■ *World Vision Bangladesh Working Area*

■ *Rohingya Refugee Response Area*

Number of Cases (as of 10 April)

As of 10 April, 424 cases and 27 deaths are officially reported in this country of 165 million people.

Country Overview

Adequate testing continues to be a problem. The government is taking strong prevention measures and a national lock-down is in place until 25 April. All transportation is halted. All operations of World Vision development programs are on hold, while our COVID-19 emergency response has started in Cox's Bazar and is being rolled out elsewhere across the country this month.

In Cox's Bazar, World Vision is providing essential services in the world's largest refugee camp that is home to 1 million Rohingya. Activities are restricted to food assistance, WASH, nutrition and protection case management. Some 200 staff continue to work in the camps following training on COVID-19 prevention.

Gaps and Challenges

Transitioning all staff quickly to productive work-at-home schedules was challenging, but teams are adapting. Many completed WHO on-line training on COVID-19.

Overcrowded conditions in the Rohingya camps (40,000 people per km2) makes people particularly susceptible to the virus. The 335,000 people in need in the surrounding district—the poorest in Bangladesh—are also extremely vulnerable. Providing essential services is difficult as humanitarian access to the camps shrinks and the army begins to control NGO movements more.

Lessons Learned, Best Practices and Innovations

WVB acted quickly to disseminate prevention messaging to community leaders (including faith leaders) across its 56 Area Programmes with 152,614 sponsored children.

In the refugee camps, our USAID-funded programme provides fresh food to more than 49,000 refugee households each month. Vendors are pre-packing food so refugees spend less time queuing in the shops, and are delivering food to quarantined households in the camps.

Advocacy

We are calling on government, the UN and the international community to scale up prevention and response measures for children and their families. This includes strengthening health systems, equipping frontline health workers, and engaging and communicating with communities effectively regarding COVID-19 prevention and health services.

We also urge that full humanitarian access be assured to NGOs working in the Rohingya refugee camps that are providing life-saving services to these especially vulnerable children and families.

245,052
new beneficiaries reached

117,858
children reached

$17.2 million
total budget

COVID-19 Emergency Response | Highlights

OBJECTIVE 1: Promote preventative measures to stop or slow COVID-19 spread

150,058 people reached with prevention hygiene information.

1,206 community handwashing stations established, maintained.

76,906 information/education materials printed, distributed.

165,967 people reached with prevention information through social media.

455 faith leaders engaged to disseminate prevention measures, create hope.

OBJECTIVE 2: Support health systems and workers

737 community health workers trained, supported to provide services.

OBJECTIVE 3: Provide children and families with multi-sector support

6,859 people (children and families) reached with psychosocial support.

USD479,065 Total amount of cash/vouchers distributed.

10,858 households receiving cash disbursements/vouchers.

1,890 food packages provided.

6,916 new children reached with targeted age-specific health education.

17,226 new children supported with child protection (eg. engagement of CP/social workers; coordination and awareness-raising).

"I have to put on sandals to use the toilet and then wash my hands with soap. I need to avoid dirty places, crowds and going outside unnecessarily."

-Nurankis, age 10, Rohingya refugee