1. GLOBAL OVERVIEW

On 8 May, the United Nations Secretary General called for an all-out effort to end hate speech globally – a global appeal to address and counter COVID-19 hate speech. He called for political leaders, educational institutions, social media companies, civil society and religious actors to act decisively in their respective spheres of influence to counter hate speech, stigma and discrimination, and to serve as models of mutual respect. He also called for everyone, everywhere, to stand up against hate, treat each other with dignity and take every opportunity to spread kindness.¹

On 6 May, the United Nations released a policy brief on ‘Disability inclusive response to COVID-19’ as the global crisis is deepening pre-existing inequalities, exposing the extent of exclusion and highlighting the need for inclusion of persons with disabilities. The Secretary General urged governments to place people with disabilities at the center of COVID-19 response and recovery efforts and to consult and engage people with disabilities.² The brief identifies four key action areas – (a) mainstreaming of disability in all COVID-19 response and recovery together with targeted actions, (b) enhancing accessibility of information, facilities, services and programmes in the COVID-19 response and recovery, (c) undertaking meaningful consultation with and active participation of persons with disabilities and their representative organizations in all stages of the COVID-19 response and recovery, and (d) establishing accountability mechanisms to ensure disability inclusion in the COVID-19 response.³

On the occasion of World Press Freedom Day on 3 May the Secretary General upheld the importance of impartial news media at a time when harmful health advice, hate speech and wild conspiracy theories are rising, and blatant lies are being spread online at a dizzying rate. During the online dialogue on World Press Freedom Day, he said “the antidote to this pandemic of misinformation is fact-based news and analysis.”⁴ The United Nations Special Rapporteur on freedom of expression called upon States to ensure that media workers can do their jobs without fear, noting that journalism expands the public's right to know and to accountable government during the public health crisis⁵.

The International Telecommunication Union, reiterated the importance of bridging the digital divide for the 3.6 billion people who remain off-line as the COVID-19 pandemic reshapes the way in which we work, keep in touch, go to school and shop for essentials. They called for universal broadband access and the need to accelerate the provision of global online child protection guidelines as the internet traffic tripled and a massive spike in cyber-crime that has accompanied the shift to digital in the COVID-19 crisis.\(^6\)

Lockdown measures will worsen poverty and vulnerabilities among the world’s two billion informal economy workers – the COVID-19 lockdown and containment measures threaten to increase relative poverty levels among the world’s informal economy workers by as much as 56 percentage points in low-income countries, said the International Labour Organization (ILO).\(^7\) In the latest policy brief on “COVID-19 crisis and the informal economy: Immediate responses and policy challenges”, ILO has recommended sustained efforts in the medium to long term for those in the informal economy on (a) strengthening health systems to ensure access and financial protection for all, (b) building universal social protection, (c) supporting the recovery of productive economic units, stepping up their productivity and facilitating their transition to formality so as to enhance formal job opportunities, and (d) facilitating the transition to formality.\(^8\)

As of 10 May 2020, the Global Humanitarian Response Plan (GHRP) has received USD 812.8 million against an increased total requirement of USD 6.69 billion.\(^9\) The UN’s Humanitarian Chief has called for swift and determined action to avoid the most destabilizing effects of the COVID-19 pandemic as he releases a $6.7 billion appeal and an updated global plan to fight coronavirus in fragile countries on 7 May 2020. The humanitarian system is taking action to avert a sharp rise in conflict, hunger, poverty and disease as a result of the pandemic and the associated global recession. The new GHRP included nine additional vulnerable countries and programmes to respond to the growth in food insecurity\(^10\). The appeal for the COVID-19 related requirements under the Joint Response Plan (JRP) for the Rohingya crisis is USD 117.2 million – the revised new COVID-19 related requirements, plus total 2020 JRP requirement adjusted to COVID-19 response, will be presented in the June GHRP update\(^11\).

Furthermore, WHO’s Solidarity Response Fund had mobilized USD 211.3 million from more than 371,000 donations.\(^12\) WHO reported USD 2.9 billion in total support committed or disbursed for the COVID-19 response.\(^13\) At the local level, the Asian Development Bank (ADB) approved an additional $500 million loan to bolster the efforts of the Government of Bangladesh to manage the impact of the novel coronavirus disease (COVID-19) pandemic on the country’s economy and the public health, which will build on ADB’s ongoing collaboration with Bangladesh on structural reforms by supporting government efforts to speed up the country’s social and economic recovery.\(^14\)

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9 https://fts.unocha.org/appeals/952/summary
12 https://covid19responsefund.org/
This sitrep complements the WHO sitreps which provide detailed information on the COVID-19 Health Emergency Response including on case management and infection control, surveillance and laboratory support, contact tracing and points of entry. WHO sitreps are accessible here. Separate sitreps are issued by the Inter-Sector Coordination Group (ISCG) on the COVID-19 response in the Rohingya settlement and host communities in Cox’s Bazar district. ISCG sitreps are available here.

2. Risk Communication/Awareness and Community Engagement (RCCE) Pillar

2.1.1. Evidence Update: A survey conducted by UN Women’s Asia and the Pacific Regional Office between 12 and 25 April 2020 shows that COVID-19 has gendered effects in Asia and the Pacific. Some of the key findings indicate that:

- Women are overall less likely than men to be covered by health insurance. The large majority of women in Bangladesh are not covered by health insurance (97%). Moreover, in Bangladesh women are more likely to face difficulties in accessing medical supply, hygiene products and food items (78%) and to experience longer wait time when they seek medical care (69%).
- COVID-19 has increased the burden of unpaid care and domestic work, and more so for women. As a result of the lockdown and the spread of the virus, household chores, watching the children and caring for the elderly and sick are taking up more of people’s time. Most time-consuming activity for women is cooking (28%), and cleaning (24%) whereas shopping for the family is the most time-consuming task for men (22%).
- Informal workers are losing their jobs and formal workers are working fewer hours. UN Women’s survey shows that women are likely to see their working hours reduced (83% of those in formal and 24% of those in informal employment). This is concerning as women were already more likely to report that they earn less than the partners (16%) or have no earnings (37%). Job losses are also an emerging concern among informal workers. This phenomenon is affecting both women (25%) and men (27%).

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

2.1.2. Communication Materials: The Directorate General of Health Services (DGHS) launched an infobot and made the information regarding labs available on its website. A set of messages for the general population, religious leaders, and mosque management committees was developed by concerned authorities in collaboration with the RCCE team following the lifting of restrictions on praying at the mosque and, it was shared for wide dissemination through the RCCE Pillar member organizations and RCCE subnational partners (including UNICEF Field Offices). Many partners develop new communication materials:

- a2i conducted a cartoon campaign through 156 comics on how to fight Coronavirus. In collaboration with UNICEF, a2i developed a four-segment drama series promoting helplines, stigma, selfcare, and post-Corona activities. Content for religious leaders was disseminated through various social media platforms. Printed materials such as posters were developed for community clinics targeting root-level people.
▪ BRAC Shykh Seraj, a famous media personality and agriculture development activist was engaged to raise awareness on COVID-19 through miking targeting farmers of Haor areas in the Boro harvesting season; three web episodes were developed on stigma and social distancing in collaboration with the famous movie franchisee Aynabaji.

▪ UNICEF launched new Meena video on staying home, staying safe, and the new PSA on stigma and discrimination on UNICEF Bangladesh’s social media platform as well as Grameenphone’s Facebook page. Both videos were shared with 16 TV partners for airing and Bongo BD for streaming; on UNICEF Bangladesh’s social media channels, the new Meena video has over 2.3 million views as of 10 May and the new PSA over four million views and 210,000 reactions on Facebook. A new PSA on discrimination and stigma was launched on social media and TV involving three celebrities and the Director General of the Islamic Foundation Bangladesh (IFB). A set of materials was developed for nutrition focusing on complementary feeding. Betar and community radio continued the message dissemination targeting religious leaders and worshippers going to the mosque.

▪ WHO continued disseminating messages on stigma, mental health and personal nutrition; developing strategies for re-emphasizing messages on handwashing, coughing-sneezing etiquettes, and social distancing with the gradual lifting of lock down.

▪ UNDP continued to use comic strips to disseminate messages on the importance of lockdown and of staying home. It partnered with Somoy TV to broadcast 10 episodes on COVID-19 and health issues. Awareness campaigns continued in 172 Unions across Kurigram, Lalmonirhat, Jamalpur, and Gaibandha districts under UNDP’s Strengthening Women's Ability for Productive New Opportunities (SWAPNO) project. Posters and leaflets on prevention against Coronavirus are being distributed. Messages are also being disseminated through Radio Chilmari and Radio Sarabela, two popular local radio stations in Kurigram and Gaibandha. Loudspeakers installed at mosques are being used in disseminating awareness related messages. “Moner Bondhu” continues to provide free tele- and video counselling.

▪ In partnership with the Department of Inspection for Factories and Establishments (DIFE), ILO developed Occupational Safety and Health (OSH) guidelines to prevent and mitigate COVID-19 at the workplace. A set of messages based on the safe ‘Return To Work’ is being finalized; a campaign for readymade garment workers called ‘YOUR Life is in YOUR Hands’ is also being planned.

▪ IFRC supports Bangladesh Red Crescent Society (BDRCS) in conducting TV and Radio shows including on cyclone preparedness messages in line with COVID-19 awareness campaign.

▪ BBC Media Action developed a video animation on fear and anxiety in Bangla and English.

▪ Grameenphone (GP) and Robi finalized the next round of pre-call notifications promoting government helplines and website, social harmony, information sharing, and mental health; GP also provides support to a2i, BRAC, and UNICEF awareness campaigns through their social media platforms.

2.1.3. Misinformation and Rumour Tracking: Up to 3 May 2020, RCCE misinformation and rumour tracking subgroup shared with Facebook 26 key links for removal. The second batch of misinformation links were submitted on Monday, May 11. UNICEF will orient a batch of 15 volunteers on misinformation identification, tracking and reporting in the coming week to work online and raise awareness in their communities. Examples of misinformation removed from social media over the past days: (1) a rumour that Tilapia fish was spreading coronavirus in Jessore which had spread panic among buyers and that police was conducting raids to check if people were keeping the fish in their refrigerators; (2) a video in which three people claimed to have been infected with coronavirus and cured using a coronavirus medication that they were providing for free to others via social media.
2.1.4. Additional activities: Partnerships with NGO networks through national NGOs has been initiated to ensure community engagement of the most vulnerable groups. Six such networks (NAHAB, BNNRC, BCRA, NIRAPAD, ELNAH, and ADAB) are now members of the RCCE Pillar, enabling expansion of the RCCE pillar to 170 plus local level NGOs. A mapping grid of NGOs, civil society networks, community radios has been developed and shared with RCCE partners by Shongjog.

With the approval of DGHS, BRAC installed 13 walk-in testing kiosks in Dhaka and Narayanganj, and it plans to expand to 100 kiosks for 19 hotspots subject to resource availability and funds mobilization. In Dhaka, four kiosks have been set up at Bangabandhu Sheikh Mujib Medical University Hospital (BSMMU), three at Shaheed Suhrawardy Medical College and Hospital (ShSMC), and one at Sheikh Russel Gastro Liver Institute and Hospital. In Narayanganj five kiosks have been set up at US-Bangla Medical College and Hospital. The RCCE team will support this initiative by informing the general population and symptomatic individuals about the purpose of the community kiosks, the importance of self-testing using the apps and of calling the helpline prior to visiting the community kiosks.

2.2 Logistics and Procurement Pillar

As part of the COVID-19 Supply Chain System, the supply portal is a purpose-built tool to facilitate the requests for critical supplies from national authorities and all implementing partners supporting COVID-19 national responses. A catalogue of items is available in the portal and is broadly divided into three categories: Personal protective equipment (PPE), Diagnostics and Clinical Management.

The Government of Bangladesh’s plan on COVID-19 related supply and equipment needs for the next three months was submitted to DGHS by a dedicated working group under the Logistics and Procurement Pillar. The three-month supplies plan was subsequently endorsed by DGHS on 11 May 2020. Afterwards, it will be uploaded to the COVID-19 Partner’s Platform and will be the basis of each registered agency to raise their needs requests in the supply portal.

The inventory management dashboard is now capturing 97% of the facilities in the country including the Central Medical Stored Depot (CMSD). However, there is a huge backlog for data entries, and two staff from the Management Sciences for Health (MSH) are resolving this issue. Significant improvements are expected in a few days. On 10 May 2020, the testing parameters for gowns, coveralls, surgical mask, and respirator mask (N95 / KN95) have been approved by the Directorate General of Drug Administration (DGDA). The tests will be performed by the five laboratories that were approved by DGDA. The results of those tests will form the basis for DGDA to issue No Objection Certificate (NOC) for both imported and locally produced PPE.

2.3 Preserving Stability and Addressing Social Tensions Pillar

2.3.1. Leaving No one Behind (LNOB), Essential services, livelihoods and social safety nets

The Bangladesh strategic paper on COVID-19 WASH response was launched on 5 May 2020. The Minister of Local Government Division, Rural Development and Cooperatives (MoLGRD&C) shared the Strategic Paper with UNICEF, development partners, senior officials from the Ministry of Local Government, Economic Relations Division, Department of Public Health Engineering (DPHE) and the Water Supply and Sewerage Authority (WASA). The COVID-19 WASH Response plan has three phases: Immediate: April-June 2020, Intermediate: July-Dec 2020 and Long-term: Jan-Dec 2021. This plan supplements the intervention areas for “Risk Communication”, and “Infection Prevention and Control” of the National Preparedness and Response Plan (NPRP).
To ensure learning continuity and pupils’ hygiene and health safety UNICEF and UNESCO have supported the Ministry of Primary and Mass Education (MoPME) and Ministry of Education (MoE) in drafting the Government of Bangladesh’s COVID-19 Education response and recovery plan. This plan provides the guidance for the COVID-19 Education response plan of US$ 20 million to be submitted by the World Bank (grant agent) to the Global Partnership for Education (GPE) before 12 May 2020. UNESCO, together with the Local Consultative Group WG on Education and the Education Cluster, are mobilizing resources (e.g. from Global Partnership for Education) for both financial and technical support to MoPME, MOE and a2i, with distance learning, focusing on hard-to-reach children.

Development partners met on 6 May and agreed to craft common narratives in advocating to the government on the COVID-19 social protection response. A mapping of social protection response to COVID-19 was developed to provide a complete overview of different programmes initiated by different agencies.

UNDP’s LoGIC project conducted a “Kemon Achen” survey, which found that 70% of the beneficiaries of the Community Resilience Fund (CRF) are severely affected by the coronavirus outbreak, and for 80%, income has been affected. Recommendations from the survey include immediate food support and creation of income opportunities.

UNDP established a COVID-19 Response and Recovery Private Sector Platform to support emergency initiatives and planning ahead for business recovery via test-and-trial and advocacy. It works through private sector-led task teams concerned about multiple sectors such as healthcare, agriculture, supply chain restoration, rapid identification and inclusion of the “new poor” and more.

With the support from IOM, the Ministry of Expatriate Welfare and Overseas Employment (MoEWOE) and Ministry of Foreign Affairs (MoFA) agreed to form a working committee to provide immediate support and longer-term reintegration assistance to vulnerable returning migrants. It will be chaired by the MoEWOE and members include the MoFA, the Ministry of Home Affairs (MoHA), the Ministry of Health and Family Welfare (MoHFW), IOM, the World Bank and ILO. IOM will serve as the secretariat for the working group on returning migrants.

IOM is tracing migrants that returned to Bangladesh during January to April 2020 through ten reintegration service centres to determine their level of vulnerability and to provide them with COVID-19-related information and counselling assistance on how to cope with the adverse impacts of the pandemic, including mobility restrictions and unemployment. Detailed profiling of the vulnerable returnees will be concluded once the lockdown is lifted and medium- to long-term reintegration assistances will be provided. IOM continues to provide support and counseling to callers to the IOM-funded hotline for migrants, accessed through www.probashihelpline.com. Since 29 March 2020, 111,470 migrants were provided with information on medical facilities, food access, employment status, money transfers, and information on how to return to Bangladesh. Some 73% of these migrants were from Gulf Cooperation Council countries.

2.3.2. Human rights and Rule of Law

As courts have remained closed during the coronavirus outbreak, UNDP technical team comprising Justice and Human Rights Programme and a2i under the guidance of Supreme Court has been working on arranging virtual courtroom facilities for bail applications. This will make strides in upholding the judiciary during times of crisis. The government approved ordinance to introduce court proceedings via videoconferencing.
During the past week, the Humanitarian Coordination Task Team (HCTT) produced an infographic presenting partners’ current engagement in complementing the Health Emergency Response. The document will be updated on a regular basis with the support of the Needs Assessment Working Group (NAWG). In addition, partners finalized the draft Contingency Plan 2020 for Climate-Related Disasters (i.e. cyclone, landslide and monsoon flood) in the COVID-19 Pandemic Context. It will facilitate the early development of a Humanitarian Response Plan for climate-related disasters that will include both anticipatory and rapid response actions.

In line with these efforts, the Forecast-based Action (FbA) working group led by the Bangladesh Red Crescent Society (BDRCS) is now developing an early action strategy/protocol for partners to complement Government’s response to future climate-related disasters. Furthermore, with the support of the Red Cross Red Crescent Movement (RCRC), the Cyclone Preparedness Programme (CPP), Joint Programme of the Government of Bangladesh and BDRCS, reviewed its cyclone warning and evacuation modalities considering the current pandemic context. It concerns notably the expansion of sheltering capacities as well as special provisions for protection of front-line workers.

3.1. Child Protection cluster

The Child Protection cluster continued to develop and circulate child protection messaging. Save the Children reached 5500 community people including 2800 children through messages on COVID-19, associated child protection risks and positive parenting, psychosocial and education support. World Vision Bangladesh reached 236 children and their families through Information education and communication (IEC) materials on Psycho-social Services (PSS). It also oriented 1,000 staff and facilitators on psycho-social and mental health support (reporting and referral care management). Plan-International provided 6,454 face to face and over phone counselling services to adolescents. It also started the first phase of cash distribution among 6,533 children’s families in Barisal and Rangpur Divisions.

Save the Children provided 54 children with appropriate child protection services through remote case management. UNICEF supported the Ministry of Women and Children Affairs (MoWCA) in reaching 500 adolescent Peer leaders and Club members with messaging by Child Rights Facilitators through Social Media. There continues to be a need in messaging to prevent Violence Against Children including GBV through various virtual platforms. An estimated 42% of respondents in the Inter-Agency Assessment have indicated an increase in the “beating” of children since the lockdown, and this requires robust advocacy and continued protection messaging during COVID-19. Save the Children conducted a Child Perception Survey on COVID-19 impact. Children expressed their views how COVID-19 impacted their livelihoods and protection.

UNICEF worked with the Supreme Court Committee of Child Rights and the Ministry of Law to investigate options within the law for children to be released from detention and unified with their families or be provided with alternative care arrangements. UNICEF supported the development of a guidance note on the release of children in detention facilities. In Bangladesh, 500 children meet the criteria of urgent release and will need a reintegration package to assist them settle in the community. Quick release of children in overcrowded detention facilities is urgently needed to avoid spread of COVID-19.
3.2. Education cluster

Cluster members are supporting children recover from the learning loss. Initiatives include, subject specific conference calls, live Facebook education classes, the development of story books on COVID-19, reaching parents and students through mobile phone to follow up TV classes. Broadcasts through radio channels and mobile phones are used to reach the hard to reach students.

Monitoring access to remote learning remains a challenge. The education partners together with Access to Information (A2i) are working to reach out to nine million mothers through their mobile phone numbers to monitor the access to learning. These mothers are part of the stipend programme for primary school children received through MoPME. Mobile numbers generated by MoPME are used to provide the stipend for primary school children. The Primary Education Stipend Project and school feeding programme have been halted for months. These programmes enable children of families living in poverty to stay in school.

3.3. Food Security cluster

The members of the Food Security cluster (FSC) are complementing food security efforts led by concerned national authorities. Up to 9 May 2020, the Ministry of Disaster Management and Relief (MoDMR) allocated a total of 143,117 MT of rice, and BDT 629.3 million in cash including BDT 159 million for child food. The Department of Livestock Services (DLS) supplied 66 metric tons of poultry feed have to the farmers. In addition, 5,000 poultry birds were distributed, and nine million livestock and poultry were treated. About 8,165 samples have been tested by the Central Disease Investigation Laboratory and the Field Disease Investigation Laboratories. Up to 7 May 2020, the Ministry of Agriculture reports that the rice harvest is completed at 90% in the Haor region and at 25% for the whole country.

In partnership with PepsiCo Foundation, BRAC is providing 1.4 million meals to support low income families living in extreme poverty. Oxfam distributed food and cash worth BDT 2,000 to 1,800 households in Cox’s Bazar and to 600 households in Dhaka. Working in partnership with 22 local partners and administrations, Oxfam’s assistance is planned to reach 103,550 persons in 21 districts. Save the Children International (SCI) distributed food package to 400 most vulnerable households in Dhaka, Shirajgonj and Khulna districts.

The Consortium of International Agricultural Research Centers (CGIAR) offered its assistance to the Government for the mitigation of COVID-19 Impacts on Food Systems. Under the Local Consultative Group on Agriculture, a Rapid Assessment of Potential Impacts of COVID-19 on Food, Nutrition Security and Agriculture will be conducted with the support of FAO, WFP, IFAD and CGIAR affiliated organizations. FAO assessed the impact of COVID-19 on the poultry sector. The assessment informs that (1) poultry farms smallholders are hardly hit by the COVID-19 epidemic; (2) More than 80% of broiler farms and 10% of layer farms were closed in assessment area and remaining ones are facing tremendous losses due to a drop in the prices of eggs and poultry meat; (3) the disruption of the supply chain and reduced demand appear to be the cause of the drop in the price at the farm gate. Misconceptions in society about transmission of the coronavirus through chicken and eggs also contributed to the reduced market demand for chicken meat and eggs; (4) credit facility is no longer available; (5) the whole poultry industry, including the traders, dealers, feed millers, hatchery owners and medicine providers are affected in the current context; (6) a continuing decline in poultry production is likely to lead to an acute shortage of poultry meat and eggs in the market in the near future without recovery support to the poultry industry.
The assessment recommended the following key actions:

1. Effective public communication to reassure consumers that coronavirus does not spread through chicken and eggs;
2. Restoration of the supply chain of poultry meat and eggs;
3. Use of alternative channels for marketing eggs and broilers (temporary selling points, street vendors, home delivery);
4. Immediate cash incentives and access to interest-free credit facility to smallholder farmers to continue or restart their business;
5. Access to soft loans for large farmers;
6. Ensuring veterinary services and supply of necessary vaccines and medicines;
7. Identification of locally available alternatives to imported feed ingredients and medicines.

Moreover, FAO produced its fourth situation report on the impact of COVID-19 on wet markets and food prices of Dhaka. It indicates that food prices remain high. During the Holy Month of Ramadan, prices of fruits and other products popular for the iftar is relatively high. To prevent traders from exploiting consumer demand for key ingredients, law enforcement authorities are monitoring the situation and ensuring public safety in markets. The army announced that it will work with market associations to facilitate an orderly expansion of markets into open spaces adjacent to the public markets. More information about FSC activities available here.

3.4. Gender-based Violence (GBV) cluster

The members of the Gender-based Violence (GBV) cluster are strengthening awareness and prevention efforts on GBV as well as support services for survivors of GBV. The Manusher Jonne Foundation (MJF) is advocating to the national authorities for speedy actions on preventing domestic violence against women and children and for a fair and effective disbursement of related social protection assistance. In partnership with multiple NGOs across the country, MJF is providing social counselling and legal aid services to 2,202 women and children and is following up about 2,000 cases. Ain o Shalish Kendra (ASK) hotline numbers are open for services on legal aid, psychosocial counselling and emergency shelter for survivors of GBV. In April, out of 166 calls received 15 required immediate actions. Through ASTHA project supported by the Netherlands and UNFPA in four districts – Jamalpur, Bogra, Patuakhali and Cox’s Bazaar (outside of refugee camps), 150 GBV front line service providers (case workers, case managers and social mobilization officers) connected 350 women and girls to the referral services.

To ensure necessary support services to survivors of GBV in official quarantine centers, UN Women and UNODC are developing a guidance with Bangladesh Armed Forces administering those centers. Plan International Bangladesh (PIB) organized an online training on the Inter-Agency Standing Committee (IASC) GBV Pocket Guideline for all emergency response staff and community volunteers of the organization as well as for partner organizations.

A total of 2751 households in Dhaka’s slums of Nilphamari, Lalmonirhat, Bholal and Barguna were informed on GBV prevention and available support services. Bangladesh Red Crescent Society (BDRCS), the International Committee of the Red Cross (ICRC) and, the International Federation of Red Cross and Red Crescent Societies (IFRC) will jointly conduct a webinar for around 50 field staffs on protection on “Protection from sexual abuse and exploitation”. The webinar will specifically discuss challenges in addressing sexual and gender-based violence (SGBV) in Bangladesh during the COVID-19 and suggestions on how to address them. BDRCS and IFRC will also organize a live Facebook session for around 100 volunteers supporting COVID-19 risk group, for them to understand and to learn how to address SGBV and ensure child protection measures on the ground.
UNFPA as the lead of GBV cluster, conducted an orientation for cluster members, on the purpose and process of designing multipurpose dignity kits - a critical GBV programming tool, that has been modified to address COVID-19 context and at the same time, widening programming target to transgender groups.

3.5. Logistics cluster

The National Logistics Cluster (NLC) compiled the inventory of logistics resources, assets and capacities of humanitarian agencies nationwide. With the guidance and support from the MoDMR, NLC has also gathered information on the logistics assets and resources under the custody of the Fire Service and Civil Defence Department (FSCD), Armed Forces Division (AFD) and two City Corporations. MoDMR assigned a focal point with whom humanitarian agencies can communicate with during the lockdown period for any logistics-related query including the clearance of imported relief goods.

3.6. Nutrition cluster

The members of the Nutrition Cluster are supporting the continuity of nutrition services. UNICEF is developing a guideline to continue minimum nutrition services using different channels. Indeed, according to the latest available information, indicators are showing that the percentage of pregnant and lactating women seeking counselling on infant and young child feeding decreased from 95% to 91% and, that the weighing of pregnant women decreased from 65% to 59%. Moreover, the screening of children for severe acute malnutrition (SAM) continues to be low at 35% and it warrants urgent attention. Two PSAs were developed for adolescents on “Boosting immunity through dietary diversity for preventing COVID-19” and “Hygiene, physical exercise and mental health management during COVID-19 lockdown at home”. The PSAs were posted on DGHS website, UNICEF Bangladesh Facebook page, Shorno Kishoree social media and TV.

3.7. Sexual and Reproductive Health (SRH) working group

The members of the Sexual and Reproductive Health (SRH) working group are reinforcing national SRH capacities. UNFPA is preparing a roaming team of around 60 midwives that will support Medical College Hospitals as well as District Hospitals and Upazila Health Complexes. The midwives received trainings on the adequate use of PPE and how to provide SRH and maternal health care during COVID-19. Marie Stopes Bangladesh (MSB) keeps its 46 clinics (seven maternity clinics and 39 SRH clinics) open to ensure uninterrupted SRH services during this crisis. Patients can also call toll free numbers to the clinics and be connected with MSB team members and medical doctors. MSB provides ambulance support to and from the health care clinics for pregnant women, and for women who just delivered and seeking care. Additionally, MSB is supporting community female entrepreneurs selling SRH commodities as well as other products requested by the communities. During the past week, Plan Bangladesh International (PBI) distributed 449 PPE to frontline health service providers in five areas of Dhaka South City Corporation, among six unions of Hatibandha Upazila and Lalmonirhat district, as well as in the unions of Rangpur and Bhola, and Bhola Sadar upazila. Among the same areas, PIB provided 266 adolescents with counselling support on personal and menstrual hygiene, as well as on mitigating the risk of getting infected with COVID-19 and it distributed 79 hygiene kits.
3.8. Water Sanitation and Hygiene (WASH) cluster

WASH cluster members reached a total of five million people over the past week with hygiene awareness messages to help prevent the further spread of COVID-19. Hygiene kits were distributed to 2,500 households in Bandarban, Kurigram, Rangpur and Khulna Districts. Hand-washing facilities (149) were installed for people who went to the Haor for work in the annual harvest. Moreover, 52 hand washing stations were installed at Naikhongchari, Lama and Alikadam Upazila in Bandarban and districts. In four Upazilas of Khulna and Satkhira Districts, soaps and detergent powder were provided to 30,690 households. In addition, 2,082 handpumps were repaired, 131 piped water system were disinfected. Hygiene materials were provided to 60 waste and sanitation workers in Faridpur Municipality. In the municipalities of Faridpur, Rajbari, Magura, Meherpur, Laksham, Kolaroa, Barguna, Bagerhat, Satkhira as well as in the city corporation of Gazipur, 1,086 families involved in waste and sanitation work are receiving hand sanitizer products. Hygiene awareness messages continue as installation of handwashing stations in public places such as open markets, bus stands, entry points of slums area, community clinics and health care facilities as well as the maintenance of water points. Related human interest story is accessible here.

3.9. Gender in Humanitarian Action (GiHA) working Group

The Gender in Humanitarian Action (GiHA) Working Group finalized a Rapid Gender Analysis (RGA) of the impacts of COVID-19 to inform national preparedness and response. Given the social distancing measures, the RGA has done a desk review contrasting pre-COVID-19 gender information and demographic data against new gender information from a multitude of surveys and qualitative sources. The RGA spans the humanitarian and development contexts and offers findings and corresponding, cluster-specific recommendations in the following areas:

- Women and girls’ unequal access to health, education and WASH services
- Increased risks and evidence of GBV in the context of the pandemic and its responses
- Unemployment, economic and livelihood impacts for the poor women and girls
- Unequal distribution of care and domestic work
- Women and girls’ voices not being included to inform a gender-targeted response;
- Policy response mechanisms do not incorporate gender analytical data or gender-responsive plans

The overarching recommendations emerging from RGA are:

- Targeted needs-based interventions for women and girls to enable access to health care for the most vulnerable and ensuring protection of the female health workers; providing livelihood support; protection from GBV and ensuring adequate WASH services
- Engage women leaders, diverse women’s networks and organizations in decision making processes for COVID-19 response
- Disseminate widely COVID-19 related prevention and response messages to protect women, adolescent boys and girls and other vulnerable groups.
- Collect, produce and analyze sex, age and disability disaggregated data on the COVID-19-related socio-economic impact on women, girls and LGBTIQ persons.
- Consult with women and adolescents from affected community and other vulnerable groups for planning and implementation of the COVID-19 response
- Regularly update the RGA; it is a living document and must incorporate emerging survey and research data to inform interventions in a rapidly changing context
3.10. Shongjog platform

The second edition of Corona Kotha released on the 8 May 2020 highlights ongoing information needs around prevention as well as gaps in understanding about how to access relief support and how people can access testing and treatment local to them. People with visual disabilities say that they are worried about how to maintain physical distancing; while people in middle-income groups are starting to express their need for food or cash relief, although they also expressed that they felt embarrassed to ask for help. Community feedback and perceptions analyzed for this edition also suggest that people are becoming more worried about travelers from other parts of the country arriving in their locality; want a mechanism to report those who are not following lockdown rules; need ideas to help overcome fear and anxiety; and are concerned about misappropriation of relief supplies.

This regular bulletin is being published by Shongjog (the national platform for community engagement and accountability), with inputs from a range of organisations who are collecting spontaneous questions and feedback related to COVID-19 from local communities around the country. Analysis has been done by BBC Media Action and Bangladesh Red Crescent Society on behalf of Shongjog. Organisations who would like to collaborate by sharing feedback they are receiving, for inclusion in future editions, can contact mahmuda.hoque@bd.bbcmediaaction.org.

4. CROSS-CUTTING ISSUES

4.1. Gender

A constant thread in global and increasingly in local media reports, is the rise in gender-based violence due to the COVID-19 lockdown. Recent local survey data and consultations support these accounts.15 Whilst domestic violence, which is normally underreported due to normalization or stigma, increases, the options for women and girls to escape their tormentors have decreased markedly with the closure of courts and hotlines being overrun with COVID-19 calls.

UN Women and the Gender Monitoring Network (GMN), a grassroots gender equality-focused network of 25 local CSOs, produced a brief: Voices of Women from the Ground: A brief on challenges of women against COVID-19. It summarizes key issues from a recent consultation: women and girls’ lack of access to hygiene and health care; increase in gender-based violence and domestic violence; women’s barriers to accessing relief and support; and the disproportionate and severe loss of livelihoods faced by women. The brief puts forward a range of appeals and requests by women leaders and organisations in the GMN; key among these, and a core feature of a rights-based approach, is the need for systematic consultations with rights holders. The members of the GMN are ready to work with the government and local authorities to help reach the most marginalized women and girls in the COVID-19 response.

15 GIHA RGA; GMN April 22 consultation; MJF: 4,249 women subjected to domestic violence during the lockdown: https://www.dhakatribune.com/bangladesh/2020/05/06/mjf-4-249-women-endure-domestic-violence-amid-lockdown
4.2. Leaving No One Behind through respect for human rights

UNODC, WHO, UNAIDS AND OHCHR issued a global joint statement on Covid-19 in prisons. The High Commissioner for Human Rights issued new policy guidance to States on emergency measures, noting that these must be issued for specific periods of time only and prescribed by law, proportionate and non-discriminatory. Other materials relating to Covid-19 and human rights can be found here.

Government has decided to release another additional 2,300 prisoners who are serving minor sentences. Suppression of freedom of expression has been a concern in past weeks as dozens of media workers are reported to have been subjected to physical attacks, threats, harassment and court cases, many for allegedly spreading rumors or criticism of the authorities. It was reported that since the start of the ‘lockdown’ (26 March), some 20 journalists have been affected, for reporting on pilferage, corruption, and lack of accountability in food aid meant for the poor, as noted by the Forum for Freedom of Expression, Bangladesh, a new platform of media rights activists. It appears that the Digital Security Act of 2018 has been increasingly invoked during this period. Among those arrested and charged under the Digital Security Act (DSA) are at least nine journalists, including three editors of online news portals. At least one website (Benar News) has been shut down.

Between 4 and 6 May, at least 11 people were charged under the DSA with posting content on social media critical of the Government's handling of the virus outbreak. It is notable that four of these appear to have been arrested in heavy-handed operations by the Rapid Action Battalion paramilitary force. The are a cartoonist, a writer, a Rashtrochinta (Thoughts for States) platform organizer and IT professional, and a businessman. In at least two of the cases their families have alleged that they were arrested days or hours earlier and thus alleged unacknowledged detention / enforced disappearance until they were shown arrested. In a case under the DSA, a leader of the Bangladesh Chatra League (BCL) from Habiganj, was reported to have been arrested on Thursday 7 May, for criticizing distribution of relief by MPs. The Committee for the Protection of Fundamental Rights, MOSC (organized by eminent citizens and human rights activists), leading human rights NGO Ain O Salish Kendra (also Secretariat of the Human Rights Forum Bangladesh), Odhikar, Transparency International Bangladesh, Front Line Defenders, Dhaka Union of Journalists (DUJ), the Editors Council, and the BNP have separately condemned developments relating to the alleged misuse of the DSA and in some instances demanded withdrawal of cases and/or repeal of the law. Some have reiterated that journalists' contributions to conveying news to people, risking their lives at this difficult time, are commendable.

Other useful updates and sources

- BRAC: http://www.brac.net/covid19/index-en.html
- Bangladesh Peace Observatory: BPO Covid19graphics

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