BANGLADESH RED CRESCENT SOCIETY
MOVEMENT-WIDE MONTHLY REPORT ON COVID-19
MAY 2020

MONTHLY OPERATION UPDATE FOR COVID-19
1. SITUATION OVERVIEW (AS OF REPORTING DATE JUNE 11, 2020)

2. BDRCS RESPONSE HIGHLIGHTS

- **267,000**
  Number of drinking water bottle (500ml) distributed among selected COVID-19 dedicated hospitals, test and response centers, police station at several districts.

- **2,250,357**
  People received life-saving awareness messages on COVID-19 through social media.

- **27,000,000**
  Taka provided as unconditional cash grant to 6000 families who are directly or indirectly affected by the COVID-19 pandemic in Kha-grachari, Rangamati & Bandarban districts.

- **63**
  Deputy Commissioner offices has been provided with water purification kit, disinfectants spraying materials and handwashing station countrywide.

- **28,000**
  Set of PPEs being provided to the frontline healthcare professionals dealing Covid-19 cases in Kurmitola hospital, Kuwait Maitree Hospital, Dhaka Medical College Hospital and Holy Family Red Crescent Medical College Hospital.

- **95,500**
  Food parcel distributed to Households which contains rice, pulse, sugar, oil, salt and semolina

- **2,923**
  Countrywide 263 hospitals covered through disinfectant spraying for 2923 times.

- **1,818**
  Reached with Psychosocial Services where 298 callers have been provided with Psychological First Aid (PFA) through PSS Call Center.

- **100,000**
  Packets of cooked food distributed throughout the country by RCY volunteers under Joy of Giving initiative.

- **84**
  2 Isolation & Treatment Centers of 30 and 54 beds constructed at camp-2E and camp-7 to support COVID-19 patients from both host and guest community through Population Movement Operation of BDRCS at Cox’s Bazar.

3. BDRCS OPERATION ACROSS THE COUNTRY

In response to COVID-19 pandemic, Bangladesh Red Crescent Society (BDRCS) has been continuing its emergency operation since March 2020. As an auxiliary to the Government of Bangladesh (GoB), BDRCS supports government efforts to COVID-19 pandemic. BDRCS has been operating these emergency response actions across the country by utilizing its volunteer network. Based on country context, BDRCS identified immediate health and non-health needs of vulnerable population of the country. In order to fulfill those priority needs, BDRCS prepared an emergency response plan of action. According to the plan, systematic activities has been carried out which includes but not limited to the major sectors e.g. Health and Psychosocial Support (PSS), Infection Prevention and Control (IPC), Livelihood and Basic Needs, and some other integrated issues such as Protection Gender and Inclusion (PGI) as well as Community Engagement and Accountability (CEA).

3.1. HEALTH AND PSYCHOSOCIAL SUPPORT

⇒ HFRCH signed a MoU with the Ministry of Health of GoB and started to operate as full-fledged COVID-19 treatment center accordingly. To ensure flawless support for COVID-19 patients, 847 staff from HFRCH are working in multiple shifts.

⇒ Health Department of BDRCS along with IFRC Bangladesh Country Office coordinating with Holy Family Red Crescent Hospital (HFRCH) team for assessment of necessary medical equipment.

⇒ As of 31st May 2020, 271 COVID-19 positive patients admitted at HFRCH for treatment after converting the hospital as a COVID-19 responsive hospital.

⇒ 55 MCH centers working on Anti Natal Care (ANC), Normal Delivery, and Post Natal Care (PNC). Personal Protective Equipment (PPE) being provided for MCH staffs.

⇒ BDRCS taking initiatives to provide service to thalassemia patients (blood transfusion) 5 days a week. In addition, blood collection has been increased using mobile vehicle, SMS, print media announcement, press releases.

⇒ 1818 people reached through PSS activities during May 2020. PSS activities includes mostly Psychological First Aid (PFA) through PSS Call Center. All these calls are mostly COVID-19 related and can be classified as (a) trauma from physical health, b) Frustration, panic and loneliness and (c) family crisis during this period.

⇒ Trained 194 staff and volunteers on Psychosocial Support with the support of Danish Red Cross.

⇒ 5 people referred to specialized Mental Health and Psychosocial Support (MHPSS) services.

⇒ 754 community people (215 male, 181 female and 358 children) reached through Community Safe Spaces (CSSs) in Camp.

⇒ Scaled-up MHPSS services into the Holy Family Red Crescent Medical College and Hospital.

⇒ Two different sessions on caring for volunteers were organized for 26 volunteers who have been involved in COVID-19 response where they had physical and relaxation exercises. It was a platform to share experiences and feelings with peers.

3.2. INFECTION PREVENTION AND CONTROL

⇒ With support from Novartis (Bangladesh) Limited, BDRCS started the process to distribute 28,000 pieces of Personal Protective Equipment (PPE) among the frontline healthcare professionals dealing with COVID-19 cases in four hospitals of the capital namely Kurmitola hospital, Kuwait Maitree Hospital, Dhaka Medical College Hospital and Holy Family Red Crescent Medical College Hospital.

⇒ BDRCS provided orientation and support to more than 10 organizations including airport authority, government agencies, high commission on the IPC to help them to tackle COVID-19.

⇒ Staffs involved in cleaning and disinfection at 63 Deputy Commissioner Office in 63 district received orientation on IPC from Red RCY volunteers of BDRCS.

⇒ Government Hospitals in 60 districts received disinfectant spray machine, chemical solution and orientation to conduct their own disinfectant activities within the medical settings.

⇒ BDRCS volunteers visited 263 Hospitals to carry out disinfectant spraying a total 2923 times during March-May 2020.

⇒ With support from ICRC, BDRCS completed the third phase support to monitor safety practices at 61 district prisons and distributed total 14945 packets IPC materials throughout the country. The second phase included distribution of 8550 bottles of alcohol based hand sanitizers to the Prison Directorate to enhance their IPC measures.

⇒ In addition, ICRC is collaborating with IG Prison directorate where BDRCS National Headquarter provides necessary technical guidance to concern unit offices which are responsible for coordination with district level prison authorities.
3.3 LIVELIHOOD AND BASIC NEEDS

⇒ With financial support from ICRC, BDRCS supported 6000 families with BDT 27,000,000, who are directly or indirectly affected by the COVID-19 pandemic in the three districts (Khagrachari, Rangamati & Bandarban) of Chittagong Hill Tracts (CHT). This includes a cash grant of BDT4,500 to each family to cover food and other essential household needs.

⇒ 3000 packets cooked food distributed among the floating/homeless people on 26, 27, and 28 May 2020. 17 volunteers supported this activity.

⇒ 3000 packets cook food distributed in the COVID-19 dedicated hospitals and government service providers in Dhaka district on Eid Day.

⇒ RCY volunteers from 30 Red Crescent units and National Headquarters provided Iftar/cooked food during Ramadan to 34,785 persons. Moreover, Barisal unit RCYs provided financial support to 12 people BDT 500 each.

⇒ BDRCS distributed 40000 packets of food parcel procured as the first phase and preparing for additional 35000 packets to be distributed in the second phase.

⇒ BDRCS in-collaboration with HSBC bank, commenced the initiative entitled “Joy of Giving” that includes distribution of 100,000 packets of cooked food among COVID-19 impacted responders and patients throughout the country. As part of this, special lunch packets were distributed on Eid day (25 May 2020) among duty doctors, nurses, and medical staff at all the COVID hospitals in Dhaka.

⇒ 267,000 pieces 500ml drinking water bottle distributed among selected COVID-19 dedicated hospitals, test and response centers, Police station at several districts with support from Coca Cola Bangladesh.

3.4. PROTECTION GENDER AND INCLUSION

⇒ A collaborative webinar session hosted by BDRCS, ICRC, and IFRC PGI team to provide Movement staff with an understanding of Sexual and Gender-Based Violence (SGBV) related challenges in Bangladesh during the COVID-19 emergency with potential suggestions on how to address them.

⇒ Facebook Live Orientation on SGBV and child protection was organized by BDRCS and IFRC for BDRCS Volunteers from all Units to understand those in COVID-19 contexts and how the volunteers play roles to address and respond to prevent those.

⇒ While keeping close contact with the Regional PGI, CEA, and Communications team, BDRCS disseminating PGI related awareness messages regularly to all staff and mass people through social media like Facebook, Twitter, and Viber.

3.5. COMMUNITY ENGAGEMENT AND ACCOUNTABILITY (CEA)

⇒ The BDRCS hotline addressed 146 calls in May 2020. Mostly these calls were concerning disinfection support, relief and cash support, blood plasma request, volunteerism and complaining irregularities in financial aid distribution.

⇒ BDRCS provided verbal awareness messages on COVID-19 to all 6000 families who received financial support in Khagrachari, Rangamati and Bandarban districts.

⇒ Community radios namely Lokobetar in Barguna district and Nalta in Satkhira district disseminated recorded PSA on disaster preparedness amidst COVID 19. As cyclone AMPHAN occurred in May, these events continued during 20-25 May 2020 where focus areas were main steps of preparedness in pre, during and post Cyclone situation, hygiene management system in a shelter, latrine use and disinfection process of cloths and essential staffs.

⇒ BDRCS CEA team is working with the Government, Risk Communication and Community Engagement platform and Shongjog platform.

⇒ In addition, a Facebook live show was organized on 16 May 2020 to disseminate Cyclone Early Warning Messages and Instructions among the wider audience while COVID-19 pandemic affecting whole nation. Mr. Rafiqul Islam, DSG, BDRCS; Mr. Ahmadul Haque, Director (Admin), CPP and Mr. Harun Al Rashid, DRR Specialist, IFRC joined the event as key speaker.

⇒ Published bulletin with cyclone early warning messages in the midst of Coronavirus on Corona-kotha.
3.6. POPULATION MOVEMENT OPERATION (PMO)

⇒ WASH and hygiene promotion activities are consistently being carried out at all 34 camps. 6000 volunteers are being mobilized for this purpose. Drinking water distribution points of BDRCS are still functioning and the concerned team has been taking care of potential drying-up wells or scarcity of drinking water in camps.

⇒ BDRCS with support from RCRC Partners and Cyclone Preparedness Program (CPP) reached 65,734 people through implementation of preparedness and response activities related to COVID-19.

⇒ 7 information booths are functional to provide risk communication to the camp dwellers.

⇒ BDRCS distributed 11,100 Personal Protective Equipment (PPE) to RCRC staff, volunteers & CPP volunteers.

⇒ 57 Health Community Volunteers received orientation on GBV and Protection from Sexual Exploitation and Abuse (PSEA) during May 2020.

⇒ 889 Households trained on hygiene practices and Covid-19 awareness sessions at camp 13, 14 and 19.

⇒ 206 HHs in Camp 11, 12, 13, 14, 17, 18 and 19 were reached on COVID-19 awareness as part of Risk Communication and Community Engagement (RCCE). In addition, 33 volunteers got orientation on RCCE.

⇒ PMO, BDRCS already prepared 02 Severe Acute Respiratory Illness (SARI) and Isolation & Treatment Center (ITCs) with complete and well-equipped setup including necessary medical instruments for COVID-19 patients from both host and guest communities. The 30-bedded ITC is prepared with support from Swiss Red Cross and located at camp 2E while 54-bedded ITC is prepared with support from Qatar Red Crescent and located at camp-7. The location of these ITCs are selected for their easy access to the patients from both host and guest communities.

⇒ 1710 people at camp 13 and 19 received awareness session on parenting and child maintenance during this pandemic as well as key messages of SGBV and PSEA in response to covid-19.

⇒ 23,113 People (5441 HHs) reached on Covid-19 hygiene promotion and handwashing sessions.

⇒ 266 Individuals reached with integrated Community Based Psychosocial Support and risk communication messages at different camps.

3.7. MYANMAR REFUGEE RELIEF OPERATION (MRRO)

⇒ MRRO-BDRCS responded promptly to a fire incident through providing CRI assistance at camp-1 on 12 May 2020 where 674 houses got affected. Among those 312 houses were fully damaged and 6 people injured including a child.

⇒ MRRO disinfected and distributed LPG cylinders to 15,728 guest community and 429 host community beneficiaries.

⇒ Continuous disinfection of 11 Distribution Points being carried out every day. In addition, all beneficiaries entering inside the distribution points are checked temperature through Infrared Thermometers.

⇒ As part of basic hygiene practices, MRRO distributed 281,484 soaps to 10,620 beneficiaries.

⇒ 17,855 beneficiaries from guest community are provided with rope, wire, iron peg and white kit bag as Pre-Monsoon Kit.

4. PARTNERSHIP AND COLLABORATION

As an auxiliary to public authority, the government of Bangladesh is the main partner of BDRCS. Besides, it brings beneficiaries, communities, stakeholders, movement partners and non movement partners together towards achieving its goals and objectives. Through existing partnership mechanism, BDRCS is responding to the COVID-19 pandemic. In this regard, BDRCS partnered with number of different organizations within Movement and beyond to operate the emergency operation and to maximize the reach of vulnerable people. The partners for this emergency operation includes In-country Movement Partners, Government, Humanitarian Agencies and Corporates.

Please visit the link to get PMO detail information:
https://go.ifrc.org/emergencies/4106#details
4.1 ACTION TAKEN FROM IFRC, ICRC AND PARTNERS NATIONAL SOCIETIES (PNSs)

International Federation of Red Cross and Red Crescent Societies (IFRC)

⇒ IFRC Bangladesh Country Office (CO) closely coordinating with BDRCS and all the in country PNSs as well as its Asia Pacific Regional Office (APRO) to operationalize the COVID-19 Plan of Action (PoA). Besides, an agreement of CHF 1.9 million (approx. BDT 164,607,000) is signed with BDRCS for COVID-19 response operation in Cox’s Bazar. Another agreement of CHF 1.4 million (approx. BDT 121,290,000) for the nationwide activities got approved and signed with BDRCS.

⇒ Following the request from BDRCS, the IFRC CO Logistics and Procurement unit has conducted the tendering process together with BDRCS for the insurance of BDRCS staff and volunteers. The insurance agreement is in place now. IFRC is supporting for the insurance coverage of the 1,935 volunteers and 325 staff of BDRCS who are engaged in the COVID-19 response.

⇒ IFRC CO, together with BDRCS, ICRC and two PNSs representatives (German Red Cross and Swiss Red Cross) formed a Movement Task Force (MTF), which is intended to providing the strategic guidance to the operational structure for COVID-19. The MTF will maintain a close coordination with Bangladesh Government’s plan and directives.

⇒ IFRC CO keeps all in country PNSs regularly updated about the COVID-19 and overall situation through WhatsApp group, regular weekly Partners calls and other regular communications.

⇒ In Cox’s Bazar under the PMO, the team closely coordinates with Refugee Relief Repatriation Commissioner (RRRC) office and Civil Surgeon for the implementation of COVID-19 activities as well as other ongoing necessary support for the host and guest communities in the district.

⇒ IFRC CO with its Regional Office coordinated the first air shipment of PPE which has arrived in Dhaka on 27 May 2020 and working for another shipment.

⇒ IFRC Bangladesh CO supported BDRCS by preparing a technical guidance note for providing First Aid support during COVID-19 crisis adapted from the Guidance note provided by Global First Aid Reference Centre (GFRC).

⇒ IFRC CO with its Regional Office and Fleet Base Office is supporting possible procurement of ambulances for BDRCS to strengthen its COVID-19 response operation in the country.

⇒ IFRC CO team regularly attended the Humanitarian Coordination Task Team (HCTT) meetings in Dhaka. The team also attended Shelter Cluster, Food Cluster, Gender Cluster, national Need Assessment Working group (NAWG), Gender in Humanitarian Action (GIHA) working group meetings remotely in May. IFRC along with BDRCS also attended weekly RCCE platform meetings (3 meetings in May) led by UNICEF and Director General of Health Services (DGHS) on COVID-19.

⇒ IFRC CO handed over 2,000 body bags to BDRCS for distributing among hospitals in Dhaka for safe and dignified burial of deceased due to COVID-19.

International Committee of the Red Cross (ICRC)

⇒ On 05 May 2020, 75 dead body bags were donated to the Buddhist Religious Welfare Association, designated by the Ministry of Religious Affairs to manage the dead bodies due to COVID-19 from Buddhist communities in Dhaka and Chattogram city as well as Cox’s Bazar and Chittagong Hill Tracts (CHT).

⇒ BDRCS and ICRC jointly supported 6000 families who are directly or indirectly affected by the COVID-19 pandemic in the three districts (Khagrachari, Rangamati & Bandarban) of Chittagong Hill Tracts through unconditional cash grants to cover food and other essential households needs.

⇒ Information regarding COVID-19 preventive measures and symptoms, along with messages to respect health workers in medical facilities are being broadcasted through loudspeakers on a tomtom in Cox’s Bazar district, reaching 71 unions.

⇒ Supported disinfectant spraying, awareness raising and distribution of IPC materials at 61 district prisons across the country.
**Qatar Red Crescent:**

⇒ Provided financial support to construct isolation and treatment center at BDRCS field hospital at camp 7 in Cox’s Bazar.

⇒ 5000 food parcel distributed to poor families in 10 districts across the country as a response to COVID-19 pandemic.

⇒ BDRCS distributed 3250 Ramadan food parcel distributed to poor families of Rajshahi, Sirajganj and Dhaka with the support of QRC and TRC

**Swedish Red Cross**

**Major achievements in camp 18 of Cox’s Bazar are as follows:**

⇒ Disinfectant activities carried out at 536 latrines, 294 bathrooms, 304 hand washing stations, 32 tap stand and 152 tube wells. Apart from these, around 10,000ft drainage disinfected.

⇒ 5 production boreholes increased capacity of water supply to meet the extra demand of hand washing as part of the response. With the support from Swedish RC, BDRCS distributed 29,956 soap bars among community peoples to ensure proper hand washing as part of the response.

⇒ Technical support provided to conduct 4 orientation / discussion sessions on intensified handwashing and key protective / barrier measures (including physical distancing) to the 36 camp volunteers working within the hygiene promotion team at camp-18. Besides, 2,071 Households covered with modified / intensified hand washing session and demonstration, including access to IEC materials.

⇒ As a safety measures, PPE (masks, hand gloves, hand sanitizer) provided to 179 community based volunteers, labors and staff.

⇒ In Cox’s Bazar field hospital 08 new latrines constructed, 13 latrines repaired and 3 hand washing facilities installed. Besides, 02 latrines (01 male & 01 female latrine chamber) for doctor’s at Isolation centre of Camp 2E were constructed.

⇒ Swedish RC and Turkish RC in-coordination with BDRCS took initiatives to prepare and procure 33000+ reusable cloth masks for the camp residents. This reusable masks will be distributed to 15000 camp residents, 400 camp volunteers and 400 BDRCS and IFRC–wide staffs at PMO.

**German Red Cross**

⇒ Unconditional cash grant support is being provided to 1500 urban poor HHs affected by COVID 19 of 18 wards at Dhaka South City Corporation (DSCC).

⇒ 5,000 Leaflets on COVID-19 distributed through DSCC Ward authorities in order to raising awareness among the people.

⇒ 35,300 people reached in 09 coastal districts by providing different necessary support such as evacuation of people and livestock, vehicle support for evacuation, dry food, water, face masks, hand sanitizers and first support, through Cyclone early action.

⇒ 6,992 people reached through Hygiene Promotion messages; 5,963 people received IEC materials; 16,804 Hygiene Kit and soap distributed to 2,727 households; 254 WASH facilities and 154 public spaces and infrastructure disinfected with chlorine solution at camp-13 and camp-18 in Cox’s Bazar.

⇒ As part of host community activities- 4290 people reached with COVID 19 tailored Hygiene Promotion Awareness and Handwashing session and Soap distributed to 800 households at 02 union of Teknaf upazila

⇒ Host Community EP&R for Covid 19 in Teknaf has been developed and coordinated, prior to activation, necessary procurement ongoing, selection of Volunteers and preparation for volunteers training done.
**Turkish Red Crescent:**

⇒ Training provided to the Community Volunteers of camp 17 in Cox’s Bazar on COVID-19 preparedness and response, hygiene promotion. Training was also provided to 10 health staff on epidemic control and diseases prevention at camp-20.

⇒ Community based Psychosocial support and risk communication message disseminated considering COVID-19 at camp-17 in Cox’s Bazar.

⇒ General PFA service provided considering COVID-19 at camp-17 in Cox’s Bazar.

**British Red Cross:**

⇒ 3,000 food packages distributed by the Cox’s Bazar Unit and the Vulnerability to Resilience Project team in Teknaf.

⇒ Out of targeted 2,500 food packages, 1900 distributed by the Barishal Unit and the Vulnerability to Resilience Urban Project team in Barishal.

⇒ The British Red Cross secured funding (GBP £500,000) from the Department for International Development (DFID) to fund activities in Cox’s Bazar included in the Country Plan of Action. The BRC continues to advocate with the British Government to increase their contributions in support of the country plan of action.

**Danish Red Cross:**

⇒ Intensified house-to-house hygiene promotion sessions and handwashing demonstration as well as distribution of hygiene kits and promotional materials for COVID-19 response at camp 14 and 19 in Cox’s Bazar.

⇒ Supported BDRCS to establish the 25-bed isolation unit at HFRCH.

⇒ DRC provided technical support to conduct COVID-19 awareness raising sessions for BDRCS staff and volunteers at both PMO and HQ level.

⇒ MHPSS support to the general public, Health workers in BDRCS Hospitals, staff and volunteers and distressed people in the camp.

⇒ As of 31 May 2020, 2,226 HH reached in camp 14 and 19 through essential COVID-19 related activities. Besides, in camp 19, 1,902 WASH facilities had been disinfected. 12,352 soaps were distributed to HH level in Camp 14 and 19.

⇒ Intensified house-to-house hygiene promotion sessions and handwashing demonstration as well as distribution of hygiene supplies (soaps, hygiene kits) and promotional materials, as well as repair and maintenance and disinfection of WASH facilities for COVID-19 response at camp 14 and 19 in Cox’s Bazar. Intensified hygiene promotion sessions, handwashing demonstration and soap distribution for COVID-19 response in host communities (WARD 3, 4,5,6) in Palongkhali Union, Ukhiya.

**4.2. COORDINATION WITH GOVERNMENT AND HUMANITARIAN AGENCIES**

⇒ BDRCS and its partners are working closely with Ministry of Health and Family Welfare (MoHFW), more specifically with Director General of Health Service (DGHS) and Ministry of Disaster Management and Relief (MoDMR). BDRCS and its Partners along with Cyclone Preparedness Programme (CPP) worked closely with MoDMR on updating the cyclone evacuation protocols considering the COVID-19 situation.

⇒ A memorandum of understanding (MoU) signed between BDRCS and Bidyanondo Foundation to enhance humanitarian response initiative particularly on COVID-19 response and beyond. According to the MoU BDRCS has been working with Bidyanondo Foundation since March 2020.

⇒ BDRCS expressed its willingness to participate for a global fundraising campaign of IFRC with Coca-Cola.