Cyclone Remal

HCTT Humanitarian Response Plan 2024



(June - Dec 2024)





Foreword

Gwyn Lewis

Resident Coordinator, Bangladesh

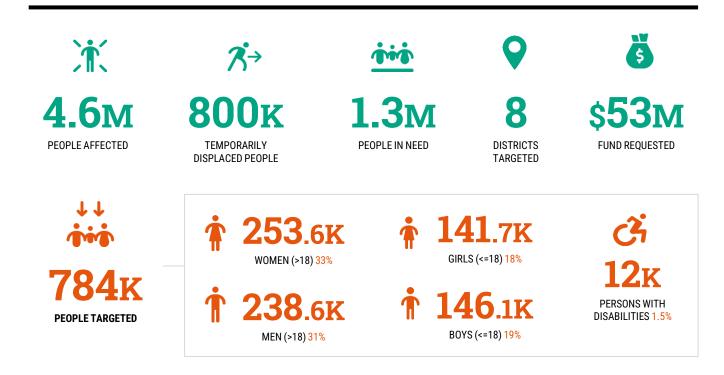


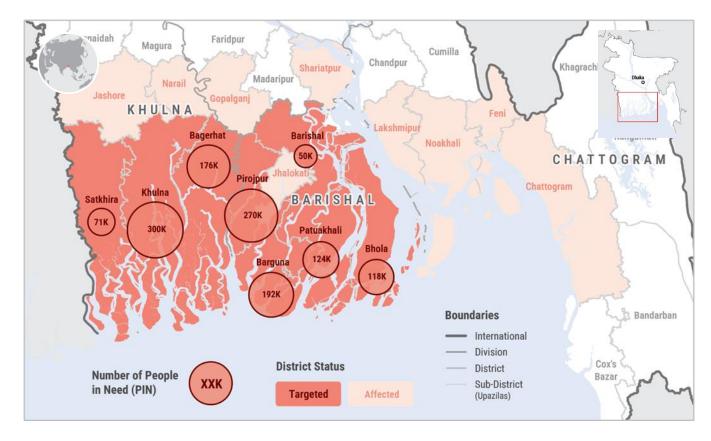
Just two weeks ago, on May 26, 2024, Cyclone Remal made landfall in Bangladesh, remaining on land for approximately 48 hours. The cyclone spanned an area of 400 square kilometers and caused storm surges 8 to 12 feet above normal levels. In a matter of hours, it displaced 800,000 people. Thanks to the rapid dissemination of early warning messages by local and national authorities and volunteers many lives were saved. People found refuge in 9,424 evacuation centers swiftly opened by the government. Early action by the government and local civil society saved lives, but the devastation left by the cyclone remains enormous. From the Government's preliminary information and the humanitarian community's assessments, we know that 4.6 million people were affected by the cyclone. In eight districts (Barguna, Bhola, Pirojpur, Satkhira, Patuakhali, Bagerhat, Barishal, Khulna) a total of 433,745 people require health services, including 45,543 children under five and 9,976 pregnant women. Immediate needs include restoration of access to drinking water as well as to sanitation facilities. A total of 20,543 water points were damaged, of which 1,570 were completely destroyed. Of the 134,501 latrines damaged by the cyclone, 24,407 were totally destroyed. People are still living in shelters or with relatives, since a total of 173,866 houses were damaged, of which 40,338 houses were destroyed. Schoolchildren are unable to attend the 964 cyclonedamaged Government Primary Schools (GPS), 795 in Barishal and 169 in Khulna. Over half a million farmers (537,234) have been affected by damage to crops worth BDT 10,595 million (US\$ 90.7 million) over 62,783 hectares of land.

In line with the identified priorities and to complement the support of the government, the Humanitarian Coordination Task Team (HCTT) has developed this humanitarian plan to assist 784,000 people, focusing on the most vulnerable groups, including children, women, and people with disabilities. We are firmly committed to addressing the protection needs of these groups, including their exposure to discrimination and sexual and gender-based violence.

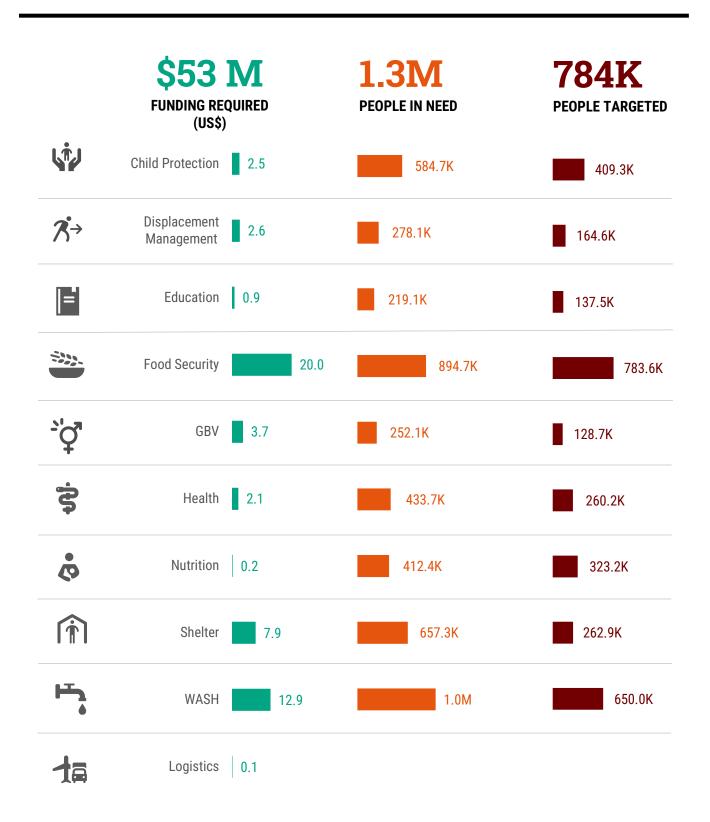
As we work through this critical phase, we will strive to build bridges for early recovery and reconstruction to mitigate any long-term impact on lives and livelihoods in the affected regions. We will collaborate closely with national and local organizations under the leadership of the government to reduce disaster risk through both humanitarian and development actions.

Key Figures





Funding Requirements





Situation Overview



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On May 26, 2024, cyclone 'Remal' made landfall near the Bangladesh-India border, in the western part of Sundarbans in the Shatkhira district. The tidal surge accompanied by extremely heavy rainfall, caused flooding of between 5 and 8 feet in the coastal districts.

Cyclone Remal is the most devastating cyclone to strike Bangladesh in over a decade. According to the Government assessment (NDRCC report, SoS Form), <u>4.6 million</u> people were affected across 19 districts. Of the total people affected, more than half are are women. A total of 173,866 houses have been damaged or destroyed (133,528 partially damaged and 40,338 fully damaged), and 16 lives were lost.

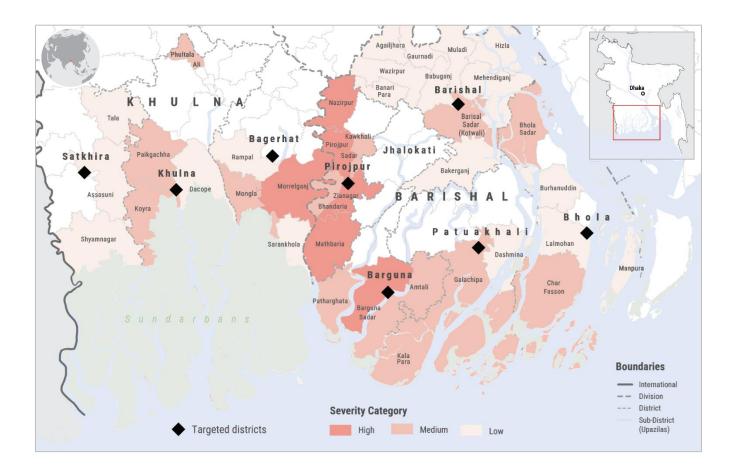
On May 31, 2024, the Needs Assessment Working Group (NAWG) published a <u>rapid needs assessment</u> providing a critical overview of the impact and needs of Cyclone Remal. Pirojpur, Khulna, Bagerhat, Satkhira, Patuakhali, Barguna, Bhola, and Barisal remain the most affected districts. The tidal surge breached embankments, resulting in extensive flooding and damage to homes, infrastructure, forests, agricultural fields, and fishing farms in low-lying areas. According to NAWG, out of 277,226 hectares of cultivable land, 80,591 hectares of land were inundated, and 46.6% of standing crops were damaged. Embankments were damaged by the storm and as a result, there has been saltwater intrusion of both cropland and animal water sources. 23.5 % of food stored was lost.

Initial data from the Department of Public Health Engineering (DPHE) identified eight affected districts with 20,260 water points damaged and 134,269 latrines damaged. The Ministry of Fisheries and Livestock reported 50,000 fish enclosures, 34,000 ponds, and 4,000 crab farms were flooded during the cyclone. Cyclone Remal has resulted in a loss of BDT 6,880 crore of assets and Infrastructure (around USD 600 million) in 20 districts of the country, as <u>stated by State Minister, MoDMR</u>.

The Government responded immediately to address needs and allocated a response fund of USD \$903,385, primarily sourced from Government provisions such as rice, cash, children's food, and fodder covering 15 affected



districts. The <u>UN Emergency Relief Coordinator</u> announced an allocation of \$7.5 million from the Central Emergency Response Fund (CERF) to provide critical humanitarian assistance to those affected by Cyclone Remal. Additionally, UN agencies and humanitarian partners are also providing immediate humanitarian assistance to affected populations; for instance, the <u>Start Network allocated GBP 0.8 million</u>, the <u>EU released euro 1.2 million</u> and <u>BRAC contributed BDT 10 crore</u> (around USD 0.86 million) for the response.



Anticipatory Actions taken before Cyclone Remal made landfall



PEOPLE REACHED WITH EARLY WARNING



During the initiation of the low-pressure area at the Bay of Bengal on 22 May 2024, the Anticipatory Action Technical Working Group (AA TWG), comprised of all humanitarian agencies in Bangladesh, worked closely with the government-led Forecast Based Action Task Force under the Ministry of Disaster Management and Relief to monitor, forecast, and issue warnings in anticipation of the cyclone using national and international meteorological models. This support was provided to the Bangladesh Meteorological Department, Flood Forecasting Warning Center, and Cyclone Preparedness Programme to develop effective warnings based on the harmonized Early Action protocol for cyclones.

Anticipatory action triggers, based on the forecasted wind speed and location, were reached on the evening of May 25, approximately 24 hours before the cyclone's landfall. With this activation decision, Agencies supported shelter management, early warning dissemination, WASH support, evacuation, GBV awareness, and Multi-Purpose Cash Grants (MPCG) to support families to prepare for the storm by enabling them to reinforce their homes, seek safe refuge, transport valuable assets, and procure essential items like food, medicines, and cattle feed.

ActionAid, BDRCS, BRAC, Christian Aid, Center for Disability in Development, Concern Worldwide, FAO, World Food Programme, STEP Consortium, START Network, Oxfam, World Vision and Save the Children implemented anticipatory actions on the ground with local implementing partners.

These agencies reached more than 2.5 million people with early warning messages and at least US\$ 2.1 million was spent for the range of anticipatory actions during the activation, primarily on cash assistance, including by utilizing social protection systems to test the Shock-Responsive Social Protection approach during the activation.

The impact of the cyclone on most vulnerable populations was reduced significantly due to the robust early actions taken prior to the cyclone's landfall in the exposed areas across 8 districts in southern Bangladesh.



Timeline of Key Events



Cyclone Remal 24-26 May 2024

Cyclone Remal slammed into Bangladesh's coast on May 26th with heavy rain and strong winds impacting 16 coastal districts, with millions evacuated, and widespread infrastructure damage.



UNRCO Situation Report #1 and NAWG Anticipatory Analysis #1 26 May 2024

Potential Impact information and compilation of sectoral preparedness (ICCG, ISCG)



UNRCO Situation Report #3

29 May 2024

Last situation that captured the sectoral impact and information on needs (ICCG, ISCG, Bhasan Char)



HCTT HRP (June 2024-November 2024)

2 June 2024 to 7 June 2024

ICCG agreed on the HRP and appeal for complimentary resource mobilization and target was set after consultation with the clusters. Humanitarian Advisory Group meeting took place on June 4, 2024

→물

Anticipatory Actions taken 22-23 May

Humanitarian partners reached 2.5 Million people with early warning alerts and released over 2 million in cash and other assistance to help people prepare for the storm.



NAWG Anticipatory Impact Analysis # 1 25 May 2024

Situation monitoring and compilation of all available information on potential impacts as of 25 May 2024.



ICCG Meeting and UNRCO Situation Report #2

27 May 2024

There is an ICCG meeting to discuss the situation and trigger of Rapid Need Assessment. 2nd Version of UNRCO sitrep that focus on overall response (ICCG,ISCG)



Rapid Need Assessment

31 May 2024

The Assessment captured the sectoral impact and information on needs (ICCG, ISCG, Bhasan Char)

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Response Monitoring 31 December

2024 Clusters will

monitor the response quality and ensure Collective Accountability to the Affected Community (AAP)



Response Strategy

Assist the affected population and prevention of further human suffering

Strategic Objectives



S01

Provide dignified and accessible humanitarian support for the most vulnerable.

Ensure the provision of humanitarian assistance in a dignified manner to the most vulnerable people affected, including in hard-to-reach areas.





Restore essential services and support livelihoods

Restore access to essential services such as water and sanitation, healthcare, and education, while also providing livelihoods to support early recovery.

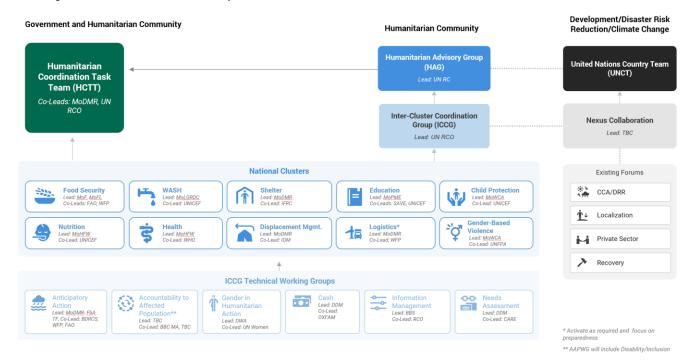


Address immediate protection risks.

Ensure the protection of women and men, boys and girls, irrespective of their age, sex, social milieu from immediate risks, including but not limited to violence, exploitation, and abuse.

🔆 Response Coordination

This emergency response plan is implemented under the overall guidance of the HCTT with support from the Resident Coordinator (RC) and Humanitarian Advisory Group (HAG)¹. Operational support is provided by the Inter-Cluster Coordination Group (ICCG). See Bangladesh Humanitarian Coordination Architecture, in complementation to the government led coordination platform, HCTT.



¹ In Bangladesh, the Humanitarian Advisory Group (HAG) is the equivalent of a Humanitarian Country Team (HCT). The HAG s a network of humanitarian organizations that work together to assist the Resident Coordinator (RC) in Bangladesh in her role as the Co-chair of the Humanitarian Coordination Task Team (HCTT).

🛱 Key Needs and Priorities

The Needs Assessment Working Group (NAWG) conducted a <u>rapid assessment</u> to gauge the immediate necessities of the population, with results based on the preferences of 548 respondents. The findings indicate that the drinking water supply is the most pressing need, with 49.96 per cent of the participants identifying it as crucial. This is followed by concerns regarding and the requirement for toilet repair, temporary facilities, or accessible toilets (49.31 per cent), and the requirement for repair and maintenance of shelter (31.9 per cent). Food provisions, specifically packages containing rice, lentils, and oil, were considered vital by 30.95 per cent of respondents. Additionally, other significant needs include Income and employment (23.25 per cent), the repair or disinfection of drinking water sources (17.85 per cent), dry food package (8.91 per cent) and initiatives related to drainage and solid waste management (8.58 per cent). While the emphasis on cooked food, hygiene promotion and agricultural inputs was slightly less (7.66 per cent, 6.57 per cent and 6.39 per cent respectively), the data emphasizes the necessity for a comprehensive response. Lesser but still notable concerns encompassed areas such as shelter items, inputs for crop and/or vegetable production, educational resources, and gender-specific facilities.



WASH: Provision of safe drinking water supply, the continuity of functionality of water facilities, and the prevention of other waterborne diseases in the most affected and vulnerable areas. Hygienic sanitation facilities and handwashing materials are critical for the most disadvantaged people, mainly children and women who are the most vulnerable in the affected areas.



Food Security: Ready-made/cooked food, child food package distribution, cooking utensils, fuel, and food assistance are urgently needed for the people displaced. Livestock feed and veterinary services, water for livestock, in-kind emergency livelihood support, and emergency agriculture input are also critical.



Shelter: Shelter materials and household items are urgently needed in the community at this moment, including Emergency Shelter Support, essential household supplies, housing repair assistance, and rental assistance. Displaced populations are in need of food assistance; emergency shelters, shelter rebuilding items, sanitation & hygiene items; and livelihood restoration.



Health: Emergency health care support, including mental health and psychosocial support, health education, and promotion. Enhance disease surveillance systems to prevent potential communicable disease outbreaks. Replenish emergency drugs and medical supplies, and repair damaged health facilities. Need for implementation of the Minimum Initial Service Package MISP) to restore the SRHR services for the women. Emergency health care support for the women who are not getting access to health facilities is also needed.



GBV: Safety and dignity items for displaced women, girls, transgender/ hijra, including persons with disabilities (PWD) to reduce GBV risk and ensure well-being. CASH support to women-headed households, pregnant women to access essential health services. Mental and psychosocial helpline services (MHPSS) by counselors for survivors of gender-based violence.

🐼 Response Monitoring

Given the destructive nature of Cyclone Remal and subsequent flooding and considering the specific access challenges to some of the target areas, particularly in islands and remote forest areas, a clear and adaptable response monitoring system is imperative. The following elaboration offers a detailed look at how response monitoring will function under these circumstances:

Identifying Gaps: Recognize any shortcomings, inefficiencies, administrative impediments, or delays in the delivery of humanitarian aid as outlined in the HRP. This is essential in such dynamic situations, where changes in situation, unexpected damages, or challenges in access to specific target areas, may necessitate immediate adaptations and modifications in the delivery mechanism.

Ensuring Accountability: Use the collective Accountability for Affected Population (AAP) framework that ensures transparency, answerability, and responsibility to the affected communities, donors, and other stakeholders. This is crucial for trust-building, ensuring the correct utilization of resources, and fostering collaborative efforts during crises. Conduct joint field missions with cluster coordinators and donors to improve the speed and quality of the response.

Promote Humanitarian-Development Nexus: The humanitarian community should craft emergency response interventions with a long-term perspective, fostering strong collaboration with development partners to address underlying vulnerabilities and sustain emergency services for sustainable recovery processes. This approach is pivotal for bridging the gap between immediate life-saving aid and long-term development strategies during crises, fostering a holistic response that addresses current needs while building resilience for the future. ICCG will assess its effectiveness through joint field missions, after-action reviews, and response monitoring using the 5Ws.

Automated 5W Matrix Implementation: The automated 5W matrix (who, what, where, when and why) will be piloted to enhance real-time data collection, analysis, and dissemination. Information management working group and NAWG in collaboration with OCHA-ROAP and RCO roll out the 5W matrix.



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Cluster Plans

🙀 Child Protection

PEOPLE IN NEED

PEOPLE TARGETED

REQUIREMENTS (US\$)

2 5M

584,717

409,302

Humanitarian Impact and Key Immediate Needs

Cyclone Remal has amplified vulnerabilities for 1.79 million children, notably in Pirojpur and Khulna regions, potentially leading to increased risks like violence, child labor, marriage, family separation, income loss, undignified work, trafficking, displacement, and limited access to services. It also heightens migration to urban areas due to livelihood loss and parental inability to support welfare. Immediate support for affected children is crucial. Strengthening, expanding and improving access to essential child protection services disrupted by the cyclone is imperative. Enforcing laws against child labor and child marriage, along with community awareness initiatives, is critical to safeguarding children's rights and future well-being. Prioritizing children's needs in response efforts will enormously minimize the long-term impact on their physical and emotional well-being by providing children including adolescents with the necessary tools and resources to cope with disasters and support them to recover and rebuild more quickly.

Response Activities

- Support for affected families and community mobilization
- Strengthening (either activation or enhancement) of community-based child protection mechanisms (CBCPC)
- Deployment of social workers to child-friendly spaces (CFS) and safe spaces to assess protection needs, develop individual intervention plans, and refer children to appropriate services.
- Repair and restoration of children/adolescent spaces
- Establishment of referral mechanism with service providers to extend required support and services to survivors of violence against children (VAC) and gender-based violence (GBV)
- Distribution of family support kits, reunification kits including dignity kits.

Response Package

- Mental Health and Psychosocial Support (MHPSS)
- Strengthening community-based child protection systems
- GBV risk mitigation and interventions
- Family kits and dignity kits for affected families and adolescent girls



Targeting Criteria

- Children adolescents in psychosocial distress
- Children including children with disabilities (CWD), victims of physical violence, harmful practices as well as survivors of sexual and gender-based violence (SGBV)
- Children at risk of danger or risk of child labor, injured, drowning, child marriage, migration and trafficking including CWDs.

Response Partners

UNICEF, World Vision, Society Development Agency (SDA), Rupantar, Jagrata Juba Shangha (JJS)

Contact

Syeda Tahsina Hridita (UNICEF): shridita@unicef.org



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🖈 Displacement Management

PEOPLE IN NEED

PEOPLE TARGETED

REQUIREMENTS (US\$)

2.62 M



164,589

Humanitarian Impact and Key Immediate Needs

Ahead of landfall on May 26, 2024, approximately 0.8 million people were pre-emptively evacuated to 9,424 evacuation shelters across 19 districts. Many more of the temporarily displaced were staying with neighbors or families. As per the Needs Assessment Working Group (NAWG) report, approximately 4.6 million people were affected across 19 districts in 119 sub-districts and 934 unions. Around 173,866 houses have been damaged, of which 40,338 houses were fully damaged.

Based on the NAWG report, an estimated total of 278,125 were displaced due to the cyclone in the eight most affected districts of Bhola, Patuakhali, Barishal, Barguna, Pirojpur, Bagerhat, Khulna, and Satkhira. This number includes those who were previously displaced such as floating populations, people living in slums and who remained displaced at the time of cyclone. As per cluster partners, the displaced population are in need of shelter, food, WASH items and key protection concerns. The cluster will target about 60 per cent of the total displaced.

Response Activities

- Regular displacement mapping to determine number of IDPs/ movements, Identifying numbers, locations, key challenges of displaced population.
- Multi-Purpose Cash Grants: Provide MPCG for displaced population to support themselves.
- Temporary Relocation: Shelter/Rental assistance while displaced full or partial rental costs.

Response Package

- Displacement Mapping and vulnerability needs assessment.
- Multi-purpose cash (MPCG)
- Temporary relocation including rental assistance

Targeting Criteria

- Displaced and living in evacuation shelters or relatives' houses or other houses
- Families living on or outside of embankment or other communal settlements
- Households with vulnerable groups such as PWD, women-headed households, pregnant women, elderly people, etc.) will be prioritized

Response Partners

IOM, BRAC, NRC, World Vision, Caritas, Uttaran, Concern Worldwide, Jaago Nari, Plan International, Oxfam

Contact:

Syed Shahrear SHABAB (IOM) : ssshabab@iom.int



PEOPLE IN NEED

PEOPLE TARGETED

REQUIREMENTS (US\$)



137,463

850,000

Humanitarian Impact and Key Immediate Needs

Approximately 192,800 children, 50 per cent are girls, have been impacted by the cyclone damages to the schools. There are 964 cyclone-damaged Government primary schools (GPS), 795 in Barishal and 169 in Khulna, across eight districts. The damages or loss mainly include repairs of WASH and electrical facilities and replenishment of lost educational materials such as textbooks, stationery items and teaching/learning materials.

There have been 688 government primary schools used as temporary shelters in Khulna that require support for repairs, cleaning and replenishment of teaching and learning materials. Similar interventions are required for the 1,852 GPS used as temporary shelters in Barishal.

There are significant damages to schools, however, as the financial year is closing in June, schools anticipate delays in receiving funds from the DPE that is needed to cover repair and replenishment costs for the damages.

Response Activities

- Approximately 137,463 children and 550 schools (400 Primary and 150 secondary schools) in the affected areas are targeted with different response packages
- Distribution of education kits and teaching learning materials
- Provision of hygiene and cleaning materials, including support to clean school premises that were damaged or used as temporary shelter.
- Minor repair and maintenance of damaged schools and schools used as temporary shelter (WASH facilities, electrical connections, furniture, damaged doors/windows etc.)
- Awareness-raising among school stakeholders including printing and distribution of existing information and education campaign (IEC) materials on hygiene, water-borne diseases and other health risks, such as skin diseases caused by contaminated water.

Response Package

- Education in Emergency kits to include: 1) materials for schools such as chalk box, teaching materials, posters, and charts; 2) materials for learners such as pens/pencils, writing pads and school bags
- Hygiene and school cleaning packs for schools to include handwashing liquid soap (5L), hand sanitizers (200ML), alcohols (>60%), hand rub solution (200-250ML), disposable sanitary pads (pack of 10), liquid toilet cleaner (500ML), cleaning liquid (500ML) and cleaning accessories such as broom, buckets and dusting cloth sets.



Targeting Criteria

- Upazilas will be selected based on the NAWG severity index high and medium (7 high and 13 medium)
- Primary and secondary schools will be selected based on severity of damage (high and medium)
- Approximately 60per cent of the affected schools will be supported for minor repair and maintenance.
- Girls' schools affected by the disaster will be prioritized
- At least 10per cent schools will be selected from the schools used as cyclone/temporary shelters and/or have been damaged

Response Partners

UNICEF, Save the Children, Winrock International, Plan International, BRAC

Contacts

Mourie Chowdhury (UNICEF) : <u>mochowdhury@unicef.org</u> Meherun Nahar Shapna (Save the Children) : <u>meherun.nahar@savethechildren.org</u>



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Food Security and Agriculture

PEOPLE IN NEED

PEOPLE TARGETED

REQUIREMENTS (US\$)

19.96M



783,642

Humanitarian Impact and Key Immediate Needs

Cyclone REMAL impacted 19 districts and 119 Upazilas affecting 4.6 million people. Crops in over 62,783 hectares of land were damaged worth BDT 10,595 million (US\$ 90.7 million) affecting 537,234 farmers. The cyclone caused significant loss of livelihood and household income. The limited functionality of the market and lack of economic activities accelerated the suffering.

Due to the wind and tidal surge, most of the people's cooking facilities like stoves and cooking fuel washed away. It also destroyed recently harvested household food stock, and stored seeds and fodder. Tidal surges, heavy rainfall and high wind speed caused damage to standing crops, fruit orchards, seedbeds, fisheries, livestock, poultry and forestry. It also caused livestock and wild animal death, injury and sickness accelerated by the water point contamination. Marine fishing households are suffering a double due to the fishing ban. Most of the agricultural household's agricultural tools and equipment were damaged (e.g. machineries, trawlers etc.) due to saline water and unwanted displacement. The breach of embankments caused long-term saline water intrusion which will cause long-term soil salinity impacting the total agricultural production. Farmers are likely to start the Aman planting season late, which would result in significant production loss.

Assessments were conducted in eight most affected districts namely: Khulna, Satkhira, Bagerhat, Barishal, Patuakhali, Pirojpur, Barugna and Bhola. These eight districts are climate vulnerable and exposed to salinity. Based on preliminary assessment, 85.2 per cent of people started skipping meal and 86.2 per cent of people are facing difficulty with cooking fuel. About 93.2 per cent of people had their livelihoods and income generating activities and 84.1 per cent of affected people are already facing income loss. It is estimated that 86.3 per cent of agricultural activities were disrupted. Other impacts include: 81.6 per cent disruption of water sources, 69.5 per cent of cattle feed and 23.5 per cent of local storage facilities are disrupted.

Priority needs include food assistance to most vulnerable households to ensure food and nutrition security and prevent further deterioration of the current food and nutrition situation. Restoration of immediate income opportunities and agricultural infrastructure need to be addressed. At the same time immediate lifesaving agricultural interventions such as provision of tools, seeds, fertilizers, cattle feed, fodder and veterinary services, fish feed and fishing equipment are needed to restore immediate food production. It is likewise necessary to rehabilitate cattle and wild animal drinking water sources and forestry.

Response Activities

• Distribution of Immediate Food Assistance: Immediate dry food package with two options: 1) flattened rice (Chira), White sugar/brown sugar/molasses and Fortified Biscuit, and; 2) fortified Biscuit only per household.

- Distribution of FSC Food Basket: Food basket consisting of rice (fortified preferred) *(BR-29) considered, fortified vegetable oil, lentils/ mung dal/ cholar dal, chira, iodized salt, sugar / molasses, as per SPHERE standards. Modalities include in-kind, cash and in-kind or full cash depending on the needs and market functionality. In consideration of climate vulnerability, salinity intrusion, late sowing, IPC level and other relevant factors, the assumption of food shortage will be at least 150 days. The cluster will cover 60 days as the remaining 90 days will be covered by the government or the affected community.
- Cash for work to restore livelihood and agriculture infrastructure: The package value is the same as the livelihood package for affected people who are agri and non-agri laborers and under IPC3+ and below the poverty line.

Lifesaving agriculture livelihood: Provide emergency lifesaving agricultural inputs, training, information, and cash. Agricultural inputs include livestock feed, veterinary services, seeds, fertilizer, tools etc.

Response Package

- Immediate food assistance package
- FSC Food Basket package
- Non-agricultural livelihood and Cash for work
- Lifesaving agriculture livelihood package
- Cash for work package

Targeting Criteria

- Affected IPC3+ and below lower poverty line households are targeted. Priority will be given to households with severely malnourished children, women-headed households, and households with PWD or elderly members.
- Displaced families without cooking facilities
- Affected farmers who are IPC level3+ and below the poverty line who are extremely vulnerable such as sharecroppers, small/marginal farmers, or owning little livestock(five heads of cattle or less).

Response Partners

FAO, WFP, DAE, DLS, DOF, World Vision, BDRCS, IRB, Concern Worldwide, SCI, ACF, Uttaran, Shushilon, Action Aid, Oxfam, Care, Plan, BRAC, COAST Foundation and RRF

Contact

Mohammad Mainul Hossain Rony (FAO & WFP) : mohammad.rony@wfp.org

ϔ Gender-Based Violence

PEOPLE IN NEED

PEOPLE TARGETED

REQUIREMENTS (US\$)



128,742

3.68 M

Humanitarian Impact and Key Immediate Needs

While drinking water, toilet, shelter and food are the top needs as per the Joint Needs Assessment (JNA) and should be prioritized - these lifesaving actions will not have meaningful impact if overall protection and GBV risks are not immediately addressed. The Joint Needs Assessment (JNA) report shows that 37 per cent surveyed households (HH) think that the cyclone impact will significantly increase the risks of violence against women and children (VAWC). It is to be noted that the pre-crisis prevalence of partner violence in the affected areas of Barishal and Khulna division is 44.6 per cent and 57 per cent, respectively. During any emergency or crisis, displacements, financial stress and loss of assets contribute to increased risk of partner violence or other forms of gender-based violence. Findings from the JNA show similar indications, about 42 per cent of HH fear the impact of cyclone will be on safety issues for children, women, girls and persons with disabilities (PWDs). About 70 per cent indicated difficulties in accessing toilets, particularly for PWD, women and girls. Adolescents, particularly girls, face a critical interruption in their physical and emotional development due to the disruption of health services, leaving them without access to crucial reproductive health information and services. This includes menstrual hygiene management (MHM) and contraceptive counseling, elevating the risk of unwanted pregnancies and gender-based violence (GBV). In observance of these findings, timely GBV response and risk mitigation intervention are strongly recommended. the Rapid Gender Analysis (RGA) particularly recommends the immediate provision of dignity items including menstrual hygiene management.

The JNA reports around 58 per cent of HH indicated to reduce expenditure on non-food items (NFIs). This will have a disproportionately impact on the essential personal items that facilitate women and girls access to services including humanitarian aid. Particularly for marginalized communities such as transwomen/hijra, female sex workers, women farmers and women fisher folk, Bede (nomadic group), and Rakhine (ethnic community) affected by the cyclone who are struggling to meet their basic needs. They are also often not accounted for in government and humanitarian communities' response. At the same time, the combination of infrastructure damage, lack of transportation, and societal marginalization severely restricts their access to essential services. In the JNA, it is estimated that over 50 per cent of healthcare services in affected districts will have a disproportionate impact on the accessibility and service-seeking attitude among pregnant women. It is to be noted that in normal times, there is low ANC uptake in Bagerhat (40 per cent) and Satkhira (49 per cent).

Although the JNA shows an overall 51 per cent disruption in education services in all the affected districts, gendered roles within households will have a disproportionate impact on adolescent girls' education. Damaged roads, displaced conditions, increased household work (repairing, cleaning), and loss of essential belongings including educational material will be limiting factors for adolescent girls to continue education. The JNA report shows that in the affected districts, 27per cent of households fear early marriage and an uncertain future for adolescent girls. This is particularly to be noted in a context where child marriage prevalence is already high; in Bagerhat at 70 per cent and in Satkhira at 58 per cent.



Despite the presence of significant numbers of local and national NGOs and women-led organizations in the cyclone hit region, specific GBV response and risk mitigation efforts are limited. Up until now, only 10 NGO partners reported GBV response and risk mitigation activities in cyclone affected areas. Lack of awareness of first responders on GBV risks and safeguarding measures may further put women, girls and PWD at heightened risks of gender-based violence. Bhola, one of the char/island districts in Barishal Division, has the lowest antenatal care (ANC) uptake and institutional delivery, and high child marriage prevalence (approximately 60 per cent). There are no reports received on any response activities in this district.

Response Activities

- Provision of essential items, services and cash for GBV response and risk reduction
- Safety and dignity items for displaced women, girls, transgender/ hijra, including PWD to reduce GBV risk and ensure well-being.
- Unconditional cash for dignity kits to support individual women including pregnant women and women with disabilities, transgender and other individuals from key population groups. The focus is on mitigating their heightened protection risks, facilitating access to essential/ lifesaving services, and information, and promoting safety, dignity, and well-being.
- Inclusive dignity and menstrual health management kits with unconditional cash support for assistive device that facilitate mobility and help them navigate the challenging circumstances with greater resilience.
- Support affected families of adolescent girls with conditional cash support for two months. These girls are at heightened risk of GBV including child marriage, trafficking and have dropped out from mainstream education.
- Case management of GBV survivors remotely and through facilities where possible, including psychosocial support (PSS)/psychosocial first aid (PFA) and effective referral. Mental and psychosocial helpline services (MHPSS) by counselors for survivors of gender-based violence, including dedicated helplines for adolescents and youth. The helpline service providers are also trained on life-saving referrals for GBV survivors.
- Immediate capacity building of front line non-GBV actors (PIO/DDRO, DWA, DSS, CPP) and other community
 volunteers including adolescents and youth local government representatives particularly female) on how
 to respond to survivors in absence of GBV services, and to the urgent needs and vulnerabilities of
 adolescent girl survivors.
- Coordination: In the eight cyclone-affected areas, GBV cluster together with the Child Protection Cluster will coordinate capacity building initiatives, map response and identify overlaps and gaps.

Response Package

- Dignity kit (DK) for women / women with disabilities/elderly women and transwomen
- Cash for Dignity Kits
- Menstrual health management (MHM) kit for adolescent girls and adolescent girls with disabilities
- GBV Referral package
- Inclusive Dignity kits with cash support for assistive device for women and girls with disabilities
- Conditional cash support to adolescent girls' families to prevent GBV including child marriage.
- Mental health and psychosocial support referral package



Targeting Criteria

Women, adolescent girls, elderly women, transgender, PWD, sex workers, people living with HIV

Response Partners

Oxfam, UNFPA, JAAGO NARI, Prerona, Action Aid, Concern for Women's Development (CWFD), Concern WorldWide, Christian Aid, UTTARAN, Save the Children, BRAC

Contact

Rumana Khan (UNFPA): rkhan@unfpa.org





PEOPLE IN NEED

PEOPLE TARGETED

REQUIREMENTS (US\$)

2.11M



260,247

Humanitarian Impact and Key Immediate Needs

In eight districts, 433,745 people require health services, including 45,543 children under five and 9,976 pregnant women. The critical shortage of safe drinking water and sanitation facilities risks increasing communicable diseases, such as acute watery diarrhea (AWD) and acute respiratory tract infections (RTI), particularly among children. Additionally, 47 per cent of household members have been separated from their families, aggravating mental health and psychosocial well-being. Pregnant women face significant barriers in accessing healthcare due to transportation and financial constraints, and many community clinics at union-level are affected. To address these issues, financial support for transportation purposes (e.g. for going to health clinic), doorstep maternal health care through mobile health camps, reproductive health kits, and ensuring 24/7 functional services for normal deliveries are urgently needed.

Response Activities

- Emergency health care support to the displaced including PWDs and children under five
- Psychological First Aid (PFA) Training for the mental health and psychosocial support services (MHPSS) providers for separated and traumatized persons.
- Deployment of Field Coordinators in three divisions (Khulna, Barisal and Dhaka)
- Conduct crash immunization program in hard-to-reach areas to cover drop-out children
- Support for referral of high-risk pregnant women and sick newborns with complications from hard-to-reach areas to the higher centers.
- Support to restore MNCAH services including provision of necessary logistics, essential medical supplies in primary health facilities in hard-to-reach areas.
- Support repair, renovation of the damaged health facilities and provide necessary equipment and logistics for continuing essential services including safe drinking water supply in Upazila Health Complexes(UHC).

Response Package

- 26 Interagency Emergency Health Kits (IEHK Kits)
- PFA Training for the MHPSS service providers
- Deployment of 3 Field Coordinators including travel cost for five months (for Khulna, Barisal and Dhaka Division)
- Essential supplies and logistics
- Facility readiness include minor renovation and refurbishment of affected facilities
- Deployment of 48 midwives for five months in priority areas
- Mobilization of 72 community health volunteers for five months,
- Deployment of doctors to mentor midwives (eight doctors for five months)
- Social Behavioral Change Communication (SBCC) materials and community outreach



- Distribution of baby kits
- 20 mobile health camps for community outreach
- Cash support to pregnant women in need of emergency obstetric care
- Logistics and supplies for Health Sector Response to Gender-based Violence (HGBV) and setting up confidential spaces
- Support outreach/crash immunization program
- Referral and transport support of high-risk pregnant women and sick newborns from remote areas
- Restoration of MNCAH services, including repair and renovation of the damaged health facilities coupled with necessary equipment and logistics support.

Targeting Criteria

- Displaced population including PWD, women and children suffering from various types of health problems
- Pregnant women and newborn babies
- Adolescent girls and women of reproductive age

Response Partners

DGHS, WHO, UNFPA, UNICEF

Contact

Muhammad Zahidur Rahim (WHO) : rahimm@who.int



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REQUIREMENTS (US\$)

132,000

Humanitarian Impact and Key Immediate Needs

Cyclone REMAL impacted 19 districts and 119 Upazilas affecting 4.6 million people in the coastal district of Bangladesh. Among the 19 affected districts, eight districts were severely affected such as Khulna Satkhira, Bagethat, Barisal, Priojpur, Patuakhali, Bhola and Barguna. In compliance with the early warning system, sea and airports operations were suspended which significantly affected cargo logistics. The electricity supply was also suspended in coastal areas. More than 27,000 mobile network towers were down.

The regional storage facilities are also damaged in Khulna, Barisal and Barguna districts, hence, there is scarcity of safe storage facilities for the relief goods. In addition, as this is post-harvest season, most of the Government warehouses are used for the ongoing procurement of rice and paddy, which limits the storage/ warehousing capacity for humanitarian activities.

As per Rapid Needs Assessment, conducted by the NAWG, disruption were reported in : transport and communications (73 per cent); difficulty in accessing markets, agriculture and livestock services (43.1 per cent), local market functionalities (46.5 per cent), and agricultural activities such as cultivation, fisheries, poultry and livestock(86.3 per cent). About 23 percent of local storage facilities have been destroyed along with HH food storage capacities.

Due to heavy rainfall, prolonged waterlogging the muddy and semi-pacca roads, bridges and culverts were washed away in many places in Khulna, Satkhira, Bagerhat, Barguna, Patuakhali, Bhola, Pirojpur and Barishal districts that are hindering the transport of food and NFIs in affected areas including movement of people for their daily needs.

The unclear status of logistics capacity in the affected districts require immediate capacity assessments to identify specific needs and gaps so that the cluster can provide service to the humanitarian community as a whole. Additionally, it is crucial to activate a regional temporary humanitarian logistics hub with logistics information center to provide support to responders.

Response Activities

- Establish temporary humanitarian logistics hub including logistics information center in Khulna and Barisal regions.
- Logistics vulnerability and capacity assessment in the Cyclone REMAL 2024 affected districts including all three seaports. Evaluate the present status and compile comprehensive information regarding the: road infrastructure, storage, transporter, market and its functionality, and the sources of supply.
- Orientation on Logistics and supply chain management for the humanitarian actors to inform and enhance their logistics capacity.

Response Package

- Logistics hub setup including two mobile storage units (MSU), prefabricated office, generator, pallets and tarpaulins.
- Logistics vulnerability and capacity assessment
- Orientation on Logistics and Supply Chain Management in the eight affected districts

Response Partners

WFP, FAO, UNICEF, Oxfam, BDRCS, IRB, JAAGO NARI, CARE, Action Aid, World Vision, Plan International, Save the Children, Concern Worldwide, UTTARAN

Contact

Akhtarul Islam (WFP) : <u>akhtarul.islam@wfp.org</u>



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PEOPLE IN NEED

PEOPLE TARGETED

REQUIREMENTS (US\$)





198,472

Humanitarian Impact and Key Immediate Needs

Nutritional services are being interrupted due to health facilities being affected by cyclone REMAL at various levels including community clinics at ward level, Family Welfare Centres (FWCs) at union level and severe acute malnutrition (SAM) corners at the Upazila level especially in Morelganj and Mongla of Bagerhat district; Mathbaria, Nagirpur, Bhandaria, Sadar and Kawkhali Upazilas of Pirojpur district; Galachipa and Kalapara Upazilas of Patuakhali district, Pathorghata, Taltali and Sadar Upazilas of Barguna district, and Char Fasion and Bhola Sadar Upazilas of Bhola district.

Pregnant women, lactating mothers, and children are unable to or lack access to health facilities due to road and embankment destruction, and nutrition services are disrupted because of the loss of various essential supplies. Displaced children suffer from a lack of adequate breastfeeding and complementary feeding, pregnant and lactating women (PLW) face challenges in accessing sufficient food, and inundated areas are experiencing increased gastrointestinal and other diseases, all contributing to malnutrition. The families who have lost their crops due to storm surge are suffering from lack of food increasing malnutrition. Therefore, rapid identification, referral and treatment of SAM children, counseling on infant and young child feeding (IYCF) for preventing further deterioration nutritional status, relevant logistics supply and capacity building of relevant nutrition staff are essential. Moreover, coordination with health, WASH, food security departments and child protection are needed for their support.

Response Activities

- Support community outreach for screening, identification, and referral of malnourished children.
- Management of Severe Acute Malnourished Children (SAM)
- Promote and support activities for optimal IYCF
- Capacity building of staff and volunteers
- Monitoring and documentation

Target Criteria

- SAM cut off: WFH <-3 Z score and/or MUAC <11.5cm and/or nutritional oedema (ref: Sphere Handbook 2018, page#226) to detect SAM in all children aged 6–59 months
- MUAC (Mid-upper Arm Circumference) of all targeted children between 6 59 months
- Caregivers of children 0-23 months including pregnant women, lactating mothers, grandmother, adolescent girls



Response Package

Referral and treatment of identified 1,123 SAM children who will receive BDT 3,500/ child (BDT 500 for transportation and BDT 3,000 for additional expenditure in the hospital and wage loss compensation of caregivers).

Response Partners

UNICEF, Ministry of Health and Family Welfare (MoH&FW), National Nutrition Services (NNS), Jagorani Chakra Foundation, NGO Forum for Public Health, CARITAS Bangladesh

Contact

Md Ruhul Amin (UNICEF): mrdamin@unicef.org



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PEOPLE IN NEED

PEOPLE TARGETED

REQUIREMENTS (US\$)

7.93M



262,911

Humanitarian Impact and Key Immediate Needs

According to the Ministry of Disaster Management and Relief (MoDMR), a total of 173,866 houses were damaged, out of which 40,338 houses were totally destroyed and 133,528 houses are partially damaged. People are living in open spaces, inside their damaged houses or being hosted are all unable to meet their basic shelter needs. The cyclone caused severe floods in the affected areas and people have lost essential household items, cooking utensils, among others. The preliminary needs assessment led by the NAWG shows 91 per cent of HHs currently face difficulties in cooking their food resulting in reduced daily food intake. About 93 per cent of HHs livelihoods and income-generating activities have also been disrupted increasing their vulnerability. With their income halted, they are unable to repair or reconstruct their houses on their own. A significant number of HHs remain living in open spaces or inside damaged houses and violence against women and children (VAWC) is on the rise in the affected areas. At this point, the affected people are critically in need of shelter support, which will help them to get back to their normal life, especially women, children, the elderly, PWDs and adolescents.

Response Activities

- **Emergency Shelter Support:** Provision of tarpaulins, toolkits, and fixing materials along with technical guidance to the affected households from severe weather conditions.
- Essential Household Supplies: Provision of vital non-food items (NFIs) such as clothing, mosquito nets, cooking utensils, solar lamp, candles and fireboxes, supplemented with necessary guidance to ensure their effective use.
- House Repair Assistance: Provision of house repair assistance to affected people including technical expertise on Build Back Safer approaches, ensuring a swift return to safety and normalcy through in-kind or cash for shelter modalities.
- Transitional/Core Shelter Support: Provision of technical expertise on Build Back Safer, ensuring a secure, healthful, and private living environment that upholds the dignity of its residents through in-kind or cash for shelter modalities.
- Host Family Assistance: Support to both families hosting and being hosted by friends, relatives, or neighbors. This support encompasses the provision of essential household item kits, cooking equipment, relocation aid, cash support programs, and assistance in expanding living spaces.
- Cash for Work: Provision of cash for work at the HHs level to raise the plinth of the severely affected vulnerable HHs and reconstruction of access roads. Participation of females in the cash for work is prioritized.
- Technical Assistance to the FHH: To ensure effective implementation, with the support of Infrastructural specialists, technical support will be provided to FHHs for best utilization of cash grant for house reconstruction. Technical sessions of house owners and house construction labor for safe house reconstruction/ repairing will be part of the assistance and capacity building of local people.
- Sensitization on Build Back Safer approaches through IEC material and key messages disseminated to affected households.

Response Package

- Emergency shelter support
- Essential Households items
- Housing Repair support
- Transitional Shelter support
- Cash for Work (US\$ 5 8 per person per day)

Targeting Criteria

- Totally destroyed house, heavily or partially damaged house, flooded house, house with blown-off roof.
- Households having lost of essential household items.
- Damaged houses still not reconstructed, needs others assistance and/or less capacity to reconstruct without external assistance.
- Displaced households living in collective centers or with hosted families
- Households living on or outside of embankments.
- Households with vulnerable groups (persons with disabilities, women-headed households, pregnant women, adolescents, elderly people, widow, hijra, without any incomes or very low incomes) will be prioritized

Response Partners

Action Aid, AVAS, BDRCS, BRAC, Caritas Bangladesh, IFRC, IOM, Islamic Relief Bangladesh, Jago Nari, Nazrul Smriti Sangsad (NSS), Norwegian Refugee Council, Plan International Bangladesh, Save the Children, UNDP, Uttaran, World Vision and UNWOMEN.

Contacts

A K M Zahirul Alam (IFRC): akmzahirul.alam@ifrc.org, coord1.bd@sheltercluster.org

Apurba Swatee Mahboob (UNDP): apurba.mahboob@undp.org



🐂 Water, Sanitation and Hygiene (WASH)

PEOPLE IN NEED

PEOPLE TARGETED

REQUIREMENTS (US\$)

3 M

1,019,422

650,000

Humanitarian Impact and Key Immediate Needs

The Water, Sanitation, and Hygiene (WASH) sector has been severely impacted, particularly in the districts of Barguna, Bhola, Pirojpur, Satkhira, Patuakhali, Bagerhat, Barisal and Khulna. More than one million people are in need of water, sanitation and hygiene services. The main affected drinking water sources are ponds, tube wells, pond sand filters (PSF) and rainwater harvesting systems. These water sources were affected by inundation and contaminated by saline seawater and stormwater, thereby disrupting communities' and households' safe water resources and water supply infrastructure. Surface water ponds are widely used to meet domestic water supply needs in this area. Their contamination with fecal matter from the surrounding toilets systems and seawater intrusion is exacerbating the water scarcity. According to the Needs Assessment Working Group (NAWG) findings, 84 per cent and 82 per cent of the affected population reported disruption of their sanitation and water supply services, respectively. The restoration of WASH services is reported by half of the affected population as the top priority life-saving interventions. Initial data from the Department of Public Health Engineering (DPHE) in eight affected districts identified 20,543 water points damaged of which 1,570 are fully damaged) and 134,501 latrines damaged of which 24,407 are fully damaged). Immediate needs include restoration of access to sufficient quantities and quality of water and sanitation facilities which safely contain waste.

Response Activities

- Construct and repair water points (RWHS/Solar PSF/PSF With Force PMD/PSF based UF (Pond)/Community Piped/Submersible/AIRP/Deep TW/TW with RO) to replace destroyed water points, ensuring their climate resilience and undertake water quality testing.
 - Rehabilitate (and disinfect) damaged water points (RWHS/Solar PSF/PSF With Force PMD/PSF based UF (Pond)/Community Piped/Submersible/AIRP/Deep TW/TW with RO) ensuring their climate resilience and undertaking water quality testing.
 - o Repair institutional (schools, health care facilities and other institutions) water facilities.
- Construction of replacement latrines (ensuring climate resilience) to safely contain wastewater.
 - Rehabilitation/decommissioning and disinfection of damaged latrines (ensuring climate resilience) to safely contain wastewater.
 - Repairing institutional (school and other institutions) sanitation facilities.
- **Hygiene promotion** activities with special emphasis on communal adaptive measures for better preparedness and protection from future cyclones and other climatic risks.
 - Installation of handwashing facilities close to latrines.
 - Distribution of key hygiene items and water containers.



Response Package

- Provision of safe drinking water (one water point for 10 families)
- Safe sanitation facilities (one latrine for 3 families)
- WASH Cluster Minimum Hygiene Packages
- WASH Cluster advance hygiene packages
- Hygiene Promotion

Targeting Criteria

- Children and women with disabilities
- PLWs
- Women-headed households
- People on seasonal income
- Marginalized communities
- Fisher men/women

Response Partners

UNICEF, BRAC, BDRCS, World Vision ACF, CARE, Concern Worldwide; Global One; Habitat for Humanity International Bangladesh; IFRC; Islamic Relief Bangladesh; Muslim Aid Bangladesh; Oxfam in Bangladesh; Save the Children; WaterAid Bangladesh; Caritas Bangladesh; DSK; NGO Forum; Rupantar; VERC; Jago Nari, Uttaran, Shushilan, Plan International, Department of Public Health Engineering (DPHE), Environment and Population Research Centre (EPRC)

Contact

Mst Saleha Khatun (UNICEF) : mkhatun@unicef.org



Ways to Support the Response

Donating through the Humanitarian Response Plan

Financial contributions to reputable aid agencies are one of the most valuable and effective forms of response in humanitarian emergencies. Public and private sector donors are invited to contribute cash directly to aid organizations participating in the Humanitarian Response Plan.

Contributing through the Central Emergency Fund

The Central Emergency Response Fund (CERF) provides rapid initial funding for life-saving actions at the onset of emergencies and for poorly funded, essential humanitarian operations in protracted crises. The OCHA-managed CERF receives contributions from various donors – mainly governments, but also private companies, foundations, charities and individuals – which are combined into a single fund. This is used for crises anywhere in the world. Find out more about the CERF and how to donate by visiting the CERF website.

By donating in-kind resources and services

The UN Secretary-General encourages the private sector to align response efforts with the United Nations in order to ensure coherent priorities and to minimize gaps and duplication. To make an in-kind donation of goods or services visit www.business.un.org. Contributions must comply with the Guidelines on Cooperation between the UN and the Business Sector. The United Nations enters into pro-bono agreements with companies planning to provide direct assets or services during emergencies. Contact ocha-ers-ps@un.org to discuss the ways in which your company might partner with the UN. Individuals can donate online via the United Nations Foundation.

Registering and recognizing your contributions

We thank you in advance for your generosity in responding to this urgent request for support. OCHA manages the Financial Tracking Service (FTS), which records all reported humanitarian contributions (cash, in-kind, multilateral and bilateral) to emergencies. Its purpose is to give credit and visibility to donors for their generosity and to show the total amount of funding and expose gaps in humanitarian plans. Please report yours to FTS, either by email to <u>fts@un.org</u> or through the online contribution report form.



For additional information, please contact: Office of the UN Resident Coordinator Office, Bangladesh Aleyda Valdes, Humanitarian Affairs Advisor, valdes@un.org Pankaj Paul, DRR/Nexus Specialist, pankaj.paul@un.org H M Shahid Hassan, Disaster Risk Officer, Shahid.unrcobd@outlook.com

Cyclone Remal

HCTT Humanitarian Response Plan 2024

BANGLADESH