



CYCLONE AILA

JOINT UN MULTI-SECTOR ASSESSMENT & RESPONSE FRAMEWORK

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INTRODUCTION

A year has passed since Cyclone Aila struck the southwest coast of Bangladesh. In the immediate aftermath of the cyclone there was widespread relief at the relatively low death toll. While the damage was considerable, it was localised and appeared to be well within the capabilities of the Government of Bangladesh to respond.

The Government's response must be noted. Since the cyclone struck, and in spite of the deplorable living conditions for some 100,000 people¹ who were forced into slum-like settlements on damaged and broken embankments, there have been no major disease outbreaks or significant deaths attributed to secondary causes. While the food and water rations people depend on are meagre, they have sustained communities who eagerly await the reconstruction of the embankments necessary for their return and recovery.

The aim of this multi-sector assessment is to provide a concise review of the humanitarian situation in the communities worst affected by Cyclone Aila, together with an analysis of the interventions carried out to date, gaps and challenges as they move towards recovery. The overall objective is to support decision-makers in answering the question "what next".

The report is based on sector-specific assessments undertaken over the last 12 months, many recently. UN agencies have jointly visited the affected communities to verify and update this data, and contextualise it in light of the changing dynamic. Progress on repairing embankments is being made, enabling some communities to begin the task of recovering. Other will likely spend another Monsoon living precariously on the edge of another potential disaster. Others have, and will continue to, migrate.

The first section of the report introduces essential information on the disaster and its impact, detailing the context in which the disaster struck and the national response including relief provided to date. An explanation of the assessment methodology is also provided.

Section two provides an overview of the current situation, followed by sector-specific analysis on the key focus areas – WASH, Health, Food Security & Nutrition, Livelihoods, Education and Shelter. In addition, special attention has been given to issues relating to migration, trafficking, and vulnerable groups including female headed households.

The third section, drawing on the analysis of the early section and the current context, provides a compilation of proposed UN-supported interventions, by agency, under a coordinated and complementary framework.

¹ Joint Position Paper on Cyclone Aila: Priorities for Action (www.cccm.iom.org.bd)

1 THE DISASTER

1.1 The Cyclone

Cyclone Aila was the second tropical cyclone to form within the Northern Indian Ocean during 2009. The disturbance that was to become Cyclone Aila formed on 21 May 2009. Over the following days the disturbance slowly intensified into a cyclonic storm, named Aila, located approximately 350 kms offshore. Cyclone Aila became a severe cyclonic storm on 25 May. The system maintained a cyclonic intensity for approximately 15 hours after making landfall.

Hitting during high tide, the cyclone brought with it tidal surges of up to 6.5 metres, affecting 11 coastal districts. This surge of water damaged and washed away over 1,742kms of embankments, removing the only protection available to many people along the coast. The storm lingered over the coast of Bangladesh for a comparatively longer time than Cyclone Sidr (2007), which further increased its impact.

In many areas the damage to the network of embankments has resulted in a prolonged continuation of what affected communities faced in the immediate aftermath of the cyclone – flooding. Breaches in the embankments, which become severe during daily high tides, and particularly during periods of full moon, have prevented the high levels of self-recovery normally seen in Bangladesh following disaster events.

1.2 The Impact

The direct and immediate impact of Cyclone Aila resulted in 190 deaths and approximately 7,100 injuries. In total, over 3.9 million people were affected. Some 100,000 livestock were killed, and nearly 350,000 acres of crop land were destroyed. It also caused considerable infrastructure losses.

The damage to the coastal embankment network was severe and has directly contributed to the continuation of the post-cyclone scenario (widespread flooding and tidal inundation) currently faced by the worst affected communities.

South western Bangladesh is a low-lying deltaic flood plain, crisscrossed by hundreds of rivers and channels. Communities in this area are dependent on the 7,500km-long network of flood embankments for protection from storms, tidal surges and cyclones. Bangladesh's current network of embankments dates back to the 'Coastal Embankment Project' of the 1960s. The embankment system, which includes *polders* and sluices, is maintained by the central Government, through the Water Development Board. Prior to Cyclone Aila, it was widely acknowledged that the network of embankments were weakened and vulnerable due to successive cyclone and storm damage during the preceding two years, including super Cyclone Sidr, as well as by structural damage caused by the shrimp industry, and a general lack of timely and adequate maintenance.

Sector	Damage	Quantity
Households (number of)	Fully	243,191
	Partially	370,587
Embankments (kilometres)	Fully	237
	Partially	1,557
Crop Losses (acres)	Fully	77,486
	Partially	245,968
Institutions (number of)	Fully	445
	Partially	4,588
Roads (kilometres)	Fully	2,233
	Partially	6,621
Bridges/Culverts	Fully	157

Source: DMB SitRep 11 June 2009 & BDWB

1.3 Bangladesh's Cyclonic Risk Profile

Bangladesh's coastal areas and offshore islands are low lying and very flat. The height above mean sea level of the coastal zone is less than three metres. The range of astronomical tide along the coast of Bangladesh is so large that storm induced sea levels often become very high. The normal tidal range is about three metres near the Indian border in the west, becoming higher in the east (central coastal belt) to approximately five metres the mouth of the Meghna estuary. This vulnerability is increased by funnelling coast line that reduces the width of storm-induced waves and increases their height.²

Bangladesh's coastal communities frequently face cyclonic storm risks. In addition to Cyclone Aila in 2009, the southeast coast was also affected by Cyclone Bijli in April. In October 2008, the southwest coast was hit by Cyclone Rashmi, and in November of the same year Cyclone Sidr, a category four super cyclone, hit the central coast causing extensive damage and the loss of over 4,000 lives. Since 1970, Bangladesh has experienced 36 cyclonic storms resulting on over 450,000 deaths and immeasurable economic losses.

1.4 National Emergency Response

Following Cyclone Aila, the Government of Bangladesh did not make an international appeal, nor any formal request for external assistance. At the time the relatively low casualties, the localised nature of the affected areas, and the relief resources available resulted in a predominantly Government-led and resourced relief effort.

The Government provided the bulk of relief assistance including food, cash, drinking water, emergency medicine and other non-food materials to Aila affected communities. Through the Government's Vulnerable Group Feeding (VGF) programmes, in four upazilas of Satkhira and Khulna districts, a total of 47,810 families have been receiving 20 kg rice per month since September 2009 and will continue to until November 2010. A further 11,213 MT of rice and BDT 41.52 million were distributed through the Government's Gratuitous Relief (GR) programme in four upazilas. The Government also distributed requisite quantity of dry food such as flattened rice, molasses and biscuits etc. In addition, 25,000 MT of rice was allocated to support embankment repair.

Under the Government's Vulnerable Group Development (VGD) programme, 4,195 households in two upazilas of Khulna district and 4,720 households in two upazilas of Satkhira district are receiving 30 kg rice per month which will continue till December 2010. Food and cash distributed under the Government's VGF, VGD and GR programmes account for almost 90 percent of all relief assistance.

The Government also undertook some emergency repair of embankments to stop sea water inundation, particularly during high tide. Under this 40 day Cash for Work programme, 6,637 households in two upazilas of Khulna and 19,330 households in two upazilas of Satkhira are receiving taka 120 per day for day-labour work. This programme started in March 2010 and will end in May 2010.

In the agriculture sector, the Department of Agriculture Extension (DAE) provided T-Aman rice seed, Boro rice seed, maize, mughbean seed and fertilizer to affected farmers in two upazilas of Satkhira district. To date, the Government has not provided any support to the fisheries or livestock sectors.

² ADPC, Cyclone Hazard in Bangladesh, Sirajur Rahman Khan

1.4.1 Summary of Government of Bangladesh Assistance

Item	Amount	Status
Gratuitous Rice	36,500 MT	Completed
Cash Grants	1,288 Lakh	Completed
Shelter Grants (cash)	3,002 Lakh	Completed
Food Assistance (VGF)	7,649.6 MT	Ongoing
Agriculture Support (crop)	3,497 Households	Completed

Source: Relief Division, DMB, 21 April 2010 & DAE Upazila Officers, 26 May 2010

Although there was an absence of a formal appeal, the international community provided assistance to a number of international and national organisations and Government agencies working in the most affected areas.

1.4.2 Summary of International Donor Assistance

Donor	Amount (USD)	Sector(s)/Activity(ies)
ECHO	11.93 million	Food Assistance, Health & WASH
EU	6.63 million	Shelters
DFID	1.58 million	NFIs, Settlement Support (through IOM)
SDC	1.31 million	Livelihoods & WASH
Government of Spain	.66 million	Food Assistance (through WFP)
WFP	18.5 million	Food Assistance
UNICEF	1.5 million / .54 million /.75 million	WASH / Education/Health/Nutrition
FAO	.5 million	Agriculture
UNDP	.25 million	Livelihoods
WHO	.10 million	Emergency Medicine & WASH
TOTAL	44.25 million	

Date: 26 May 2010

1.5 Joint Multi-Sector Assessment Methodology

The UN Country Team (UNCT) agreed on 19 April 2010 that a joint multi-sector assessment would be undertaken on the prevailing situation in the Cyclone Aila affected areas. The objective of the assessment was to provide the UNCT with a concise review of the humanitarian situation in the communities worst affected by Cyclone Aila, together with an analysis of the interventions carried out to date, current gaps and a response framework.³

The damage and destruction caused by Cyclone Aila is now 12 months old. During this time, a number of UN agencies have supported various sector-specific damage and needs assessments,⁴ and the level of statistical information, and other data, maintained and provided by the Government and other non-government actors, is considered to be largely accurate albeit dated in sections.

Therefore, the multi-sector assessment focused on the key sectors of WASH, Health, Food Security & Nutrition, Livelihoods, Education and Shelter. In addition, special attention was given to issues relating to migration, trafficking, and vulnerable groups including female headed households.

³ Cyclone Aila UN Rapid Assessment: Terms of Reference

⁴ UNICEF (Wash Cluster Collective Assessment April 2010), WFP (Food Security Survey Aug 2009), WHO (Health Cluster Needs Assessment 2009), UNDP (Rapid Assessment June 2009) and IOM (Assessment September 2009).

At the request of the UNCT, UNDP coordinated the assessment with other agencies taking the lead in the following sectors:

<i>Sector</i>	<i>Lead Agency</i>
Education	UNICEF
Food Security & Nutrition	WFP (with FAO)
Health	WHO (with UNFPA)
Livelihoods	FAO (with UNDP)
Shelter	UNDP (with IOM)
WASH	UNICEF
Movement / IDPs	IOM

The worst affected districts - Satkhira and Khulna – were the primary geographical focus.

Given the considerable volume and quality of data available, the assessment drew primarily from available sector-specific information. The following methods were then used to validate and update the findings:

- Primary information sources – selected field visits to validate secondary information and baseline;
- Secondary sources of information - primarily drawn from existing assessments was used to build up baseline information on Cyclone Aila from both Government and non-Government sources;
- Qualitative data verification – focus group discussions; local government meetings and interviews; community group meetings; guided walkabout observations; and household interviews.

The assessment sought to take stock of the current context, local capacities to manage early recovery programmes, and the needs of vulnerable communities vis-à-vis the continuation of relief assistance and the transition to early recovery.

2 THE ASSESSMENT

2.1 Current Situation Analysis

In addition to the concentrated and large-scale damage Cyclone Aila caused in various unions, primarily of Satkhira and Khulna districts, the cyclone created disparities across affected communities in peoples' ability to work from relief dependency towards self-sustained recovery. In effect, there are two developing post-disaster pictures.

The first is of a continued and likely ongoing scenario of reliance on relief and high vulnerability to future disaster shocks. These communities are unable to commence the process of self-recovery as they remain on the embankments, without secure access to drinking water, sanitation, livelihoods or sufficient food. Families remain in the precarious situation of living on damaged embankments, exposed to the elements and without secure shelter and are reliant on the repair and reconstruction

of the embankments in order for them to return. In the medium term, these families will need ongoing relief, with additional support to prepare them to withstand a second Monsoon season.

The second picture sees families who have returned to recently inundated villages. While there is a degree of self-recovery, external support for the re-establishment of local services such as schools and health centres, as well the reconstruction of local-level infrastructure such as water and sanitation, community roads and spaces, is needed. Perhaps most importantly, in terms of supporting self-recovery, is the creation of income generating activities. Pre-Aila livelihoods have been severely affected across all major sectors. Agriculture will not be viable until the level of salinity is reduced in the soil, and fisheries, primarily shrimp cultivation, will require the repair and reconstruction of ponds.

While all members of the population in these areas were severely affected, women and children, the elderly, and the disabled have specific vulnerabilities that make it harder for them to recover unless emergency response interventions adequately address their specific needs.

2.2 Sector Specific Analysis

2.2.1 Education

According to the Disaster Management Bureau, Cyclone Aila destroyed 445 education facilities/institutions and partially damaged 4,588 across all affected districts, impacting approximately 500,000 children. School furniture and teaching-learning materials were reported to be badly affected in all affected districts.

A Rapid Education Needs Assessment, previously undertaken by the Education Cluster, conducted in the six most severely affected districts of Khulna, Bagerhat, Satkhira, Barisal, Barguna and Patuakhali. The Assessment verified the Government data and found that over 20 percent of institutions were being used as shelters by affected communities.

During discussions with the UN Assessment Team, Upazila and District Education Officers, teachers and local government officials sighted the following as key immediate needs:

- Appointment of Para teachers for education at the para level
- Hygiene, sanitation and drinking water support for educational institutions
- Small grants for all affected schools to support recovery efforts
- The repair of damaged educational institutes in both the formal and non-formal sector
- Primary health care for school children
- The distribution of education and communication materials
- School dress (functional for both in and out of school)
- Nutrition support for affected students

In addition, education stakeholders highlight ongoing communication/transportation issues, for both teachers and students, as a major barrier. The health and nutritional status of children was a growing concern, particularly as school facilities were destroyed and are contributing to poor hygiene. While exact figures were not obtainable, particularly as many schools are in transition, there was considerable concern around the number of potential drop-outs due to increasing levels of child labour.

2.2.2 Food Security

Poverty and food insecurity is widespread in the Cyclone Aila affected areas of the country. More than two thirds of the population (67 percent) in four upazilas of Satkhira and Khulna districts (the areas worst affected by the cyclone) are originally poor, and consuming 2,122 kcals/person/day or less. More than half (55 percent) are extremely poor and food insecure, consuming 1,805 kcal/person/day or less.

The recent Poverty Estimates, calculated by the Bangladesh Bureau of Statistics, WFP and World Bank, indicates that 65 percent and 58 percent of the population of Shyamnagar and Assasuni upazilas respectively of Satkhira district are extreme poor (below the lower poverty line), and that for Koira and Dacop upazilas of Khulna district are 35 percent and 60 percent.

The impact of Aila on household food security is particularly severe as a major percentage of households in those cyclone prone areas were already suffering from high poverty and food insecurity as indicated above. Moreover, these households experienced the impact of Cyclone Sidr and high food price shock in 2007 from where they have not recovered fully.

The two major livelihoods in the affected areas, farming and fishing, suffered significant damage and loss due to continuous inundation of paddy fields and shrimp *ghers*/ fish ponds by saline water. According to the Department of Agriculture Extension, only a minor portion of total cropland in four upazilas was possible to bring under cultivation after Aila and approximately 70-80 percent crop production was lost. An estimate by the Department of Fisheries and FAO indicates that production of shrimp was reduced from normal year's 2,350.14 kg/h to 470.03 kg/h. Since the cyclone, Aman rice cultivation has not been possible due to increased salinity in the soil and vast area of cropland still being inundated regularly due to broken embankments and high tides twice a day.

Households were experienced severe shock as they entirely or partially lost their housing and productive assets of higher monetary value. Animal assets as well as agricultural crops, shrimp *ghers*, agri machineries, fish ponds, boats /trawlers, trees/orchards, rickshaws/bicycles are some examples of their asset loss. According to Agriculture Extension Department, a major portion of crop land in four upazilas in Khulna and Satkhira districts were inundated by saline water and standing crop was fully destroyed. Cultivated homestead and shrimp *gher* side vegetables and fruits were also fully damaged. In the fisheries sector, shrimp cultivation was worst affected which is the main livelihood and more than 60 percent people involved in this sector. As Aila hit was during the harvest time, 100 percent of export grade shrimps were washed away. Sweet water pond fishes were also destroyed and further sweet water fish cultivation was not possible as ponds were inundated by saline water. In the livestock and poultry sector, the damage was very heavy and more than 80 percent household cows, goats, sheep, chicken and ducks were washed away.

The market plays an important role in ensuring food security in communities. Due to Aila, all local markets were severely damaged and communities faced difficulties in buying food. Physical access to markets had been disrupted in some of the worst affected areas due to breaches of roads and embankments. In some remote areas, boats were the only vehicle for the transportation of food items. However, many boats were also damaged causing transportation disruption, and subsequently transportation costs have gone up, resulting in price increases of essential food and non-food items. Retailers and small traders are not making adequate profit due to low selling volume and lack of financial/micro-credit support. As a result, they failed to rebuild the market and

were unable to stock essential food and non-food items in line with demand. Furthermore, micro-credit organizations have stopped providing new loans since Aila, and are pushing for payback of previous loans.

Overall food availability at district and upazila levels is satisfactory but the main challenge is accessibility in affected areas. People are buying less due to income loss and price increase of essential food commodities in the local market since Aila hit. Affected people mentioned during community level interviews that the most dramatic price increases are for coarse rice (40 percent), lentils (18 percent), and wheat flour (4.5 percent). The main reason for income loss is the fall in agricultural and fishing activities which significantly affected the labor market and subsequently diminished employment opportunities. Casual laborers found only 7-10 days work per month, compared to 20-25 days in a normal year.

Even after one year of Aila, evidence shows that a significant number of affected people are still suffering from food insecurity. Due to the loss of livelihoods and decreases in income, poor households typically reduce their food purchases and compromise their food consumption habit by having fewer meals per day, less quantity food per meal and less nutrient-rich food items, which can result in under-nutrition and deficiencies in essential micronutrient. The majority of the affected population are not in a position to afford three meals a day and are unable to buy basic food items beyond rice and pulse. The situation is even worse for children under two years of age who are extremely vulnerable to the effects of poor food quality and quantity. Adequate complementary feeding with age-appropriate foods, as well as continued breastfeeding, is needed to reduce their risks for malnutrition.

The national Household Food Security and Nutrition Assessment Report (HFSNA 2009) by WFP, UNICEF and Institute of Public Health Institute (IPHN) found that in 2007-2008, one in four (25 percent) households was food insecure in Khulna division based on household food consumption patterns. In terms of nutritional status of children under 5 years of age, the study showed that stunting (low height-for-age) was classified as a 'high severity situation' (WHO > 40 percent) in Khulna division and in the country's five other divisions, too. The population in this area had not yet fully recovered from the effects of Cyclone Sidr and global high food prices shock when Cyclone Aila hit. Specially children, elderly, lactating and pregnant mothers were unable to have proper recommended nutritious foods according to the age and gender specific daily kcal needs.

Existing Food Security Need in four Worst Affected Upazilas

Upazila	Upazila Population	Approximate No. of Households	No. of Households Affected	Self-Recovered (with GoB or Donors Assistance)	Gap (currently in need of assistance)	
					Returned home or other places	Still living on Embankment
Shyamna	350,419	70,084	48,457	29,074	17,183	2,200
Assasuni	278,346	55,669	37,403	22,442	13,761	1,200
Koyra	215,015	43,003	38,514	23,108	12,597	2,809
Dacope	175,878	35,176	29,832	17,899	4,228	7,705
Total	1,019,658	203,932	154,206	92,523	47,769	13,914
					61,683	

Source: UN Joint Aila Assessment Mission, May 2010

The UN Assessment Team identified during the field visit in four upazilas in Satkhira and Khulna districts that out of a total of 203,932 households, 154,206 households (76 percent) were affected during Aila. On an average, 90-100 percent houses were damaged either fully or partially in four upazilas and approximately 102,000 people were forced to take shelter on embankments and other places. The community people and local government officials mentioned during the discussion sessions that around 60 percent of the affected people have recovered more or less by getting support from GoB, UN and/or NGOs. The remaining 40 percent affected households i.e., approximately 60,000 households could not recover due to loss of livelihoods and loss of productive assets like houses, crops, livestock, poultry, fishes/shrimps, fishing boats/nets etc. Either their loss was huge or they didn't get enough support to recover fully. They still require food/cash and livelihood support. The UN assessment team found that, out of those 60,000 households, approximately 14,000 households are still residing on embankments and are seriously in need of food and drinking water. They will be more vulnerable during the forthcoming Monsoon season and the risk will be even higher if rising water intrudes through breached embankments. The special concern is that the repaired embankments have already been damaged further by high tides in the recent days.

In summary, the overall food security condition of these communities was severely affected by Aila and affected households could not recover due to total loss of livelihoods and productive assets. Livelihood restoration, mainly farming and fishing, was also not possible due to major breaches in embankments and continuous inundation of crop land and shrimp/fish ponds for the last one year since Aila hit. Although the worst affected population received minimum amount of assistance from the Government and non-government agencies, that assistance proved to be inadequate against their requirements. As a result, their food security and nutrition situation is of serious concern now.

2.2.3 Health

Following Cyclone Aila a health sector rapid needs assessment was conducted jointly by the Directorate General of Health Services and WHO from 29 May to 2 June 2009. Structural damage of health facilities was found to be insignificant, however health care services were totally disrupted at all unions of Assasuni and Shyamnagar upazila in Satkhira district, due to inundation of hospital compounds, damage of roads, and the disruption of power supply, as well as water and sanitation services.

There were shortages in emergency management (especially trained doctors and paramedics) across every health facility level. Stocks of emergency medicines like ORS, IV fluids, and antibiotics were sufficient, but emergency medical equipments like ambo bags, pulse oximeter, nebulizer, oxygen masks and cylinders were not available. Also some equipment, such as X-ray machines and ambulances, were non-functioning.

As part of the Cyclone Aila response, the Government immediately provided over USD 100,000 value of emergency drugs and over 70,000 IV cholera saline to the affected areas pre-positioned by UNICEF, and about 9,500 diarrhoeal and 14,000 ARI cases and various other infections were rapidly managed using the UNICEF-supplied drugs and IV saline. 10,500 children aged nine to 11 months were immunised against measles in the Aila affected areas through mobilising routine vaccines and supplies made available through the Government.

In its emergency nutritional response to Cyclone Aila, UNICEF distributed 166 metric tonnes of supplementary, high-energy biscuits to 62,457 children aged six to 59 months, 2,327 pregnant women and 6,732 lactating mothers in three highly-affected areas of Khulna and Satkira districts. The Government, with UNICEF and WHO support, issued a Joint Statement on 'Infant Feeding in Emergencies and Appropriate Use of Breastmilk Substitutes during Emergencies'. The Bangla translations were widely distributed to all district and sub-district health and government officials.

One year on from Cyclone Aila, the UN Assessment Team found that the structural situation of health centres has deteriorated due to the lack of reconstruction work. Although the first assessment showed minor damage in the health sector and no significant outbreak of disease occurred, given that there was very limited support for rehabilitation of affected people, the overall situation in the worst affected areas has worsened. The recent Assessment revealed that health facilities are severely understaffed and are barely able to provide even the most basic health care services. Those living on the embankments were found to be suffering from a range of diseases like diarrhoea, skin infection, and pneumonia etc. Also most cultivable land remains inundated by saline water, crops and vegetables are not growing resulting in micronutrient deficiency and malnutrition.

Since the catchment area for upazila health complexes are very small, and the communities are far away, in addition to the non-availability of adequate health care at these health facilities, affected people are not able to visit health complexes, union health centres and community clinics. For these reasons, affected people are compelled to receive treatment from their nearby village doctors (indigenous medical practitioners). The village doctors and birth attendants were found to have insufficient or, in some case, no training and were unaware of basic treatment protocols for common ailments. Given the situation for many people on the embankments, there were reports of psychosocial depressive illnesses. However these remain untreated as there is no psychosocial support activities being provided.

Although there has been no increase in the number of deaths or large scale outbreaks of disease to date, this could reflect improper surveillance. It was found that most pregnant women living on the embankments are delivering their babies in their shelters on the embankments, with the assistance of a Traditional Birth Attendant, if available. Focus group discussions revealed that many women would like to delay their next pregnancy until they are in more suitable living conditions. However limited reproductive health and family planning services are currently being offered at health facilities servicing the affected areas, and visits to most affected unions by FWVs or NGO workers providing Family Planning Services are sporadic and insufficient.

2.2.4 Livelihoods

Prior to Cyclone Aila, the majority of people in affected areas were largely self-sufficient. Many people cultivated vegetables and fruits around their homestead, and on the bank of the *gher*. Following the Cyclone, most agricultural land in the affected areas has been damaged, with much previously cultivatable land either inundated with water or with high-levels of salinization of the soil. The major crops destroyed were Aus rice, jute and vegetables. Total damaged crop area was 9,712 hectares. In addition, communities reported a high degree of homestead-based poultry and livestock rearing prior to the cyclone. According to the Department of Livestock Services, the cyclone destroyed more than 80 percent of animals (goat/sheep 2,150 and chicken/duck 46,236). The vast majority of livestock or poultry that survived the cyclone was sold immediately after at a reduced

price, due to the lack of fodder, limited space to keep the animals, and/or the need to generate cash.

Rice production was very limited in the affected areas as most cultivable land suitable for rice was being used for shrimp cultivation prior to the cyclone. However, the scenario was changing in some areas, such as Dacope upazila, as people were returning to rice production for their main sources of livelihood. This was previously the stable crop across the whole of Khulna and Satkhira districts some 20 years ago. Due to the inundation of saline water, soil fertility has decreased significantly.

During focus group discussions, the Assessment Team was informed that based on traditional knowledge, the community estimates that it will take three to four years before the land regains its full crop production capacity.

Upazila	Baseline (immediate after Aila)			Update (covered by GOB and donor agencies)			Gap (needs assistance)					
	Crop (Ha.)	Livestock (no.)		Fishery (Ha.)	Crop (Ha.)	Livestock (no.)		Crop (Ha.)	Livestock (no.)		Fishery (Ha.)	
		Goat sheep	Chick Duck			Goat Sheep	Chick Duck		Goat Sheep	Chick Duck		
Syamngar	776	359	22,808	13,024	500	-	-	-	276	359	22,808	13,024
Asasuni	52,208	18	628	10,636	130	-	-	-	78	18	628	10,636
Koira	2,008	1,562	12,000	10,364	54	-	-	-	1,954	1,562	12,000	10,364
Dakop	6,720	211	10,000	4,861	2,241	-	-	-	4,479	211	10,000	4,861
Total	9,712	2,150	45,436	38,885	2,925	-	-	-	6,787	2,150	45,436	38,885

Source: UN Joint Assessment, May 2010

The main livelihood source in affected areas is fishing, with more than 60 percent of people directly, or indirectly, involved in the sector: around 38,885 hectares of shrimp *ghers* and sweet fish ponds were damaged by the cyclone. The cyclone hit as the sector was preparing to harvest the season's first output, meaning that all 'ready to export' (grade) shrimp was washed away. As earlier stated, according to the Department of Fisheries and FAO, overall production is down 80 percent.

One year on the sector remains in ruins. Most of the *ghers* and ponds that were damaged by Aila are still inundated, due to the broken embankments, corresponding income losses and the capital intensive costs of re-starting production. Day laborers (mostly female) and small traders involved in collecting shrimp from the farms and selling to mainland wholesalers have been seriously affected. People reported that they have either lost boats in the cyclone, unable to meet the cost of repairing damaged boats, or had to sell boats to meet day-to-day costs of living. Many extreme poor, especially women, were reported to have engaged in catching shrimp fry. However, when compared to before Aila, prices have decreased by five times due the dramatic fall in demand. While other fishing opportunities are available, the capital investment (boats, nets etc) required to access these opportunities has restricted many, particularly the poor, from accessing these.

The Sundarbans is one of the largest sources of livelihood in Khulna and Satkhira districts. The Government imposed restrictions on entering the forest after Cyclone Sidr (2007) to allow for its natural recovery. Local people are allowed to enter the forest during a three month period (March to May) after obtaining permission from the Department of Forestry. Forest livelihood includes collection of *Golpata* (forest leaves), honey, fodder, timber, fish and crab. As people lost boats and tools during Aila, they are now reporting difficulty entering and working in the forest during this year's working season (March-May). Moreover, as many failed to pay back previous loans, due to

losses following Cyclone Aila, micro-credit providers have not provided further loans to support their livelihood re-establishment this year.

This fall in agricultural and fishing activities significantly affected the local labour markets and has led to decreased employment opportunities and income for agriculture and fishing wage labourers. The labour wage-rate for paddy cultivation has been reduced from around 150 taka per day per person, before Aila, to 100-120 taka immediately after Aila. Moreover, casual labourers found only seven to ten days work per month, compared to 20-25 days in a normal year.

Currently there is very limited scope for communities (either living on the embankments or for those who have returned to their previously inundated land) to re-engage in their previous livelihood given the dominance of the largely destroyed shrimp industry. The Assessment Team did observe a number of opportunities where affected communities could diversify (albeit temporarily for some) into other sectors, however this will require external support.

2.2.5 Shelter

In affected areas traditional houses (85 percent) were constructed largely from earthen walls, with wood to stabilise the structure, and a roof of leaves from the *golpata* plant, collected from the adjacent Sunderbans. These houses immediately collapsed and washed away following the inundation caused by the collapse of the embankments. According to the loss and damage statement prepared by the District Administration in July 2009,⁵ the number of households affected by Cyclone Aila in the four worst affected upazilas was approximately 76 percent.

Name of Upazila	Upazila Population	# of households affected by Aila	# fully destroyed	# partially destroyed
Shyamnagar	350,419	48,457	87,342	9,574
Assasuni	278,346	37,403	12,375	25,700
Koyra	215,015	38,514	23,820	18,620
Dacope	175,878	29,832	25,067	8,349
Total	1,019,658	154,206	148,604	62,243

Breakdown of the total number of population vis-à-vis damages in the shelter sector

Without the repair of the damaged embankments, communities will be unable to return to their villages to rebuild their houses. Any form of shelter support should be looked at critically and analyzed, taking into consideration the various needs and settlements of the displaced. For those who have returned to their homesteads, more durable structures may be considered as well as transitional shelters. Those living on the embankments need immediate support. Land is also not available to build transitional shelter in these areas due to continuous inundation in most unions. The shelters on the embankments are far below the minimum standard and they are mostly one-room make-shift huts without any space for privacy, and are extremely vulnerable to the monsoon. The capacity to make use and act on disaster early warnings is also very inadequate.

With the repair of the breached embankments ongoing, people taking shelter on the embankments have started returning to their villages. However, the UN Assessment Team found that nearly 14,000 families are still living on the embankments in a slum-like state.

⁵ Upazila wise damage and loss statement prepared by DRRO, Satkhira on 22 July 2009

Number of People on Embankments in Khulna and Satkhira Districts

District	Upazila	Upazila Population	# of Affected Households	# of VGF Cardholders in Upazila	# of Families on Embankments
Khulna	Koyra	215,015	38,514	27,310	2,809
	Dacope	175,878	29,832	10,500	7,705
Satkhira	Shyamnagar	350,419	48,457	9,500	2,200
	Assasumi	278,346	37,403	500	1,200
TOTAL		1,019,658	154,206	47,810	13,914

Source: UN Joint Assessment Team May 2010

Experience from the Cyclone Sidr response in the shelter sector suggests that self-recovery in this sector is approximately 70 percent. However, discussion with relevant stakeholders at different levels suggests that, the self-recovery in the shelter sector in Aila-affected areas may not be so high. While Sidr-affected people remained mostly in their respective homesteads, following the event, Aila affected people were forced to leave their homesteads and take shelter on the embankments. Moreover, the scope for on-farm livelihood recovery is quite restricted in affected areas due to the saline and inundated land. Off-farm livelihood opportunities are also not feasible for a significant proportion of affected people living in rural-slum like conditions. Although difficult to ascertain, concerned stakeholders believe that 60 percent of affected households may be able to recover by themselves, while 40 percent of households will require external shelter assistance. Based on this premise, about 60,000 families would require external assistance for recovery in the shelter sector across the worst affected areas. The assistance provided by the Government and NGOs has focused primarily on repair and reconstruction of partially damaged houses, and there is thus an unmet gap in the sector of approximately 60,000 households.

Existing Shelter Gap in the Four Worst Affected Upazilas

Upazila	# of Houses Affected	# of Destroyed Houses	Assumed Self-Recovery	Gap in Fully Destroyed Households
Shyamnagar	48,457	87,342	52,405	34,936
Assasuni	37,403	12,375	7,425	4,950
Koyra	38,514	23,820	14,292	9,528
Dacope	29,832	25,067	15,040	10,026
TOTAL	154,206	148,604	89,162	59,440

Source: UN Joint Assessment Team, May 2010

With the Monsoon season approaching, more durable roofing materials such as tarpaulins and ground sheets are immediately required for the 14,000 embankment dwellings. In addition, a number of families who have already returned to their villages also require temporary shelter assistance. Therefore, the total number of households requiring temporary shelter assistance immediately is estimated to be approximately 16,000.

The Assessment Team found that for those families which have moved from the embankments to their homesteads and are trying to repair/rebuild their houses, immediate support is need in the form of shelter toolkits (including rope, roof screws, nails of different sizes, GI wire of different grades, wooden saws, shovels and hoes) to support self-recovery efforts.

2.2.6 WASH

Prior to Cyclone Aila, affected areas experienced significant water scarcity with high saline levels found in groundwater. Therefore people dependent mostly on surface water bodies. The cyclone resulted in saline intrusion over the surface water resources making them unfit for drinking. The WASH sector assessment, carried out during May and June 2009, found that some 4,000 protected ponds, 1,000 pond-sand filters, and 13,000 tube-wells were damaged. This damage has adversely affected water supply coverage by 50 percent. In addition, over 210,000 household latrines were fully or partially damaged, accounting for 32 percent of the total sanitation coverage in these two districts.⁶

One year on from the disaster, the situation continues to be precarious for about 672,000 people spread over 19 unions of Assasuni, Dacope, Koyra, Paikgacha, Shyamnagar and Tala upazilas in Khulna and Satkhira districts. The situation is compounded by the discontinuation of many basic WASH emergency interventions for displaced people. It was found that the frequency of the Department of Public Health Engineering (DPHE) water 'trucking' has been reduced to once a week in many locations. The Assessment Team confirmed the need for ongoing water trucking for some 120,000 displaced people across six unions - Dakkin Bedkhashi, Gabura, Kamarkhola, Maheshwaripur, Padmapukur, and Sutarkhali.

Better organisation amongst the NGO-supported activities is also needed as unorganised water distribution was found to be supporting the capture of water by more powerful households at the cost of the most vulnerable, particularly women-headed households. The average distance travelled by a household to secure drinking water was found to be four kilometres, with the distance varying from two to six kilometres across communities. Water rationing has been introduced in some areas to reduce potential inequalities in access.

The Assessment Team estimates that 1,600 public/shared latrines are in need of repair, with a further 1,600 new latrines needed for displaced people at their present shelters on the embankments. At present the 3,900 latrines available for the displaced communities is grossly inadequate with about ten households sharing one latrine. This is of particular concern for women and children, who have different hygiene needs and are at higher risk of contracting skin-borne diseases, RTIs and other reproductive health diseases.

Hygiene promotion efforts were found to be inadequate, inconsistent and irregular. Most programmes were found to be engaging paid community workers for hygiene promotion sessions, yet due to inadequate monitoring, the sessions are not continued regularly. This in part can be attributed to the absence of an enabling environment, such as non-availability of potable water to support ablution, bathing and cleaning.

It is important to note that the water supply and sanitation situation was worsened following Cyclone Aila, in 46 unions of Assasuni, Dakop, Koyra, Paikghacha, Shyamnagar and Tala upazilas in Khulna and Satkhira districts, with damage of over 1,140 protected ponds, 786 pond-sand filters and 6,000 tube-wells. In addition, 130,000 household latrines were fully or partially damaged in these unions affecting over 60 percent of people. One year on, the situation has improved in half of these unions leaving behind 19 'most affected' unions.

⁶ The projected population in Khulna and Satkhira is 2,163,000 and 1,179,000 respectively for the year 2010

It is estimated that presently only 43 percent of people have access to improved water points and 51 percent of people have access to a latrine within these 19 most affected unions. To return to the pre-cyclone scenario, at least another 50 percent of people need secure water from improved sources and further 49 percent of people need access to household latrines.

Assuming 10 percent of people will be in a position to improve their water supply situation without external assistance, 40 percent of people in the most affected 19 unions, approximately 268,800 people, need improved water supply support to raise coverage to 93 percent⁷. Assuming 100 people i.e. 20 households will need a functional water point, the number of water points needed is 2,688. The areas, being water scarce, are mostly dependent on surface water and cannot be served by tube-wells alone. Improved water sources, in affected areas, could be secured by pond-cleaning, pond-improvement, rehabilitation of defunct pond-sand filters, installation of new pond-sand filters, repair of defunct tube-wells, and installation of new tube-wells.

45 percent people i.e. 330,000 people of the most affected 19 unions need support for sanitary latrines. The WASH cluster estimates a possibility of self-rehabilitation of 15 percent. Amongst the rest 10 percent i.e. 6,600 households will require support for the rehabilitation of their existing latrines and 24 percent i.e. 15,840 households will require support for the new latrine installation.

2.2.7 Movement / Internally Displaced Persons

Cyclone Aila resulted in the displacement of an estimated 76,478 families, of whom 25,928 were found to be living on damaged embankments. In Khulna 16,651 families were living on embankments in Koyra and Dacope alone.⁸ Most IDPs are still living on embankments, inner-ring roads and on other high strips of land. The precarious situation of the affected communities has resulted in increased migration to urban centres, with long-term implications of the displaced families. According to the ECHO partners' assessment (October 2009), after Cyclone Aila, approximately 40,000 people migrated from the Koyra Upazila of Khulna district alone. The figure is around 30,000 in Paikgacha, 18,000 in Dacope and 12,000 in Batiaghata.

Since November 2009, an average of one in four families has left their IDP settlement, to either return to their homes, or have moved to another safer rural or urban area. Following the UN Joint Assessment, the number of families currently on the embankment, and likely to remain over the Monsoon period, is approximately 14,000.

District	Upazila	Union	# of Families on Embankments	
Khulna	Koyra	Dakkin Bedkhashi	893	
		Koyra Sadar	315	
		Maheshwaripur	820	
		Uttar Bedkhashi	179	
		Bagali	132	
		Moharapur	470	
	Dacope	Kamarkhola	2,865	
		Sutarkhali	4,840	
			<i>Sub-Total</i>	<i>10,514</i>

⁷ The recovery intervention is expected to bring the water supply coverage up to pre-cyclone Aila level i.e. 83%.

⁸ These figures are from the DC's office in Khulna

Satkhira	Shyamnagar	Gabura	1,000
		Padmapukur	1,200
	Assasuni	Protapnagar	600
		Assasuni Sadar	400
		Siruil	200
		<i>Sub-Total</i>	<i>3,400</i>
	TOTAL		13,914

Source: UN Joint Assessment, May 2010

In discussions with the Assessment Team, a common concern raised by families living on the embankments was the forthcoming Monsoon and the risk they faced if rising water intrudes through broken embankments and worsens the situation. These families are monitoring the repair of embankments, through cash for work or other programmes, with caution as some repaired areas have already been damaged by high tides in April. There is a level of scepticism among many families about the durability of the repaired embankments and whether they will be able to withstand another storm, high tide or the Monsoon season.

Several families reportedly attempted to return to their homesteads but came back after observing the inhabitable conditions in their villages. While water has temporarily receded in some areas (on average two wards in each union), low lying land continues to be inundated during high tide. Some families reported their intention to move away from the current areas for various reasons, including for income generating activities, better access to resources, or improved security etc.

Approximately 78 percent and 73 percent of families living on the embankments in Gabura and Padmapukur unions, respectively, have returned to their homes or left the area. Only one whole settlement of Protapnagar in Assasuni union has been able to return to their own places at the end of April 2010. Around 48 percent of the families living on the embankments in Dacope and Koyra of Khulna district have returned to their homes or left the area; and only one whole settlement (90 families) of Mayderchor of Dakkin Bedkhashi in Koyra has been able to return to their own places at the end of December 2009.

During discussions with the communities, many households reported that the lack of social protection and access to income generating activities has resulted in families moving from the area. It is however difficult to verify the ultimate destination of families that have moved from the embankments to areas other than the villages they previously inhabited. There were reported cases of migration to areas across Bangladesh, including the Chittagong Hill Tracts and, in a number of limited reports, India.

The ratio of men and women among IDPs is nearly equal. About 51 percent men and 49 percent women are living on embankments. A total of 1,552 heads of households are now working outside the two upazilas of Khulna mostly in day labour. An additional 387 families have left the area in search of better opportunities. A total of 54 women, girls and children have reportedly left their own areas to others areas like Dacope, Khulna, Satkhira, Dhaka and Chittagong for income generating activities.

There are some incidents of trafficking such as in Kalinagar settlement of Kamarkhola union in Dacope, where the community reported 13 females, including young children, were trafficked. The proximity to the Indian border may be a factor. However, these incidents have not been reported

formally. Awareness of trafficking is very low among the affected families. They need to be aware of the dangers of human trafficking and human smuggling, as there are possibly a good number who are migrating to other parts of the country for work in the informal sector (such as the brick fields, construction, street hawkers, collecting wastes, etc). Some occurrence of gender-based violence and sexual harassment was reported.

3 THE WAY FORWARD

3.1 UN Collective Response Plan

Addressing the two developing scenarios will require different approaches both in terms of the types of interventions and the timeframe. For the 14,000 families still living on the embankments immediate action is required to provide them with the tools and support to withstand the coming Monsoon. Proposed interventions include the continuation and up-scaling of essential relief including water distributions and supplementary food support. In addition, there is need to provide these families with shelter materials, and improvement sanitation conditions to reduce their vulnerability to disease outbreaks.

Supporting the early recovery process for those families emerging from a prolonged period of relief is essential if they are to fully recover. There is therefore a pressing need to provide shelter and WASH assistance to recently returned families, and to immediately commence income generating activities to augment self-recovery.

The significant and widespread destruction of livelihoods requires a multi-directional approach to recovery. While income generating activities will inject much need cash into the local economy in the short-term, support for livelihood diversification is needed, through training and capital grants, to enable people to transition from dependence on cash transfers. The re-establishment of the local agricultural-based and fisheries sectors will likely take years to return to a pre-Aila volume.

The UN Collective Response Plan for Cyclone Aila outlines the proposed interventions of the UN System in Bangladesh. These interventions are guided by the principles of national and local ownership, with community participation at the centre of decision-making and implementation. Following the practice of “build back better” and integrating risk reduction in all interventions will be at the core of the programmatic response. The various programmes will promote gender equality by assessing particular needs and vulnerabilities of women, and ensuring that inclusion is substantive and genuine.

The proposed inventions, over a period of 24 months, are dependent on the repair and maintenance of the embankments. Therefore, the programme will be progressively implemented to ensure that the investments made in supporting the re-building of affected communities is effectively implemented and sustainable.

The UN Collective Response Plan details interventions across the main sectors, taking into account immediate needs (0-four months) and early recovery programmes (0-24 months).

Sector	Immediate Needs	Early Recovery Programmes	Total Intervention Cost (USD)
Education (UNICEF)	390,000	600,000	990,000
Food Security & Nutrition (WFP, FAO & UNICEF)	3,700,000	7,000,000	10,700,000
Health (WHO, UNFPA & UNICEF)	520,000	1,000,000	1,520,000
Livelihoods (FAO & UNDP)	1,350,000	6,901,600	8,251,600
Shelter (UNDP & IOM)	936,000	4,487,400	5,423,400
WASH (UNICEF & UNFPA)	425,000	3,501,955	3,926,955
Movement / IDPs (IOM & UNDP)	1,270,400	1,540,000	2,810,400
TOTAL	8,591,400	25,030,955	33,622,355

Results Framework: Education					
Objectives	Strategic Interventions	Indicators	Project Title	Project Budget (USD)	Amount Funded (USD)
<i>Immediate Support Interventions (now to 4 months)</i>					
1) Ensure availability of education materials	<ul style="list-style-type: none"> Education and communication materials distribution to approx. 100 primary schools 	<ul style="list-style-type: none"> Number of education, recreational and teaching materials available at school 	Education Emergency Response (UNICEF)	300,000	<i>Unfunded</i>
2) Create learning environmental at the school level and to increase access to schools	<ul style="list-style-type: none"> Include small grant for all affected schools including Chair, Table, Boards, Almira and repairing cost for approx. 100 schools 	<ul style="list-style-type: none"> % of Students are getting good seating arrangements and kept learning materials safely 		70,000	<i>Unfunded</i>
3) Teach the students about vulnerability and how to take necessary action in disaster.	<ul style="list-style-type: none"> PVA for all school for the disaster prone unions especially Gabura, Paddapukur and Pratapnagar union of Shamanagar and Asahasuni upazila respectively (100 schools) 	<ul style="list-style-type: none"> Numbers of schools have done Participatory Vulnerability Assessments. 		20,000	<i>Unfunded</i>
4) Temporary learning space to continue education and ensure safe space	<ul style="list-style-type: none"> Open at least 70 temporary learning spaces for children in the embankments 	<ul style="list-style-type: none"> Number of children continuing education in a safe space 	<i>Included under Movement/IDP sector by IOM. UNICEF and IOM will coordinate</i>		<i>unfunded</i>
<i>Sub-Total</i>				390,000	<i>Unfunded</i>
<i>Early Recovery Interventions (now to 24 months)</i>					
1) Ensure schooling at school level with good facilities	<ul style="list-style-type: none"> Repair and renovate educational institutes (GPS, RNGPS) 	<ul style="list-style-type: none"> Number of Schools restored education 	Education Emergency Response (UNICEF)	250,000	<i>Unfunded</i>
2) Ensure schooling at the disaster period	<ul style="list-style-type: none"> Renovation and up-gradation of schools (disaster resilient) 	<ul style="list-style-type: none"> Number of Schools continue classes even after/in disaster situation 		250,000	<i>Unfunded</i>
3) Improve capacity of educational institute in preparedness for disasters at School levels & to create awareness among the students on disaster and response strategies.	<ul style="list-style-type: none"> Incorporate DRR into education program – 100 schools 	<ul style="list-style-type: none"> Number of Teachers/SMC members trained on DRR Number of schools with disaster preparedness plans. Number of classes has been taken. 		100,000	<i>Unfunded</i>
<i>Sub-Total</i>				600,000	<i>Unfunded</i>
TOTAL				990,000	<i>Unfunded</i>

Results Framework: Food Security & Nutrition					
Objectives	Strategic Interventions	Indicators	Project Title	Project Budget (USD)	Amount Funded (USD)
<i>Immediate Support Interventions (now to 4 months)</i>					
<p>1) Ensure adequate food security and to save highly food-insecure homeless people who are still living on embankments and who will be jobless for the coming Monsoon season</p> <p>2) Improve nutritional status of children 6-23 months and pregnant and lactating women</p>	<ul style="list-style-type: none"> ▪ The UN Aila assessment team discovered approximately 14,000 worst affected homeless households in four upazilas of Satkhira and Khulna districts who are still living on embankments. WFP will provide food assistance for them for five months during the Monsoon season (July – Nov 2010). Under this general food distribution, they will receive family ration of rice, pulse and vegetable oil. In addition to that, children under-two years of age will receive Wheat Soya Blend (WSB). The family ration will cover only one third of their calorie requirement (approximately 1,000 kcal/person/day) whereas the rest two third calorie requirement is assumed to be fulfilled by other sources. 	<ul style="list-style-type: none"> ▪ Households consuming a balanced diet including carbohydrate, proteins and fat/oil. ▪ Percent of households consumed at least three meals a day. ▪ Prevalence of wasting (weight-for-height) among children 6-24 months ▪ Anaemia rate of under-two children. ▪ # of children 6-23 months receiving MNP supplements ▪ Coverage among pregnant women of iron/folate 	General Food Distribution and Micronutrient supplementation (GFD) (WFP & UNICEF)	2,200,000	<i>Unfunded</i>
<p>3) Rapidly rebuild the livelihoods of 10,000 worst affected farmers through providing vegetable seeds, fruit tree saplings, fertilizers, spade and watering can for backyard gardening</p>	<ul style="list-style-type: none"> ▪ Select implementing NGO partners ▪ Develop relationship with DAE for the identification of beneficiaries and provide technical knowledge ▪ Conducting training ▪ Procurement and distribution of 50,000 packages (5 types of seeds, 5 types of fruit tree saplings, 5kg fertilizer, spade and watering can) of inputs for homestead gardening 	<ul style="list-style-type: none"> ▪ Resumption of 10,000 vegetable gardens by landless and female headed households in Cyclone Aila affected areas ▪ Consumption of fruits and vegetables at homestead level increased therefore improving nutrition 	Ensuring food security and nutritional availability to the cyclone Aila Affected Ultra-Poor Farmers (FAO)	1,500,000	<i>Unfunded</i>

	<ul style="list-style-type: none"> Monitor project activities 				
4) Provide vulnerable women with Chicken or duck and chicken/duck feed to 5,000 households	<ul style="list-style-type: none"> Selection of beneficiaries Identification of implementing NGO partner and coordinate with DLS Procurement and distribution quality (10chicken/ 10 ducks and feeds packages) Monitoring and follow up 	<ul style="list-style-type: none"> Resumption of 5,000 homestead-based chicken / duck farming Increased consumption of eggs and meat increasing protein intake of households 			
			<i>Sub-Total</i>	<i>3,700,000</i>	<i>Unfunded</i>
<i>Early Recovery Interventions (now to 24 months)</i>					
1) Contribute to the restoration of livelihoods by repair/ rehabilitate/ reconstruct of key physical infrastructures such as embankments/ rural roads and to re-excavate drainage canals, to repair schools and markets. This will protect livelihoods from future tidal surges and floods, and avoid further salinity in the soil	<ul style="list-style-type: none"> The UN Aila assessment team identified approximately 60,000 worst affected households who have not recovered yet and need external assistance. WFP under its recovery programme will target 33,000 extreme poor households which will be selected from among these worst affected population (approximately 55 percent on an average according to recently launched Poverty Estimates by BBS, WFP and World Bank). These 33,000 households will work under Food for Work (FFW) programme for five months (total 90 working days). 	<ul style="list-style-type: none"> Kilometer of damaged embankments, roads, culverts repaired / reconstructed and canal re-excavated Number of schools/ rural markets repaired/ reconstructed Number of trees planted. Number of people re-established their livelihoods No of infrastructure rebuilt, re-stored or in use. No of community groups mobilized for recovery work 	Recovery Programme (Food For Work) (WFP)	7,000,000	<i>Unfunded</i>
			<i>Sub-Total</i>	<i>7,000,000</i>	<i>Unfunded</i>
			TOTAL	10,700,000	Unfunded

Results Framework: Health					
Objectives	Strategic Interventions	Indicators	Project Title	Project Budget (USD)	Amount Funded (USD)
<i>Immediate Support Interventions (now to 4 months)</i>					
1) Ensure supply of emergency drugs for replenishment of buffer stock at health facility level to prevent ongoing and impending disease outbreak	<ul style="list-style-type: none"> Distribute emergency drugs to the health facilities 	<ul style="list-style-type: none"> Availability of emergency drugs at buffer stock 	Improved Health support to Aila affected areas (WHO & UNICEF)	500,000	<i>Unfunded</i>
2) Enhance emergency and primary health care at health facility level	<ul style="list-style-type: none"> Provide medical and other equipment to the health facilities 	<ul style="list-style-type: none"> Availability of equipment at health facilities 			
3) Ensure supply of audio-visual instruments for waiting patient in order to increase awareness level and thereby adopt healthy life style	<ul style="list-style-type: none"> Supply audio-visual equipments at health facility level 	<ul style="list-style-type: none"> Number of Health facilities equipped with audio-visual equipment 			
4) Improve knowledge and skills through training for community level health personnel(Health Assistant, village doctors) and health managers	<ul style="list-style-type: none"> Conduct capacity building training on treatment of common ailments, emergency health care, psychosocial support, disease surveillance 	<ul style="list-style-type: none"> Number of health personnel and manager trained 			
5) Increase awareness level of Aila affected people with focus on psychosocial support, personal hygiene and sanitation, what action should taken during emergencies especially drawing management, snake bite management, cardio-pulmonary resuscitation etc	<ul style="list-style-type: none"> Develop IEC materials like poster, leaflet etc at Aila affected communities Organise of special campaign for community people on awareness building 	<ul style="list-style-type: none"> Number and type of IEC materials developed Number of session held 			

6) Ensure strengthen disease surveillance system of Aila affected areas	<ul style="list-style-type: none"> Recruit health personnel to assist local health authority on disease surveillance Update disease reporting format and maintain data base 	<ul style="list-style-type: none"> Availability of trained health personnel to assist in disease surveillance system Number of control room using updated reporting format 			
7) Increase capacity of health worker in emergency response	<ul style="list-style-type: none"> Provide emergency equipment like lifebuoy, search light, personal protective equipment (PPE) etc to the front line health workers for search, rescue and evacuation 	<ul style="list-style-type: none"> Number and type equipment provided 			
8) Improve nutritional status of affected people especially for pregnant and lactating mother and under 5 children	<ul style="list-style-type: none"> Distribute of micronutrient ingredients 	<ul style="list-style-type: none"> Amount of Micronutrient ingredients supplied 			
9) Reduce risk of maternal mortality among the affected population	<ul style="list-style-type: none"> Procure Reproductive Health Kits (Clean Delivery Kits) and distribute to pregnant women and girls in coordination with local authorities and local NGOs 	<ul style="list-style-type: none"> # of maternal deaths registered in the affected community 	Improving Maternal Health among Affected Population (UNFPA)	10,000	Unfunded
10) Increased availability of Family Planning Services among Aila Affected population	<ul style="list-style-type: none"> Procure Reproductive Health Kits (Oral and Injectable Contraceptives) and distribute to women and girls of reproductive age living in affected areas, in close coordination with local health authorities. Sensitize the population on Family Planning, including different FP options, in order to allow them to make informed choices. 	<ul style="list-style-type: none"> # of women and girls reporting un-met access to FP services of their choice # of women and girls reporting correct knowledge about different FP services 	Improved Availability of Family Planning Services among affected population (UNFPA)	10,000	Unfunded
<i>Sub-Total</i>				<i>520,000</i>	<i>Unfunded</i>
<i>Early Recovery Interventions (now to 24 months)</i>					
1) Improve quality of health services available for the affected population	<ul style="list-style-type: none"> Carry out capacity building training for health personnel (Primary Health Care, Community Skilled Birth 	<ul style="list-style-type: none"> # of maternal deaths reported in the community # of births attended at UHCs 	Improve Quality of Health Services	500,000	Unfunded

	<p>Attendants (CSBAs) etc.) in the Aila affected regions</p> <ul style="list-style-type: none"> Strengthen availability of essential commodities in government led health facilities 	<p>and MCWCs</p> <ul style="list-style-type: none"> Reported stockouts of essential commodities 	(UNFPA, WHO)		
2) Increased knowledge among affected population on primary health care, including reproductive health care and family planning	<ul style="list-style-type: none"> Carry out IEC campaign to raise awareness on Primary Health Care, Reproductive Health care, including antenatal and postnatal care, risks of home deliveries, and family planning. 	<ul style="list-style-type: none"> # of people reporting accurate knowledge on different FP methods # of people reporting accurate knowledge on postnatal and ante natal care 	IEC on Basic Health Care (UNFPA, WHO & UNICEF)	500,000	<i>Unfunded</i>
<i>Sub-Total</i>				<i>1,000,000</i>	<i>Unfunded</i>
TOTAL				1,520,000	Unfunded

Results Framework: Livelihoods					
Objectives	Strategic Interventions	Indicators	Project Title	Project Budget (USD)	Amount Funded (USD)
<i>Immediate Support Interventions (now to 4 months)</i>					
1) Support immediate resumption of farming activities and restoration of agriculture based livelihoods through provision of essential agricultural inputs (5 Kg Aman seed & 30 Kg Urea, 10 Kg TSP, 10 Kg MoP fertilizer/per HH) to 5 000 households	<ul style="list-style-type: none"> ▪ Identification and preparation of beneficiaries ▪ Selection of NGO and coordination with DAE ▪ Procurement and distribution Aman rice seed and fertilizer ▪ Conducting training to the selected farmers on Aman rice cultivation ▪ Provide technical support to the farmers 	<ul style="list-style-type: none"> ▪ Rapid resumption of Aman rice production ▪ Distribution of 25 MT Aman rice seed with 250 MT fertilizer ▪ 5,00 farmers cultivated Aman rice 	Emergency Response and Early Recovery of Cyclone Aila Affected farmers (FAO)	1,350,000	<i>Unfunded</i>
2) Rapidly rebuild livelihoods of 3,000 worst affected households through immediate restocking of vaccinated female goat and sheep with feed (2 goat or sheep and 100Kg feed/HH)	<ul style="list-style-type: none"> ▪ Selection of beneficiary ▪ Procure inputs i.e. 6,000 goat/ sheep with 300MT feed ▪ Select NGO partner ▪ Distribute among beneficiaries ▪ Providing technical support throughout the project period ▪ Monitoring the activities 	<ul style="list-style-type: none"> ▪ Resumption of goat/ sheep farming ▪ Increased income for women 			
3) Contribute to restoration of livelihoods for 5,000 fish and shrimp farmers	<ul style="list-style-type: none"> ▪ Selection of beneficiaries ▪ Coordination with DOF and selection of partner NGOs ▪ Procurement of inputs i.e. fish seed, feed, fertilizer and lime for carp, <i>bagda</i> and <i>galda</i> farmers 	<ul style="list-style-type: none"> ▪ Resumption of production in fish ponds and shrimp <i>ghers</i> 			
			<i>Sub-Total</i>	<i>1,350,000</i>	<i>Unfunded</i>
<i>Early Recovery Interventions (now to 24 months)</i>					
1) Restore agriculture based livelihoods through providing saline tolerant varieties of Boro rice seed and fertilizer to 5,000	<ul style="list-style-type: none"> ▪ Identification of beneficiaries ▪ Selection of NGO and preparation beneficiary list in consultation with DAE ▪ Procure and distribute Boro rice seed 	<ul style="list-style-type: none"> ▪ Rapid resumption of Boro rice production ▪ 5,000 farmers cultivate Boro rice ▪ Increased production and 	Livelihood initiatives of the Cyclone Aila affected farmers	4,000,000	<i>Unfunded</i>

affected households	and fertilizer i.e. 37.5 MT seed and 375 MT fertilizer <ul style="list-style-type: none"> Conducting training for the farmers Provide technical support to the farmers 	increased income			
2) Restore the livestock based livelihoods through providing large ruminant with feed and shed (1 cow, 100kg feed and shed) to 1,000 households	<ul style="list-style-type: none"> Identification of beneficiaries Selection of beneficiaries Consultation with DLS Procurement and distribution of ruminants with feed Providing technical support Monitoring of activities 	<ul style="list-style-type: none"> Restoration of livestock Increased production Increased income 	(FAO)		
3) Rapidly rebuild livelihoods of 1,000 worst affected fishers group (3,000 HH) through the supply of fishing boat and net	<ul style="list-style-type: none"> Build and purchase boat, net Beneficiary and NGO selection 	<ul style="list-style-type: none"> Available boat, net Increased income 			
4) Provision of financial and technical assistance for off-farm livelihood activities	<ul style="list-style-type: none"> 7,000 beneficiary households identified for undertaking off-farm livelihood programme <ul style="list-style-type: none"> <i>Homestead based IGA supports</i> <i>Brackish water based livelihood support (boat and net support)</i> <i>Small scale aquaculture development</i> 	<ul style="list-style-type: none"> 7,000 families (minimum 40% are women) received alternative livelihood support 	Off-Farm Livelihood Recovery Programme for Cyclone Aila Affected Communities (UNDP)	2,307,600	<i>Unfunded</i>
5) Provision of cash assistance to self-employed entrepreneurs	<ul style="list-style-type: none"> Cash grants to self-employed entrepreneurs (like <i>Ferywala</i>, and other small traders engaged in fish processing, nurseries, candle-making, crap fattening, handicraft, poultry farming, duck/goat/cow rearing etc). 	<ul style="list-style-type: none"> 2,000 no self-employed entrepreneurs assisted 80 no of training / orientation programmes organized. Partnerships established with vocational institutions and technical organizations 	Support for Self-Employed Entrepreneurs Affected by Cyclone Aila (UNDP)	540,000	<i>Unfunded</i>
6) Repairs and restoration of	<ul style="list-style-type: none"> Repairs and restoration of local 	<ul style="list-style-type: none"> 20 no of market places 	Restoration of	54,000	<i>Unfunded</i>

local market areas places	market places	and/or community infrastructure repaired and strengthened	Cyclone Aila Affected Local Markets (UNDP)		
			<i>Sub-Total</i>	<i>6,901,600</i>	<i>Unfunded</i>
			TOTAL	8,251,600	Unfunded

Results Framework: Shelter					
Objectives	Strategic Interventions	Indicators	Project Title	Project Budget (USD)	Amount Funded (USD)
<i>Immediate Support Interventions (now to 4 months)</i>					
1) Provide emergency shelter assistance packages for the homeless families living on embankments and homesteads	<ul style="list-style-type: none"> 14,000 vulnerable families will be able to protect themselves from the monsoon <p><i>In coordination with IOM</i></p>	<ul style="list-style-type: none"> 14,000 families received shelter assistance 	Immediate Shelter Assistance Programme for Cyclone Aila Affected Families (UNDP, IOM)	936,000	<i>Unfunded</i>
<i>Sub-Total</i>				<i>936,000</i>	<i>Unfunded</i>
<i>Early Recovery Interventions (now to 24 months)</i>					
1) Setting up of training and resource centres for facilitating disaster resilient shelter construction	<ul style="list-style-type: none"> Setting up 4 Resource Centres in selected upazilas of Satkhira and Khulna district Training allowance to masons and carpenters 	<ul style="list-style-type: none"> 2,510 household members received support and training on owner driven disaster resilient core family shelter construction 	Support to Cyclone Aila Affected Families Self-Recovery (UNDP)	437,400	<i>Unfunded</i>
2) Undertake disaster resilient family shelter programme on the principle of 'built back better'	<ul style="list-style-type: none"> 3,000 Aila affected families will have houses rebuilt by themselves with the financial and technical assistance of UNDP 	<ul style="list-style-type: none"> 3,000 families received durable disaster resilient houses 	Disaster Resilient Shelters for Cyclone Aila Affected Families (UNDP)	4,050,000	<i>Unfunded</i>
<i>Sub-Total</i>				<i>4,487,400</i>	<i>Unfunded</i>
TOTAL				5,423,400	Unfunded

Results Framework: WASH					
Objectives	Strategic Interventions	Indicators	Project Title	Project Budget (USD)	Amount Funded (USD)
<i>Immediate Support Interventions (now to 4 months)</i>					
1) Affected Families have access to Basic Hygiene Supplies	<ul style="list-style-type: none"> Distribute basic hygiene kits for families, including soap, cotton towels for women, cooking utensils, etc. (items to be defined in consultation with local communities) 	<ul style="list-style-type: none"> Women report improved hygiene situation after 3 months 	Distribution of Hygiene Kits to affected households (UNFPA, UNICEF)	100,000	<i>Unfunded</i>
2) Displaced men, women and children have access to safe drinking water	<ul style="list-style-type: none"> Continued water trucking for 120,000 people Explore installation of additional water points to enhance access to the displaced people 	<ul style="list-style-type: none"> Percentage of displaced people with access to 7.5 litres potable water per person per day. Percentage of people whose distance of collecting water is less than 500m. 	Water trucking with well established rationing system (UNICEF)	155,000	<i>145,000 (LGD allocation)</i>
3) Displaced men, women and children have access to sanitary latrines	<ul style="list-style-type: none"> Repairing of 1,600 public/shared latrines and install another 1,600 latrines for the displaced people near to their present shelters Use and upkeep of facilities established by working with the user communities 	<ul style="list-style-type: none"> No faecal matter observed in and around the shelters of displaced people. More than 80 percent of men, women and children using and maintaining latrines as evidenced by hygienic condition and availability of soap Improved and new latrines. Conform to the design standards defined in the WASH Cluster. 	Installation of 1,600 new public latrines and repairing of 1,600 defunct latrines (UNICEF)	105,000	<i>Unfunded</i>
4) Displaced men, women and children are enabled to practice safer hygiene in a dignified and culturally appropriate manner	<ul style="list-style-type: none"> Continued and regular hygiene promotion sessions; with emphasis on life saving behavioural needs 	<ul style="list-style-type: none"> 80 percent of displaced children, women and men can demonstrate knowledge of key hygiene practices by end September 2010 	Mobilization, use & upkeep of water points and latrines. Events: hygiene	65,000	<i>Unfunded</i>

			promotion (UNICEF)		
			<i>Sub-Total</i>	<i>425,000</i>	<i>Unfunded</i>
<i>Early Recovery Interventions (now to 24 months)</i>					
1) All men, women and children have access to safe drinking and domestic water up to pre-Aila levels, in most affected 19 unions, by December 2011	<ul style="list-style-type: none"> ▪ Cleaning of ponds and repairing of existing 100 pond-sand-filters ▪ Installation of 385 new pond-sand-filters ▪ Upgrading / repairing of existing 250 deep TWs; and installation of 675 new deep TWs ▪ Upgrading / repairing of existing 150 shallow TWs; and installation of 585 new shallow TWs ▪ Support roof-rainwater harvesting for 1,700 households ▪ Promotion of household water treatment and storage 	<ul style="list-style-type: none"> ▪ Water supply coverage in the affected districts return to the pre-Aila ▪ Percentage of population with access to water from improved sources ▪ Percentage of population whose distance from their place of dwelling is less than 500-m ▪ Percent age of population having awareness over the safe collection, storage and retrieval of drinking water; including among mothers, caregivers and school-age children 	Improved 2,688 water points by use of technically feasible solutions: pond cleaning, repairing/ installing PSFs, repairing/ installing TWs, and rainwater harvest (UNICEF)	1,570,000	<i>Unfunded</i>
2) 80 percent men women and children have restored access to safe sanitary facilities to pre-Aila levels, in most affected 19 unions, by December 2011	<ul style="list-style-type: none"> ▪ Rehabilitation of 6,600 household latrines that supports 10% population ▪ Construction of 15,840 household latrines that supports 24% population 	<ul style="list-style-type: none"> ▪ The sanitation coverage in the affected districts return to the pre-Aila level ▪ More than 80% of girls and women express satisfaction with the safety and privacy of latrines ▪ New and improved latrines conform to the design standards defined by WASH Cluster; and are child-friendly 	Support installation of 15,840 new household latrines and repair of 6,600 existing latrines (UNICEF)	856,555	<i>Unfunded</i>
3) 70 percent of school children have access to safe sanitary facilities; supported with	<ul style="list-style-type: none"> ▪ Rehabilitation of 250 WASH facilities in schools ▪ Installation of new 250 WASH 	<ul style="list-style-type: none"> ▪ Percentage of school going children having access to private sanitation facilities 	Support installation of 250 new	375,000	<i>Unfunded</i>

water supply for ablution/cleaning/ hand-washing	facilities in schools	<ul style="list-style-type: none"> Number of schools with established proper use & upkeep of water & sanitary facilities 	facilities and repair of 250 existing facilities (UNICEF)		
4) All men, women, children are enabled to practice safer hygiene in a dignified and culturally appropriate manner, in most affected 19 unions, by December 2011	<ul style="list-style-type: none"> Hygiene promotion at households, communities and schools Hygiene promotion emphasise hand-washing with soap (HWWS) and drinking-water safety 	<ul style="list-style-type: none"> 80 percent of children, women and men can demonstrate knowledge of key hygiene practices by end December 2011 	Community mobilization, and hygiene promotion (UNICEF)	700,400	<i>Unfunded</i>
<i>Sub-Total</i>				<i>3,501,955</i>	<i>Unfunded</i>
TOTAL				3,926,955	145,000

Results Framework: Movement / Internally Displaced Persons					
Objectives	Strategic Interventions	Indicators	Project Title	Project Budget (USD)	Amount Funded (USD)
<i>Immediate Support Interventions (now to 4 months)</i>					
1) Ensure IDP families living on embankments have access to basic items necessary for daily life.	<ul style="list-style-type: none"> Distribute NFI kits to 14,000 families including blankets, water storage containers with filters, and other critical needs 	<ul style="list-style-type: none"> 14,000 families will have a basic household kit. 	Comprehensive Life Saving Needs Provided and Coordinated for IDP families living on Embankments (IOM)	250,000	<i>Unfunded</i>
2) Ensure primary health care requirements of individuals living on the embankments are covered.	<ul style="list-style-type: none"> Provision of basic primary health care services to the IDP's living on the embankments through the use of mobile clinics (vans, and other transportation i.e. speed boats, engine boats) <p><i>Coordinated with WHO & UNICEF</i></p>	<ul style="list-style-type: none"> Basic primary health care requirements of 14, 000 IDP families living on embankments will be provided 		150,000	<i>Unfunded</i>
3) Ensure a comprehensive understanding of population data and levels of service provision relating to displaced populations from Khulna and Satkhira	<ul style="list-style-type: none"> Continue Displacement Tracking Matrix (DTM) to collect and update information of IDPs in affected areas of Khulna and Satkhira. 	<ul style="list-style-type: none"> Fortnightly DTMs of Satkhira and Khulna distributed among government, UN agencies, donors and NGOs for up to 14,000 IDPs. 		50,000	<i>Unfunded</i>
4) Provide for basic personal sanitation and clothing needs for women and children living on embankments	<ul style="list-style-type: none"> Procurement and distribution of locally acceptable female hygiene kits and culturally appropriate clothing for women and children. Community groups will be mobilized for self-selection of vulnerable families for clothing distribution 	<ul style="list-style-type: none"> Immediate basic needs for hygiene kits and clothing for vulnerable families will be covered. 14,000 IDP families living on embankments covered 		200,000	<i>Unfunded</i>

5) Reduce trafficking of Persons within the Displaced Communities	<ul style="list-style-type: none"> Through the use of formal and informal communication networks, awareness campaigns and community-level engagement regarding the issue of trafficking of persons and linkages to HIV will be highlighted 	<ul style="list-style-type: none"> Displaced communities living on embankments will be aware of trafficking issues and coping mechanisms within the local context 		60,000	<i>Unfunded</i>
6) Ensure comprehensive life saving needs are provided (emergency shelter, food, water) for displaced populations living on embankments prior to monsoon/storm surges	<ul style="list-style-type: none"> Coordinate basic needs, shelter kits, food, water, medical to approximately 4,000 IDP families located in Satkhira and 10,000 IDP families located in Khulna. <p><i>(This activity will be carried out in coordination with UNDP, WFP, WHO and WASH and is referenced in their budget)</i></p>	<ul style="list-style-type: none"> IDP families living on embankments of Satkhira and Khulna will have life saving needs covered 		50,000	<i>Unfunded</i>
7) Address the trauma and psychosocial requirements of displaced communities, including learning facilities for children who cannot attend schools	<ul style="list-style-type: none"> Provision of psychosocial services to up to 14,000 families living on embankments Provision of learning opportunities for children through temporary learning shelters, private tutoring or escort service by boats to nearby schools/learning centers <p><i>(Coordinated with UNICEF)</i></p>	<ul style="list-style-type: none"> Access to psychosocial activities for up to 14,000 families living on embankments provided Access to learning provided to those children of 14,000 IDP families who are not covered. 		500,000	<i>Unfunded</i>
8) Early warning dissemination measures and contingency plan in place for communities living on embankments	<ul style="list-style-type: none"> Contingency plan in place Training of focal persons for dissemination of early warning amongst the families living on the embankments Providing necessary equipments (cell phones, mega phones, radios and flags etc) for dissemination of early warning 	<ul style="list-style-type: none"> Contingency plan in place and ready for operationalisation 24 focal persons received training on dissemination of EW messages in 12 settlement points/locations 24 radio received by the focal persons 24 cell phone and mega 	Early warning dissemination measures for communities living on embankments (UNDP)	10,400	<i>Unfunded</i>

	(Coordinated through MoFDM/CDMP)	<ul style="list-style-type: none"> phone received by the focal persons 24 numbers of signal flags received by the focal persons 			
<i>Sub-Total</i>				1,270,400	<i>Unfunded</i>
<i>Early Recovery Interventions (now to 24 months)</i>					
1) Ensure a comprehensive understanding of population data and levels of service provision relating to displaced populations from Khulna and Satkhira	<ul style="list-style-type: none"> Continue Displacement Tracking Matrix (DTM) to collect and update information of IDPs in affected areas of Khulna and Satkhira. 	<ul style="list-style-type: none"> Fortnightly DTMs of Satkhira and Khulna distributed among government, UN agencies, donors and NGOs for up to 14,000 IDPs. 	Displacement Tracking Matrix tracks primary information of IDPs (IOM)	290,000	<i>Unfunded</i>
2) Eliminate Trafficking of Persons within the Displaced Communities	<ul style="list-style-type: none"> Through the use of formal and informal communication networks, awareness campaigns and community-level engagement regarding the issue of trafficking of persons will be highlighted 	<ul style="list-style-type: none"> Up to 14,000 displaced families and those living on embankments will be aware of trafficking issues and coping mechanisms within the local context 	Awareness on Counter trafficking issues for displaced persons (IOM)	300,000	<i>Unfunded</i>
3) Address gender in disaster risk reduction	<ul style="list-style-type: none"> An assessment and programming that takes into account perceptions, knowledge and dangers of long term exposure to the harsh elements of those living on the embankments as well as their coping mechanisms Support provided based on the assessment recommendations and as identified by the women that take into account theirs as well as their community's needs Training on alternate dispute resolution to women community leaders address gender based 	<ul style="list-style-type: none"> A rapid assessment carried out by academics and development organization on women's perception, knowledge and hazards/dangers of long time living on embankments <p># of community activities undertaken # of persons benefited disaggregated by sex and age # of elderly and disabled assisted. # of women trained.</p>	Gender in disaster risk reduction (IOM)	250,000	<i>Unfunded</i>

	violence	# of disputes settled.			
4) Return Kits for Displaced Populations	<ul style="list-style-type: none"> ▪ Procurement and distribution of prioritized items (tools, household,) to ensure sustainable return 	5) Displaced communities who return are able to do so over an extended period	Support to Sustainable and Dignified Returns through provision of return kits (IOM)	700,000	<i>Unfunded</i>
<i>Sub-Total</i>				<i>1,540,000</i>	<i>Unfunded</i>
TOTAL				2,810,400	Unfunded

4 ANNEXURES

4.1 Summary of Interventions Targeting Immediate Support for People Living on Embankments

Sector	Strategic Interventions	Project Budget (USD)
Education	Open at least 70 temporary learning spaces for children in the embankments	<i>Included under Movement/IDP sector. UNICEF and IOM will coordinate</i>
Food Security & Nutrition	Provide food assistance for approximately 14,000 worst affected homeless households in four upazilas of Satkhira and Khulna districts for five months during the Monsoon season (July – Nov 2010). They will receive family ration of rice, pulse and vegetable oil. In addition, children under-two years of age will receive Wheat Soya Blend (WSB).	2,200,000
Health	<ul style="list-style-type: none"> ▪ Distribute emergency drugs to the health facilities ▪ Provide medical and other equipment to the health facilities ▪ Supply audio-visual equipments at health facility level ▪ Develop IEC materials like poster, leaflet etc at Aila affected communities ▪ Organise of special campaign for community people on awareness building ▪ Recruit health personnel to assist local health authority on disease surveillance ▪ Update disease reporting format and maintain data base ▪ Provide emergency equipment like lifebuoy, search light, personal protective equipment (PPE) etc to the front line health workers for search, rescue and evacuation ▪ Distribute of micronutrient ingredients ▪ Procure Reproductive Health Kits (Clean Delivery Kits) and distribute to pregnant women and girls in coordination with local authorities and local NGOs ▪ Procure Reproductive Health Kits (Oral and Injectable Contraceptives) and distribute to women and girls of reproductive age living in affected areas, in close coordination with local health authorities. ▪ Sensitize the population on Family Planning, including different FP options, to support informed choices. 	520,000
Shelter	<ul style="list-style-type: none"> ▪ Provide emergency shelter assistance packages for 14,000 homeless families living on embankments and homesteads enabling them to protect themselves from the monsoon 	936,000
WASH	<ul style="list-style-type: none"> ▪ Distribute basic hygiene kits for families, including soap, cotton towels for women, cooking utensils, etc. ▪ Continued water trucking for 120,000 people ▪ Explore installation of additional water points to enhance access to the displaced people ▪ Repairing of 1,600 public/shared latrines and install another 1,600 latrines for the displaced people ▪ Use and upkeep of facilities established by working with the user communities ▪ Continued and regular hygiene promotion sessions; with emphasis on life saving behavioural needs 	425,000
Movement / Internally	<ul style="list-style-type: none"> ▪ Distribute NFI kits to 14,000 families including blankets, water storage containers with filters, and other critical needs ▪ Provision of basic primary health care services to the IDP's living on the embankments through the use of mobile clinics 	1,270,400

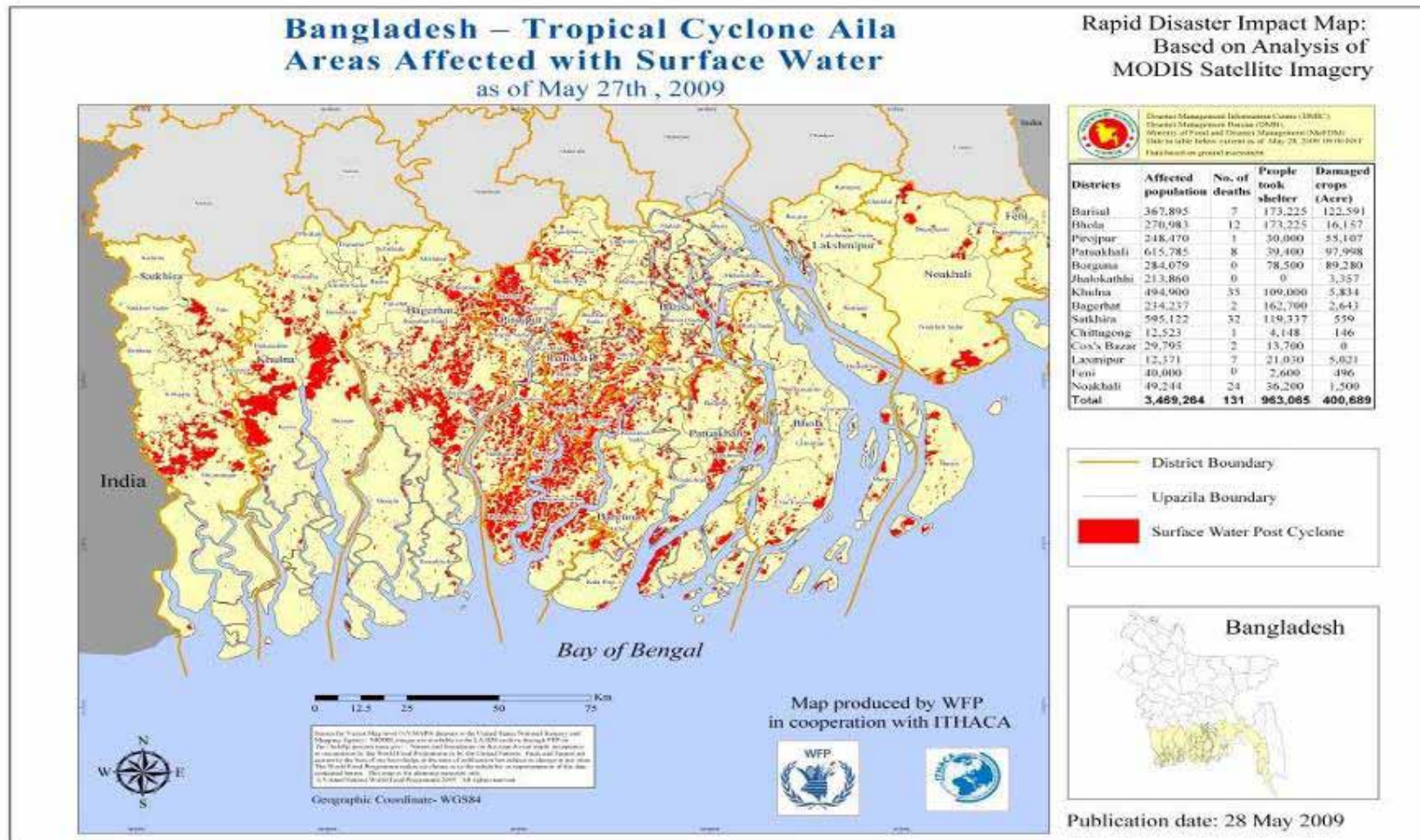
Displaced Persons	<p>(vans, and other transportation i.e. speed boats, engine boats)</p> <ul style="list-style-type: none"> ▪ Continue Displacement Tracking Matrix (DTM) to collect and update information of IDPs in affected areas of Khulna and Satkhira. ▪ Distribution of locally acceptable female hygiene kits and culturally appropriate clothing for women and children. ▪ Through the use of formal and informal communication networks, awareness campaigns and community-level engagement regarding the issue of trafficking of persons will be highlighted ▪ Establish early warning dissemination measures and contingency plan in place for communities living on embankments 	
TOTAL		5,351,400

4.2 Summary of Cyclone Aila Damages to Satkhira & Khulna Districts

District	Upazila	Union (No.)	Villages (No.)	Affected Household (No.)	Damaged							
					Crop Land (Ha)	Shrimp Gher/ Pond (Acre)	School (No.)	Embankment (km)	Road (km)	Sluice Gate, Culvert (No.)	Drinking Water Sources (No.)	Latrine (No.)
Satkhira	Shyamnagar	12	92	48,457	501	32,661	151	86	123	45	3,130	20,850
	Ashashuni	11	42	37,403	65	13,300	49	80	91	13	6,712	15,239
Khulna	Koira	7	46	38,514	211	20,300	16	80	108	30	1,103	27,350
	Dacope	10	64	29,832	1,360	17,640	279	166	274	38	11,200	16,320
Total		40	244	154,206	2,137	83,901	495	412	596	126	22,145	79,759

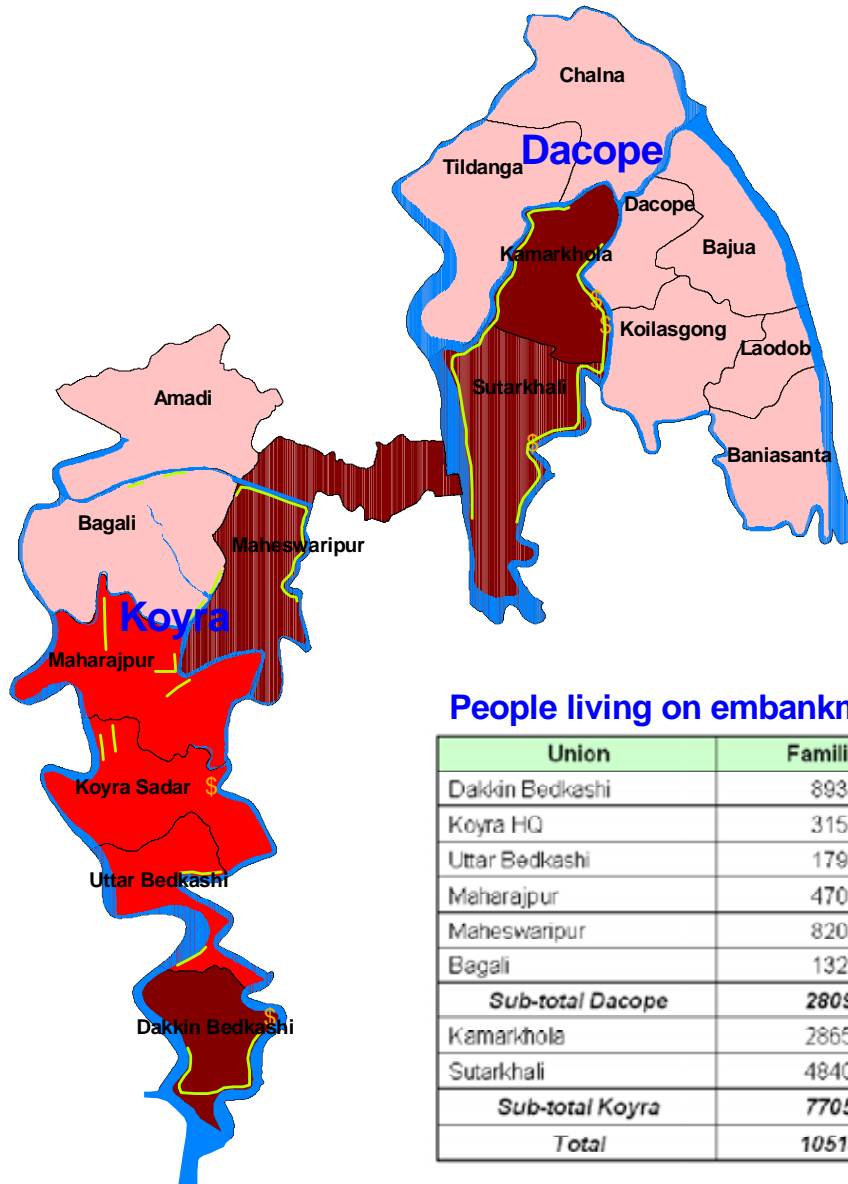
Source: Cyclone Aila damage report prepared by the district administrations of Satkhira & Khulna, July 2009

4.3 Map: Affected Areas with Surface Water (27 May 2009)



4.4 Map: Impact of Cyclone Aila on Khulna (26 May 2010)

Impact of Cyclone Aila on Khulna

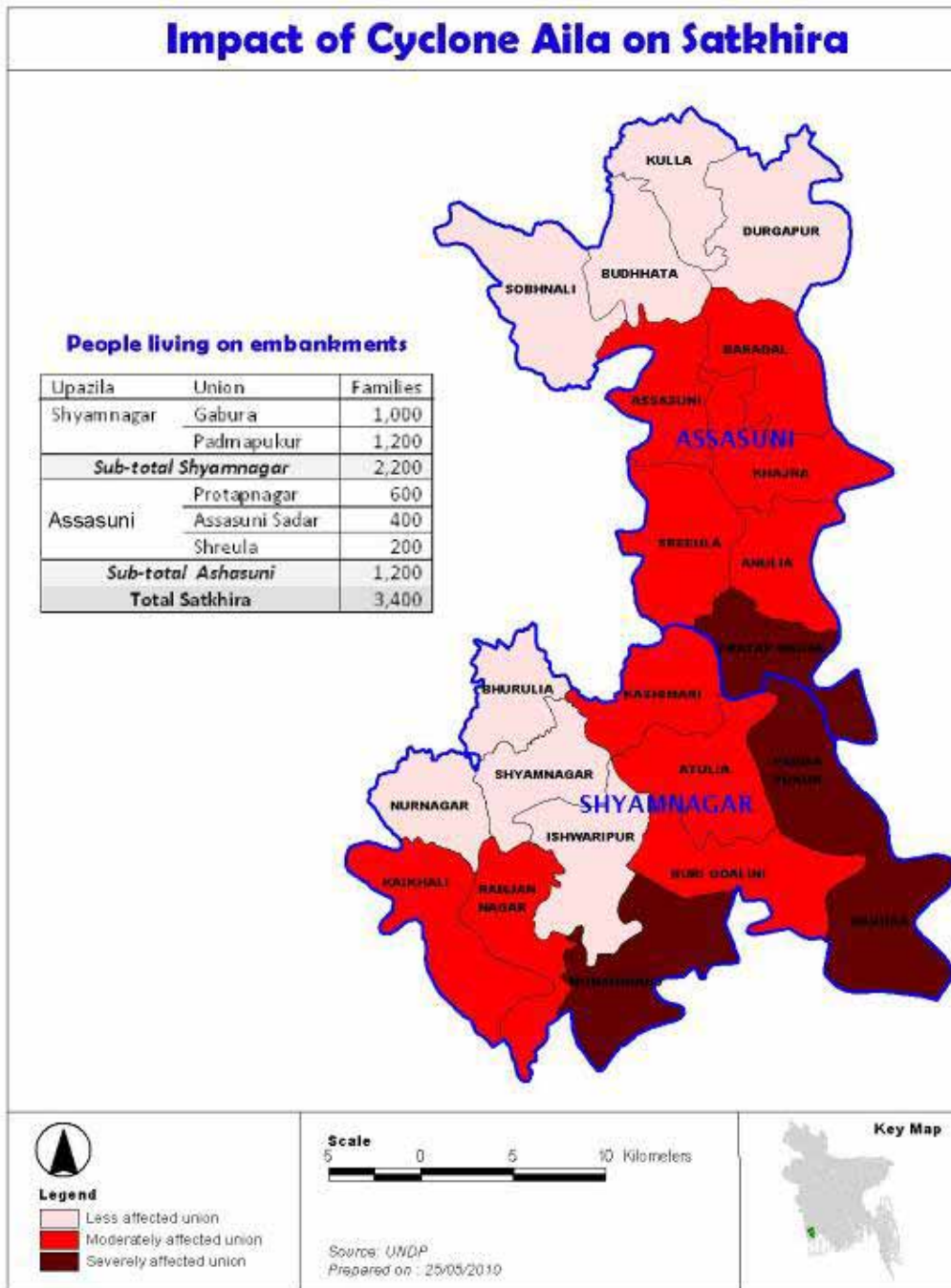


People living on embankments

Union	Families
Dakkin Bedkashi	893
Koyra HQ	315
Uttar Bedkashi	179
Maharajpur	470
Maheswaripur	820
Bagali	132
Sub-total Dacope	2809
Kamarkhola	2865
Sutarkhali	4840
Sub-total Koyra	7705
Total	10514

<p>Legend</p> <ul style="list-style-type: none"> \$ Broken embankment ■ River Less affected union Moderately affected union Severely affected union — Location of people's living embankment ~ Location of people's living embankment 	<p>Scale</p> <p>3 0 3 6 Kilometers</p> <p>Source: UNDP & IOM Prepared on: 26/05/2010</p>	
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4.5 Map: Impact of Cyclone Aila on Satkhira (26 May 2010)



CONTACTS

Coordinators of UN Joint Multi-Sector Assessment & Response Framework:

Steven Goldfinch, UNDP
steven.goldfinch@undp.org

Rumana Khan, UN Resident Coordinator's Office
rumana.khan@undp.org

Sector	Agency(ies)	Contact
Education	UNICEF	Famida Shabnam fshabnam@unicef.org
Food Security & Nutrition	WFP	Malik Kabir malik.kabir@wfp.org
	FAO	El Zein El Muzamil elzein.elmuzamil@fao.org
	UNICEF	Birthe Rossi-Locatelli brossilocatelli@unicef.org
Health	WHO	Kazi AHM Akram akramk@searo.who.int
	UNFPA	Clara Rodriguez Ribas crodrigues@unfpa.org
Livelihoods	FAO	El Zein El Muzamil elzein.elmuzamil@fao.org
	UNDP	Md. Sifayet Ullah sifayet.ullah@undp.org
Shelter	UNDP	BMM Mozharul Huq mozharul.huq@undp.org
	IOM	Nishat A Chowdhry nchowdhry@iom.int
WASH	UNICEF	Lalit Patra lpatra@unicef.org
Movement / Internally Displaced Persons	IOM	Nishat A Chowdhry nchowdhry@iom.int