

2016

HUMANITARIAN RESPONSE PLAN Bangladesh Monsoon Floods

15th August 2016



Prepared jointly by Humanitarian Coordination Task Team (HCTT)

SUMMARY

PERIOD

**August – October
2016**

3.7 million

People affected

130,965 persons

Targeted



US\$ 13,620,052

REQUIRED

Background

2016 Monsoon season started on July 22nd. The impact of the monsoon increased gradually over the following weeks. Considering the severe deterioration of the situation, an inter-cluster meeting was organized on August 1st as well as an ad-hoc Humanitarian Coordination Task Team (HCTT) on August 4th that decided to trigger a Rapid Needs Assessment. The Needs Assessment Working Group (NAWG) analyzed the situation and reported their findings to the Department of Disaster Management (DDM) of the Ministry of Disaster Management and Relief (MoDMR) on August 7th. Based on these findings, the clusters/sectors revised their draft response plan and the HCTT Humanitarian Response Plan was presented to the HCTT on August 11th.

3.7 million people across 19 districts of Bangladesh are affected by monsoon-induced floods. 106 people died to date as a consequence of the floods. It includes 96 from drowning and 10 from snake-bite. 7,400 people sought refuge in 69 flood shelters. The official estimates indicate at least 250,000 houses have been destroyed or damaged (Shelter Cluster based on NDRCC reporting, 03.08.16). Riverbank erosion has resulted in a large number of houses and homesteads being washed away.

On August 7th, 16,770 houses/homesteads were reported completely lost with a further 65,156 partially damaged by erosion. The districts which have experienced the greatest impact of the floods are: Jamalpur, Kurigram, Sirajgonj, Tangail, Gaibanda. Together, these 5 districts account for more than 70% of the affected people. All of these districts were also among the worst affected by the flooding in September 2014 affecting around 2 million people in north-western Bangladesh (JNA, 08.09.14). The Rapid Needs Assessment indicated that immediate needs of the population in affected areas are emergency food, drinking water and sanitation. However all sectors are affected and a coordinated multi-cluster/sector response is required.

Strategic objectives

1. To meet protection and life-saving needs of the most vulnerable population
2. To ensure immediate resumption of education activities
3. To support urgent restoration of livelihood opportunities

Map of affected population

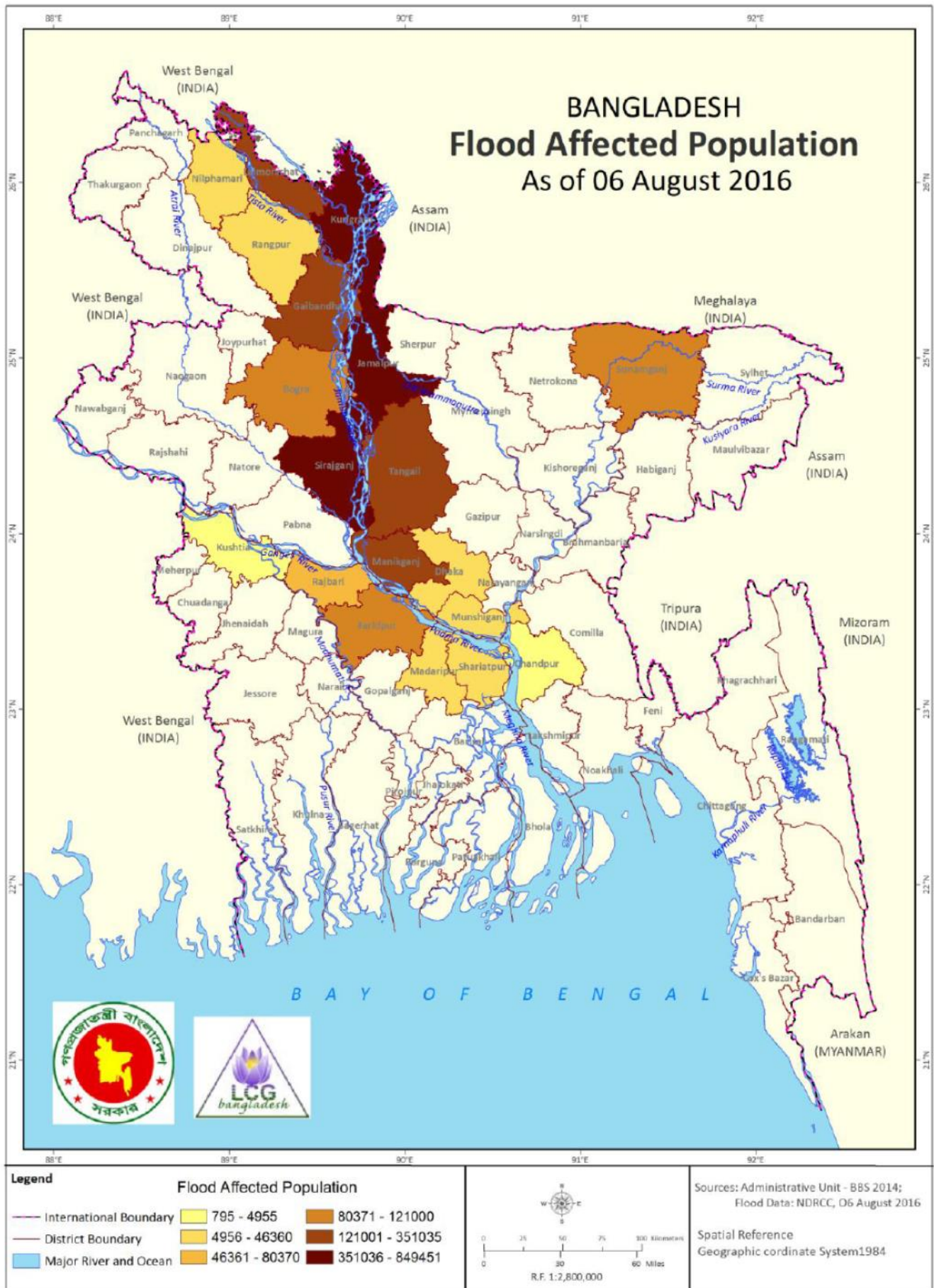


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PARAMETERS OF THE RESPONSE

National emergency response

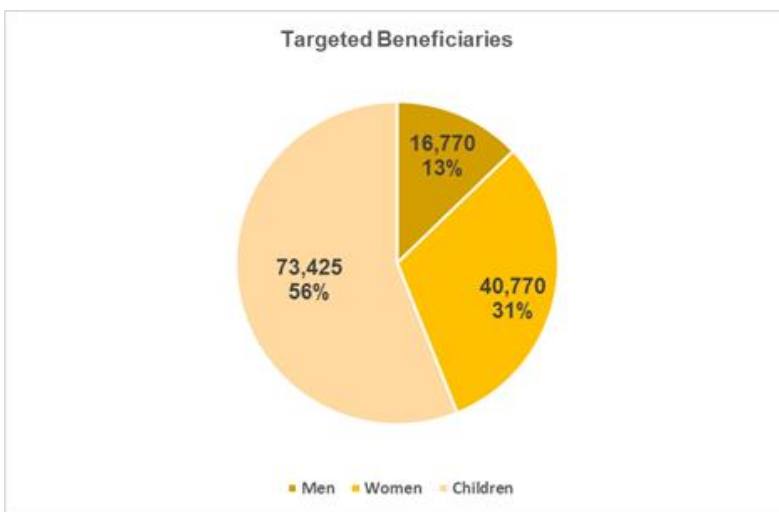
The HRP takes into consideration the immediate response provided by the national authorities to the people affected. The Department of Disaster Management (DDM) of the Ministry of Disaster Management and Relief (MoDMR) was highly responsive to the immediate needs of affected communities. They allocated 10,050 MT GR rice, BDT 42,450,000 GR cash and BDT 22,500,000 for dry food 4,000 packets of dry food (NDRCC, 07.08.16).

People targeted

The total number of people targeted is 130,965. This number is estimated based on the number of households (HH) entirely destroyed by the monsoon floods (16,770). That represents 83,850 individuals (including 50,000 children) who lost entirely their house and belongings in the five (5) most affected and most vulnerable districts out of the 19 districts affected. To that number is added, 23,000 additional children whose access to education needs to resume urgently as well as 24,000 additional pregnant women who need life-saving maternal and newborn health services.

Based on lessons learnt from previous recurrent monsoon floods in Bangladesh, and the information, reports and SITREPs available at the time of the Rapid Needs Assessment, the below needs were most commonly reported. These needs could not be prioritized due to the non-availability of official published damage reports¹. The promoted approach through this HRP is a multi-sector intervention.

- Emergency food (ready to eat food for people without cooking facilities and other appropriate food assistance for those having access to cooking facilities)
- Access to drinking water
- Access to latrines for people who are displaced
- Emergency shelter
- Access to health services
- Protection (including fears of looting and GBV)
- Ensuring children can resume education as soon as possible
- Livelihood recovery (including agriculture, fishery and livestock)
- Housing repair and reconstruction (with a focus on HHs whose houses and land have been washed away)
- Recovery of community infrastructure (including roads, embankments, bridges, schools and any other public buildings that have been affected)



¹ D-Forms

PLANNED RESPONSE

The below table synthesizes the key planned activities of the ten (10) concerned Cluster/Sector.

	Cluster/Sector ²	Activities
1	Child Protection	<ul style="list-style-type: none"> • Conduct a Child Protection Rapid Assessment • Set up 32 Child Friendly Space • Provide 80 psychological and recreational kits • On job training and Follow-up support for staff and animators • Periodic monitoring and evaluation
2	Communication with Communities	<ul style="list-style-type: none"> • Provide lifesaving information to avoid increasing waterborne diseases, drowning and other life threatening risk in a coordinated way. • Promote two-way communication activities that allow affected populations to provide feedback to the decision makers • Support the provision of practical and actionable information for flood affected population
3	Early Recovery	<ul style="list-style-type: none"> • Improving dwelling area and maintain community infrastructure • Support income generating activities for 5,366 households³ • Support local authorities for the development of 5 local recovery plans
4	Education	<ul style="list-style-type: none"> • Provide 41,925 education kits to children from affected districts • Set up 100 temporary learning spaces • Build of 50 new schools/ classrooms/repairing damaged one • Organize one communication campaign in each of the five targeted districts
5	Food Security	<ul style="list-style-type: none"> • Food assistance (in kind or in cash or mix) to 83,850 persons • Livelihood recovery for 16,770 households⁴
6	Health	<ul style="list-style-type: none"> • Provide additional temporary staffing support (deployment of midwives) to Union and Upazilas level health facilities in the most affected areas • Procure and distribute emergency life-saving reproductive health kits to affected Upazilas and Union level health facilities for use by midwives in discharging their duties • Support emergency transport and communication measures for 24,000 pregnant and post-partum women and 16,000 newborn babies
7	Nutrition	<ul style="list-style-type: none"> • Screen 21,000 under five children for malnutrition. • Treat 840 Under five children with Severe Acute Malnutrition (SAM) • Reach 20,000 PLW with conditional cash transfer for availing IYCF-E promotion and support.
8	Sexual and Gender Based Violence	<ul style="list-style-type: none"> • Assist 34,000 women with GBV package • Provide multi-sectoral GBV prevention and response assistance • Procure and distribute Dignity Kits
9	Shelter	<ul style="list-style-type: none"> • Provide emergency shelters and NFIs kits to 16,770 households
10	WASH	<ul style="list-style-type: none"> • Deploy 10 Water Treatment Plant for immediate provision of safe drinking water; • Rehabilitate 4,200 damaged water points • Clean 1,512 ponds • Construct 6,720 improved household latrines • Construct 840 latrines to persons with different needs (elderly, child, disabled) • Provide 4,200 private bathing cubicles for women • Distribute 4,200 Conditional Cash for hygiene kits to affected households • Build 1,512 Solid Waste Dumping Stations • Establish 4,200 Household Drainage System.

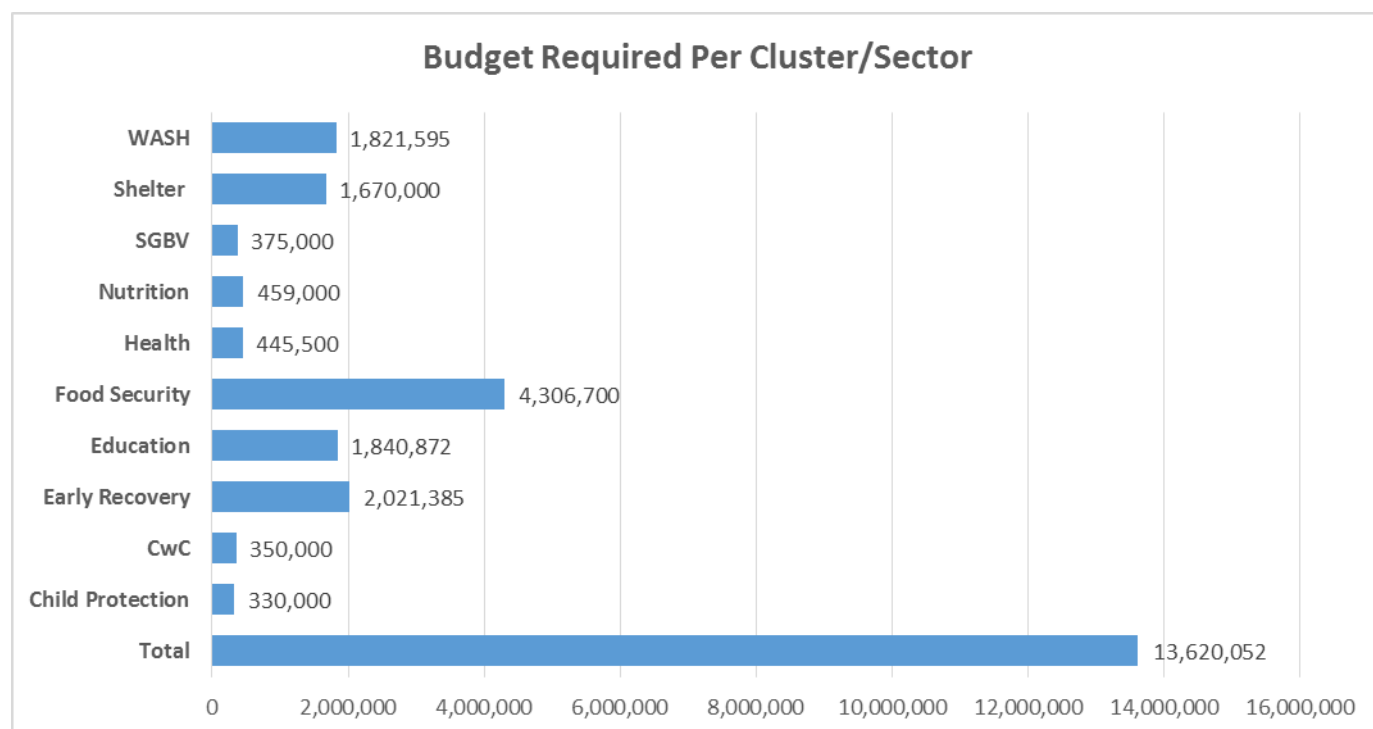
² In alphabetic order

³ FSC Livelihood interventions and ERC Income Generating Activities will be coordinated b/w clusters (i.e. targets, methodology) notably through the district coordination system.

⁴ Idem

Budget required for the response

The budget for the response is US\$ 13,620,052 broken down per concerned Cluster/Sector as per the graph below.



Cross-cutting issues

Beyond the priority sector response plans, humanitarian actors in Bangladesh have focused on a joint approach to a number of key issues:

1. *Humanitarian principles:* The HCTT will guide its response by focusing services on those with the greatest needs and maintaining impartiality;
2. *Community Engagement:* The HCTT will involve affected communities in the design, planning, management, implementation and evaluation of programmes. The HCTT will also seek feedback from the communities on the implementation of the JRP interventions.
3. *Government ownership:* The HCTT will promote GoB's leadership of the cluster/sector responses.

Implementation and coordination

The Humanitarian Coordination Task Team (HCTT) that comprises the cluster/sector leads and co-leads will ensure the coordination and the follow-up of the implementation of the activities at the central level. In addition, a district area-based coordination system will be promoted to ensure a more integrated approach per affected district. Therefore, a UN Agency or an INGO will be responsible for the coordination of activities in each affected district. These Agencies will work in close collaboration with the respective District Commissioners and help distinguish short-term and long-term needs and streamline communication to the HCTT. This area-based coordination arrangement will also have the advantage to provide both ways real-time information between the district authorities and the HCTT.

Monitoring and Evaluation

Cluster/Sector Leads/Co-Leads will ensure the monitoring of their respective cluster activities based on their implementation plan that will include expected results and targets. Cluster/Sector Leads/Co-Leads will also take into account the feedback of communities in the monitoring of the implementation of their respective activities. The HCTT will also play a role in monitoring the response and provide appropriate guidance to the Cluster/Sector Leads/Co-Leads.

Resources mobilization

HCTT Members will circulate the HRP to their partners and to the donors. The objective will be to mobilize the required funding for allowing the much-needed comprehensive multi-sectoral assistance. The second objective will be to expand the donors' base to non-traditional donors for humanitarian activities in Bangladesh. The HCTT will explore ways to develop partnerships with the private sector in order to receive in cash or in-kind donations from interested actors willing to contribute to the response as part of their Corporate Social Responsibility programmes. DFID has already committed 500,000£ through the START Funding. Several organizations are already started responding using their own funds.

Communication

During the two (2) first months of implementation period of the response plan, the Humanitarian Coordination Task Team (HCTT) will issue a weekly SITREP to report and to update the international community on the needs, the response and gaps. Communication with communities' activities will be coordinated by Shongjog – a multi-stakeholder platform including national and international NGOs, UN agencies and government. The coordination function is already funded through the DFID Disasters & Emergencies Preparedness Programme, and BBC Media Action currently hosts the secretariat. Implementation of communication activities on the ground will be undertaken by Shongjog member agencies according to their expertise, capacity and ground presence. Activities will, wherever possible, build on existing communications products, channels and initiatives. Where no existing channel is in place, then the Shongjog will work to establish new mechanisms of communication where appropriate. This will be particularly important in harder to reach areas and with marginalised communities; and in areas where traditional media is not widely accessible. Shongjog agencies will use their existing ground presence to develop effective and efficient communication mechanisms in these areas.

Cash Assistance

HCTT Members recognized the challenges related to unconditional cash assistance. HCTT Members agreed to support objective oriented cash assistance to ensure achievement of the assistance purpose. HCTT Members also agreed that cash assistance needs to respect commonly agreed packages and that interventions need to be discussed with and supported by Cluster/Sector Leads/Co-Leads.

CLUSTER/SECTORS' RESPONSES PLANS

The next pages present the Cluster/Sector Response Plans. The information is provided in alphabetical order.

Child Protection

Rationale:

Child protection is a fundamental issue in all affected districts in relation to the floods. Following are some facts and figures identified and analyzed from secondary sources particularly based on the Rapid Needs Assessment (RNA) report of Plan International Bangladesh.

- The situation has significantly impacted children and is exposing them to a variety of risks. There are reports of a large number of children staying in shelters without adequate care including food, water, hygiene, education & recreational facilities.
- The risk of children becoming involved in child labour and hazardous work has increased as HHs try to recover lost income. There is also an increased risk of trafficking, especially for those children left alone.
- Given the lack of supervision/support of parents, there is an increased risk of drowning and exposure to animal bites.
- Young and adolescent girls have been found to be particularly at risks of physical abuse, SGBV, emotional ill-treatment, and being unable to maintain proper hygiene.
- Adolescent girls are facing further risks given the levels of privacy for being able to access toilets during the daytime. Many are reporting waiting until nightfall to be able to go to the toilet which both increases health and security risks of walking to remote open places for open defecation at night. Many girls are reporting being unable to adequately keep menstrual hygiene.

Objective:

To address the issue of protection risks, needs and priorities of boys & girls (age 6-10), adolescents (Age 11-15) from the selected affected areas, notably through Child Friendly Spaces (CFS)

Top-priority activities:

Activities	Locations	Indicator	Target
Child Protection Rapid Assessment	2 districts	Availability of the assessment report	1
Set up and Organize Child Friendly Space ⁵ / Establishing CFS (temporary structure or renovation of any existing space to have a child friendly environment) including phase-out strategy in selected locations of Kurigram district	5 Districts	Number of CFS set-up;	32;
		Number of children reached through CFS;	1500;
		Number of psychosocial and recreational kits provided;	80;
		Percentage of referred cases managed and registered	100%
On job training and Follow-up support for staff and animators	5 districts	On-job training undertaken	1
Periodic monitoring and evaluation	5 districts	Monitoring and evaluation undertaken	1

Target beneficiaries:

Direct beneficiaries: 1,500
Indirect beneficiaries: 5,500
Total: 7,000

Budget requirements:

US\$ 330,000

Budget Details:

⁵ CFS will be implemented with the following provisions: Birth registration and early identification of the vulnerabilities; Case management for assessing vulnerabilities (individual needs); Structured psychosocial care sessions/activities (support groups counseling, mentoring art, sports and recreational activities); One hot meal (if necessary); Hygiene promotion and health promotion; Referral to other basic services/alternative care (case by case based on individual need).

Child Protection	Unit	Budget (USD)
<ul style="list-style-type: none"> Based on the assessment set up 32 Child Friendly Space in 5 priority districts reaching 1500 children with of 80 psychosocial and recreational kits 	1500 children's x 220 USD	330,00.00

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Communication with Communities

Rationale:

The HCTT Multi-sector Rapid Needs were analysed based on the secondary data review and voice of affected communities are not directly reflected to identify the specific needs and priorities at a district level. On the other hand secondary data analysis also highlighted the lack of available information for communities to save lives and take action. Daily Star, English daily newspaper also report on 6th August 2016 that due to lack of awareness among the flood victim, they are drinking floodwater-mixed water and are being affected by different waterborne diseases. Affected people also need information to access services or make the best decisions for themselves and their communities. Additionally, agencies can manage communities' high expectation to receive aid by communicating effectively with affected population and enable them to support ongoing response.

Besides coordinated community engagement and communication can reach out people not directly targeted by the response but highly affected as well, ensuring that they have best possible information and advice to assist them to recover and response any further flood in coming days. Resourced two way communications also provide an opportunity for communities to share their voice and choice with decision makers and agencies who are responding. SHONGJOG – the multi stakeholder platform on Communication with Communities in Bangladesh will coordinate the activities.

Objectives

- To provide immediate coordinated life savings information to avoid increasing waterborne diseases, drowning and other life threatening risk;
- To support clusters effectively engage and communicate with communities to fully involve affected population in their response for better service delivery (e.g. importance of resumption of education activities);
- To provide practical information and advice to household not receiving appropriate aid enabling them to take self-action in response to the needs they face;
- To provide a channel for communities to ask questions; raise issues and complaints; and provide feedback to humanitarian actors;
- To develop understanding of all affected communities about the potential floods to prepare them in advance;
- To liaison with national and regional media and communication outlet to ensure they provide useful information and coordinated practical advice to the affected population.

Top Priority Activities

Activity	Locations	Indicator	Target
Provide lifesaving information to avoid increasing waterborne diseases, drowning and other life threatening risk in a coordinated way.	Nationwide targeting specifically flood affected population	Number of death will decrease and people will take action to avoid the waterborne diseases.	16,770 household ++
		National and regional media disseminate life savings information	15 media outlet
Number of responding agencies disseminating coordinated communication materials and engaging affected population with their response	5 districts	People will support ongoing flood response and take self-help initiative.	8,000 household
		Agencies will equipped to engage people to manage communities expectation and enable them for self-help	20 Agencies
Two-way communication activities that allow affected populations to provide feedback to the decision makers	5 districts and Dhaka	Communities will have access to provide their concern and raise their voices	8,000 household ++
		Key decision makers will be inform about the community perception and their concern	20 Agencies
Media will involve to provide practical and actionable information for flood affected population	Nationwide targeting specifically flood affected population	Number media will engage to support ongoing flood response.	15 national and regional media outlet
		Affected people will get critical information for flood response and recovery	16,770 household ++

Target beneficiaries:

Cross sectoral intervention, it will reach affected population nationwide. Maximum household proposed for this intervention is 16,700 HH.

Budget requirements:

US\$ 350,000

Budget Details:

Communication with Communities	Unit	Budget (USD)
<ul style="list-style-type: none">• Provide lifesaving information to avoid increasing waterborne diseases, drowning and other life threatening risk in a coordinated way.• Promote two-way communication activities that allow affected populations to provide feedback to the decision makers• Support the provision of practical and actionable information for flood affected population	BULK	100,000.00
	BULK	50,000.00
	BULK	100,000.00
	BULK	100,000.00

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Early Recovery

Rationale:

The Government of Bangladesh estimated that 3.7 million are affected due to Monsoon flood across 19 districts. Around 1,018,779 people are affected who are living lower poverty line. Floodwaters recedes now in the country's north and northeast, leaving trails of massive damages to crops, houses, bazaar, roads and dykes. Farmers and fishing communities lost hectares of farmlands and farm products in granaries reserved for future consumption and for sale, leaving affected families with no alternative means of livelihood, i.e aman paddy fields, saplings and seed beds have been flooded. Community infrastructure, for example, schools, bazar/hut, connecting road have been damaged partially or washed way. In this emergency phase, immediate livelihood support through CASH for Work/Food for Work in improving road conditions will enhance mobility of the affected population. Livelihood support for the next planting season is recommended by the community, in case of fishermen, fishing tools/cash should be provided to help them to restore livelihood. Following the field investigation and media report, it has been confirmed that there is a huge need of early recovery facilities in the affected Upazilas of selected districts, for example, community infrastructure rehabilitation, to improve access to basic services as well as revitalize the local economy; Crop damage recovery by cash grant and provide assistance to the local government for making suitable recovery plan The targeted geographical location for ERF response will be Jamalpur, Kurigram, Sirajgonj, Tangail and Gaibanda as because 70% of the most affected people reside in these five districts and most of them are living below poverty line, i.e Kurigram in IPC 4 category and Jamalpur in IPC 3 category. Till date. The D-form is not produced by the government, therefore, Upazilas wise information will be added with after thorough field investigation by the ERF team following the availability of D-Form. The total number of beneficiaries will be 1,677 HHs, 10 % of 16,770 households (40 % men, 60 % women).

Objectives:

To improve dwelling area and to maintain community infrastructure; To support income generating activities in order to revitalize the local economy; To strengthen local government capacity for relief and recovery planning, coordination and implementation and, for local risk management.

Top-priority activities:

Activity	Locations	Indicator	Target
Improving dwelling area and maintain community infrastructure	5 districts	Percentage of targeted areas and infrastructures improved and maintained	100%
Support income generating activities for 5,366 households	5 districts	Percentage of targeted households effectively supported	100%
Local governance support, strengthening local government capacity for relief and recovery planning, coordination and implementation, improving the capacity for local risk management.	5 districts	No of recovery plans are made in collaboration with local government	5

Target beneficiaries:

16,770

Budget requirements:

US\$ 2,021,385

Budget Details:

Early Recovery	Unit	Budget (USD)
• Improvement of dwelling areas and maintenance of community infrastructures;	1	1,425,500
• Support off-farm livelihoods activities through cash grant to basic services as well as revitalize the local economy for 5366 households	5,366 HH x 110 USD	590,260
• Support local authorities for the development of 5 local recovery plans	5 Plans x 1125 USD	5,625

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Education

Rationale:

Almost all the schools are affected in the flooded areas of the country, either by being inundated or eroded or by being used as flood shelters. This seriously hinders access to education for children in the affected areas. More than 1,500⁶ schools have already been reported by Government as directly affected by the floods. For example in Gaibandha district as of 1st of August classes were suspended in all 106 affected schools⁷. In Kurigram – one of the worst affected district around 43,000 students of 248 primary schools have been badly affected as their dwellings and schools have been inundated by the flood waters, according to district primary education office (DPEO) sources. According to the same sources, the schools have been closed for around two weeks. The situation with access to education in the affected areas is worsened by the fact that children lost their books and other education materials⁸. Global evidence suggests the longer the period for resuming education process interrupted during emergencies and natural disasters, the higher risk of dropping out of children from school. With already alarming figures of out of school children in Bangladesh (more than 1 in 4 school age children⁹ – some 6.2 million currently are out of school) and low performance of students (only 25% of Grade 5 students reach the standards in Bangla and Math in 2013), the education should be given high and urgent priority in the current floods response. Overall, at least 3% of the students in Bangladesh have been found to drop out of school as a direct result of floods and cyclones, with a negligible gender difference¹⁰. However as they get older, girl children, especially in class four and five, face specific challenges accessing education during disasters due to: household responsibilities; early marriage; and privacy related issues such as absence of separate toilets in the school¹¹.

Objectives:

- Restore access to education for children in the affected areas in schools or temporary learning spaces
- Ensure coordination and advocacy efforts to find alternative spaces for shelters and ensure repair of schools that were used as shelters are included in the response plans of respective clusters
- Repair and/or build additional classrooms and WASH blocks in the worst affected schools

Planned cluster interventions will allow more than 100,000 students in 665 schools affected by floods in 5 priority districts to resume their schooling in restored school environment or in temporary learning spaces; and more than 40,000 children from the households which were completely destroyed during the floods to receive education kits consisting of essential learning materials to resume their education.

Immediate response:

- Collect Upazilas wise detailed information on number of schools where classes were suspended either because of structural damages or due to schools being used as temporary shelters;
- Education line departments should continue to request local education officials to work with communities for identifying alternative learning spaces, wherever possible, that are safe for children to continue their education. Local education officials should also guide closed schools in adapting their academic calendar to accommodate for shortened contact hours during the flooding;
- As soon as water goes down and poses no danger for children to access schools, resume education process in the schools or in temporary learning spaces;
- Distribute education kits (Annex 1) for school age children of the affected/targeted areas;
- Coordinate with WASH, Protection and Shelter clusters on response plans including advocacy to target schools or temporary learning spaces
 - For schools occupied as shelters, the management of the shelter should ensure to safeguard education materials and WASH facilities
 - Coordination with the Child Protection Cluster to ensure that children continue their education in child friendly places in case those are set up in the affected areas
- Organize community mobilization campaign among parents, School Management Committees and other key stakeholders on importance of restoring education process interrupted during emergencies and natural disasters. The aim of the campaign is to ensure children's education is restored as soon as possible and parents as well as primary caregivers see short term and long term benefits of education. This is especially important as lessons learned from past disasters indicate that when poor/vulnerable families are impacted in terms of livelihoods and shelter, children in those households are at risk of missing school due to the need to support their families.

⁶ According to preliminary data from Directorate of Primary Education

⁷ As reported by UNICEF quoting sources from respective DPEO offices

⁸ The daily Star: August 04, 2016

⁹ Multiple indicator cluster survey 2012-2013

¹⁰ Plan and SCI 2010

¹¹ ibid

Medium and longer term:

- Organize comprehensive school damage assessments and develop a plan for their rehabilitation and renovation. Include schools completely damaged during floods into a priority list for Government financed school building initiative;
- In close collaboration with Ministry of Primary and Mass Education, Directorate of Primary Education, Department of Disaster Management and Local Government Engineering Department to engage in discussion on Comprehensive School Safety.

Top-priority activities:

Activities	Locations	Indicator	Target
Providing 41,925 education kits to children from affected districts	5 districts	Percentage of education kits delivered	100%
Setting up 100 temporary learning spaces	5 districts	Percentage of temporary learning spaces set up	100%
Building of 50 new schools/classrooms/repairing damaged one	5 districts	Percentage of new schools/classrooms built	100%
Organizing one communication campaign in each of the five targeted districts	5 districts	Number of communication campaign organized	5

Target beneficiaries:

71,925 children

Budget requirements:

US\$ 1,840,872

Budget Details:

Education	Unit	Budget (USD)
• Provide 41,925 education kits to children from affected districts	41,925 Kits x 10.58 USD	443,437.00
• Set up 100 temporary learning spaces	100 TLS x 3846.15 USD	384615.00
• Build of 50 new schools/ classrooms/repairing damaged one	50 CR x 1923.76 USD	961,538.00
• Organize one communication campaign in each of the five targeted districts	5 Districts x 10,256.40 USD	51,282.00

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Food Security

Rationale:

For most of the affected districts the main livelihoods are agriculture based daily wage labour. These communities suffer from high levels of chronic poverty. The previous IPC acute and chronic analysis conducted in the North West revealed a high level of acute & chronic food insecurity, indicating an underlying vulnerability to any shock including that which these floods present. Sunamganj and Kurigram are classified in chronic IPC level 4 (severe food insecurity) while the other most affected districts are classified in level 3 (moderate food insecurity). The food consumption pattern is poor with more than 30% of HHs in affected areas experiencing poor and borderline food consumption against a national average of 15%. Dietary diversity of women is particularly poor, with consumption of protein highly inadequate. Only 4% of children are meeting the minimum dietary diversity which compares poorly with the national average of 24 % (BDHS, 2011).

Food insecurity is also associated with seasonality in the affected areas. Almost every year there is a shortage of food in October and November, known as the monga (or lean) season. During flooding, cropland and homesteads are inundated with water causing severe damage to standing crops. This will have a serious impact on job opportunities for daily labourers. Reports suggest that sources of livelihoods have been destroyed, including fish farms and paddy fields, farmers have no seeds and there is a growing lack of fodder for cattle. Households affected by flooding report the adoption of the following coping strategies:

- Distressed assets selling such as livestock;
- Migrating to non-affected areas to find work opportunities (e.g. as agricultural day labour, rickshaw puller, household help and non-agricultural day labour, reduction in meal frequency and size (Food Security Cluster - DFP-North West, 10/09/2015).
- Households are eating less than three meals a day (Oxfam 48 Hour Assessment, Kurigram, 3.08.16)

The current needs as described in the Sitreps compiled by the INGO-ESC (Sitrep, INGO-ESC Flood 03.08.16) and field observations (by Local NGOs and WFP) mention food assistance as one of the priority needs. This will be followed by longer term livelihood recovery needs.

Objective:

To meet the short term food security needs of vulnerable population affected by the floods until the next cropping season

Top-priority activities:

Activities	Locations	Indicator	Target
Food assistance (in kind or in cash or mix)	5 districts	Percentage of targeted population that received the food assistance package Percentage of resource received vs. targeted	100%
Livelihood recovery	5 districts	Percentage of targeted population that received the livelihood recovery assistance Percentage of resource received vs. targeted	100%

Target beneficiaries:

83,850 (equivalent to 16,770 Households)

Budget requirements:

Food assistance: US\$ 2.462 million

Livelihood recovery: US\$ 1.844,700 million

Budget Details:

Food Security	Unit	Budget (USD)
• Food assistance (in kind or in cash or mix) to 83,850 persons (16770 HH)	16770 HH x 146.81 USD	2,462,000.00
• Livelihood recovery for 16,770 households	16770 HH x 110 USD	1,844,700.00

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Health

Flooding in Bangladesh has started during the 3rd Week of July 2016; out of 19 affected districts, five are affected severely. To date, 106 people died (96 from drowning and 10 from snakebite) and 12 216 people suffered from flood related diseases between 25 July and 09 August 2016¹². Water and sanitation systems have been disrupted, triggering an increase in water borne disease such as diarrhea, skin and eye infections. The floods have triggered other related such as reproductive health problems, mental health problems that require immediate emergency comprehensive health care services. The Health Cluster is already responding with its own resources (US\$ 560,000) in several ways:

- Intensification of health promotion
- Ensure adequate support supply of Emergency drugs
- Increase primary health care services
- Provision of mental health and psychosocial support
- Availability or reproductive health services
- Ensure optimum level of coordination

In addition to that, it is estimated that there are over 24,000 pregnant women in the five targeted districts, and 12,000 of them will deliver over the next three months. All pregnant women need urgent life-saving maternal and newborn health services. These services include quality antenatal care, skilled birth attendance, emergency obstetric and newborn care (EmONC) and post-natal/newborn care. The RH interagency minimum initial service package (MISP) is a sphere standard for providing these basic emergency response services and requires no assessment. Several of the affected districts already have poorer reproductive health indicators when compared to the national average. Access to facilities is likely to be impaired secondary to road and facility infrastructure damage. In addition, health is likely to receive less priority during emergencies as families need to refocus on rebuilding shelters and restoring livelihood, critical maternal and newborn health needs can easily be neglected, thus increasing risk for life threatening conditions including pregnancy related complications and death. In addition, women and girls risk gender based violence in such situations and need timely prevention and treatment services.

Objectives:

To assist 24,000 pregnant women and 16,000 newborns with a focus on life-saving maternal and newborn health. Attention will be given to increasing access to quality prevention and treatment of pregnancy related complications, particularly for the most affected vulnerable women and girls, in areas where the health facilities are under staffed and less/not equipped with lifesaving essential maternal health supplies. This extra support will ensure mothers and newborns have no unnecessary loss of life or deterioration in health.

Top-priority activities:

Activities	Locations	Indicator	Target
Provide additional temporary staffing support (deployment of midwives) to Union and Upazilas level health facilities in the most affected areas.	5 districts	Percentage of Upazila and Union health facilities in the affected areas provided with 24/7 EmONC services	100%
Procure and distribute emergency life-saving reproductive health kits to affected Upazilas and Union level health facilities for use by midwives in discharging their duties	5 districts	Percentage of Upazila and Union health facilities in the affected areas that received essential maternal health supplies	100%
Support emergency transport and communication measures for pregnant and post-partum women and their newborn babies	5 districts	Percentage of visibly pregnant women who were supported to attain emergency transport and communication	100%

Target beneficiaries:

24,000 pregnant women (15-49 years old)
16,000 newborns

Budget requirements:

US\$ 445,500

¹² Source: National Health Crisis Management Crisis Centre and Control Room, DGHS

Budget Details:

Health	Unit	Budget (USD)
<ul style="list-style-type: none">• Provide additional temporary staff for 24X7 EMONC services (deployment of midwives) to Union and Upazilas level 100 health facilities in the 5 most affected Districts to support 24000 pregnant and 16000 newborn babies.• Procure and distribute emergency life-saving reproductive health kits to affected Upazilas and Union level health facilities for use by midwives in discharging their duties• Support emergency transport and communication measures for 2000 pregnant and post-partum women	100 HF x 3200 USD	320,000.00
	90 Kits x 1333.33 USD	120,000.00
	3500 PLW x 25.54	89,390.00

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Nutrition

Rationale:

The pre-crisis nutritional situation of the 5 most affected districts (Kurigram, Gaibandha, Tangail, Sirajganj and Jamalpur) can be classified as “alert”. Global Acute Malnutrition(GAM) rate was 9.58% of which Severe Acute Malnutrition(SAM) was 3.1% as per Multiple Cluster Indicator Survey(MICS 2013).Considering the poor pre-crisis nutrition status as well as the aggravating factors the nutritional situation of the population can easily deteriorate following the ongoing flood situation. To alleviate the possible negative consequences of the current disaster situation, nutrition situation aimed at supporting the vulnerable groups i.e. under five children as well as pregnant and lactating women (PLW) are proposed to be intervened. There are currently 25 Government hospitals in the 5 affected districts that have all the supplies and capacity to provide treatment of children SAM. The proposed interventions will therefore be designed and implemented to support the existing mechanism. The focused reasons for the intervention are the High pre-crisis prevalence of malnutrition; Global Acute Malnutrition 17% (BDHS 2014, Underweight 33% (MICS 2013), Stunting 48% (MICS 2013) and the sub optimal infant and young child feeding practices in the affected areas.

Objectives

To improve the nutritional status of the vulnerable groups i.e. under five children as well as pregnant and lactating women (PLW). Community outreach component will be implemented to help in screening, detection and referral of malnourished children to the target hospitals. A cash transfer of 3000 BDT will be provided as a one off support for each child to cover transport and upkeep while in the hospital to complete full treatment. Experience has shown that, many children are not referred and taken to the facilities once identified and when they do, they leave hospital before completion of full treatment. Additionally PLW will be provided a one off conditional cash transfer of 1500 BDT for availing IYCF-E counselling and promotion.

Top Priority Activities

Activity	Locations	Indicators	Target
Screening of children under 5 for malnutrition	5 districts	% of children identified as SAM and MAM	100%
Cash transfer to cover referral and hospital costs for children with Severe Acute Malnutrition(SAM)	5 Districts	% of targeted children with SAM who benefited from cash transfer	100%
Cash transfer to pregnant and lactating women(PLW) to cover additional nutritional needs and IYCF-E counselling	5 districts	% of targeted PLW who benefited from cash transfer	100%

Target beneficiaries:

41,000 individuals including 21,000 children under five years and 20,000 Pregnant and Lactating Women (PLW).

Budget requirements:

US\$ 459,000

Budget Details:

Nutrition	Unit	Budget (USD)
• Screening of children under 5 for malnutrition	21,000 U5 children x 3USD	52,500
• Cash transfer to cover referral and hospital costs for children with Severe Acute Malnutrition(SAM)	840 U5 Children X 38 USD	31,500
• Conditional cash transfer for PLW for availing IYCF-E promotion and support.	20,000 PLW X 19 USD	375,000

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Sexual and Gender Based Violence

Rationale:

The monsoon started on 19 July 2016 and flooding began which is predicted by the experts to be more damaging this year than the recent years. As of 9 August 2016, an estimated 3.7 million people affected and 94 deaths reported across 19 districts. Most affected districts are Jamalpur, Kurigram, Gaibandha, Sirajganj and Tangail districts. These districts account for over 70% and the estimated number of women of reproductive age in these districts is 715,000. Women and girls in Bangladesh are already at high risk of GBV (24% of married women suffered from sexual violence in the last 12 months) and subject to limited decision-making power, even in a normal setting. Out of all GBV cases, 38.8% indeed resulted in death of the victims (including homicide, suicide, etc) 3.14% of all maternal deaths were attributed to violence. In an emergency situation, these women's and girls' vulnerability to GBV increases⁴, because of heightened level of stress, restricted mobility and privacy, and disrupted services and weakened protection. Not only protecting those affected women and girls from losing their life to GBV, emergency response must also ensure that the survivors of GBV can mitigate high life-threatening injuries and long-lasting traumas even when they managed to avoid losing their lives. In a disaster response, usually other traditional and more obviously life-saving clusters tend to attract more attention, and much less for GBV, compounded by weakened social network for psycho-social support for affected women and girls. However, humanitarian actors have increasingly acknowledged the high life-threatening and long-lasting traumas ensuing from GBV even when the survivors did not lose their lives, and hence the need to fully integrate GBV prevention and response in all phases of the humanitarian preparedness and response. Humanitarian actors have increasingly acknowledged the high life-threatening and long-lasting traumas resulting from GBV even when the survivors did not lose their lives, and hence the need to fully integrate GBV prevention and response in all phases of the humanitarian preparedness and response.

Objectives:

The GBV package for immediate response during the first 3 months will be targeted for the most vulnerable women and girls, to ensure their safety and dignity, including for the prevention of child marriage. The GBV cluster will target 34,000 women and adolescents of 15-49 likely to experience any form of physical violence: 34,000 including 3,500 most likely to experience sexual violence during three months long response period.

1. Multi-Sectoral GBV Prevention and Response
 - Ensure increased patrol by law enforcement agencies
 - Establish 2 Women Friendly Spaces (WFS) to provide protection, referral, psycho-social counselling, information on available GBV services, SRHR services including family planning, income generating activities, negative consequences of child marriage, etc
 - Capacity building on psycho-social counseling and first-aid support among social workers, volunteers and other service providers
 - Procurement and provision of 15 sets of the latest life-saving Rape Treatment Kits
 - Orientation of health service providers in 5 district level hospitals and 10 upazila health complex on the use of the Rape Treatment Kits
 - Strengthen community-based monitoring of GBV by establishing 10 Community Watch Groups
 - Develop, print and distribute 10,000 IEC materials on GBV prevention and response
 - Conduct awareness raising sessions targeting the affected communities using different media
2. Procurement and distribution of "Dignity Kits"
 - Procure and distribute 7,000 "Dignity Kits" filled with traditional and culturally appropriate clothes, sandal, and essential hygiene supplies like toothbrush, toothpaste, shampoo, soap, detergent, sanitary napkins and underclothes, as well as flashlight and whistle to mitigate risks of GBV
3. GBV coordination, data management, and mainstreaming
 - Establish and strengthen GBV coordination mechanism in the national humanitarian architecture
 - Ensure that GBV concerns are mainstreamed in other key sectors (i.e. Shelter, WASH, Food Security)
 - Contribute to future needs assessment, such as JNA Phase II if/when conducted, to assess the status of women and girls affected by violence
 - Continue to support the activation of the 'GBV module' integrated in the Bangladesh Police Criminal Data Management System (CDMS)

Top-priority activities:

Activities	Locations	Indicator	Target
Provision of multi-sectoral GBV prevention and response assistance	5 districts	Percentage of targeted population effectively covered by the multi-sectoral GBV prevention and response assistance	100%
Procurement and distribution of Dignity Kits	5 districts	Percentage of targeted population that received the dignity kits	100%

Target beneficiaries:

34,000 women and adolescent girls (b/w 10-49 years old)

Budget requirements:

US\$ 375,000

Budget Details:

Sexual and Gender Based Violence	Unit	Budget (USD)
• Enhance multi-sectoral GBV prevention and response assistance to 34,000 women	34,000 women x 3.53 USD	120,000.00
• Procure and distribute Dignity Kits		200,00.00
• Strengthened GBV coordination, data management and mainstreaming	1000 PLW x 20 USD BULK	55,000.00

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Shelter

Rationale:

Government information on damaged houses in the affected districts indicates that 16,770 houses were fully damaged. Shelter is more than a roof over a head to cover people and protect them from the elements. It is a holistic concept of interlinked issues such as physical safety and security, privacy, comfort, health, well-being and livelihood. Without access to sufficient shelter affected people are exposed to the monsoon rains and other weather elements as well as possible protection risks, especially for women and girls. Moreover, there is high risk of mud built houses collapsing after the flood water recedes. If the forecast for another flood in the same region happen then these fragile houses will be affected and the number of damage shelter will go high.

Objectives:

Applying the Bangladesh Shelter Cluster Guidelines and Standards, to provide Emergency shelter support (In cash, 5000 BDT value, or in-kind items include tarpaulin, rope, bamboo, nails, hammer, knife, hand saw, shovel, hoe and cash for labour) and NFIs (In cash, 3000 BDT value, or in kind items package include cloth, blankets, kitchen utensils set, candle). This support would give emergency shelter to affected population displaced, or in their homestead, as protection from further monsoon rains, increase privacy, increase general well-being and comfort.

Top-priority activities:

Activities	Locations	Indicator	Target
Provision of emergency shelters and NFIs kits	5 districts	Percentage of targeted population that received the shelter assistance package	100%
Provision of NFIs kits	5 districts	Percentage of targeted population that received NFI assistance package	100%

Target beneficiaries:

83,850 (equivalent to 16,770 Households)

Budget requirements:

US\$ 1.670 million

Budget Details:

Shelter	Unit	Budget (USD)
• Provide emergency shelters and NFIs kits to 16,770 households	16,770 HH x 99.58 USD	1,670,000.00

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WASH

Rationale:

The rapid assessment revealed the adverse impact of the flood on WASH facilities in all the affected districts with varying degrees of severity. Access to safe drinking water dropped by as high as 50% in some of the affected districts due to extensive damage to water points (more than 25,000) while in some districts more than 50% of the household sanitation facilities have been washed away. The tube-wells serving as the main sources of drinking water in most of the affected districts have been damaged and heavy contaminated with effluents from household sanitation facilities. The hygiene and general environmental sanitation situations in the areas are poor with the high risk of occurrence of water and sanitation related diseases, if not urgently addressed. There were safety concerns especially for women on access to latrines and bathing facilities almost in all the affected districts. Efforts are being made by International NGOs, National NGOs, UN agencies and governments to respond to the deplorable WASH situations in affected districts but to the magnitude and spread of the damage to WASH facilities, most of the affected population are still without safe drinking water and sanitation facilities.

Objective:

Respective of the WASH standards, to provide comprehensive WASH package to mitigate post flood disease outbreaks

Top-priority activities:

Activity	Locations	Indicator	Target
Safe Drinking Water:			
<ul style="list-style-type: none"> ▪ Deploy Water Treatment Plant for immediate provision of safe drinking water. ▪ Rehabilitation of damaged water points including platforms ▪ Pond Cleaning 	5 districts	Percentage of targeted households with access to safe drinking water	100%
Improved Sanitation:			
<ul style="list-style-type: none"> ▪ Construction of Emergency resilience improved household latrines ▪ Distribute Latrine for people with different needs (Elderly, Child, Disable) 	5 districts	Percentage of targeted households with access to improved sanitation	100%
Hygiene			
<ul style="list-style-type: none"> ▪ Provide private bathing cubicles for women ▪ Distribution of Conditional Cash for hygiene kits to affected households 	5 districts	Percentage of households sensitized on hygiene	100%
Waste Management			
<ul style="list-style-type: none"> ▪ Solid Waste Dumping Station ▪ Household Drainage System 	5 districts	Percentage of household have waste dumping and drainage facilities	100%

Target beneficiaries:

83,850 (equivalent to 16,770 Households)

Budget requirements:

US\$ 1,821,595 (Safe Drinking Water \$ 344,244; Improved Sanitation and Hygiene \$1,477,307)

Budget Details:

WASH	Unit	Budget (USD)
• Deploy 10 Water Treatment Plant for immediate provision of safe drinking water;	10 WTP x 1,723.04 USD	17,230.38
• Rehabilitate 4,200 damaged water points	4200 WP x 31.91 USD	134,014.04
• Clean 1,512 ponds	1512 pond x 127.63 USD	192,980.22
• Construct 6,720 improved household latrines	6720 latrines x 108.49	729,036.38
• Construct 840 latrines to persons with different needs (elderly, child, disabled)	840 latrines x 108.49 USD	729,036.38
• Provide 4,200 private bathing cubicles for women	4200 PBC x 114.87 USD	482,450.54
• Distribute 4,200 Conditional Cash for hygiene kits to affected households	4200 cash x 25.53 USD	107,211.23
• Build 1,512 Solid Waste Dumping Stations	1512 SWDS x 12.76 USD	19,298.02
• Establish 4,200 Household Drainage System.	4200 HDS x 108.49 USD	26,802.81

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