

A photograph of a woman wearing a pink and white patterned headscarf and a matching pink top. She is looking down at a baby who is lying in a cardboard box. The woman's hands are visible, holding the baby. The background is a wooden wall. The lighting is warm and soft.

Humanitarian Crisis Management Programme (HCMP) Annual Report 2022

Humanitarian Crisis
Management Programme (HCMP)
Annual Report 2022

Acknowledgement

We extend our heartfelt appreciation to all the individuals, communities, partners, and well-wishers who have made valuable contributions to our humanitarian efforts throughout the year. Your unwavering commitment and kindness have played a crucial role in enabling our organisation to create a meaningful difference in the lives of those in need.

Our sincerest gratitude to Asif Saleh, the Executive Director of BRAC, for his exceptional leadership. His visionary guidance, strategic insights, and unwavering commitment to our organisation's mission have driven positive change and propelled our efforts toward impactful outcomes.

We wholeheartedly acknowledge the strategic engagement and guidance provided by our Senior Directors — KAM Morshed (Advocacy, Innovation, and

MEAL); Tushar Bhowmik (Chief Financial Officer); and Moutushi Kabir (People, Culture, and Communications). Their strategic expertise and adeptness in overcoming challenges have resulted in innovative solutions. They have been instrumental in fostering collaboration among various programme teams, ensuring synergy, and maximising our organisation's collective impact.

Our sincere appreciation to the Programme Directors and Programme Heads: Safi Rahman Khan (Education, Skills Development, and Migration); Nobonita Chowdhury (Gender, Justice, and Diversity); Tasmiah Tabassum Rahman (Skills Development Programme); Dr. Morseda Chowdhury (Health); Dr. Shayla Islam (Communicable Disease Programme); Palash Kanti Das and Rozina Haque (Ultra-

Poor Graduation Programme); D. Sasikumar (Ayesha Abed Foundation); and Shashwatee Biplob (Social Empowerment and Legal Protection). Their expertise and guidance have enhanced the quality and effectiveness of our programmes, allowing us to address the diverse needs of our participants.

We also highly appreciate Dr. Erum Mariam, Executive Director of BRAC Institute of Educational Development, for her continued support and contributions to HCMP.

Our sincere thanks to the Directors of various departments — AFM Shahidur Rahman (Monitoring, Evaluation, Accountability, and Learning); Ahmed Najmul Hussain (Administration and Road Safety); Rear Admiral (Retd) M Makbul Hossain (Operations); SK Jenefa Khanom Jabbar (Social

Compliance and Safeguarding); Mafruza Khan (Global Resource Mobilisation and Partnerships); Syed Mazbahul Morshad (Chief Engineer, Construction, and Maintenance); and Nanda Dulal Saha (Internal Audit). Their outstanding support and contributions have been invaluable to HCMP.

We are indebted to the Government of Bangladesh and our esteemed donors who have placed their trust in our organisation, generously contributing their financial, technical, and administrative resources. Their unwavering belief in our mission and consistent support have played a vital role in enabling us to respond swiftly and effectively to emergencies. We are also grateful to our local and international partners who share our vision and collaborate with us toward a common goal. Their

support and cooperation in our programmes enable us to reach and assist even more individuals and communities in need.

We appreciate the commitment of our colleagues and volunteers who have tirelessly worked on the ground, often in challenging environments, to provide essential services and support to affected populations. Their ongoing dedication to transparency and accountability in achieving humanitarian goals reflects our commitment to creating a just and empathetic world for all.

Lastly, we wish to acknowledge the remarkable resilience and strength exhibited by the communities we serve. Their courage, determination, and active engagement in our programmes have played a pivotal role in facilitating meaningful change within these communities. Through our collective efforts, we have achieved a positive impact on lives.

Contents

MESSAGE FROM

Executive Director, BRAC | Senior Director, BRAC | Office In Charge, HCMP

LIST OF ACRONYMS

12

EXECUTIVE SUMMARY

14

CHAPTER 1:

16

BRAC's Humanitarian Crisis Management Programme in Cox's Bazar and Bhasan Char

Goal

17

Objective

17

BRAC's Humanitarian Response in Cox's Bazar

BRAC's Humanitarian Response in Bhasan Char

HCMP's Strategic Shift

20

a. Adoption of Integrated Humanitarian Services

b. Alignment with ISCG Rationalisation

c. Alignment with Sectoral Shift to Livelihoods and Skills Development

Sectoral Representation of BRAC HCMP

22

HCMP At A Glance in 2022

24

Message from the Executive Director

Approximately, one million people from the Rohingya community escaping violence in Myanmar arrived in the Cox's Bazar district of Bangladesh in August 2017. Five years have passed, and the crisis has now evolved from an emergency to a protracted one. The Government of Bangladesh (GoB) and international humanitarian agencies are working together toward a 'strategic shift'. Having passed the initial emergency response phase (2017-2019) and pandemic response phase (2020-2021), this response plan has now entered the protracted phase.

There is no denying that our utmost priority is to advocate for the safe return of Rohingyas to their homeland. However, there is growing recognition that the current efforts to support the Rohingya community should shift from a short-term, crisis-focused approach to a more developmental approach that takes a mid-term view of the situation. This shift is essential not only from a humanitarian standpoint but also from a security perspective. The longer we delay this, the more a community without hope for a brighter future is at risk of disintegration. We must not let that happen.

Therefore, it is important to reflect on the response's scope, operational design, governance, resourcing, and participation aspects and consider how they can be improved, keeping that mid-term strategy in mind.

As resources and aid are decreasing, a more efficient and integrated mechanism of service delivery should be explored, and increased effort towards localisation of the response is needed.

I thank BRAC frontline staff members, volunteers, donors, development and implementation partners, and most importantly, various ministries and departments of the Government of Bangladesh for their continued hard work and support.

Asif Saleh
Executive Director
BRAC



Message from the Senior Director

Since the onset of the influx in 2017, BRAC's Humanitarian Crisis Management Programme (HCMP) was established to support Rohingyas by providing humanitarian assistance to save lives and preserve their dignity. The HCMP started with an emphasis on lifesaving interventions, initially WASH and shelter for Rohingyas. Based on the changing needs of the respective communities, it gradually began providing support to other sectors such as protection, site management, health and nutrition, disaster risk reduction, education, general food assistance, livelihoods and skills development in 33 Rohingya camps and the surrounding host communities of Cox's Bazar and Bhasan Char. BRAC ensures equitable access to all essential services in coordination with the Government of Bangladesh, UN agencies, donors, and ISCG.

BRAC supported around 800,000 people in Rohingya and host communities in 2022. HCMP is shifting towards a sustainable and coordinated response by improving sector-wise coordination and building synergy according to the Principles of Rationalisation developed by ISCG.

Activities in Bhasan Char have been expanded through the piloting of new initiatives and the revamping of the support functions to ensure smooth programme implementation.

BRAC developed a five-year strategy paper for an integrated approach to contextualise camp strategies for the self-reliance of the Rohingya community and support transformational development. With a three-year plan for the new agriculture-based livelihoods sector, BRAC is piloting livelihoods interventions in Cox's Bazar and Bhasan Char, including host communities, for further expansion. BRAC is a co-coordinator in Bhasan Char for the livelihood sector, along with UNHCR and WFP.

BRAC is grateful to all the passionate and dedicated individuals working on humanitarian grounds and the development partners for supporting its work.

Md Akramul Islam, Ph D

Senior Director
BRAC



Message from the Office In Charge

BRAC has a long-standing history of leading in disaster and humanitarian crises. Capitalising on fifty years of multi-sectoral and multi-contextual experience, its Humanitarian Crisis Management Programme (HCMP) has significantly contributed to the response to the people affected by the influx from Myanmar. However, in Cox's Bazar, BRAC has been working with the Rohingya and affected host communities from previous influxes for 39 years and began working with recent influx-affected people in 2017 and in Bhasan Char since 2021. BRAC's emergency services have shifted to a more sustainable and cost-effective service modality. Following humanitarian principles, HCMP provides specialised interventions with a more integrated approach.

In 2022, we prioritised identifying concentrated needs and ensuring programme quality; BRAC's interdepartmental integration started and will gradually focus on intersectoral integration. All of the sectors of BRAC HCMP identified their sectoral objectives and goals at the beginning of the year to contribute to achieving the broader goal of HCMP.

We express our heartfelt gratitude to our partners, donors, community members, and Government stakeholders who have been a part of the HCMP.

Rezaul Karim

Programme Head and Office In Charge
HCMP, BRAC



List of Acronyms

AAP Accountability to Affected Populations	CPSS Child Protection Sub-Sector	ELCO Eligible Couple
APBN Armed Police Battalion	CRA Community Risk Assessment	FDMN Forcibly Displaced Myanmar Nationals
AWD Acute Water Diarrhoea	CSI Capacity Sharing Initiative	FSM Faecal Sludge Management
CBCPC Community-Based Child Protection Committee	DM Disaster Management	FSS Food Security Sector
CBP Community-Based Protection	DMC Disaster Management Committee	GBV Gender-Based Violence
CBO Community-Based Organisation	DOT Directly Observed Therapy	GFA General Food Assistance
CESG Community Education Support Group	DRR Disaster Risk Reduction	GoB Government of Bangladesh
CHW Community Health Worker	DSS Decision Support System	HCMP Humanitarian Crisis Management Programme
CiC Camp-in-Charge	ECD Early Childhood Development	HIV Human Immunodeficiency Virus
CLDRI Community-Level Disaster Resilience Index	ECDWG Early Childhood Development Working Group	HPL Humanitarian Play Lab
CP Child Protection	ECE Early Childhood Education	IED Institute of Educational Development
CPP Cyclone Preparedness Programme	E-CRA Electronic Community Risk Assessment	ISCG Inter Sector Coordination Group

ITN
Insecticide-Treated Nets

JRP
Joint Response Plan

LC
Learning Centre

LCFA
Learning Competency Framework
Approach

LSD
Livelihoods and Skills
Development

LWG
Localisation Working Group

MAM
Moderate Acute Malnutrition

M&E
Monitoring and Evaluation

MEAL
Monitoring, Evaluation,
Accountability, and Learning

MFFU
Mobile Firefighting Unit

mhGAP
Mental Health Gap Action
Programme

MHM
Menstrual Hygiene Management

MHPSS
Mental Health and Psychosocial
Support

MIS
Management Information
Systems

MoDMR
Ministry of Disaster Management
and Relief

PIQ
Programme Implementation
Quality

PLW
Pregnant and Lactating Women

PSS
Psychosocial Support

PTSD
Post Traumatic Stress Disorder

RRM
Rapid Response Modality

RRRC
Refugee Relief and Repatriation
Commissioner

SAM
Severe Acute Malnutrition

SASA
Start, Awareness, Support, and
Action

SMC
School Management Committee

SMS
Site Management Support

SPD
Serious Psychological Distress

SRHR
Sexual and Reproductive Health
and Rights

SWM
Solid Waste Management

TB
Tuberculosis

TPD
Teachers Professional
Development

UNHCR
United Nations High
Commissioner for Refugees

WASH
Water, Sanitation and Hygiene

WFP
World Food Programme

Executive Summary

BRAC's Humanitarian Crisis Management Programme (HCMP) has had a significant impact in providing sustainable humanitarian assistance and build-back-better support to vulnerable populations affected by the Rohingya crisis in Cox's Bazar and Bhasan Char. As the influx has now entered its sixth year, the situation has transitioned from an emergency to a protracted crisis. Therefore, HCMP has undergone a strategic shift, incorporating a greater humanitarian-development nexus lens with an integrated approach to humanitarian services.

Subsequently, BRAC's sector-wise humanitarian programmes have been more formally linked with BRAC's development programmes, fostering mutual learning and knowledge sharing.

HCMP is aligned with the Inter Sector Coordination Group's (ISCG) rationalisation process, which aims to ensure that all Rohingya populations have equitable access to essential services. For example, in 2022, the HCMP aligned with the sectoral shift to 'Livelihoods and Skills Development' from 'Food Security', and developed a three-year plan to expedite livelihoods sector's interventions. These changes were need-based, context-specific, and cost-efficient. In 2022, HCMP provided critical support to approximately 800,000 people in Cox's Bazar and 28,000 people in Bhasan Char, almost 45% of whom were female. In Cox's Bazar, the programme provided 358,472 outpatient general medical consultations and 63,441 maternal and sexual reproductive health services.

Education support was also a priority, with 69,579 students accessing learning centres (LCs), including 6,400 students from the host community. In addition, 111,188 fresh food supports were provided, which reached 17,000 households with vegetable seeds and other agricultural inputs. Skill-based training was provided to 635 artisans in areas such as hand embroidery, tailoring, block printing, and screen printing. Shelter construction was also a significant focus - with 28,489 shelters reconstructed and 43,765 linear metres of infrastructure developed, including drains, stairs, and bridges.

Significant accomplishments in the WASH sector included constructing 553 latrine chambers and conducting 215,116 hygiene promotion

sessions, along with many other critical WASH services. Gender-segregated and disability-friendly WASH facilities were the core focus to ensure safety and security while meeting basic needs. Protection, Child Protection and Mental Health and Psychosocial Support (MHPSS) was also significant part of HCMP intervention. The programme reached 98,192 children with recreational support, provided legal information to 17,656 people, and gave focused psychosocial and psychological care to 7,779 people.

In Bhasan Char, the BRAC HCMP has been actively engaged in providing various forms of support to address the diverse needs of the community and promote their overall well-being. This includes offering 17,769 outpatient general medical consultations, providing

education to 2,867 students through LCs, offering focused psychosocial and psychological care to 240 individuals, and providing agricultural and aquaculture support to 3,300 households.

Moreover, considering localisation and community development as priorities, in addition to the pooled fund, HCMP capacitated four local partner NGOs in 2022 to better meet the needs of locally-affected communities by enhancing their leadership among local authorities and civil societies in humanitarian action. Drawing on its valuable lessons and experiences gained over the past five years, BRAC HCMP remains committed to continuing its operations in these areas.

In 2022, BRAC's Monitoring, Evaluation, Accountability, and

Learning (MEAL) team collected quantitative information through Management Information Systems (MIS) and verified it through a comprehensive validation process. Regular Programme Implementation Quality (PIQ) monitoring exercises were conducted to assess the effectiveness and quality of programme interventions. The monitoring findings were shared with each sector to drive further action and continuous improvement.

HCMP's efforts have been vital in ensuring the delivery of essential services to vulnerable populations. Based on our learning on the ground, we will continue to provide sustainable humanitarian assistance and help create a self-sustaining and resilient system that alleviates suffering and saves lives.

CHAPTER 1

BRAC's Humanitarian Crisis
Management Programme in
Cox's Bazar and Bhasan Char

Goal

BRAC's Humanitarian Crisis Management Programme (HCMP) aims to provide sustainable humanitarian assistance and build-back-better support to all people affected by the Rohingya crisis, regardless of their gender, age, racial origin, social class, or ability.

Objective

To increase access to basic humanitarian services — food, shelter, water and sanitation, healthcare, and education to Rohingya crisis-affected people to save their lives and alleviate their suffering while upholding their human dignity and protection and creating a self-reliant, resilient system and environment.

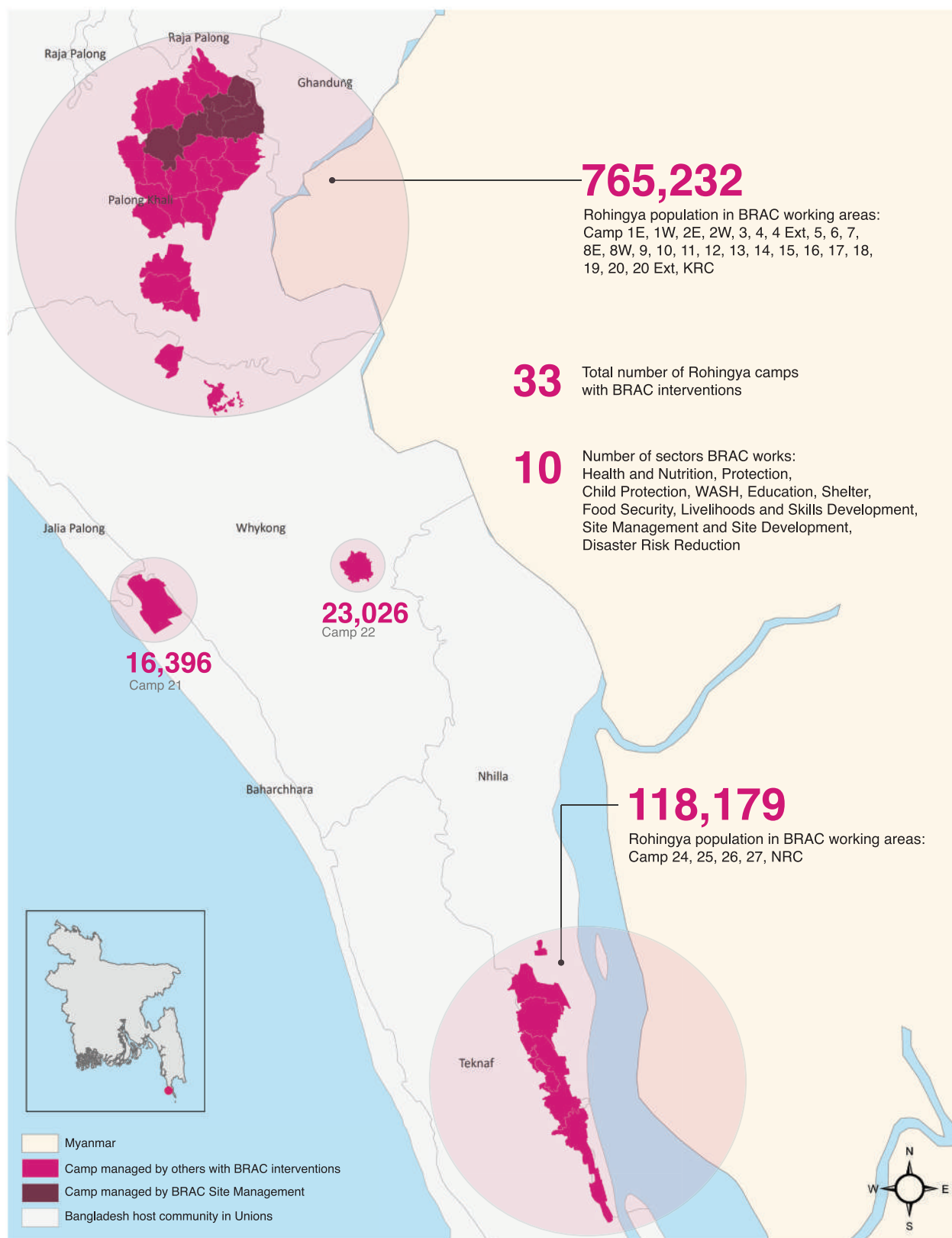
BRAC's Humanitarian Response in Cox's Bazar

In August 2017, BRAC HCMP initiated its operations by providing critical lifesaving services to address the urgent needs of the Rohingya population. Over time, the focus of HCMP expanded into a comprehensive and sustained humanitarian response aimed at meeting the basic needs of the Rohingya population and ensuring dignified lives. In 2022, BRAC HCMP supported approximately 800,000 people living in the Rohingya camps and neighbouring host communities in Cox's Bazar. HCMP provided a wide range of services across multiple sectors, including Water, Sanitation and Hygiene (WASH); Shelter, Site Management and Development; Education; Protection - Gender-Based Violence (GBV), Community-Based Protection (CBP), and Legal; Child Protection (CP); Health and Nutrition; Mental Health and Psychosocial Support (MHPSS); Livelihoods and Skills Development; Food Security; and Disaster Risk Reduction (DRR).

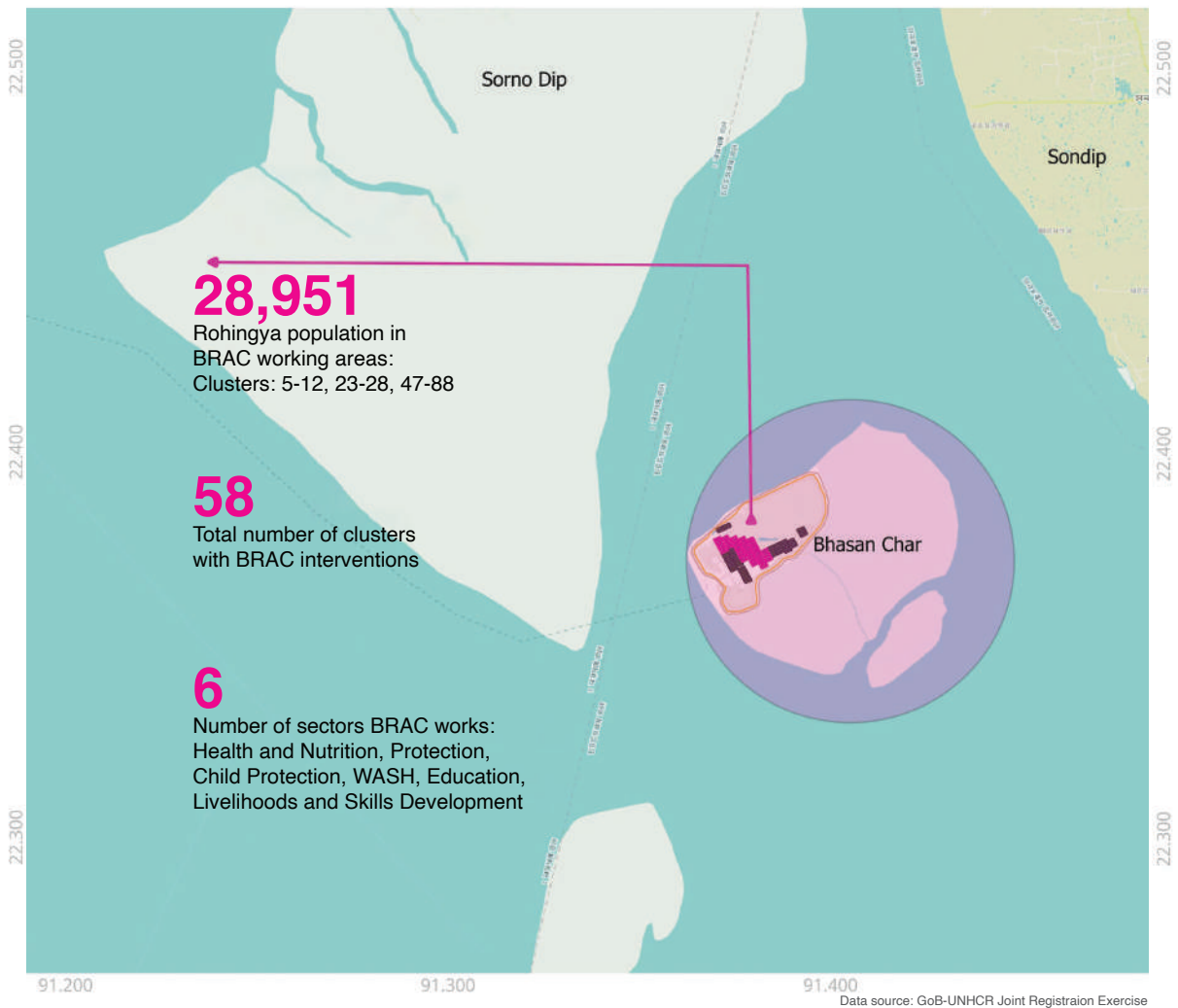
BRAC's Humanitarian Response in Bhasan Char

Following the relocation of Rohingya population in Bhasan Char in March 2021, BRAC HCMP began to provide Education and WASH services. Despite encountering numerous challenges, including the remote geographic location of Bhasan Char, BRAC is currently working in 62 clusters to ensure the delivery of a comprehensive range of essential services. These clusters include WASH; Health and Nutrition; Education; Protection; Child Protection; Livelihoods and Skills Development; and Food Security.

Rohingya population in different camps at Cox's Bazar with BRAC interventions in 2022



Rohingya population in different clusters at Bhasan Char with BRAC interventions in 2022



HCMP's Strategic Shift

a. Adoption of Integrated Humanitarian Services

Over the past five years, BRAC and its partner organisations, including UN agencies, INGOs, national and local NGOs, have done a challenging yet commendable job of responding to the needs of the Rohingya population at Cox's Bazar. However, due to the absence of a clear repatriation timeframe, decreasing funding support, and evolving requirements of this expanding one million-strong community, there is a need to realign the response towards a more development-oriented approach. It has now become evident that an integrated service delivery model is much needed to address i) the more development-like needs of this protracted crisis, ii) the need for cost efficiency in the context of the decline in funding and iii) the importance of increasing accountability to the Rohingyas. Keeping these elements in mind, BRAC conducted a series of internal exercises and external

consultations with frontline staff, subject matter experts, UN agencies, donors, partners, local NGOs, and government agencies. Based on learning and experience, BRAC designed an Integrated Humanitarian Services Model to enhance the quality and effectiveness of humanitarian services. The integration of services will begin with the volunteers of sectors with the highest presence at the root level of the camps. These volunteers will share key messages from other relevant sectors and their regular sectoral work. Through regular visits at the doorsteps, community health workers can share messages on relevant sectors, e. g., health, nutrition, and hygiene education, and refer cases of Gender-Based Violence (GBV) to focal points. The Shelter and Site Management volunteers could support gender equality and protection by sharing GBV and Community-based Protection messages alongside their regular work. The teachers of the learning centres can monitor and motivate the students to follow basic hygiene practices.

This solution aims to provide comprehensive and integrated assistance to Rohingyas with minimal resource allocation. Simultaneously, the integrated model will incorporate a strong commitment to enhancing transparency by implementing thorough and systematic monitoring and evaluation processes.

b. Alignment with ISCG Rationalisation

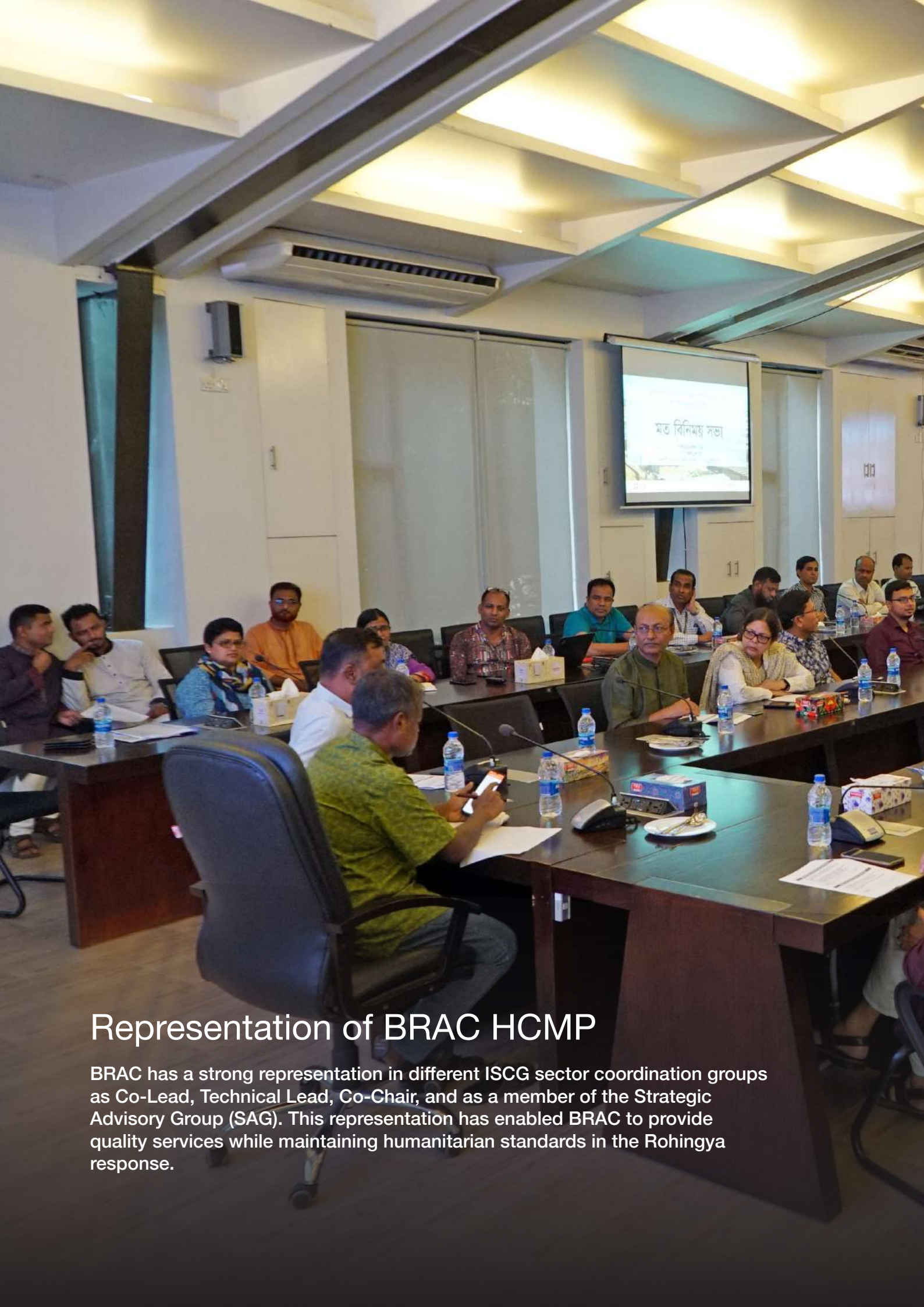
HCMP has been working towards a sustainable and coordinated response for Rohingyas and thus proceeding with the rationalisation process in coordination with the Government of Bangladesh (GoB) and Inter Sector Coordination Group (ISCG), which aims to ensure that all Rohingya people have equitable access to basic services in a predictable, efficient, and timely manner, through a standardised and cost-effective approach to providing equitable services for Rohingya people. BRAC has participated in the Joint Response Plan (JRP). All of its humanitarian projects are aligned with the JRP proposals.

c. Alignment with Sectoral Shift to Livelihoods and Skills Development

ISCG divided the Food Security, Skills, and Livelihoods sector into two different sectors, Livelihoods and Skills Development (LSD) sector and Food Security (FS) sector. Since September 2022, Livelihoods and skills development activities, including skills training, have been considered under the LSD sector.

To expedite Livelihoods sector interventions, BRAC has developed a three-year plan and has started piloting Livelihoods interventions at Cox's Bazar and Bhasan Char. In this regard, a working group at BRAC's Head Office level consisting of members from various development programmes, including Skills Development Programme,

Ultra-Poor Graduation Programme, Livelihoods cluster, and Enterprises. This working group is actively contributing to the design and implementation of Livelihoods programmes in HCMP. BRAC has been selected as the co-coordinator for the LSD sector for Bhasan Char, along with WFP and UNHCR.



Representation of BRAC HCMP

BRAC has a strong representation in different ISCG sector coordination groups as Co-Lead, Technical Lead, Co-Chair, and as a member of the Strategic Advisory Group (SAG). This representation has enabled BRAC to provide quality services while maintaining humanitarian standards in the Rohingya response.



মত বিনিময় সভা

Co-Lead

Cox's Bazar

Food Security (FS), WASH, Child Protection (for Early Childhood Development Working Group - ECDWG)

Bhasan Char

Livelihoods and Skills Development (LSD) sector

Technical Lead

Cox's Bazar

Gender-Based Violence (GBV) Sub-sector

Co-Chair

Cox's Bazar

Child Protection Sub-sector Localisation Working Group (CPSS LWG)

Elected Member of SAG

Cox's Bazar

Education, FS, WASH, LSD, Shelter and SMS, Child Protection

HCMP At a Glance in 2022

Cox's Bazar



358,472

outpatient general medical consultations made through health facilities in camps



635

artisans received training on hand embroidery, tailoring, block print, screen print in camps and host communities



215,116

hygiene promotion sessions conducted in camps and host communities



63,441

maternal and Sexual Reproductive Health (SRH) services were provided



28,489

shelters built and reconstructed in camps



98,192

children in camps and host communities reached for recreational support e. g., story-telling, indoor games



69,579

students accessed education through LCs in camps and 6,400 in host communities



43,765

linear metres of infrastructure constructed in camps e. g., drains, stairs, bridges



17,656

people received messages on legal information and rights in camps



111,188

fresh food support provided to the most vulnerable households and 17,000 households reached with vegetable seeds and other agricultural inputs



553

latrine chambers constructed in camps and host communities



7,779

people received focused psychosocial and psychological care in camps and host communities

Bhasan Char



17,769

outpatient general medical consultations made through health facilities



16,322

feedback and complaints received under a community-based complaints mechanism



240

people received focused psychosocial and psychological care



2,867

students accessed education through learning centres



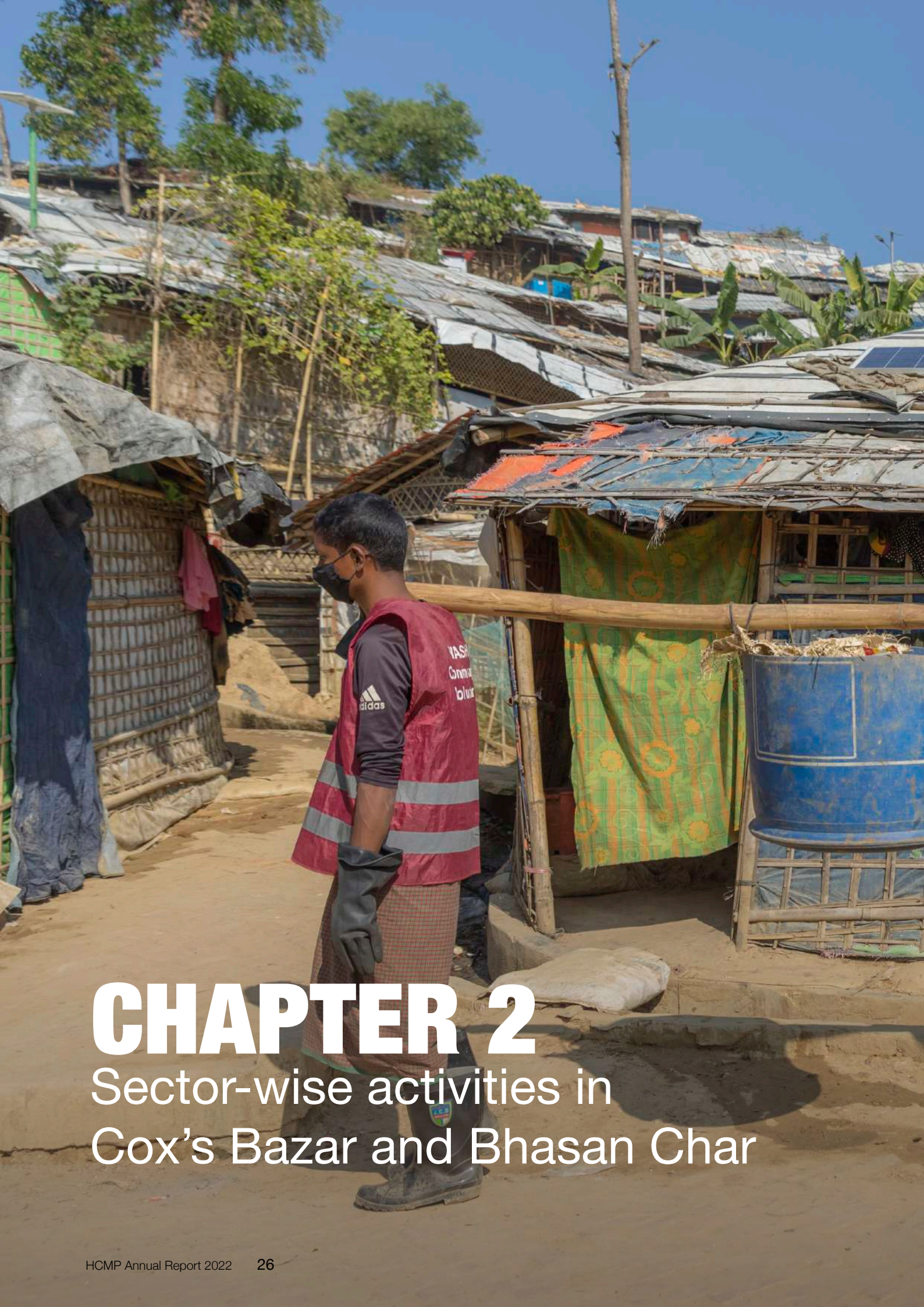
1,018

people received messages on legal information and rights



3,300

households reached with different agriculture and aquaculture support



CHAPTER 2

Sector-wise activities in Cox's Bazar and Bhasan Char



WASH

Water, Sanitation and Hygiene

“ I couldn’t eat, I felt sick, and the smell from the sludge used to bother me even after completing faecal sludge management work. After a few months, BRAC provided a generator, pump, and pipe to do the desludging. This type of faecal sludge mechanisation made my work dignified and healthy.

Anwar Hossain, Age 32
Desludge volunteer
Camp 3

Cox's Bazar

In 2022, the overall objective of the WASH programme was to provide quality, regular, sufficient, equitable, and dignified access to WASH services for targeted Rohingya camps and host communities, including persons with disabilities. In line with this objective, BRAC continued operation and maintenance of its WASH facilities, such as piped water supply

networks, tube wells, latrines, bathing cubicles, women hygiene centres, Solid Waste Management (SWM), Faecal Sludge Management (FSM) plants and hygiene promotion activities, along with new WASH construction both in Rohingya and host communities. BRAC also regularly monitored water quality through its equipped water quality monitoring laboratory. In addition, the

programme managed the largest FSM plant and a mega sanitary landfill site, which benefited both Rohingya and host communities. The programme was implemented in 12 camps and host communities, benefiting approximately 279,502 people in the Rohingya camps and 65,000 people in the host community.



Bhasan Char

In 2022, BRAC provided regular repair and maintenance services for mini-water networks, tube wells, latrines, bathing cubicles, SWM, and hygiene promotion. The WASH intervention reached over 19,155 people and covered 38 clusters during this time in Bhasan Char.



Key Facts and Figures of WASH:

16,090

water sources installed
or repaired or upgraded

144

solid waste and faecal
sludge management
facilities/plants installed
and maintained

279,163

people who participated
in community hygiene
behavioural change
programme

13,454

sanitation facilities
installed, maintained,
and improved

42,748

women and girls who
had appropriate sanitary
protection materials for
menstruation





Education

“Earlier, I was nervous and afraid of speaking in front of the learners, but the BRAC language course boosted my confidence, and I am now able to manage the class more skillfully.

Noor Qadar, Age 36
Subject-based Rohingya teacher
Camp 16

Cox's Bazar

The objective of the education programme, in 2022, was to ensure access to quality, gender-responsive and inclusive education, in a safe and protective environment, for the children of Rohingya and affected host communities.

The most significant achievement was the successful transfer of 55,056

students from the Learning Competency Framework Approach (LCFA) curriculum to the Myanmar curriculum following the decision of the Government of Bangladesh. BRAC provided a range of educational services such as Early Childhood Education (ECE) for 3-4 years-old children and basic literacy and numeracy education for youths and adolescents aged 15-24 years. BRAC also distributed textbooks and teaching learning materials to all the students to support their learning. Additionally, the programme offered basic pedagogy and subject-specific training to teachers, which helped in their professional development. The initiative also arranged capacity development training for members of the Community Education Support Group (CESG) and parents, aimed at strengthening community mobilisation and active engagement within the community. Moreover, BRAC collaborated with the Institute

of Educational Development (IED), BRAC University and Cambridge University, UK, to develop basic literacy and numeracy education materials for youths and adolescents. These materials were used by BRAC and other partner organisations to educate and support the learners.

The programme also ensured the necessary repair and reconstruction of learning centres (LCs) for the continuation of the study. In 2022, BRAC provided educational support to 69,579 students (35,213 girls, 34,366 boys) in 16 camps and host communities in Cox's Bazar. As the early months of 2022 were under the imposed lockdown due to COVID-19, the learning centres were closed for months, however, as soon as those were reopened, BRAC took proactive initiatives to bring the learners back to the learning centres and join in the learning process.



Bhasan Char

The education programme started working in Bhasan Char in 2022 as one of the very first responders, aiming to ensure quality gender-responsive and inclusive education for children, adolescents and youths living in Bhasan Char. In 2022, the Education programme introduced the Myanmar curriculum for the students of Kindergarten to Grade 6. The programme also developed educational materials for learners, and

provided ECE for preschoolers; basic literacy, numeracy, and life skills education for adolescents, and youths. The programme also conducted capacity development training for teachers and staff comprised of basic pedagogy, subject-based pedagogy and training on other cross-cutting issues. From the learning of Cox's Bazar, the programme ensured gender-segregated WASH facilities in all centres. BRAC encouraged community participation through the School Management Committees (SMC) to ensure students' attendance, promote inclusive education, and child safeguarding in schools. The programme provided education services in 18 clusters through 41 LCs, 10 Adolescent Clubs, and 7 Humanitarian Play Labs and reached 2,867 children in 2022.



Key Facts and Figures of Education:

197

learning facilities and adolescent centres in camps constructed with safe and protection features

868

teachers/staff trained on different types of training and achieved more than 80% marks in the post training evaluation

72,446

crisis-affected Rohingya girls and boys aged 3 to 24 years received education, supplies, and equipment aligned with Education sector standards





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Health and Nutrition including MHPSS

“ I could not take any food, became weak, and suffered from multiple ailments. I came to BRAC primary health care centre for treatment. Here I received doctor’s consultation, nutritional counselling, and adolescent counselling. Now, I feel better, and they were really kind to me.

Yeasmin Akter, Aged 18
Victim of human trafficking
Camp 4

and sexual and reproductive health through household visits and community-level meetings. In addition to awareness raising, the CHWs refer the patients to their nearest health facilities for early diagnosis and treatment. The programme continued facility-based health care through 11 health facilities (3 primary health care centres and 8 health posts) located in 10 camps dedicated to 155,000 people.

chronic diseases. Community-based diagnosis, treatment (including TB DOT) and referral of TB, TB-HIV and Malaria have been strengthened as per the national guidelines, and Insecticide-Treated Nets (ITNs) have been distributed in the camps. Furthermore, the programme significantly focused on promoting institutional delivery and supporting survivors of GBV through referral and MHPSS. Conjunctivitis and re-emerging of Dengue were major health hazards in 2022, which were mitigated successfully in collaboration with the government and other partners of the Health sector.

Cox's Bazar

In 2022, the Health and Nutrition programme contributed to improving equitable access to and utilisation of quality lifesaving and comprehensive primary health care services for Rohingya and affected host communities. This programme continued providing preventive and promotive healthcare services by the Community Health Workers (CHWs) on communicable diseases, noncommunicable diseases,

The programme also provided nutrition counselling for infants, young children, adolescents, pregnant women and lactating mothers, and patients with



Bhasan Char

The Health and Nutrition programme followed the same service provision modality for Bhasan Char. These services were provided through 1 health facility for 10,000 people on the island.



Key Facts and Figures of Health and Nutrition:

376,241

people reached (with recurrence) through outpatient general medical consultations, disaggregated by age, sex, and disability

879

under five children suffering from acute malnutrition (SAM or MAM)/ Pregnant and Lactating Women (PLW) admitted to the nutrition facilities

191,200

ITN distributed to the Rohingya families

20,451

women received Antenatal Care (ANC) services

2,627

TB cases detected in the Rohingya population

1,833

HIV screening among all diagnosed TB patients

413

institutional deliveries conducted by skilled birth attendants

65

Malaria cases detected in the Rohingya population

5

HIV positive cases identified among diagnosed TB patients

21,500

eligible couples (ELCOs) received contraceptive methods (total users by all stakeholders)

BRAC HCMP worked on strengthening access to noncommunicable disease programmes by providing community-based MHPSS to Rohingyas through a cost-effective and sustainable para-counselling model.



In 2022, a total of 243,159 Rohingyas received different group sessions on MHPSS. In addition, a total of 8,019 potential clients were identified for individual counselling and Psychosocial Support (PSS), and 1,047 Rohingyas were provided psychiatric support. It also focused on quality PSS and integrating mental health into different sectors through the capacity building of 147 front liners of BRAC and other agencies, as well as strengthening inter-sectoral referral pathways. Moreover, BRAC MHPSS, in coordination with WHO and UNHCR, organised three-day mhGAP training for health professionals of 40 national and international agencies which created access to expert mental health support

for Rohingyas. Moreover, the programme focused on creating evidence of quality MHPSS which resulted from a study conducted by BRAC-IED (2022) that showed an increased quality of life of the Rohingya community in terms of physical health, psychological, social relationship and environmental aspects. It also showed a significant decrease ($p < .001$) in Serious Psychological Distress (SPD), depressive symptoms and post-traumatic stress disorders (PTSD) after the intervention. In Bhasan Char, MHPSS integrated with the Health sector provided counselling and PSS during increased suicidal attempts among Rohingya population. As a result, there were no further suicidal attempts taken by the participants under BRAC MHPSS' support. In addition, the programme provided extended support in different disasters and fire incidents as a response to emergency situations (including

Bhasan Char), helping to prevent vulnerability and contributing to developing resilience among communities.







Protection

(Community-Based Protection-CBP, Gender-Based Violence-GBV, and Legal Protection)

“ I would definitely be rotting in jail if the legal office did not interfere timely about my confinement. My reputation would be destroyed. BRAC provided legal support and released me from confinement.

Md. Mokbul, Age 47
Block Leader
Camp 4 Extension

Cox's Bazar

The Protection programme continued its effort under three sub-sectors – Community-Based Protection (CBP), Gender-Based Violence (GBV), and Legal Assistance to reduce the risk of protection vulnerability, thereby, ensuring women's and girls' safety and dignity.

CBP worked to strengthen community self-management structures and developed a

sustainable community-led approach to address the community's challenges. Capacitating community members and involving them in identifying problems, finding solutions, and implementing those solutions was a major component of CBP. The project reached 58,766 individuals in 2022.

GBV worked for prevention and response to GBV and followed a comprehensive survivor-centred approach in the Rohingya and host communities. The core interventions included case

management services for GBV survivors, livelihoods and skills development-related activities in women's and girls' safe spaces, and engagement of men and boys in GBV prevention and response. In 2022, approximately 100,000 individuals received GBV-related services.

Legal protection services ensured access to justice for the Rohingya community. The intervention included promoting community access to legal information and legal services. In 2022, 27,902 people benefited from this programme.



Bhasan Char

The protection programme followed the same modality of activities in Bhasan Char. This programme reached a total of 28,951 individuals through CBP services, 18,013 individuals through GBV prevention and response services, and 1,872 individuals through legal services under three facilities in 2022.



Legal Assistance Centre Camp- Bhasan Char

Legal Protection, HCMP, B



Key Facts and Figures of Protection:

60

community groups capacity development to strengthening community self-protection mechanism

3,043

participants received livelihoods/vocational training

10,286

individuals supported with legal aid and related services including victims of trafficking and exploitation

550

religious leaders sensitised to strengthen community engagement and awareness on protection issues

5,281

people participated in sensitisation sessions on gender, Menstrual Hygiene Management (MHM), Sexual and Reproductive Health and Rights (SRHR), drug abuse resistance, health, and hygiene at the household level





Child Protection

“ Here, I can talk about my happiness and sadness. I can keep myself well and my child playful. I can frankly tell everything about myself to BRAC’s mother volunteer and para-counsellor apa. It is very soothing for me.

Yeasmin, Age 31

Participant of home-based mother engagement session
Camp 12

Cox's Bazar

The Child Protection programme prioritised the well-being of children, adolescents, and the community. In 2022, the programme mostly focused on strengthening play-based interventions through community-based mechanisms. The interventions enhanced the skills and knowledge of the children. Furthermore, the programme provided structured and unstructured PSS, life skills training, and pre-vocational skills training and created the provision of recreational and development activities for adolescents and youths. The programme also conducted evidence-based research reinforcing the need to develop results-based models within the bigger picture. The programme reached 98,192 children and adolescents, as

well as 371,541 members of the community.

Improvements have been observed in the developmental skills of children, including physical, cognitive, creative, social, and emotional skills. Furthermore, approximately 89.35% of parents and caregivers are engaged in self-care activities, leading to enhanced emotional well-being, reported at 91.90%.

Moreover, some adolescents and young adults have successfully graduated from vocational training programmes in various trades such as

tailoring and solar energy, enabling them to establish their own businesses or collaborate with other agencies.

In 2022, the Child Protection sector had a significant impact on the community. Child protection committee members were instrumental in identifying and addressing child protection concerns affecting children and adolescents' lives. They effectively referred 75% of these children to appropriate service points, following established case management procedures, as revealed by research findings from BRAC IED in 2022.



Bhasan Char

In 2022, a Child Protection programme was initiated in Bhasan Char to reduce the protection risk of children by focusing on suicide prevention. Interventions included structured and unstructured PSS and life skills-based interventions. In addition, adolescent clubs and community-based groups were established to strengthen the community-based child protection mechanism. This programme reached a total of 8,142 children.



Key Facts and Figures of Child Protection:

54,591

children, adolescents and youths received services related to Early Childhood Development (ECD), life skills, pre-vocational skills, occupational/vocational skills, basic IT skills, literacy and numeracy competency, and entrepreneurship skills

246,515

individuals including children and adolescents benefitted from age, diversity and gender-sensitive mental health and PSS services (individual, structured, Humanitarian Play Lab sessions, community-based, group-based, clinical mental health consultations, or integrated PSS services)

38,240

parents and caregivers received culturally and contextually appropriate PSS services like psycho-education-based sessions

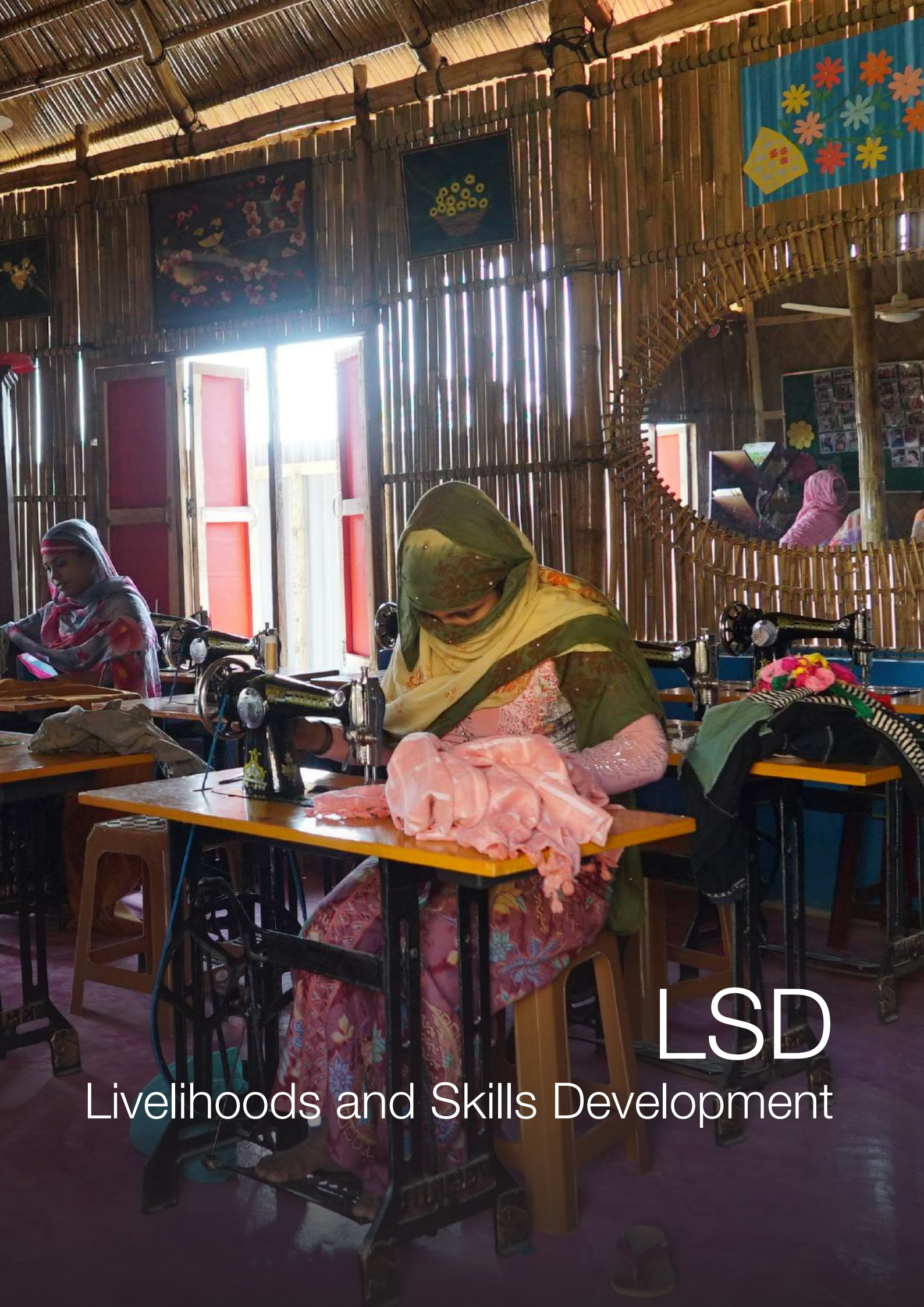
2,068

identified children-at-risk aged 0 to 18 years, received specialised age and gender-sensitive child protection services through individual case management

3,359

individuals from the communities, authorities, service providers and other sectors trained on protection practices, principles, and policies (including training on protection mainstreaming by partners and protection mainstreaming focal points)





LSD
Livelihoods and Skills Development



One of the most significant developments in the Livelihoods and Skills Development sector in 2022 was the approval of the 'Framework on Skills Development for Rohingya Refugees/FDMNs and Host Communities' by the Government of Bangladesh. BRAC played a proactive role in drafting and developing the framework and worked closely with relevant UN agencies, including UNHCR, in this regard.



A. Skills Development

Cox's Bazar

Aiming to increase technical skills and livelihood opportunities, the LSD programme provided technical skills training to the women, men, and youths of Rohingya and

host communities. It also established 8 new skills development centres in 8 Rohingya camps to provide vocational training, especially to Rohingya youths, including girls and young women. In 2022, the Ayesha Abed Foundation (AAF) supported 249

Rohingya women in the camps and 335 women in the host community, including persons with disabilities, by offering training and livelihood opportunities. This activity continues in Cox's Bazar.

“ After receiving training from skilled trainers at the Ayesha Abed Foundation, I began earning money on a daily basis, and now my monthly income amounts to approximately Tk. 11,000.

Jahanara Begum, Age 33
Orphan and widow in the host community
East Goliapalong, Khuniapalong union Ramu

B. Agricultural Livelihoods Development

Cox's Bazar

Despite the challenges of limited physical space and less favourable climatic and topographic conditions in the Rohingya camps, BRAC was able to make significant contributions to agricultural livelihood development in both the Rohingya and host communities. The project participants received essential training and inputs, including seeds, fertiliser, bamboo, and other accessories. Rohingya

volunteers engaged by BRAC, along with BRAC staff, provided proper guidance, close supervision, and follow-up to ensure the successful establishment of homestead vegetable gardens.

Additionally, the programme strengthened community

engagement in production and market linkages. The agricultural livelihoods component supported 7,300 Rohingya participants in 17 camps and 2,000 host participants in 5 unions of the host community in Ukhiya and Teknaf.



Bhasan Char

BRAC made a significant contribution to agricultural livelihood development on Bhasan Char. Training, along with agricultural inputs such as seeds, fertilisers, bamboo, and other accessories, as well as integrated pest management supplies, were provided to 3,600 Rohingya households on Bhasan Char. These households received support for homestead gardening

and commercial vegetable production on pond banks. BRAC also promoted community aquaculture in cluster ponds and in lakes outside the clusters. Livestock-related interventions were offered to the Rohingya participants. Through these interventions, BRAC piloted various livelihood options, including sheep rearing, duck rearing, homestead chicken rearing, broiler chicken rearing, and various types of vegetables on Bhasan Char. This pilot aimed to identify

the survivability, productivity, profitability, and overall suitability of these options in the harsh agro-climatic context of Bhasan Char.

The piloting process has provided valuable insights into future agricultural livelihood options for Rohingyas on Bhasan Char. Additionally, BRAC conducted a study titled 'Need and Market Assessment of Livelihood Opportunities for Rohingya Refugees on Bhasan Char' by engaging a third-party consultant.



Key Facts and Figures of LSD:

1,000

households received capacity building support through skills development activities

14,500

homestead gardens established with at least 2 Climate-Smart Agriculture (CSA) technologies

280

Rohingya households involved in community-based aquaculture and vegetable gardening

1,055

beneficiaries supported and practiced on specialised agricultural interventions (disaggregated by the type of interventions like Mushroom, seedling nursery, vegetable aggregator, seed production, Taro production, Orange Flesh Sweet Potato)

“ BRAC supported me when I needed to rebuild my shelter and also provided tarpaulin for the roof. In addition to that, BRAC is assisting in the construction of roads, bridges, and stairs in the camps, which helps us maintain smooth communication.

Salim Ullah, Age 45
Member of Rohingya community
Camp 4



Shelter

maintenance of access roads, drainage systems, and slope stabilisation. To accomplish these goals, BRAC was involved in providing shelter kits, rehabilitating damaged or destroyed shelters, and constructing new ones or improving existing ones. Community participation was another key focus, ensuring that the solutions provided were culturally appropriate. The BRAC shelter programme also emphasised capacity building for local communities in shelter construction and maintenance, helping them take ownership

of and sustain the shelters in the long term. Furthermore, the programme created employment opportunities during times of crisis through cash for work activities, enabling Rohingyas to earn and support their families. The programme addresses the specific needs and vulnerabilities of women, children, and other marginalised groups, including the elderly and people with disabilities, by providing essential porter and labour support for repairing and constructing shelters for these vulnerable populations.

Cox's Bazar

The Shelter programme focused on providing shelter solutions for people affected by crises, such as natural disasters or displacement, in 10 camps. Additionally, improving the overall site conditions of the camps was another priority, achieved through the



Key Facts and Figures of Shelter:

336

households benefitted from durable shelter materials (treated bamboo, steel shelters, reinforced concrete posts) in camps

28,153

households assisted with shelter support (disaggregated by emergency, regular-maintained minimum performance standards) in camps

1,719

community people trained on technical knowledge to build or repair shelter at household level in camps

43,765

liner metres of site improvements related infrastructure constructed (drains, stairs, retaining wall, bamboo bridge, and canal re-excavation) in camps

‘ I walk with a crutch and strongly feel the urgent need for a bridge or culvert over the canal. Responding to this need, BRAC constructed a 40-foot long bamboo bridge here based on the recommendation of the nearby community.

Md. Abu Bakkar Siddique, Age 35
Person with disability
Camp 17



Community-Led Project
လူထုဦးဆောင်သောစီမံကိန်း
Camp 17

SMS

Site Management Support

Cox's Bazar

The Site Management Support (SMS) has been assisting designated government authorities (Refugee Relief and Repatriation Commissioner-RRRC, Camp-in-Charge-CiC) in improving the living conditions for Rohingyas in camps and ensuring access to assistance and protection. SMS has ensured that the services provided to the Rohingya community are inclusive, rationalised, and holistic through effective coordination among partners and Rohingyas. Given the frequent incidents of fire, the programme initiated a

Mobile Firefighting Unit (MFFU) in every camp, equipped with necessary fire response equipment such as fire hydrant tanks and portable pumps, and conducted biweekly firefighting drills. SMS also organised awareness events in collaboration with other key sectors, provided training to staff and volunteers on disaster preparedness and response, and played a crucial role in emergency response by engaging the volunteers and community.

In 2022, SMS had 700 well-trained and equipped

volunteers who were also involved in Cyclone Preparedness Programme (CPP) activities during cyclone preparedness and response. With the help of these volunteers, SMS staff strengthened the community's resilience to camp-specific hazards. SMS also played a vital role in facilitating the dignified relocation of Rohingyas. In 2022, the SMS programme managed 7 camps with a total population of 177,744 individuals from 37,183 households.



Key Facts and Figures of SMS:

227

site development and improvement works identified through community consultations and/or referrals in camps

176,525

Rohingyas living in camps where a multi-hazard emergency preparedness and response plan has been updated and tested

271

sector-wise service gaps assessment conducted and coordinated with respective partners to resolve the issues

336

effective relocation facilitated for minimising risk factors and improving living standard in camps

36

camp actors trained and sensitised on camp management and camp coordination structure for efficient delivery of services

“ With the training, I learned my roles and responsibilities as a member of the ward disaster management committee. Now I help my neighbours and community better prepare for any impending disaster.

Moni Day, Age 23

Training participant organised by DRR-HCMP
Ukhiya



DRR

Disaster Risk Reduction

Cox's Bazar

The Disaster Risk Reduction (DRR) programme aims to assist the Rohingya and host communities in better preparing for and responding to various hazards. In 2022, the programme focused on developing a digital Decision Support System (DSS) for local government authorities in Ukhiya upazila. This system

consolidated information on resilience and identified specific risk areas in each union from a single database. It also used geographic information on existing infrastructure and natural features to improve its accuracy. The system included a list of vulnerable households and their locations, which could be utilised during evacuations when natural hazards strike suddenly.

Based on the findings of the DSS, the DRR programme implemented activities throughout the year to strengthen community resilience. This included organising capacity-building sessions for local Disaster Management Committees (DMCs) and HCMP staff to improve their preparedness

for hazards. The programme also implemented nature-based mitigation measures and community-led initiatives, such as canal re-excavation schemes, to reduce waterlogging and landslides in vulnerable areas. Additionally, the programme collaborated with the Ministry of Disaster Management and Relief (MoDMR) to develop training modules for CPP to promote volunteerism in disaster preparedness and response.

Overall, the DRR programme worked to improve the preparedness and resilience of the Rohingya and host communities through the use of digital tools, capacity building, nature-based solutions, and collaboration with local authorities and stakeholders.



Key Facts and Figures of DRR:

1,500

vulnerable households reached with disaster preparedness interventions

4,000

vulnerable households received weather forecasts and early warning messages

780

Disaster Management Committees (DMCs) members and different stakeholders trained on disaster management

5

updated Community Risk Assessment (CRA) and Disaster Management (DM) plans endorsed by the local administration

“ With the support of BRAC, we have been able to buy fresh vegetables at lower prices from vendors in the camp quickly. We have benefited more than before.

Mohammad Shofique
Member of Rohingya community
Camp 27, Block B




WFP
World Food Programme

Community-based Aquaculture
ရပ်ရွာအခြေပြုငါးယဉ်ကျေးမှု



  
SAVING LIVES
CHANGING LIVES

FS

Food Security

Cox's Bazar

The Food Security programme aimed to ensure food security for targeted Rohingya populations. In 2022, the BRAC General Food Assistance (GFA) team continued its services to increase access to a variety of food products to meet nutritional needs. The programme provided regular

food assistance through primary sources, including e-voucher outlets and fresh food corners. Individuals could purchase up to USD 12 worth of food, including rice, oil, lentils, vegetables, fruits, and other items, from these outlets.

Additionally, highly vulnerable households, such as those headed by the elderly, women, children, or persons with disabilities, received additional vouchers worth USD 3 to

purchase fresh foods like vegetables, fish, and chicken. The GFA team also extended services through the Rapid Response Modality (RRM) to vulnerable individuals affected by disasters such as cyclones, fires, landslides, or spontaneous displacement. This programme operated in 7 camps and played a significant role in providing services through an e-voucher system at 6 food distribution outlets.



Key Facts and Figures on Food Security:

32,172

Rohingyas received regular food assistance through the primary sources of e-voucher outlets and fresh food corners (data disaggregated households)

12,031

Rohingyas participated in food for assets or cash for work activities

277

Rohingya households reached with timely food assistance in case of a disaster

9,403

extreme vulnerable (approximately 30%) Rohingya households such as elderly-headed, women-headed, child-headed, persons with disabilities received fresh food from fresh food corners

Monitoring, Evaluation, Accountability, and Learning (MEAL)

The MEAL is a vital component in managing all HCMP programmes. It employs an adaptive planning and management approach and integrates BRAC's sectors, programmes, and relevant stakeholders.

MEAL Activities in 2022

In 2022, HCMP MEAL strengthened its Management Information System (MIS) data hub in alignment with BRAC's central MIS. Approximately every month, progress on around 40 projects was captured and validated through this comprehensive process. The MEAL unit also collaborated with sectors to develop quality benchmark tools for measuring programme intervention quality in both Cox's Bazar and Bhasan Char. This year, MEAL conducted an annual outcome survey to assess sustainable changes among programme participants. Additionally, it continued to provide support in designing the Monitoring and Evaluation (M&E) plan for all awarded projects under HCMP to ensure that the outcomes, indicators, and activities of all projects were aligned with the

approved results framework. The MEAL unit established a MEAL Working Group within HCMP as a proactive measure to enhance the capacity of HCMP staff. This working group serves as a platform for sharing knowledge and best practices in these areas. The MEAL unit also developed a MEAL findings tracker to monitor MEAL findings through regular Programme Implementation Quality (PIQ) assessments and an HCMP facility location navigation map for the MIS data hub application. All of these MEAL initiatives have helped HCMP improve its programme quality, efficiency, and cost-effectiveness.

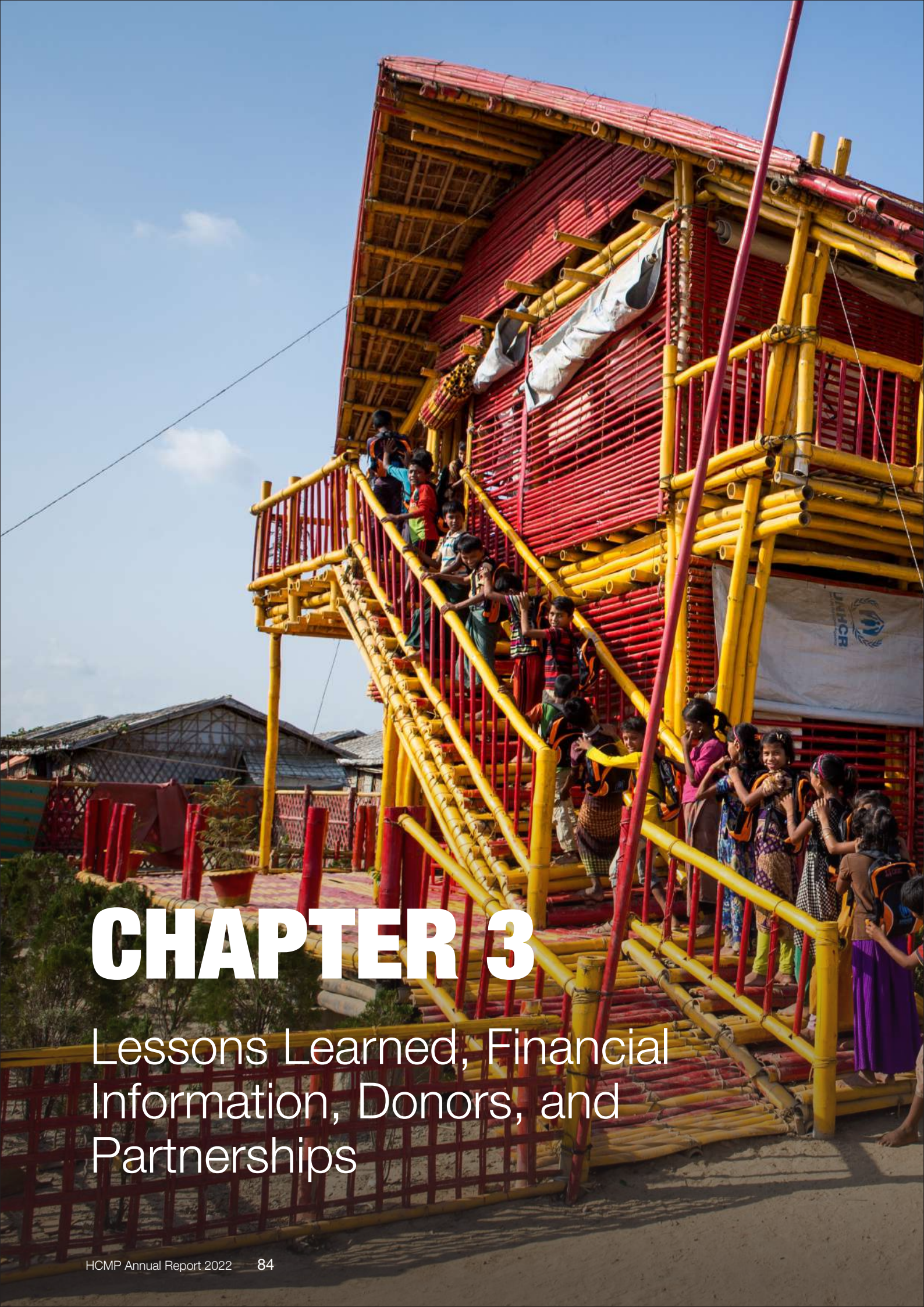
Alongside routine MEAL activities, the MEAL plan for 2023 encompasses regular PIQ assessments and reports, along with the introduction of a digital MEAL web system designed to monitor real-time findings.

Partnerships with Local NGOs

BRAC prioritised localisation and community development to better address the needs of locally-affected communities by enhancing leadership among local authorities and civil society in humanitarian action. In 2022, prior to the pooled fund intervention, HCMP collaborated with four local NGOs (ACLAB, NONGOR, PHALS, and SHED) to implement activities in both Rohingya and host communities, aiming to strengthen local partner NGOs. Through these partnerships, BRAC provided technical support and guidance to these local NGOs to develop their organisational capacity, accountability guidelines, participation in decision-making, and alignment with humanitarian principles. With support from BRAC, these NGOs created or revised Gender Strategy/Position Papers, Accountability to Affected Population (AAP) plans, and preparedness and response strategies.

These local partners strengthened two Union Parishad and Ward-level DMCs and organised union-level workshops and training sessions for 40 Community-Based Organisations (CBOs) leaders. The training covered topics such as leadership, organisation/group management, and networking for community development and humanitarian response, aiming to promote community participation and local ownership of humanitarian and development interventions. Local CBOs/clubs developed and implemented Community Action Plans to address emerging socio-economic challenges. Additionally, assistance was provided to 9 youth clubs.

Nine youth clubs received assistance with local legal identification registration. Additionally, 5 Union Parishad Standing Committees, covering various areas such as agriculture and other development works, cottage industries and cooperatives, women and children welfare, culture and sports, conservation of the environment and tree plantation, and union public works, were activated and collaborated with CBOs/clubs to implement local-level plans.



CHAPTER 3

Lessons Learned, Financial Information, Donors, and Partnerships



Water, Sanitation and Hygiene (WASH)

In 2022, the WASH programme encountered challenges related to the construction of new latrines and bathing cubicles. These issues arose due to delays in design approvals and the procurement of construction materials. Additionally, our experience has shown that providing durable WASH solutions for Rohingya community, such as steel frame latrines and bathing cubicles, has significantly reduced repair and maintenance costs. However, developing a cost-effective WASH programme and implementing low-cost technological innovations are essential steps for BRAC HCMP to address current funding gaps.

Acute Watery Diarrhoea (AWD) and scabies were significantly reported in the camps. Monitoring and improving water quality will remain a top priority, especially in areas lacking regular operation and maintenance, to prevent

waterborne diseases like AWD and scabies.

SWM remains a critical issue in the camps due to a lack of community awareness and engagement, communal infrastructure and services, inadequate secondary landfill facilities, and outdated technology for handling various types of waste.

The increasing presence of plastic and inorganic waste pose a significant threat to environmental degradation, leading to problems such as blocked drainage systems, reduced soil fertility, and the spread of vector-borne diseases like Dengue and Malaria. Furthermore, the sole sanitary landfill for the Rohingya response, where non-recyclable waste is disposed of, is nearing its capacity. Therefore, effective management of sanitary landfill sites would be an essential part of WASH intervention in 2023. An integrated SWM approach is a high priority in future planning, focusing on environmental sustainability and improving the living conditions of both the Rohingya and host communities.

Education

In 2022, the Education Sector faced several critical challenges while providing educational services to students from the Rohingya and Host communities. Among these challenges, the most formidable one was enhancing the pedagogical skills of Rohingya teachers, in particular. Continuing the Myanmar curriculum posed a significant hurdle due to the limited number of trained Bangladeshi teachers, while available Rohingya teachers often lacked the necessary educational background. Consequently, BRAC initiated Teacher's Professional Development (TPD) programmes to support the capacity building of its teachers and partners on a large scale. This effort must continue to increase the number of Rohingya teachers and ensure the quality education of Rohingya children.

Another pressing issue in 2022 was the quest for adequate space to accommodate the growing number of children and establish new learning centres. BRAC sought to address this challenge by

constructing two-story learning centres using bamboo. Finding alternative infrastructures for continuous education remains a high priority. Furthermore, bamboo has become scarce in the greater Chattogram region, leading to increased costs and environmental concerns associated with excessive bamboo harvesting. Consequently, BRAC believes that instead of bamboo, plastic or other sustainable materials could be used for construction. Simultaneously, the urgent need for two-story construction in the camp area is essential to accommodate all Rohingya students in proper classrooms.

On the other hand, the registered camps community expressed concerns regarding the Myanmar curriculum, as they do not see a future for their children within this framework. This concern has resulted in a higher dropout rate in learning centres. In response to this situation, the Education programme developed an interim curriculum to enable children to continue their education. This initiative should be addressed at the national level to resolve the curriculum issue, considering the future of Rohingya children.

Health and Nutrition including MHPSS

Refugees and displaced individuals are particularly vulnerable to communicable diseases due to the high population density and poor sanitation and hygiene. In 2022, the Health programme faced the challenge of dealing with an increased number of Dengue and Conjunctivitis cases within the camps. During this critical period, the timely procurement of essential medicines was crucial. The programme successfully addressed this challenge by promptly securing the necessary medications with support from the Procurement team. Therefore, it is imperative to enhance preparedness for seasonal and communicable diseases and improve the supply chain for medicines. Additionally, adopting a sector-wide approach is essential to provide rapid support to partners when a disease outbreak occurs.

Challenges in managing medical waste disposal systems have arisen due to the lack of coordination and designated spaces within the camps. It is imperative to establish a sector-level coordination mechanism to mitigate the risk of improper medical waste management.

The prevalence of noncommunicable diseases is on the rise in BRAC health facilities; however, the follow-up system within the camps remains inadequate. Effective NCD case management necessitates specialised services, including regular diagnosis, check-ups, and follow-ups. Strengthening community engagement through more effective involvement of CHWs is essential. This can raise awareness within the community about maintaining proper health and hygiene practices, which, in turn, can reduce the impact of such diseases.

Mental Health and Psychosocial Support (MHPSS)

At the beginning of the year, the programme faced challenges stemming from volunteer dropouts due to the government's directive to reduce payments to Rohingya volunteers. Additionally, certain operating camps experienced a shortage of skilled female volunteers within the communities.

Engaging Para-Counsellors in conducting a study presented another challenge for programme implementation, as it required their participation in extensive training, conducting assessments, and maintaining client follow-ups alongside their regular work responsibilities, which involved providing individual sessions. Furthermore, the study's duration led to some research participants dropping out.

The recruitment of psychologists faced delays due to the unavailability of suitable and experienced

candidates, especially female candidates. To ensure the continuity of the programme at Bhasan Char, two experienced psychologists from Cox's Bazar were temporarily assigned to oversee activities until the newly recruited team could join.

The newly recruited team underwent comprehensive training and continuous supervision to effectively manage crises and provide high-quality services. At one point, there was a notable increase in suicide attempts among Rohingyas in Bhasan Char. This placed considerable pressure on the MHPSS service providers, who worked diligently to prevent further attempts. They also collaborated closely with CiC and donors to identify the root causes of this troubling trend.

However, achieving effective coordination and maintaining a continuous, evidence-based advocacy effort with the Government of Bangladesh and ISCG for integrated MHPSS services is essential. These efforts will eventually lead to the acknowledgement and reduction of the existing MHPSS service gaps.

Protection

Community-Based Protection (CBP), Legal Protection, and Gender-Based Violence (GBV)

Due to religious and cultural views, coupled with a lack of awareness, community members were at times hesitant to participate in the programme. This reluctance posed limitations on the programme's long-term effectiveness and impact. Additionally, the remoteness of certain blocks often hindered community members from accessing protection-related services at the community centres.

To increase community participation, the Protection programme expanded its engagement with community leaders and community outreach volunteers. Their role is to raise awareness and improve understanding of the programme's objectives and services among community members. Furthermore, the CBP programme plans to provide mobile services in different blocks, which is expected to facilitate the participation of community

members residing in remote areas, who face difficulties reaching the community centres.

The HCMP's Legal Protection team encountered challenges when addressing legal issues due to a lack of shared understanding among members of law enforcement agencies, such as Armed Police Battalion (APBN) and the Police. This often resulted in hesitancy to take prompt and appropriate initiatives. To overcome this, the Legal Protection team maintained regular communication with the responsible agencies, seeking clarification on issues to expedite the pursuit of justice for the people. The programme recognised the importance of providing frequent updates to CiC and law enforcement agencies to accelerate the implementation of legal services. Furthermore, the Legal Protection team has devised a plan to establish block-wise community groups and conduct necessary capacity-building and awareness sessions. These groups will focus on addressing safety and security issues within the camps for the entire community's benefit.

The GBV team encountered challenges in engaging SASA (Start, Awareness, Support, and Action) volunteers, who displayed reluctance in attending community sessions or one-on-one sessions. To address this issue, the GBV staff increased follow-up sessions with activists and leaders, seeking their support for the programme and explaining their roles and responsibilities. Furthermore, the team recognised the need for regular training sessions using SASA-appropriate tools and techniques, including power posters, community conversations, quick chats, etc. A comprehensive development strategy is imperative to engage these non-incentive volunteers effectively.

Child Protection

To align the Child Protection sub-sector with the Education sector, the age group targeted for the Humanitarian Play Lab (HPL) project has been modified. This adjustment created challenges in maintaining the HPL model and conducting associated research. To address this issue, it is imperative to engage in advocacy efforts with government authorities and various agencies. These efforts aim to promote and integrate the HPL curriculum as part of the model's sustainability.

The Rohingya community has exhibited reluctance in expressing concerns or filing complaints related to forced/child marriage. Additionally, adolescent girls have been hesitant to access service points where they can obtain information about child rights, adolescent protection, PSS, and empowerment activities. To address this, Community-Based Child Protection Committee (CBCPC) members and youth groups were engaged to raise awareness and encourage reporting.

Shayya Begum
begum
Husna Begum
Ruba Begum
a Begum
Fatema Begum





The orientation of community members should prioritise child protection concerns, sensitising them to take proactive roles in addressing these issues.

Furthermore, there has been a noticeable rise in child labour concerns within the camps, particularly at distribution points. This has exacerbated the negative impact on children's development and heightened child protection concerns. However, the diligent efforts of our dedicated monitoring team have resulted in a reduction in the presence of children at these distribution points.

In addition to this, conducting community awareness sessions and encouraging increased participation in life skills and vocational training can be instrumental in addressing this issue.

Livelihoods and Skills Development (LSD)

The LSD programme encountered a significant challenge in securing space for constructing 8 skills development centres across 8 Rohingya camps in Kutupalong. The team had to collaborate closely with other sectors within BRAC, campsite management organisations, and CiC to identify suitable locations before establishing these centres within the camps.

These skills centres were well-equipped, staffed by qualified personnel, and equipped with necessary tools and facilities comparable to formal training institutes offering certified vocational training.

Sustaining these centres requires regular maintenance and repairs for their prolonged use. In addition to fixed centres, we are exploring the possibility of creating mobile training units. These units would be particularly effective in camps with limited available space.

Another substantial challenge confronting the agricultural livelihoods component is the scarcity of water for irrigation, particularly during the dry months, in the Rohingya camps, which often have rugged terrain. To tackle this issue, domestically used water is being repurposed for homestead gardening. Furthermore, BRAC's LSD sector is actively exploring opportunities for collaboration with the WASH sector to develop strategies for recycling and reusing waste and greywater from tap stands and bathing cubicles within the camps for irrigation purposes.

One of the foremost challenges faced by agricultural livelihoods and gardening within the camps is the limitation of space. To address this issue, innovative approaches such as vertical gardening, sack gardening, and tower gardening have been adopted. Furthermore, community gardens have been established in appropriate areas, involving multiple Rohingya families.

Another significant hurdle for the agricultural livelihoods component is the scarcity of water for irrigation during the

dry months in the undulating topography of the Rohingya camps. In response, efforts have been made to reuse domestically used water for homestead gardening. Furthermore, BRAC's LSD sector is actively exploring opportunities for collaboration with the WASH sector to develop strategies for recycling and reusing waste and greywater from tap stands and bathing cubicles within the camps for irrigation purposes.

Shelter

The Shelter programme faced significant challenges in maintaining and repairing the constructed shelters, which were made from temporary and degradable materials. The costs of these maintenance efforts have been steadily increasing over time, exacerbating the existing funding gaps that have accumulated over the years.

To identify potential solutions, BRAC has already initiated collaboration with various stakeholders and will continue these efforts in the coming year. The objective is to explore alternative shelter materials that are not only durable but also environmentally friendly, fire-resistant, and easily reusable.

Site Management Support (SMS)

The BRAC SMS Programme encountered challenges, including overlapping issues with the Shelter programme, which affected the overall cost-effectiveness of the response efforts. In response to these challenges, BRAC has aligned itself with the rationalisation process initiated within the Rohingya response, coordinated by ISCG. This alignment aims to reduce service duplication and promptly identify the most effective solutions.

To address inter-sectoral coordination-related challenges, discussions will be held in larger forums with the goal of integrating a more effective and sustainable approach.

Disaster Risk Reduction (DRR)

One of the major challenges faced by the DRR programme in Cox's Bazar is the lack of preliminary information regarding risk assessment and community resilience. To address this challenge, the programme leveraged technology to develop a Decision Support System (DSS) for the host community in Ukhiya upazila. This collaborative effort involved government stakeholders, other organisations, and community members.

The Government of Bangladesh has officially accredited BRAC's DSS, making it accessible through online platforms such as the Community-Level Disaster Resilience Index (CLDRI) and Electronic Community Risk Assessment (E-CRA). This system is now actively used for monitoring resilience and planning implementation areas, contributing significantly to overall risk governance.

Food Security (FS)

Within the FS programme, the General Food Assistance (GFA) faced challenges related to the utilisation of vouchers, primarily due to the unfortunate circumstances of beneficiaries, including their passing away or prolonged absences. To address this issue, the Food Security team implemented a tracking system to identify such cases and exclude them from entitlements. This effort significantly improved voucher utilisation rates.

Furthermore, the programme management personnel engaged in discussions with CiC to collaborate on addressing this issue, verifying the list of beneficiaries, and ensuring that deceased and missing beneficiaries were excluded to facilitate the proper utilisation of entitlements.

In the near future, enhancing inter-sectoral coordination will be essential to ensure that the central database remains updated more frequently.

Monitoring, Evaluation, Accountability, and Learning (MEAL)

The MEAL team encountered challenges when attempting to track progress across various projects using the same indicators. These challenges arose from differences in context and implementation strategies. To address this, MEAL successfully tackled the issue by contextualising indicators for each project, developing clear definitions, and establishing specific data collection methods. This approach helped overcome the initial challenge and ensured accurate progress tracking.

Another challenge the MEAL team faced was aligning the HCMP's results framework with donor requirements. To tackle this challenge, MEAL conducted a thorough review of the results framework and made necessary adjustments to bring it in line with donor requirements.

Financial Statement

Humanitarian Crisis Management Programme (HCMP)
Statement of Financial Position
as of 31 December 2022

Particulars	Amount in BDT
Assets	
Property, plant and equipment	123,828,589
Grants Receivable	420,576,932
Advances, deposits and prepayments	25,747,166
Cash in hand and at banks	653,961,490
Total Assets	1,224,114,176
Liabilities and Net Assets	
Liabilities	
Donor fund-investment in fixed assets	57,468,541
Grants received in advance account	877,817,982
Other current liabilities	288,827,653
Total Liabilities	1,224,114,176
Net Assets	-
Capital fund	-
Total Liabilities and Net Assets	1,224,114,176





Our Partners

- The Government of the People's Republic of Bangladesh
 - Office of the Refugee Relief and Repatriation Commissioner (RRRC)
- Abundant Future Foundation
- Action Against Hunger
- The Australian Government
- Avaaz
- The Big Heart Foundation
- Bill & Melinda Gates Foundation
- British Asian Trust
- The British High Commission Dhaka
- Cartier Philanthropy
- charity:water
- ConnectHER
- Conrad N. Hilton Foundation
- The Cynthia and George Mitchell Foundation
- The Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ)
- Dubai Cares
- Education Above All Foundation
- Education Cannot Wait Fund
- edotco
- The Global Fund to Fight AIDS, Tuberculosis and Malaria
- The Government of Canada
- Grand Challenges Canada
- HSBC
- International Development Research Centre
- International Organization for Migration
- Lego Foundation
- Medicor Foundation
- Metabolic Studio, Annenberg Foundation
- MSI
- The Nippon Foundation
- The Royal Netherlands Embassy in Bangladesh
- The Russell Family Foundation
- Save the Children International
- Semnani Family Foundation
- Sesame Workshop
- SpaandanB
- Standard Chartered
- The Swiss Agency for Development and Cooperation
- Together Rising
- UN Central Emergency Response Fund
- UN Women
- UN World Food Programme
- UNDP
- UNHCR
- UNICEF
- Bureau of Population, Refugees, and Migration (PRM) of the United States Department of State
- World Memon Organisation
- Yidan Prize Foundation
- Zakat Fund
- Anonymous donors

**Sincere appreciation goes to all Sector Leads and colleagues of
BRAC Humanitarian Crisis Management Programme (HCMP)**

Reviewers:

Md. Akramul Islam, Ph D
Senior Director, BRAC

Rezaul Karim
Programme Head and Office In
Charge, HCMP

M Nazrul Islam, Ed D
Programme Head, HCMP

Editors:

Mamunul Haque
Head, HCMP and External
Communications

Cora Ann Neudeck
Programme Specialist
ED's Office and HCMP

Copy-editing:

Saeda Bilkis Bani
Programme Coordinator, HCMP
Support

Mostafizur Rahman
Senior Manager, PDDR, HCMP

Contributors:

Shamima Easmin Toma
Manager, Knowledge Management
PDDR, HCMP

Kazi Ashief Mahmood
Specialist, PDDR, HCMP

Heronmoye Tanchangya Lisa
Specialist, PDDR, HCMP

Abdur Rouf Khan
Specialist, PDDR, HCMP

Coordinator:

Abdullah Al Rashed
Communications Specialist, HCMP

Art Direction and Design:

Tania Afroz
Lead, Design, Communications

Mahbuba Ali
Manager, Design, Communications

Photo credit:

BRAC
BRAC/ Abdullah Al Rashed
BRAC/ Mazadul Haque
BRAC/ Laila Sumaiya
BRAC/ Shanauzzaman Angkan
BRAC/ C-CAB/ Sanwar Hossain
BRAC/ Studio Wide Angle/ Faiham Ebna Sharif

Cover photo:

BRAC/ Sarker Protick

Data:

BRAC MEAL Department

*Note: The names and designations have
not been arranged in alphabetical order or
by seniority.*

For further information

BRAC Humanitarian Crisis
Management Programme (HCMP)
Plot 42, Block C,
PWD Hotel Zone
Kolatoli, Cox's Bazar 4700
Bangladesh

Mobile: +880-1844530066
E-mail: hcmp.info@brac.net
Website: [https://www.brac.net/
program/brac
humanitarian-crisis-management-
programme/](https://www.brac.net/program/brac-humanitarian-crisis-management-programme/)

BRAC

BRAC Centre
75 Mohakhali
Dhaka 1212
Bangladesh

T: +88 02 2222 81265
F: +88 02 2222 63542
E: info@brac.net
W: www.brac.net

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