them. The national helpline number in Bangladesh is 109, operated by the MoWCA's National Helpline Center for Violence against Women and Children.

Bandhu Social Welfare Society, a leading NGO that works for the rights of transgender, hijra and gender diverse persons in Bangladesh, conducted a rapid survey to understand the physical, mental and financial vulnerabilities of their target groups as a result of the lockdown. Out of the 88 persons

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<sup>26</sup> Story link: <https://www.oxfamamerica.org/explore/stories/what-will-happen-us-bangladesh/>  
<https://drive.google.com/file/d/1G8rUSgNchwZlb564zJUxRiFDDA1hMJx/view?usp=sharing>

surveyed countrywide, most are illiterate and not in formal employment; they depend on begging and day labour. Due to the lockdown and resulting lack of income, many have had to reduce their diets and around 93 percent indicated that they were suffering from stress and anxiety because of the lack of food, and due to stigma and discrimination. Roughly a quarter of the persons surveyed had not received any kind of aid; of those who had received aid, many indicated that they had faced stigma and discrimination because of their gender identity.

Bandhu is providing relief and has introduced mental health and medical counselling helplines specifically for transgender, hijra and gender diverse persons.

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

Global UN human rights experts called on States on 26 May to protect the rights of migrants and their families, regardless of their migration status, during and after the COVID-19 pandemic<sup>27</sup>. In their 17 Guidelines<sup>28</sup> the experts urge States to ensure the rights of persons in need of international protection, including access to their territories, and to continue search and rescue for persons in distress at sea.

On 26 May independent experts of the Human Rights Council expressed concern about the arrest under the Digital Security Act (DSA) of journalist Shafiqul Islam Kajol on 3 May who had just been found after an alleged enforced disappearance and unacknowledged detention for 53 days. They expressed “concern that his detention continues seemingly without a legal basis. [...and that this is particularly concerning with heightened risk of COVID-19 infection that those detained are exposed to”. The DSA was also used to constrain freedom of expression when a journalist was arrested for criticizing the operator of a bus service who was illegally operating during the lockdown.

Concerns have been raised about disparity in observed allocation of resources seen. Kishoreganj, with a poverty rate of 53.5%, is receiving 1.42 kg rice per person whereas Munshiganj, where the poverty rate is 3.1%, is receiving 34.21 kgs of rice per person<sup>29</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>
- Bangladesh Peace Observatory: [BPO Covid19graphics](https://www.bpo.gov.bd/covid19-graphics).
- Bangladesh Red Crescent Society (BDRCS): <http://www.bdracs.org/news/coronavirus-covid-19-situation-update>



<sup>27</sup> <https://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=25904&LangID=E>

<sup>28</sup> <https://www.ohchr.org/Documents/Issues/Migration/CMWSPMJointGuidanceNoteCOVID-19Migrants.pdf>

<sup>29</sup>BRAC