



COVID-19: SITUATION REPORT

30 APRIL 2020



35M

programme
participants oriented
on COVID-19



100,000+

workers on the
ground covering 64
districts



876,000

items of
protective wear
distributed



1.5M

hygiene products
distributed



198,611

families received cash
support

Make empathy go viral: Urgent appeal

BRAC has provided 198,611 families with cash support, including households living in ultra-poverty, those living in remote *haor* (wetlands) and *char* (riverine islands) areas, host communities in Cox's Bazar district, and indigenous communities.

Much more is needed, though. Stand beside a family today: <https://www.brac.net/covid19/donate/>



BRAC has reached **198,611** out of
a targeted **200,000** families with
cash support



FROM THE GROUND

My husband worked as a driver. He lost his job when the lockdown was announced. We only had BDT 2,000 (USD 24) as savings. The food we had would only last for four days.

At the start, we borrowed money from the people around us. Then we could not borrow anymore, and I refused to beg. I was convinced we were going to starve.

I came to know about a BRAC *apa* (sister) who was preparing a list of people who needed cash support in this crisis. I described our situation to her. I received BDT 1,500 from BRAC today. I will be able to buy rice, oil, onions, lentils and vegetables. This will last our family for a short while more.

Sufia Begum, 50, lives on the bank of master lane lake in Chattogram. She received cash support through BRAC's urban development programme

**“How long can a person keep
asking other people for money?”**





COVID-19 timeline in Bangladesh

7,667

168

Cumulative confirmed cases

Cumulative deaths

3

0

8 MAR

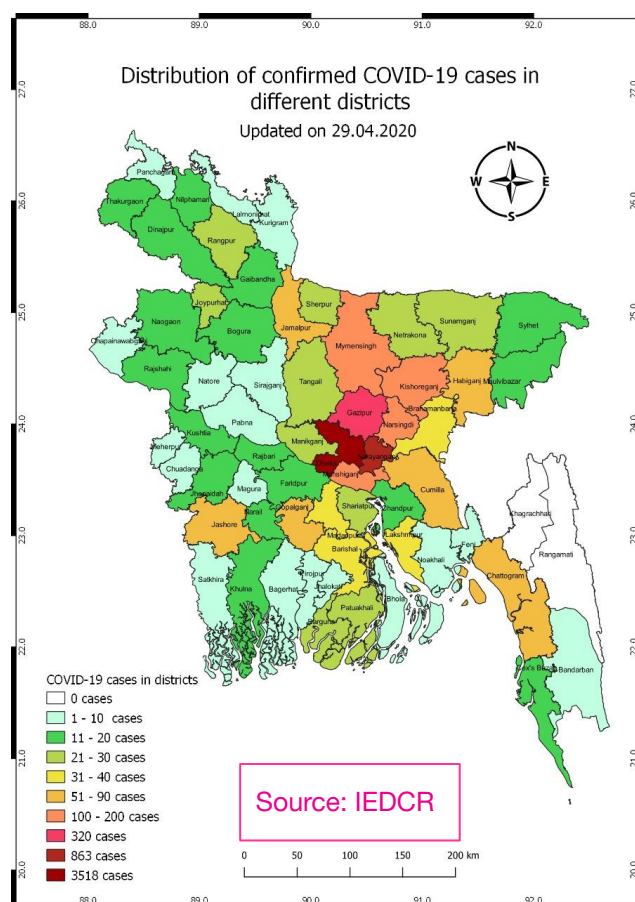
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Situation overview

- Globally, there are 3,023,788 confirmed cases of COVID-19. 208,112 lives have been claimed across 213 countries, areas or territories (updated: 30 April 2020, 2am CEST, World Health Organization).
- Bangladesh has 7,667 reported cases as of 30 April 2020. 564 of these cases were identified in the last 24 hours. The government's Directorate General of Health Services (DGHS) has confirmed 168 deaths to date. Five of the deaths were reported in the last 24 hours.
- Bangladesh has the highest death rate and lowest recovery rate among countries in South Asia, 53 days since its first detected case.
- Narayanganj district recorded the highest number of confirmed new cases in a day on 28 April. Out of the 84 people who tested positive, 18 patients were health workers.
- Civil society Representatives of Bangladesh appealed to the UN Secretary-General to refrain from repatriation of migrants. The appeal is based on international law that countries must take care of all those who are in their land during crises. At least 247 Bangladeshi workers were sent back to Bangladesh from Kuwait this week. Special flights have been arranged to bring back Bangladeshis from Japan and South Korea within this week.
- Prime Minister Sheikh Hasina again emphasised the necessity of cooperation to help fight the COVID-19 pandemic. She also stated the need to counter inequality, new standards and practices for responsible supply chains that countries like Bangladesh can adopt, and sharing responsibility for migrant workers and refugees in her [article in the World Economic Forum](#).
- The foreign minister recently met with the US Ambassador to Bangladesh to seek support from the US for the ready-made garments sector. The finance minister called the ambassador today (30 April) to reiterate Bangladesh's plea to gain GSP facilities.
- More than 2,000 ready-made garment factories reopened on Tuesday (27 April). Thousands of RMG workers arrived in the capital city on Wednesday after the announcement of the opening of Dhaka's garment factories. Many workers returned from their villages on ferries and trucks, crowding public transport terminals, in fear of losing their jobs. Bangladesh's [home ministry](#) has said necessary steps will be taken in preventing further entrance of factory workers into Dhaka.
- The Asian Development Bank has approved USD 100 million worth of credit facility for Bangladesh to address the immediate public health requirements of tackling the pandemic.
- The Minister for Labour and Employment directed that closed factories must provide 60% of April's salary to their workers. Bangladesh Garment Manufacturers and Exporters Association (BGMEA) and Bangladesh Knitwear Manufacturers and Exporters Association have come to an agreement that factories will operate on a limited scale while ensuring safety measures. BGMEA has stated that they conducted surprise inspections of 27 factories yesterday, covering all industrial belts in the country, and that it will be done daily in all industrial zones.



- **The shortage of healthcare staff in the country has prompted the Public Service Commission to recommend the recruitment of 2,000 doctors** from the 39th Bangladesh Civil Service batch and 5,000 nurses from waiting lists. Bangladesh has also decided to [outsource 386 medical technologists](#) to different hospitals.
- **The Governments of Bangladesh and India expressed interest to work together to increase food production** to face the potential food crisis due to the pandemic.
- **The Swedish Prime Minister Stefan Löfven has assured that Sweden would not cancel RMG product orders** from Bangladesh. During a telephone discussion between the Bangladesh Foreign Minister and his Dutch counterpart, the Dutch government has also [promised to keep the RMG value chain undisrupted](#).
- **Bangladesh's foreign exchange reserve stood at USD 33 billion** due to lower import pressure. Experts however emphasised the fact that several factors, including slowing exports, will soon create pressure on the reserve.
- **The government has permitted three private hospitals to conduct COVID-19 diagnosis tests on a limited scale** with a cap on price.



BRAC's overall response to COVID-19

BRAC's immediate short-term focus is prevention, through community engagement, behaviour change and mass campaigning. This has included creating a world-standard course on COVID-19, using it to train staff and volunteers, equipping them with personal protective equipment and then sending them to millions of households armed with information and sanitation products.

In parallel, we are strengthening systems, through providing information, volunteers and resources to government and civil society organisations. This has included supporting community support teams which include a BRAC healthcare worker at the ward level to support case detection and verification, running a pharmacy surveillance pilot to get additional community data to identify hotspots, and developing testing kiosks for additional sample collection.

After the recent shutdown, BRAC is focusing on ensuring short-term relief to low-income earners and those living in poverty in cities and rural villages. Treating it as a humanitarian crisis, BRAC has made an initial commitment of BDT 150 million and an appeal has been launched to mobilise additional funds. Public-private partnerships have also been created, as well as mobilising funding from institutional funders. BRAC will ensure the funds reach the people who need them the most.

As we realise that the economic impacts of the pandemic will be protracted, we are beginning to focus on livelihoods, developing a mid to long-term strategy for economic revitalisation of those living in extreme poverty. Amidst an extremely fluid situation, BRAC is focusing on remaining adaptive and agile, and keeping pace with changing needs, particularly the needs of the people in the most vulnerable situations. We are also undertaking rapid needs assessment and evidence generation for mid to long-term response.



Emerging risks and challenges

- **There are 1,245 ICU beds for COVID-19 patients in public and private hospitals**, according to the Directorate General of Health Services. While ventilators have been [installed in most hospitals](#), many are still not equipped to treat patients and lack other necessities, such as oxygen supplies, to be functional.
- **The Directorate General of Health Services does not have a system to track patients with mild symptoms** who are advised to stay at home. Hence, the recovery and prognosis data for those patients are missing from national records.
- **Three members of Dhaka Metropolitan Police have died from for COVID-19**. As infection rates within law enforcement continue to rise, it is high time to re-evaluate their level of risk and need for protective gear.
- **Counterfeit and refurbished personal protective equipment are being sold for as low as BDT 200 (USD 2.4) by street vendors**. The counterfeit items are often not up to global standards and are made in unauthorised factories. The refurbished items are coming from syndicates that collect these materials from hospitals, clean and iron them and then resell them.
- **1.25 million sets of personal protective equipment distributed to hospitals by the government are expected to result in 1,870 tonnes of hazardous [medical waste](#)**. Facial tissues, oxygen masks, test tubes, swabs, syringes and needles are also adding to the volume of waste. Dhaka's existing facilities for treating and managing medical waste are in poor condition and severely under-equipped.
- **This year's agricultural production may be affected** owing to the increase in prices and reduced productions of feed and fertilisers across the country according to [Bangladesh's National Assessment Working Group's predictions](#).
- **Delays in the government's procurement of rice is forcing farmers in the [haor region](#)** to sell their boro rice (a special type of rice grown on residual waters in low-lying areas) at low prices to rice mill owners and hoarders. This will worsen the economic conditions of households and families that depend on agriculture, and are already facing an economic shock due to the shutdown.
- **The government has granted permission for [restaurants to sell iftar \(the daily meal to break fast\) for Ramadan](#)**. This is likely to create mass gatherings. As the government eases the shutdown, dedicated law enforcement units are needed to control crowds and ensure social distance.



Orientation, safety and safeguarding of staff and communities

- **BRAC's 50,000 community health workers have identified 451 suspected cases** of COVID-19 patients which they referred to local authorities for testing. Until now, BRAC staff have identified 529 suspected cases in total.
- **BRAC's hotline has 17 dedicated numbers that attend calls from patients who report their symptoms to trained doctors**. 1,102 people on average call these numbers daily with concerns. A total of 38,582 people have called until now. Doctors discuss all cases before referring for testing.
- **35 million programme participants** have been oriented on COVID-19 to ensure prevention and outbreak of the disease in communities, including 227,667 persons with disabilities.
- **1.5 million** units of hygiene products such as disinfectants, hand sanitisers, liquid and bathing soap, have been distributed to staff and communities.
- **876,000 protective wear** items such as face masks, hand gloves, surgical caps, coverall and safety glasses were distributed.
- **134,183 BRAC staff** have been oriented on COVID-19 through BRAC's online orientation sessions with healthcare experts and training modules.



Strengthening of systems

- **13 kiosks for sample collection from suspected COVID-19 patients have been set up at Dhaka and Narayanganj districts.** In Dhaka, Bangabandhu Sheikh Mujib Medical University Hospital currently has four kiosks, manned by four lab technicians, for walk-in testing. Shaheed Suhrawardy Medical College and Hospital (ShSMCH) has three kiosks. In Narayanganj district, five kiosks have been set up at the US Bangla Medical College of Kanchon in the sub-district of Rupganj. All kiosks are fully functional, with the capacity to collect 30 to 40 samples per hour. The 13th kiosk has been set up at Dhaka's Sheikh Russel Gastro Liver Institute and Hospital on 30 April. BRAC will set up 100 walk-in kiosks across 19 risky regions to support the government's initiative of scaling up testing.
- **BRAC is supporting health institutions to meet the demand of equipment, protective wear and hygiene products.** So far, 10 non-invasive ventilators, 10 patient monitors, 60 coveralls, 2,500 masks, 1,500 gloves, and 400 sanitisers have been provided to Shaheed Suhrawardy Medical College and Hospital and National Institute of Cardiovascular Diseases.
- **BRAC aims to reach 79% of households through bKash (mobile money wallet) during the third phase of emergency cash support.** The mobile money platform minimises direct contact with participants, overcomes barriers in accessing banks and allows recipients to save the money in their mobile wallets. The government's cash transfer initiatives are also prioritising electronic transfers over direct handovers.
- **BRAC has contributed to the development of Bangladesh's Country Preparedness and Response Plan to combat COVID-19,** along with the Directorate General of Health Services, Directorate General of Family Planning, a2i and UN agencies. BRAC is directly involved in three pillars of the plan: Ensuring surveillance and laboratory support, contact tracing and point of entry screening; risk communication; and community engagement.





Partnerships

- **BRAC staff have contributed a day of salary to BRAC's response, totalling BDT 39.9 million (USD 471,007).**
- **PepsiCo in Bangladesh, along with the global food and beverage company's philanthropic arm, the PepsiCo Foundation, has partnered with BRAC to provide over 1.4 million meals** to support families with low incomes and who are living in ultra-poverty. This initiative is part of PepsiCo's #GiveMealsGiveHope global programme. BRAC will be the on-ground implementation partner, working in close collaboration with local administration and law enforcement authorities.
- **Renowned Bangladeshi actor and singer Tahsan donated BDT 750,000 (USD 8,848) to BRAC's** response by auctioning the master copy of his first solo album and lyrics.
- **BRAC and Grameenphone launched the Dakchhe Amar Desh (my country is calling me) campaign,** calling upon individuals and businesses to join hands to support those in most need. Grameenphone will provide BDT 1,500 for BRAC's third phase of cash distribution, to support an additional 100,000 families living in poverty. BRAC has now run two phases of the campaign, in which 198,611 families have been provided with BDT 1,500 so far.
- **BRAC and the World Food Programme** are exploring ways to distribute relief items (50 kg rice, 7.5 kg biscuits and BDT 2,300 for one month's support) to families in marginalised and vulnerable communities in Cox's Bazar Sadar, Ramu and Kutubdia sub-districts of Cox's Bazar, southwestern Bangladesh, during the lockdown.
- **BRAC has completed multiple stages of food and cash distribution with support from local government partners,** including Dhaka's North and South City Corporations, Sylhet City Corporation, Rajshahi City Corporation, Faridpur Municipality, Savar Municipality and Satkhira Municipality. Coordination with these government bodies has aided speed and effectiveness in reaching families most in need.
- **Australian Government's Department for Foreign Affairs and BRAC have entered their third phase of partnership.** This new phase aims to reduce the risks of COVID-19 through food assistance and enable a better assessment of the situation in Bangladesh. Under this partnership, we have been providing food support and have established a distance learning platform for students through live television broadcasts. BRAC will collectively support more than 33,000 households during these phases.
- **Global Affairs Canada and UNHCR are providing support for the COVID-19 response in Cox's Bazar,** for both the Rohingya and host communities, through the BRAC's humanitarian crisis management programme. UNICEF is also providing support, with a particular focus on ensuring children's learning and wellbeing.

Khichuri Index

Economic lockdowns and social distancing have turned the pandemic from a public health crisis into a humanitarian crisis..

BRAC has constructed a 'Khichuri Index' to understand the net impact of these changes on the food security of people who depend on daily wages. The idea of this index is inspired by the Financial Times 'Breakfast Index'. In Bangladesh, the idea was floated by JRahman (<https://jrahman.wordpress.com/2015/12/24/khichuri-index-2/>).

The *Khichuri* Index reflects the weighted average cost of a bowl of *khichuri*— a popular all-day meal in most Bangladeshi homes. This index is similar to the Financial Times' 'Breakfast Index', which is constructed using the weighted average of the cost of a continental breakfast.

One portion of the index's *khichuri* can feed a family of 4-5 people. It contains a KG of rice, 500 grams of lentils, 150 grams of onion, 10 grams of salt, 40 ML of soyabean oil, 10 grams of green chilli. A portion of Egg Khichuri will need two eggs too.

The daily incomes of both agricultural labourers and rickshaw pullers were analysed, in order to represent both agricultural and non-agricultural sectors. The total wages for an agricultural labourer were calculated by monetising the two simple meals a farm labourer receives for a day's work and adding their daily wage. The total wages for a rickshaw puller were calculated by deducting the rickshaw rent from the daily takings.

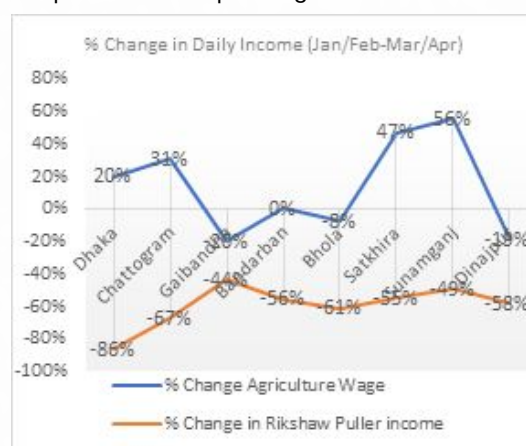
The districts in the index were selected based on their level of vulnerability.

Dhaka and Chattogram are representative of large urban cities. Gaibandha and Dinajpur represent regions with high levels of poverty in northern Bangladesh. Sunamganj, northeastern Bangladesh, represents the *haor* (wetlands) regions - some of the remotest regions in the country, along with Bandarban in the Chattogram Hill Tracts of southeastern Bangladesh. Bhola, south-central Bangladesh, and Satkhira, south-western Bangladesh, are representative of regions prone to cyclones.

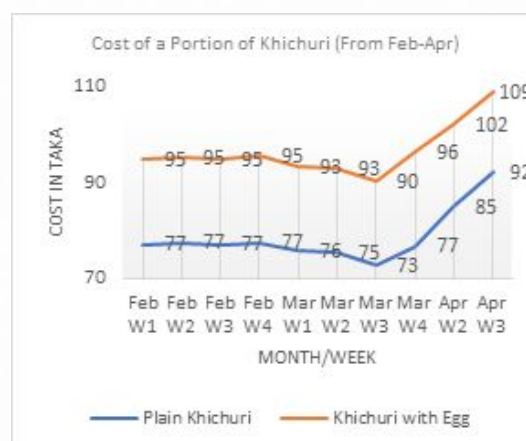
Key observations

The wage rates of both agricultural and non-agricultural wage earners have diverged considerably after the economic lockdown.

The wage rate of a day-labourer has increased significantly, especially in *haor* districts like Sunamganj, where the harvesting of *boro* rice (a special type of rice grown on residual water in low-lying land) is happening. Agricultural wages are expected to rise in regions like Gaibandha, Dinajpur and Bagura at the end of May, in line with the harvest season of that part of the country. The daily incomes of a rickshaw puller has reduced significantly due to the lockdown. The closure of offices and shops have resulted in less movement among people, leaving rickshaw pullers without passengers.

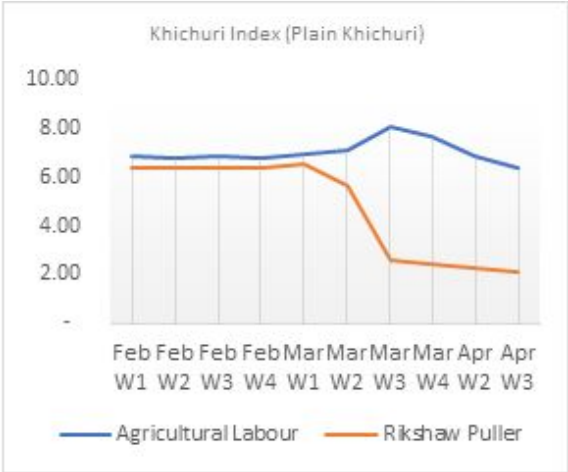
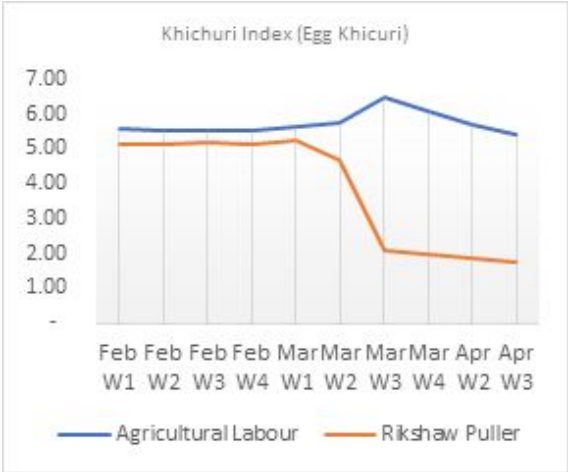


The cost of a portion of *khichuri*, both with and without egg, rose between February and April. From the third week of March, disruption in the agricultural supply chain and the expected hike in demand due to the month of *Ramadan* (a holy month for Muslims) have pushed prices up.

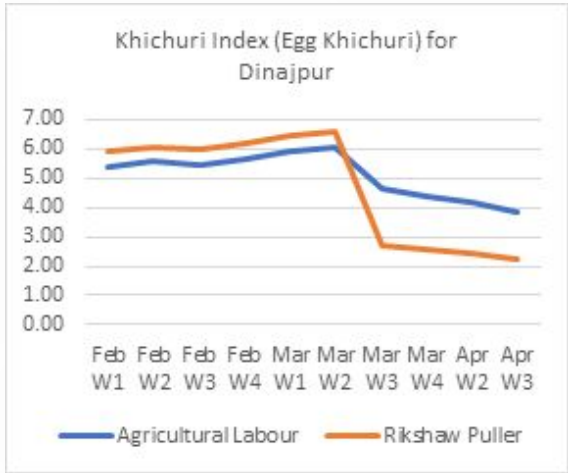
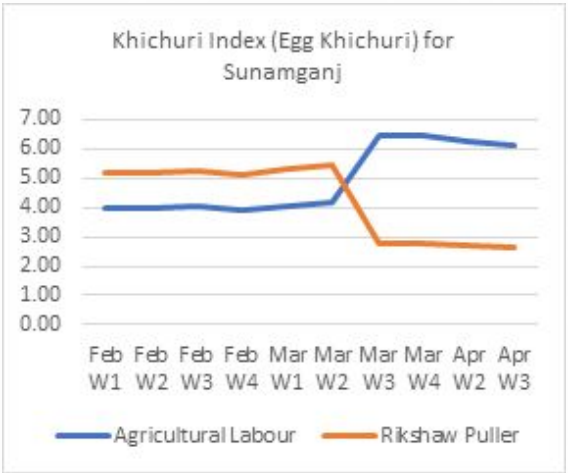


At the start of February, both agricultural and non-agricultural labourers could afford around six to seven portions of *khichuri* without egg with their daily wage. Towards the end of April, rickshaw pullers could only earn a little over two portions a day for the family.

The situation is even worse with egg. A rickshaw puller would be unable to afford two square meals with their daily wage.



The divergence of affordability in certain districts is more prominent than others.



The wage rate has spiked in Sunamganj, where the harvesting season is ongoing. Dinajpur is on a downhill trajectory in since the lockdown, even though the impact of the lockdown was slow to set in.

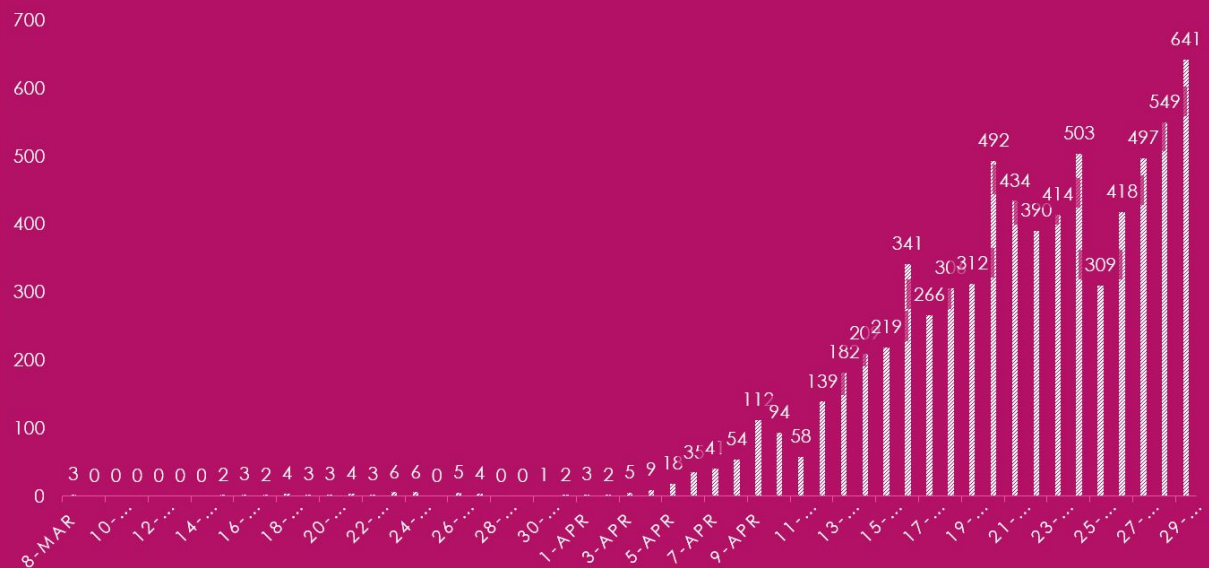
It is important to note here that the income of an agricultural labourer and the income of a farmers is not the same. It is entirely possible that difficulties in market access may reduce the income of farmers, even though the wage rate shows an upward trend.

The demand for rickshaw pullers has reduced considerably in these regions. Rickshaw pullers who are still on the road in these regions own their own rickshaws. Rickshaw pullers do not have any income at all in areas under lockdown or where rickshaw garages are closed.

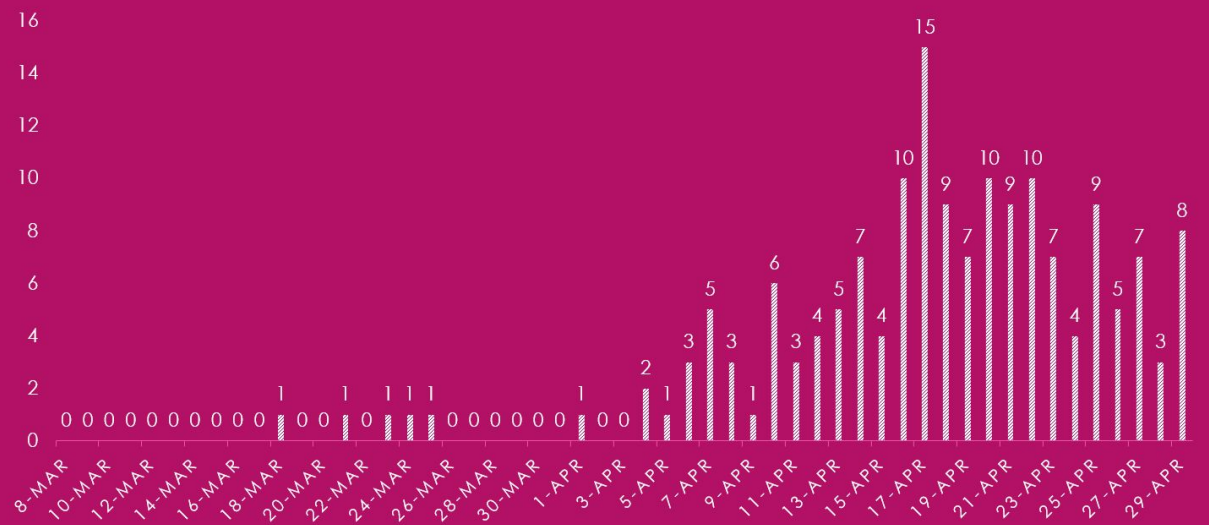
Breakdown of Bangladesh timeline

DECEASED

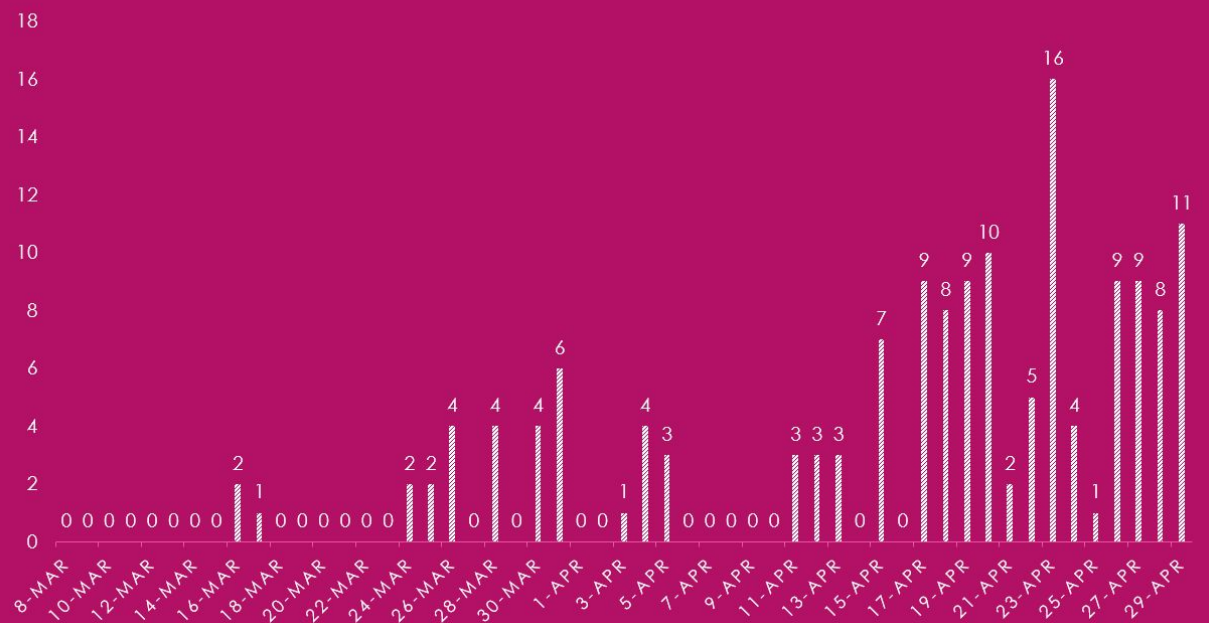
DAY WISE COVID-19 AFFECTED PATIENTS DATA



DAY WISE COVID-19 DECEASED PATIENTS DATA



DAY WISE COVID-19 RECOVERED PATIENTS DATA



CONFIRMED

RECOVERED

FROM THE FRONTLINE

Many said this pandemic was a myth. It was very hard to get them to listen to us. They did not want us near their homes.

We went from door-to-door in communities with leaflets and posters. We were able to gradually make people realise the importance of the messages when they started hearing about the virus in the news.

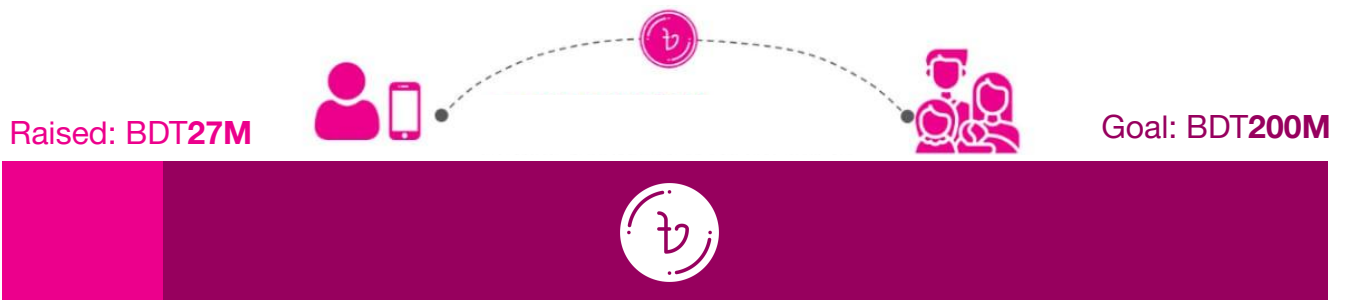
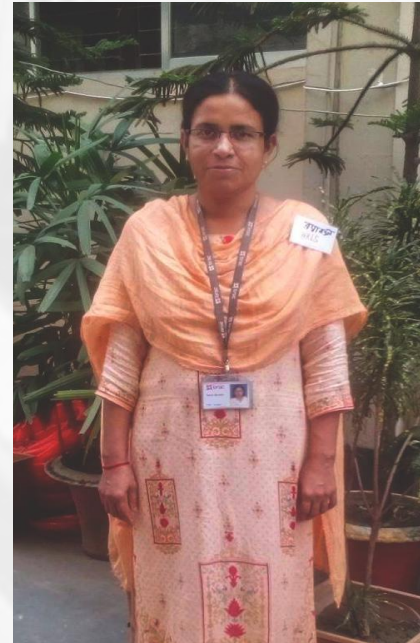
My mother worried about me. She kept asking me to come home. I told her I could not take a break from work at a time like this. I needed to help people understand how to protect themselves. I maintained all social distancing measures and wore the protective wear provided by BRAC.

I stopped working outdoors when my area came under lockdown on 5 April, when a few people in my area were found infected with COVID-19. I have been supporting our participants as much as possible over the phone. Someone called me this morning about a domestic conflict - a rising concern now because of the lockdown.

I also received a call from a participant of our class on human rights and legal services who told me about her elderly neighbour who had been going days without food. I helped her with some food I had. I also gave her the UNO's (upazila nirbahi office) helpline number for emergency relief and medical assistance. People need support now more than ever. I want to do as much as I can.

I am a survivor of acid violence and the sole earner of my family. My father cannot get out of bed because he has a disability. I received treatment from the Acid Survivors Foundation through BRAC and am proud to be advocating for human rights with BRAC.

Ratna Mondal is an officer of BRAC's human rights and legal aid services programme, in Mankiganj, central Bangladesh



BDT 27 million has been raised through BRAC's appeal to help those in the most vulnerable situations in Bangladesh. Much more is needed.

Support a family today: <https://www.brac.net/covid19/donate/>

Partners



Global Affairs
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The UN Refugee Agency



PEPSICO



Contact us: covid19response@brac.net