

Project Completion Report

On

“Provision of WASH, Child Protection and Nutrition support to the flood affected people amidst the COVID pandemic in Sirajgonj District during 2020 Project.”



Project Period: October 2020- 14 January 2021

Supported by: UNICEF

Prepared by: Shafi-ul-Kafi Suman

Implemented by:

National Development Programme (NDP)

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1. Executive summary:

Bangladesh is one of the most disaster prone countries in the world. Again Bangladesh is the eighth most densely populated country in the world. So it is unthinkable that the condition of ordinary people during a disaster is terrible. And Sirajganj is called the gateway to North Bengal. Sirajganj is one of the disaster prone districts of Bangladesh. Floods and river erosion are the main problems here. Although agriculture is the main source of income for the people of this district, jute, tat industry and dairy farms are also a major source of income in the upazila. Apart from the government, various NGOs and NGOs are working for the betterment of Sirajganj district. National Development Programme (NDP) has successfully completed the “Provision of WASH, Child Protection and Nutrition support to the flood affected people amidst the COVID pandemic in Sirajganj District during 2020 Project.”, supported by UNICEF. The tenure of the project was 4 months from 15 October 2020 to 14 January 2021. The project has a total of 3 components, wash, child protection and nutrition. To complete the project, NDP had to complete various prescribed tasks to achieve the project goal. Although the three components worked with different goals, the objective was to improve the quality of life of the flood-affected people and children during, after flood and the Covid-19. Note here that Wash was the goal is, “Flood affected people specially children, women and adolescent girls in Sirajganj district gained access to safe drinking water, emergency and disable friendly latrines, hand washing facilities, bathing cubicles and key hygiene messages”. The goal of child protection was, “Flood affected most vulnerable including child with disabilities (CWD) and families Sirajganj are responded to the increased flood related protection needs through improved case management system and care support”. And was the goal of the nutrition component, “Reduced mortality and morbidity among under 5 aged children with severe acute malnutrition, referred and treated in government hospital of Sirajganj district. Also 800 pregnant and lactating women (PLW) aware on infant and young child feeding (IYCF)”. As per schedule activities of project, NDP has successfully implemented all the tasks of the project in Kazipur, Sadar, Shahzadpur, Belkuchi and Chowhali Upazila under Sirajganj District.

At the beginning of the project, separate people were recruited for our 3 components. Eleven people were recruited for wash, seven for child protection and sixteen for nutrition component. All staff members have successfully completed their 4 month tenure. Eleven sharing meetings were held where overall progress and sharing the situation, challenges and learning were shared by the staff. A project launching workshop was held in NDP head Office to inform about the project to all stakeholders and duty bearers.

As part of the Accountability Framework to the affected people, NDP established complaint response mechanism system like information board with hotline number, complain box, open complain register with responsible focal person and effectively mitigate all complains it received during the project period.

2. Background of the Project:



NazibullahHamin, Unicef Representative was present on Basic training for Project Staff

The whole world is currently affected by the global epidemic Covid-19. Besides, in our Third World country like Bangladesh, natural calamities continue. The flood is one of them. The 2020 flood caused a heavy damaged to life and livelihoods of the people of Sirajganj district. Just as the wash situation in the district was bad and the flood situation was getting worse, children are suffering from severe malnutrition, while children and adolescents are suffering from insecurity during the floods and

Covid-19. As a result women and children were badly affected by the situation. The project “Provision of WASH, Child Protection and Nutrition support to the flood affected people amidst the COVID pandemic in Sirajgonj District during 2020 Project.”, was an initiative of Unicef to support the most affected communities in regard to WASH, Child protection and nutrition vulnerability. In consultation with the community, district local administration and Union Parishad the project prioritized five Upazila of Sirajganj district to implement the emergency WASH intervention, Child protection and nutrition vulnerability. According to district local administration only 42.93% people of siraganj district had sanitation facilities, 58.33% under five children are suffering malnutrition, and most of the child and adolescents are need to protection during the flood and Covid-19. Needs of the community Awareness for enhancing hygiene practices was assessed in order to ensure nutrition of children and protection of infants as well as development of post-flood sanitation, nutrition and child protection. National Development Programme (NDP) is a Sirajganj based national NGO, who have also presence in the five Upazilas was collaborating partner to implement the interventions. The organization is registered with the Department of Social Welfare and NGO Affairs Bureau of the Government of Bangladesh in 1992 and 1995 respectively. NDP has also experience of implementing WASH projects and emergency response activities.

3. Specific objective of the Project:

The specific objectives of the project are:

- ✚ Ensure access to safe drinking water and sanitation facilities for 36,000 people including 10,510 women and 15,336 adolescents with the 1,086 disable people.
- ✚ To protect 7,000 children and adolescents including 1,800 women, 1,680 teenager boys and 2,520 adolescents’ girls with the 210 disable people.
- ✚ Screening of 8,800 children and pregnant and lactating mothers including 266 pregnant, 534 lactating mothers including 60 disabled mothers and children.

4. Implementation methodology of the Project:

Before starting the field level activities the project’s staff members were given a two-days orientation on the project



Project Information Sharing Meeting in DC Office

implementation process. As a part of the accountability framework to the flood affected a project inception meeting was organized with UNO, Upazila Chairman, Vice Chairman, others government department representatives, SAE- Civil Surgeon, DPHE, Unicef others project representative, respective Union Chairmen, Member, flood affected people including woman and girl and all project staff. Through a consultative process with key stakeholders including UNO and Chairman, most vulnerable villages were selected. Project staff had walked through all villages to find out the most vulnerable sites of the union. Later on community consultation was organized at the selected places with the active participation of flood affected people, especially women, girls and children. Based on the community consultation potential beneficiary list was prepared. Later on the project staff visited the each and every household to find out the suitable place and most eligible HHs for implementation the project activities and to provide WASH, CP and Nutrition support. After completed the HH verification prepared a final beneficiary list which was submitted to the respective Union Chairman, SAE-DPHE and UNO. UP Chairman and SAE-DPHE submitted the list to UNO after field verification. And NDP started the main activities of the project. Before implementation of the activities, complaint response mechanism was established; setup complain box at Union Parishad and at community level, setup activities description with complain hot line number, opened complain register with given responsibility to a focal person as part of the Accountability Framework to the flood affected people.

5. Project Area:

The project was implemented in 5 Upozila in Sirajganj District. Details are given below:

| Component | District | Upazila | Union | Number of villages |
|------------------|-----------|---|--|--------------------|
| WASH | Sirajganj | Kazipur | Takani and Natuarpara | 8 |
| Child Protection | | Kazipur | Takani and Natuarpara | 8 |
| Nutrition | | 1. Shahzadpur 2. Belkuchi 3. Kazipur 4. Sadar 5. Chouhali | Kazipur, Maizbari, Nishantapur, Gandhail, Tekani, Sonamukhi, Natuarpara, Monsumnagar, Saydabad, KaliaHoripur, Sialkol, Bohuli, Mesra, Kawakola, Belkuchi Pour oshova, SadarPouroshova, Shernagar, KhasKawlia, Gharjan, SodiaChandpur, Sathol, Omorpur, Baghutia, Gala, Porjuna, Kajjuri, Rupabati, Jalalpur, Kayempur, Sonatani, Rajapur, Vangabari, Baradhul. | 218 |

6. Major Activities Target and Achievement:

Major activities of the project along with target and achievement are shown in the table below:

| Sl | Name of activities | Component | Target | Achievement |
|----|--|-----------|--------|-------------|
| 1. | Construction of life-saving Raised Double Platform TW/water points (Shallow Tube wells) including WQT | WASH | 15 | 15 |
| 2. | Renovation/Rehabilitation with disinfection of 60 existing tube wells and water points. | WASH | 60 | 60 |
| 3. | Distribution and installation of 220 hand washing facilities with focus on personal hygiene and COVID. | WASH | 220 | 220 |
| 4. | Construction of life saving emergency latrines (Off-set latrine with raised plinth + stairs with brick work & plaster) | WASH | 100 | 100 |

| SI | Name of activities | Component | Target | Achievement |
|-----|---|-----------|--------|-------------|
| 5. | Construction of 20 lifesaving disability and elderly friendly emergency latrines. | WASH | 20 | 20 |
| 6. | Rehabilitation of 100 partially damaged sanitation facilities for the ultra-poor hhs. | WASH | 100 | 100 |
| 7. | Rehabilitation of WASH Blocks including Group Hand washing Stations in light with COVID & MHM in Schools used as flood shelter and/or badly damaged due to flood | WASH | 4 | 4 |
| 8. | School Hygiene Sessions focusing on hand washing in line with COVID and MHM | WASH | 12 | 12 |
| 9. | Construction of 15 bathing cubicles for flood affected women and adolescent girls. | WASH | 15 | 15 |
| 10. | Hygiene promotion awareness sessions in the context of COVID-19 (emphasizing hand washing with soap) and MHM. | WASH | 800 | 800 |
| 11. | Conduction of Water Safety Plan (WSP) sessions with flood affected communities. | WASH | 70 | 70 |
| 12. | Project information sharing meeting at Union Porishad level | WASH | 8 | 8 |
| 13. | Organize Sub-national level Cluster Coordination Meeting | WASH | 1 | 1 |
| 14. | 4 Child Protection Hub opened and paid volunteers in service to attend children | CP | 4 | 4 |
| 15. | Number of Girls and boys have access to child protection service hubs with multi sectorial programming interventions in emergency (list of children coming to Hub for any services and programme intervention) | CP | 1600 | 2169 |
| 16. | Identification of vulnerable children and case intake (case history) for assistance and reference | CP | 500 | 507 |
| 17. | Case Management of Children -Number of extremely vulnerable girls and boys provided supports and link with different support services to address flood related protection risks during displacement and extreme economic hardship (profile of children, issues, action taken) | CP | 250 | 260 |
| 18. | Community level meeting and awareness creation on Child Protection, VAC, Injury Prevention (Drowning, Snake Bite etc), Child Help Line and other lifesaving child protection information Completed | CP | 120 | 120 |
| 19. | Message dissemination on drowning prevention (posters/leaflets/billboards/miking/visual show etc). At least 7000 community people reach in working areas with life savings messages. | CP | 7000 | 24845 |
| 20. | Capacity Building orientation of CBCPC | CP | 2 | 2 |
| 21. | Coordination meeting with District level Child Protection in Emergency Working Groups (CPiEWG) and local CBCPC members | CP | 2 | 2 |
| 22. | Training completed and Number of community based Disaster Management Committee members and community youth volunteer trained and skilled on child protection in emergencies. | CP | 120 | 120 |
| 23. | Number of Children 6-59 months screened in camp at community level through miking for identification of SAM children. | Nutrition | 8000 | 8162 |
| 24. | Incentive for caregivers for treatment of 100 Severe Acute Malnutrition (SAM) children in hospital. | Nutrition | 100 | 104 |
| 25. | IYCF counseling for pregnant and lactating mothers children age 0-23m | Nutrition | 800 | 900 |
| 26. | Complain received | | 13 | |

| SI | Name of activities | Component | Target | Achievement |
|-----|--------------------|-----------|--------|-------------|
| 27. | Complain response | | 13 | |

In its continuation, Wash Component worked on Sanitation Development in Tekani and Natuarpara Unions of KazipurUpazila in Sirajganj District. Fifteen constructions of life-saving Raised Double Platform TW / water points (Shallow Tube wells) including WQT have been completed. Sixty rehabilitation of dysfunctional water points have been completed for safe drinking water. One Hundred constructions of life-saving flood resilient emergency latrines are installed for WASH facilities. Twenty Constructions of life saving disability and elderly friendly emergency latrines are installed for elderly and disable people. We are supposed one hundred Rehabilitation of Partially Damaged Sanitation facilities for the Ultra poor HHs. This people are not able to repair their damaged latrine. We



Community Level meeting in Takini Union of KazipurUpazila under Sirajganj District

installed Rehabilitation of WASH blocks in four schools including Group Hand washing Station in light with COVID & MHM in School, which has solar supported water pump for safe water. We build 15 bathing cubicles for affected women and adolescents girls, which is very important during and after flood. As per project profile eight hundreds Hygiene promotion awareness sessions in the context of COVID-19 (emphasizing hand washing with soap) and MHM, have been completed. School Hygiene Sessions focusing on hand washing in line with COVID-19 and MHM have been completed for school going adolescent girls. Seventy Conduct of Water Safety Plan (WSP) sessions with flood affected communities sessions have been done for safe drinking water. There are 2500 family members in 100 groups in this session. Each group has been given 10 sessions with WASH, Covid-19, GOV and Early Marriage. As a result, 12,000 people have been directly alerted, from which 39,552 people have been given awareness messages regarding WASH, Covid-19, GOV and Early Marriage. As a result, 39,552 people of 2,814 households in the area have benefited from the project and out of 39,552 people 21,282 female, 1,207 children and 2,363 are adolescent girls. Eight Project information sharing meeting at Union Porishad level have been completed. During the project period 220 hand washing devices were given to households to promote hand washing practice. As a result flood affected HHs are practicing regularly hand washing and personal hygiene. They are also using latrine by maintain hygiene factors. Especially Adolescent girl and woman are very much satisfied of the project activities. Most of the households are aware about the child health hygiene and care. After promoting the awareness sessions HHs are caring to their children. We have completed two sub national cluster coordination meetings with WASH cluster member at KaziourUpazila and other one at DPHE Sirajganj. Executive Engineer of DPHE was committed to continue the WASH cluster coordination meeting on quarterly basis. After installation the disabled and elderly friendly emergency latrines disabled and elderly people are using latrine smoothly without any barrier.

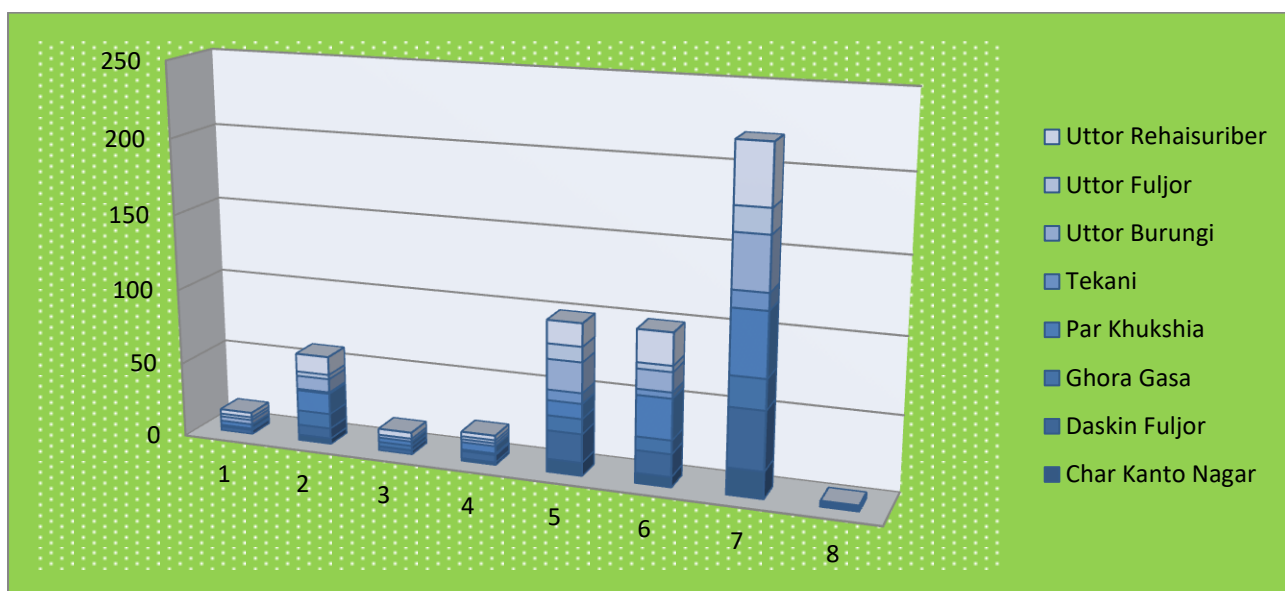
Nutrition Component we have screened a total of 8162 under five children in 5 upazilas of Sirajganj district. Among them, 104 children suffering from severe malnutrition have been referred to various government hospitals and given food provided by UNICEF. And each child returned home with a smile after gaining weight from admission for about 10 days. Three thousand taka in cash has been paid to the guardian of each child so that the children can do nursing later. Besides, we know that only a healthy and strong mother can give birth to a healthy baby. Therefore, in addition to screening of children, we have sensitized 900 pregnant and lactating mothers in five upazilas of Sirajganj district through various awareness sessions.

On the other hand, in the Child Protection component, we have worked on the protection of children and adolescents according to the project profile. A total of 4 HUBs have been set up in Tekani and Natuarpara Unions of Sirajganj District in KajipurUpazila. The purpose of which is to protect children. A total of 2169 children and adolescents come to these four HUBs. Here children and teenagers play chess, ludu, take pictures and discuss various issues among themselves. As Natuarpara and Tekeni Union are river erosion areas, almost all the families are severely affected. Of these, 500 most affected children and adolescents have been listed. Of these, 260 people have been given various types of support; among them are notebooks, pens, reading chairs, tables, bicycles, blankets and winter clothes. Besides, a list of 100 more children has been submitted to various departments including social services, which will be supported later. In addition, three awareness billboards have been set up at Natuarpara and TekaniUyun to raise awareness about drowning, snake bites and Covid-19 during and after floods. Arrangements have been made to select 120 youth volunteers for training in Natuarpara and Tekani Union during floods and other natural disasters.

7. Village wise Summary of Project Activities:

| Sl | Name of Village | Name of Activates | | | | | | | | Total |
|--------------|-------------------|---------------------------|------------------------|-------------------------------|------------------------------|--------------------|---------------------------|---------------------|--------------|------------|
| | | Double Platform Tube-well | Dysfunctional Platform | Bathing Cubicles construction | Disability/ Elderly Latrines | Emergency Latrines | partially damaged Latrine | Hand washing Device | School block | |
| 1. | Char Kanto Nagar | 0 | 4 | 0 | 2 | 9 | 7 | 18 | 0 | 40 |
| 2. | DaskinFuljor | 3 | 7 | 3 | 5 | 19 | 15 | 39 | 0 | 91 |
| 3. | GhoraGasa | 1 | 10 | 3 | 1 | 10 | 9 | 20 | 1 | 53 |
| 4. | Par Khukshia | 3 | 14 | 3 | 5 | 10 | 27 | 42 | 1 | 103 |
| 5. | Tekani | 0 | 1 | 0 | 0 | 7 | 4 | 11 | 1 | 22 |
| 6. | UttorBurungi | 3 | 9 | 2 | 2 | 20 | 13 | 35 | 1 | 83 |
| 7. | UttorFuljor | 2 | 3 | 0 | 2 | 10 | 4 | 16 | 0 | 37 |
| 8. | UttorRehaisuriber | 3 | 12 | 4 | 3 | 15 | 21 | 39 | 0 | 97 |
| Total | | 15 | 60 | 15 | 20 | 100 | 100 | 220 | 4 | 526 |

Following Chart shows the village-wise total number of activities:



Par Khukshia, UttorRechaisuriber, and Daksinfuljori are most vulnerable and flood affected then other villages. Par Khukshia, UttorRechaisuriber, and Daksinfuljori are 291 activities have been implemented.

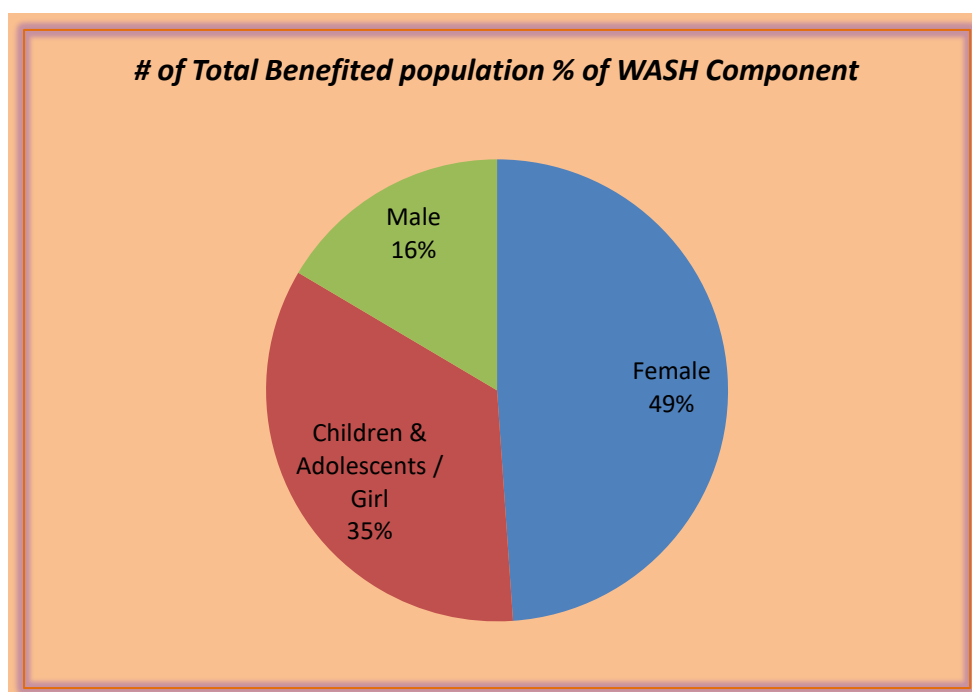
8. Activities wise Benefited population Information

A total of 15,297 households have directly benefitted from the project. About 84,136 people including 36,842 women, 24,356 children and 9,789 adolescent girls are the directly benefitting from the project interventions. The table below shows details:

| Sl | Name of activities | Component | # of Activities | Total benefited HH | Total benefited people | Female | Children | Adolescents / Girl |
|----|--|-----------|-----------------|--------------------|------------------------|--------|----------|--------------------|
| 1. | Construction of life-saving Raised Double Platform TW/water points (Shallow Tube wells) including WQT | WASH | 15 | 303 | 1752 | 558 | 482 | 325 |
| 2. | Renovation/Rehabilitation with disinfection of 60 existing tube wells and water points. | WASH | 60 | 294 | 1656 | 398 | 414 | 302 |
| 3. | Distribution and installation of 220 hand washing facilities with focus on personal hygiene and COVID. | WASH | 220 | 220 | 1320 | 453 | 310 | 241 |
| 4. | Construction of life saving emergency latrines (Off-set latrine with raised plinth + stairs with brick work & plaster) | WASH | 100 | 176 | 868 | 206 | 201 | 144 |
| 5. | Construction of 20 lifesaving disability and elderly friendly emergency latrines. | WASH | 20 | 29 | 155 | 68 | 27 | 21 |
| 6. | Rehabilitation of 100 partially damaged sanitation facilities for the ultra-poor hhs. | WASH | 100 | 108 | 529 | 142 | 131 | 116 |

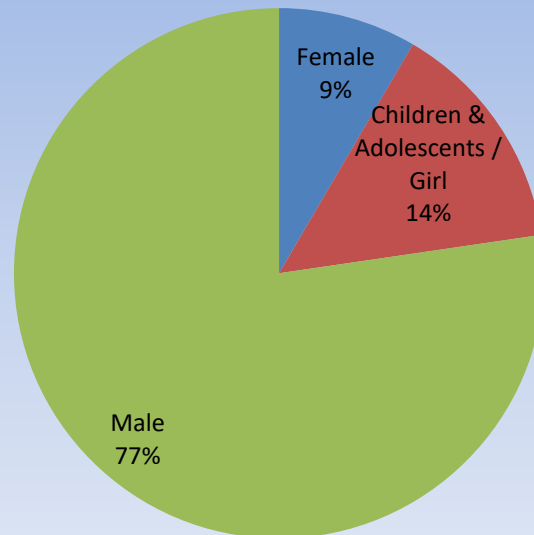
| SI | Name of activities | Component | # of Activities | Total benefited HH | Total benefited people | Female | Children | Adolescents / Girl |
|-----|---|-----------|-----------------|--------------------|------------------------|--------|----------|--------------------|
| 7. | Rehabilitation of WASH Blocks including Group Hand washing Stations in light with COVID & MHM in Schools used as flood shelter and/or badly damaged due to flood | WASH | 4 | 919 | 919 | 0 | 919 | 818 |
| 8. | School Hygiene Sessions focusing on hand washing in line with COVID and MHM | WASH | 12 | 160 | 160 | 0 | 160 | 160 |
| 9. | Construction of 15 bathing cubicles for flood affected women and adolescent girls. | WASH | 15 | 73 | 405 | 245 | 181 | 160 |
| 10. | Hygiene promotion awareness sessions in the context of COVID-19 (emphasizing hand washing with soap) and MHM. | WASH | 800 | 6125 | 39552 | 20982 | 13526 | 10314 |
| 11. | Conduction of Water Safety Plan (WSP) sessions | WASH | 70 | 765 | 840 | 496 | 314 | 282 |
| 12. | Number of Girls and boys have access to child protection service hubs with multi sectorial programming interventions in emergency | CP | 2169 | 1920 | 2169 | 0 | 2169 | 1525 |
| 13. | Case Management of Children - Number of extremely vulnerable girls and boys provided supports | CP | 260 | 260 | 260 | 0 | 260 | 152 |
| 14. | # of Community people reached through awareness program on the impact of violence against children , GBV, increased risk of children in emergency and taking initiatives for their protection | CP | 121 | 900 | 900 | 500 | 0 | 217 |
| 15. | Training completed and Number of community based Disaster Management Committee members and community youth volunteer trained and skilled on child protection in emergencies. | CP | 12 | 120 | 120 | 40 | 0 | 32 |
| 16. | # of Community members reached with lifesaving child protection messaging | CP | 24850 | 5869 | 24850 | 2742 | 2276 | 2185 |
| 17. | Number of Children 6-59 months screened in camp at community level through miking for identification of SAM children. | Nutrition | 8162 | 8062 | 8157 | 0 | 8157 | 0 |
| 18. | Incentive for caregivers for treatment of 100 Severe Acute Malnutrition (SAM) children in hospital. | Nutrition | 104 | 102 | 104 | 0 | 104 | 0 |

| SI | Name of activities | Component | # of Activities | Total benefited HH | Total benefited people | Female | Children | Adolescents / Girl |
|-----|---|-----------|-----------------|--------------------|------------------------|--------|----------|--------------------|
| 19. | IYCF counseling for pregnant and lactating mothers children age 0-23m | Nutrition | 900 | 900 | 900 | 900 | 0 | 0 |



WASH Component

of Total Benefited population % of CP Component



CP Component

Based on these project activities in the mentioned flood affected area, it can be said that as a result of the project implementation 15,297 families benefiting from the project. A total of 84,136 people are directly benefitted from the project of which 84% female for WASH component. In CP component 14% adolescent girls are directly benefited.

9. Description of the project activities:

❖ WASH:

- **Emergency latrines:** The Tekaani and Natuarpara Union are very disadvantaged with very poor communicationsystem. Most households here do not have sanitary latrine. Most people of the village use open latrine. During the flood season the sanitation situation becomes from bad to worse. Villagers suffer from various water-borne diseases and due to the underdeveloped medical support system, these diseases sometimes become pandemic. Considering the situation a total of 100emergency latrines have been installed in 8 villages of those Union. The use of these emergency latrines will on the one hand reduce the environmental pollution; on the other hand they will help to get rid of various diseases by ensuring hygiene practices. This latrine will benefit the people of the area in many ways both in flood season and normal season.



Emergency Latrine in Perkhukshia Village

- **Disability/Elderly friendly emergency latrines:** The disable people and elderly people suffer most in the flood situation due to lack of latrine that are not suitable for them. Considering the emergency needs



Disability/Elderly friendly emergency latrines in Fuljor village

the project has constructed 20 disability / elderly friendly emergency latrines in 8 villages in Tekani and Natuarpara Union with the support of UNICEF. In the past, it was very difficult for the elderly and people with disabilities (PWDs) to go to latrines without the help of others. During flood season they felt even more helpless. Now giving them disability / elderly friendly emergency latrines, has made them independent, as they can use them without the help of others. A total of 20 latrines have been constructed in the 8 villages. The importance of these disability / elderly friendly emergency latrines is huge. Many people did not even think about such type of facilities for disable/elderly people could make a huge impact

on the life of disable/elderly people. Now the beneficiaries feel safe, independent and much comfort.

- **Double Platform Tube-well:** Tekani and Natuarpara Union are highly flood affected area. Every year flood occurs here. Most of the tube-wells of the area go under water that create severe crisis of pure drinking water. As a result, the incidences of water-borne diseases break out and spread. To improve the situation and to address the needs of the people, with the support of UNICEF, NDP has constructed a total of 15 double platform tube-wells in 8 villages in Tekani and Natuarpara union. The advantage of this double platform is that the people will be able to drink pure water from the elevated place during floods.



Double Platform Tube-well in UttarBurungi

This is totally a new kind of intervention. It created huge enthusiasm among the people. Although the support is insufficient compared to the need of the people but it has created an instance. The infrastructure can be used both in emergency flood situation and normal season that will ensure safe water all over the year.

- **Rehabilitation dysfunctional water points:** The Tekani and Natuarpara Union are low lying area that gets inundated every year. Most of the tube-well platforms here were not paved; many of the tube-wells



Rehabilitation Dysfunctional Water Points in Rehaishoriber

were dysfunctional, resulting in lack of pure water throughout the year. As a result water-borne disease is a common phenomenon that persists throughout the year because the tube-well water is not safe; this is a major obstacle to living a healthy life. The poor people do not have capacity to construct and maintain the tube-wells. So to ensure safe water the project has rehabilitated 60 dysfunctional tube-wells. The activity includes maintenance of tube-wells, repairing and /or construction of platforms, tube-well on raised ground, etc.

Ensuring safe water is very basic to promote hygiene and to improve public health. Functional tube-wells and proper platform are essential in order to make safe water available. Under the

intervention of the project a total of 60 dysfunctional tube-wells have made functional and safe water source. It ensures availability of safe water all year long. It has helped to reduce the incidence of water-borne diseases.

- **Construction bathing cubicles:** The Tekani and Natuarpara Union are very poor and densely populated area in Kazipur Upazila under Sirajganj district. Due to poor socioeconomic system and population density, the adolescent and female are in more disadvantaged position. Privacy and personal hygiene both are important for maintaining personal health and hygiene as well as for dignity and decent life. A bathing place is considered is one of the important issues for privacy and personal hygiene. Unfortunately, neither the awareness on privacy and personal hygiene among the people of the area nor the facility is at all available for women and girls of the area. Almost all the households of the area do not have bathing cubicles. For women and adolescents, bathing in ponds and rivers with men is very difficult. As a result, women and adolescents face difficulty for taking bath, which hamper their privacy and maintain personal health and hygiene. Considering the above issues, the project has constructed 15 bathing cubicles in the area.



Bathing Cubicles in Dakshin Fuljor Village

Using these bathrooms, women and adolescents are able to bath safely maintaining their privacy and personal health while the violence against women and adolescents will be stopped. They will not be ashamed while taking bath. It will also create a window for sharing with their fellow peers/groups about their personal health hygiene and other issues. Thus the intervention has created more benefits for women and adolescents.

- **Hand washing Device:** Washing of hand properly is key to maintain personal and family hygiene. To ensure hand washing in addition to safe water hand washing facility plays very important role. Running water makes the work very easy. Unfortunately the poor people do not have any hand washing facilities to be clean and maintain hygiene. As a result the people, especially children suffer from diarrhea that hamper their growth. The project has distributed hand washing devices (a water bucket with tap having placed in a higher place like plastic tool) to be kept in a comfortable place so that family members can wash hands after defecation and before taking meal or feeding child. The device ensures running water and comfortably washing hand with soap. It is very helpful for children. Under the project 220 hand washing devices have been distributed.

A hand washing device is simple but very important device that helps to wash hands very easily and comfortably. Especially, it is very useful for children. Hand washing practice is increasing among people, especially among children that reduces diarrhea. However, these devices should be provided and/or to be used by all families.

- **Awareness session:** Under the project, several hardware supports like emergency latrines, disability/elderly friendly emergency latrines, double platform tube-well, rehabilitation dysfunctional water points, construction of bathing cubicles, installation of hand washing facilities (device) have been set up in 8 villages of Tekani and Natuarpara Union in Kazipur Upazila in order to increase access to safe water, sanitation and maintain personal hygiene. But to promote hygiene practice behavior change is very important. Thus in addition to the hardware support, awareness sessions were conducted in small groups with 20-



Awareness Session in Uttar Burungi, Takani

22 members in each group at the community level to increase awareness and to promote hygiene practice. These sessions were very important for improving personal hygiene and behavior change and to improving the quality of life as well as improving personal health. Community level groups were formed, session plan was developed, communication materials were developed and finally the field staff of the project regularly conducted the sessions. A total of 10 topics were selected and discussed in the group sessions.

Attendance at the session was high. Due to these sessions knowledge and awareness increased among the participants. Hygiene practice improved among the participants.

- **School Block Hygienic Station:** Currently, the whole world is in turmoil due to the global epidemic Covid-19. There is no cure for this virus. Cleanliness is the only way to escape from this epidemic. And as our work area is prone to disasters and floods, 4 school hygiene stations have been installed in our adolescents' schools for hand washing and cleaning. At this hygiene station, 6 teenagers can wash their hands at the same time. We know that there is no electricity in these chars. So we have arranged solar pumps in this hygiene station to ensure water all the time. The establishment of this hygiene station will enable all the adolescents in the school to wash their hands regularly and develop the habit of cleanliness. Such hygiene stations have received a wide response in our work area. So if such stations are installed more in the mentioned work areas, the teenagers in our flood affected areas will benefit.



School Block Hygienic Station in Takani Union, Kazipur

❖ Child Protection

- **HUB:** In Kazipur Upazila, 2 child support centers have been set up in Tekani Union and 2 in Natuarpara Union. Total children 2169. Boys 495 Girls 164. There are 110 boys and 465 girls at Kantnagar Child Protection Support Center in Tekani Union, 140 boys and 289 girls at Jumarkhukshia Child Protection Support Center, 120 boys and 450 girls at Child Relief Center in South Rehaishurib in Natuarpara Union and 125 girls at Panagari Child Protection Support Center.



Children's are in Hub at takani union, Kazipur, Sirajganj

Boys and girls from the area and young children come to this child protection support center so they can do whatever they want and talk, young children play, draw pictures, tell poems, read story books. Various issues

are discussed at this Child Protection Support Center. (What do we mean by child protection? Child rights, what is child labor? Child trafficking and child abuse, child marriage, gender, illegal divorce, dowry, drug abuse, sexual harassment and sexual abuse, rape, child abuse, juvenile delinquency, Terrorism / militancy and 1098 etc. are discussed). Before coming to the Child Protection Support Center, they did not know anything about child protection. Now they know what child protection is. They can now say that child protection means providing protection and protection to children against all forms of violence, abuse, neglect and resistance. Ensuring the rights of the child is a prerequisite for child protection. They can also talk about child rights. Learned about child marriage and learned and can say about the punishment of child marriage. If there is any abuse of children, unjust abuse and any child marriage in the area, they will call 1098 and they know that it does not cost any money to call this 1098. Apart from this, the children have come to know about CBCPC and Upazila Child Welfare Board and if they have any problem, they will inform this committee. Many have come to this child protection center and started reading again. The words that parents or family members can't talk to are the things that they can say to the child protection center volunteers. This child protection center has been



UNICEF representatives was present at the Tekani HUB

very useful for parents in the area who go out of the house for work. Their kids come to this center when they go out and they take it back. Adolescents come to the center at a specific time, at which time their mother has no worries. The girls come in the morning and the boys in the afternoon. The boys

come and play sports and read books and draw pictures. Since the coroners are off school only coaching and private tutoring, most of the time they spend time at the center just like them. The boys and girls of the center know that the children will get support wherever they go. They come to the center regularly and sit down. At their center, there is a list of mobiles of CBCPC and Upazila Child Welfare Board. It will be convenient to communicate with different organizations.

- **Case Management Support:** In the Child Protection Project, 500 people were first surveyed and listed in the area for case management support. Out of 500 people, 260 have been selected and assisted by those whose financial condition is very bad and movement is very difficult. They have been assisted based on their needs. Many of them lost their books, bags, dresses and school packages (notebooks, pens, scales, bags, dresses) due to the flood. Since Covid-19 and flood were together, the guardians had no business. And it was very difficult to run a family in the work that many people did. There would be no problem if the book was given by the government. But it took a lot of notebook pens to make them read and write, but it was not possible for them to buy it at this time. Can't afford to buy bags, school dresses again. So there was a demand from them that giving us a school package



A child is riding a bicycle in Natuarpara, Kazipur

(notebook, pen, scale, bag, dress) for reading would be of great benefit. 42 people have been given notebooks, pens, scales, bags and dresses. While surveying the area we hear about 2 disabled children and we also see that the two toilets actually scream and can't go to the toilet. Asked why, the mother of two said she could not sit on a normal toilet. The toilet comes but she can't sit and starts screaming. So if you give my son a toilet chair, my son would benefit. The two children have been given commode



UNO of Kazipur Upazila and Deputy Director, NDP are distributing winter clothes and blankets

chairs. They no longer actually shout at the toilet. There are a number of people with disabilities in the area but their financial situation is very bad and they have not received any card to get any service. The baby is slowly growing up and it is difficult to carry it in your lap. And there is more trouble during the flood. If you provided wheeled vehicles, it would be easier to transport them. We will also benefit and they will be able to move on their own. 3 people have been assisted in treatment. One person's chest bone was broken, 1 person's arm was broken and another person's leg was broken. All 3 of them are small. One girl and two boys. Most of the villagers are treated by Kabiraj. Another reason to seek treatment from Kabiraj is that it costs less money. They work as day laborers. They don't even have the money to see a doctor. Although sometimes they see a doctor then borrow money from someone else. He is too late to repay

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the loan and has to repay the loan with great difficulty. That's why they came to the child protection center and treated my child with a good doctor. We would have benefited greatly if we had arranged to see a doctor. Being away from school makes it very difficult for boys and girls to go to school. It is especially difficult for girls to go alone. Many do not go to school because of travel. It is better to give a bicycle for travel. If the family gives a bicycle, the two sisters can go to school together. 5 people have been given bicycles. So that they can continue their studies. Chairs and tables have also been provided for their study. There is no place to study without a bed. Keeps books on tanks



Coordination meeting was held on Sirajganj District in presence of Unicef and NDP Repetitive

and shelves. Many books were destroyed during the floods. If you give a table, you will be able to keep books on the table and also read. Due to poor financial situation and high number of family members, the girl stopped reading. But the girls used to sew in the house next door to study. So that they can run their own tuition. They come to the hub regularly and express their wishes to them. They say that if we are given sewing machines, we will be able to pay for our own education and also help in the family. 3 people have been given sewing machines. There are many families where mother and daughter sleep on the ground and father and son sleep on the bed. Their little one is a bed. In that bed, it is not possible for everyone to sleep at night together. Floods and winters are problems too. In winter, cold and floods infest various insects and snakes. A few beds have been provided for sleeping in the bed. Again teenagers use clothes during menstruation. The use of cloth poses a health risk. Moreover, he does not know or follow the rules of using clothes properly. Sanitary napkins have been given to 21 teenagers. So that the cow is accustomed to sanitary use. Extremely poor and disabled families have been given blanket and sweaters. They don't have enough winter clothes to wear. Again, there is not much coating like sleeping at night. They said that he would arrange for her to sleep a little better at night. The child does not even wear winter clothes. If you could give me blankets and sweaters, it would be very useful. Goats have been given to mentally, visually and physically challenge families for income generating work. The financial situation of all these families is so bad and they have to go to work far away and all these children cannot be left alone. So if any work can be done from the family so that the family can earn income and the child can also be taken care of. He used to help to increase the income of the family by giving something like cows, goats and chickens. These works can be done from home.

- **Community Label Meetings:** A total of 121 community level meetings in Tekani and Natuapara Unions of Kazipur Upazila. Various awareness meetings have been held. There are



Community Label Meeting in Natuarpara

400 males and 500 females. The topic of the meeting was what do we mean by child protection? Child rights, what is child labor? Child Trafficking and Child Abuse, Child Marriage, Gender, Illegal Divorce, Dowry, Drug Abuse, Sexual Harassment and Sexual Abuse, Rape, Children in Conflict with the Law, Snake Bites, Drowning, Cyber Crime, Juvenile Crime, Terrorism / Militancy And 1096, etc. are discussed. Separate meetings are held with men. Separate meetings are also held with girls and both men and women are held together. Adolescents were also present at that meeting. When the issue of child protection is discussed, they understand what child protection is. When it comes to child marriage examples and when it comes to child marriage laws, they say I don't think so. We think the sooner a bad girl gets married the better. He also got married to girls up to 8th class and then got married. However, after discussing child marriage, they also broke the mistake. Discussions on gender issues and 1098 were new to them. If there is any problem related to children, even if there is a child marriage in the area, call 1098. It doesn't cost any money to call 1098 and they take steps to cooperate. If a snake bites, information on where to get its injection is given. The steps to be taken to prevent any child from falling into the water are discussed in detail. The child protection support center in the area is discussed and they also say that their children go to that center and what is discussed there and the children play sports they go home and tell the parents especially the mother.

➤ **Dissemination of information:** Tekani and Natyarpara Unions of KazipurUpazila of Sirajganj

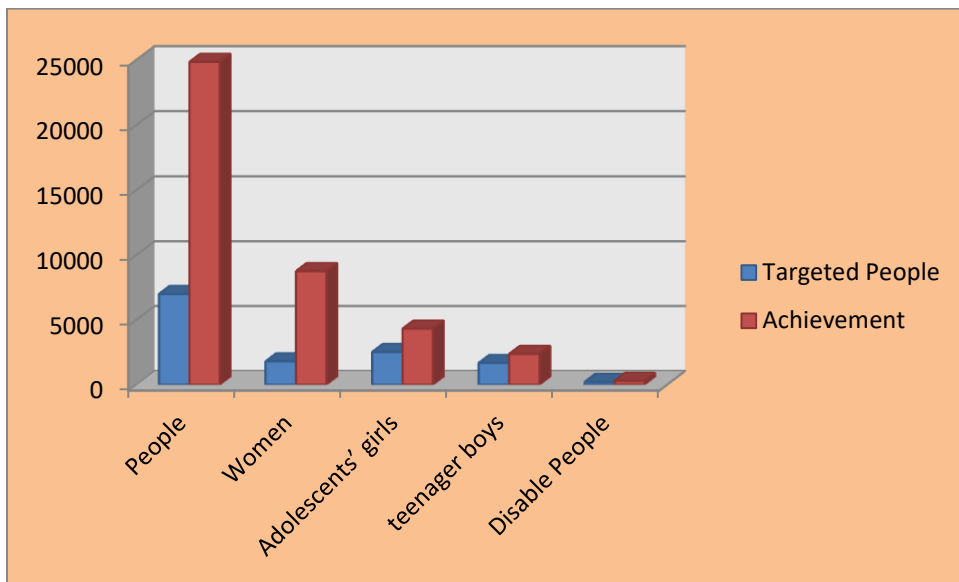


UNICEF team visit the Takani union of KazipurUpozila in Sirajganj

District are the most flood prone and affected areas. On the one hand, just as people are affected by floods, the number of deaths due to drowning and snake bites during floods is also very high. So to raise awareness, we have set up 3 billboards in Tekani and Natuarpara. That billboard has a message about what to do if you drown and what to do if someone is bitten by a snake. That billboard has a message to raise awareness about Covid-19. Our aim was to give a message to 7,000 people in the said union about drowning and snake bites during floods. But we are very happy to say that we have been able to give this awareness message to many more people than our

targeted people. Our awareness billboard has been placed in front of the Tekani and Natuarpara Union Parishads, and another has been set up In front of the market, where people are always coming and going.

| | Targeted People | Achievement | % |
|---------------------------|------------------------|--------------------|----------|
| People | 7000 | 24850 | 355 |
| Women | 1800 | 8765 | 486.9 |
| Adolescents' girls | 2520 | 4322 | 171.5 |
| teenager boys | 1680 | 2376 | 141.4 |
| Disable People | 210 | 296 | 141 |



Statistical analysis shows that we have been able to reach out to 24,850 people where our goal was to reach out to 7,000 people. In addition, our aim was to reach 1680 teenage boys with an awareness message, where we were able to reach 2376 people. Again, we intended to reach out to 2,520 adolescent girls, but we managed to reach 4,322 adolescent girls. The total population of Tekani and Natuarpara Unions is 45220 (Ref - UP). We have managed to reach 54.95% of the total population with awareness messages

- **CBCPC Meeting:** According to the composition of the committee, meetings were held at the community level with the new members of KazipurUpazila Child Welfare Board and Sirajganj District Child Welfare Board. CBCPC members will go to the child protection centers regularly and they will solve any problem. District and Upazila Child Welfare Board meetings are held.
- **Youth Group Training:** A total of 120 youths including 40 youths and 20 UDMC members were trained in Tekani and Natuarpara Unions of KazipurUpazila. The training session was conducted by SamajKazipurUpazila Service Officer, Women's Affairs Officer, PIO, Fire Service, OC of the police station. They discuss in detail what to do in case of emergency. Demo shows how to rescue a drowning person after drowning, what to do in case of snake bite. Materials like raincord, jacket pocket, flute, flashlight, bag, pad, pen, name card etc. are given in the training.



Youth Group hands on Training in UpozilaHallroom, Kazipur

❖ Nutrition

- **Sam Screening:** Nutrition may be defined as the science of food and its relationship to health. Good nutrition means maintain a nutrition status that enables us to well and enjoy good health.



SAM Child Screening Camp at Takani Union

Malnutrition is the condition that occurs when a person's body is not getting enough nutrients. The condition may result from an inadequate or unbalanced diet, digestive, absorption problems or other medical condition. Child Marriage and pregnancies, Heavy female Work load Household food insecurity, Lack of Knowledge and inadequate food intake, poor public health is a main cause of malnutrition. Provision of WASH, Child Protection and Nutrition Supports to the flood affected people of Sirajgonj District in-2020 has taken a great initiative to identify SAM Child and referred SAM Child to Upazila Health complex for better treatment of SAM Child. Project Nutrition team done Child screening in Sirajgonj district for identified SAM child and referred the child Upazila Health complex for better treatment. Ten nutrition promoters were screening for identify SAM child by MUAC, Edema regularly in flood and Corona affected area. Five project officers coordinate them and collaborated with the UHC & Medical hospital for SAM treatment for the SAM child. The NP ensures the health hygiene, social distance for every field activities and when they use MUAC tape for screening they use the sanitizer for using the tape to another child.

- **Incentive for caregivers for treatment:** Severe acute malnutrition (SAM) is an important cause of death in children. Because, there are no national information on prevalence of SAM using mid upper arm circumference (MUAC) and presence of bipedal edema in under-5 children, thus the actual number of children suffering from SAM could be much higher than the current estimate. Children suffering from SAM can be successfully treated by using WHO guidelines. In Bangladesh, SAM in children has traditionally been managed at the facility level through inpatient therapeutic care. A small proportion of cases receive this treatment because active case finding



Shah Azad Iqbq, Director(Programme), NDP met the SAM child admitted at Kazipur hospital

in the community is rare or absent, many families cannot afford the economic and opportunity costs associated with facility based inpatient care and health facilities cannot reasonably handle such a high case load. Facility-based inpatient care is essential when SAM has progressed to a stage where children have medical complications that are life-threatening. For flood affected Sirajgonj district SAM child rate of is too high. Either the SAM child seems normal but their physical immune power is very low. So they have the high risk to attack other diseases. By this project the project seeks to identify severely malnourished children through a campaign for children aged 6 months to 59 months. Nutrition officer and Nutrition Promoter identify the SAM Child by MUAC measure. By the Government circular, All the children whose MUAC below 120 CM are called SAM. These SAM children referred to the Sador and Belkuchi, Kazipur and Shahjadpur Upazila hospital from Community Clinic. PO-Nutrition closely coordinated with the Hospitals, Community Clinics and other organizations for increased allocation for SAM child Referred and Better treatment. In project time we have referred 104 SAM children from five Upazillas. All Children and caregivers stay in Hospitals up to 15 days. They received better treatment and recovered from Malnutrition. A sum of BDT 3,000 has been given to each child for transportation, medical and other cost.

➤ **Pregnant and lactating women (PLW) aware on Infant and young child feeding (IYCF):** IYCF



IYCF Session for PLW in Takani Union

counseling for pregnant and lactating mothers children age 0-23m (Each PLW will seat for one IYCF so that they retain the messages and share at the surrounding to have the greater impact of the counseling). Infant Young Child Feeding (IYCF) session is one of the most important of Pregnant and lactating mother. Though the session Pregnant and lactating mothers can know Importance of Balanced diet of 06 to 24 months child, Importance of breast feeding, Techniques of right way breast feeding, and importance of Iron and Folic acid. IYCF- Session conducting by Nutrition Promoter and Project Officer and PC were present in this session. Each PLW received one BCC session of

IYCF at 05 Upazilas. The session content are COVID-19 Epidemic Messages, IYCF GOB Circular Discussion, EIBF and EBF poster discussion, BMS code Flyer, Mat nutrition discussion.

❖ **Sub-national Cluster coordination meeting:**

Part of the project implementation and its sustainability two sub-national WASH cluster coordination meetings were organized. Aim is project update information, implementing process-procedure, techniques, mechanism and objectives disseminate to participants through project. After project activity discussion, open question and answer session facilitate by Md.JahidHasanSiddique UNO Kazipur, Sirajganj, KaziMasuduzzama (DD) NurunNaharChowdhury (Manager Training & PC Nutrition Comp.) and Jahid Kamal (DPC WASH) NDP Sirajganj.



Sub-national Cluster coordination meeting

Participants' opinion:

- Select the extreme poor beneficiary who didn't get support before from others and really they have need the support.
- Select the village where every year flood affects the locality and where many people should use the support.
- Local Government and administration will follow up the work for good progress.

10. Implementation of AAP including establishment of feedback mechanism along with WASH

Accountability to affected Population (AAP) is an essential part of the response to the outbreak. This note By this project Unicef provide to NDP guideline how to include and strengthen AAP in COVID-19 and flood affected response plan in alignment with IASC and grand bargain commitments and the Core Humanitarian Standard. Indeed it is critical that affected populations:

- Receive relevant and timely information

- Participate in decisions that affect their lives
- Have access to trusted feedback mechanisms

It is very important to have transparency and accountability anywhere AAP has been implemented in this project as per the instructions. In this project we put up a hot line number by hanging a festoon in project community area and Hospital, Also put up a complaint box. We kept a register to keep their complaints; every complaint has been recorded there. We then hung festoons and banners at every union council, corresponding market, public place and hospital where our hot line numbers were mentioned. That means we have maintained the whole process according to the project guideline. Needless to say, we consider each complaint very seriously and investigate and send it to the Concern Department. Subsequently the feedback or decision taken by that department is implemented as soon as possible. Five AAP have received from Community and Stakeholders about WASH, CP and Nutrition.



Festoon with complain number hanging to Sador Hospital

11. Major Learning, challenges, way forward and recommendations

❖ Learning:

- Accountability framework development before project implementation and strict maintaining of the framework makes implementation of the project smooth as well as transparent.
- As a new intervention, the bathing cubicle and double platform latrine have created much more attention
- Transparent consultation process is very important to select most vulnerable beneficiary.
- Well communication is very important to get support and cooperation from the respective government department.
- Collaboration with all related stakeholders, especially community leaders helps to solve field level problems.
- Transparency of implementing organization (NGO) and its staff members is very important for proper implementation of the project that have limited number of hardware support.
- Dedicated, experienced and professional staff is very important for proper implementation of short duration project.
- Organizational core staff assistance is very crucial for completion of the project in time ensuring quality of all activities.

- Participation of beneficiaries and stakeholders from the beginning of the project is key for successful implementation, ownership building and sustainability of the project.
- For common service facilities, place selection through consultation process involving community and beneficiaries is very important, that makes the facility more accessible to beneficiary.
- Behavior change is important for maintaining proper hygiene practice and awareness session plays very important role. For any emergency WASH project success depends on proper orientation, awareness raising and hygiene session.
- Cooperation of the Union Parishad, especially UP Chairman and UP Member plays important role for successful implementation of the project.

❖ **Challenges:**

▪ **WASH:**

- The project was implemented in two Union out of 92 Unions of Sirajganj district. Thus it was really big challenge to select one union as a working area of the project in the consultation process with stakeholders.
- There are huge numbers of flood affected poor and extreme poor families in the working area whose socio-economic condition are very similar and all of whom desired for the assistance but there was very limited number of assistance from the project. So it was really difficult to select the most disadvantaged and affected families in a comparative process.
- One of the critical challenges of the project was the short duration of the project. The project had many activities but duration of the project was very short. Although it was 3 months project, but practically we got only two and half months.
- The project was implemented in a remote area, where communication and transportation is a big challenge. Especially transportation of construction materials is a big challenge, which hampers timely implementation of the project.

▪ **Child Protection:**

- Without any rent venue selection for HUB center is very challenging after closing the project.
- Without volunteer pay HUB activities continuing very challenging after closing the project
- Communication barrier for Children gathering around the HUB center in flood affected area.
- Social and family taboo for the adolescents girls coming to the HUB center

- Due to the short duration of the project, some things have to be done very fast in some places.

▪ **Nutrition:**

- Screening camp with maintain social distance was very risky in COVID-19 situation.
- Lack of Knowledge of malnutrition to people and barrier in rural flood affected area
- Project duration is very short for proposed number SAM selection refers to Government Hospital in project.
- Parents unwilling to hospitalize treatment for SAM Children especially for girl child.
- Hospital doctors and nurse feels that UNICEF is liable for the SAM child treatment and all SAM management.
- Lack of SAM trained doctors and nurse. Most of the Doctors and nurse transferred from these five Upazila who received the SAM training. As the result SAM treatment for child is difficult.
- Most of the people are poor and illiterate as the result the family members are unwilling about pregnant and lactating mothers care and don't know about nutrition, malnutrition and IYCF.

❖ **Way forward and recommendations:**

- The stakeholders are happy with the project, although number of allocation is minimum but it has created a big impact.
- The duration of the emergency WASH project should be in consistent with proposed activities of the project.
- The number of support allocation of the emergency WASH project should more, so that at least a minimum number of beneficiaries can be covered.
- A minimum follow-up support can be continued in order to ensure sustainability of the project.
- The area coverage of the emergency WASH project should be more affected geographical locations.
- A development project or a post flood rehabilitation project can be developed and implemented in order to enhance resilience capacity of the people, especially for women and children.
- Awareness session should be continuing through linkage building with other projects or other government departments project/program.
- Need to develop the KoBocollectsoftware for HH data collection and verification.

12. Recommendation:

- ✓ Such projects should be further extended. Besides, all the affected people of all the unions of an upazila should be brought under this kind of project. Because if the project does not work in all the unions of an upazila, there is a difference of opinion among the stakeholders.
- ✓ It is very important to increase the unit cost of the wash component.
- ✓ The number of staff in such emergency response projects should be increased.
- ✓ The duration of the project should be extended for sustainability, especially for the child protection and nutrition component.
- ✓ Ensure that all SAM children identified in the area are admitted to the hospital and given proper treatment.
- ✓ Recruit more volunteers and social workers for the Child Protection and Nutrition Component, so that volunteers and social workers can go to each affected home to ensure nutrition services and child protection.

13. Conclusion

Being able to work in such a big disaster has increased the scope of knowledge as well as the efficiency in work. But to be honest, there is no greater risk than death, the salary of those who are working with such a big risk is much lower. Despite responding to humanitarian calls, many are forced to do such risky work for the sake of their livelihood. Even considering the humanitarian aspect, every employee should be given a risk allowance. For flood affected people in Sirajganj district project certainly a great initiatives for promoting the better WASH service, Child protection and nutrition as well as life savings to the char area specially flood affected people. The project duration and geographical area should be expanded to ensure the the WASH services, Child Protection and Nutrition in Sirajganj. Local Government and other donor can promote and continue such type of activities specially double platform tube-well, School hygienic Station in char area with the continuing for Child protection and Nutrition Component. Awareness program should keep continue to sustain the completed activities. Moreover the stakeholder of the project should continue to keep in touch with service providing agencies to deliver better service to the flood affected areas as well as affected people.