

care





TABLE OF CONTENTS

Ι.	CARE's Legacy	02
II.	Message from Country Director	03
III.	Impact Data and Reach	04
IV.	Program Overview of CARE Bangladesh	05
V.	Media and Outreach Highlights	12
VI.	Innovation and Multiplying Impacts	12
VII.	Acknowledgement	14
VIII.	Country Office Leadership Team	16

CARE'S LEGACY



In the context of Bangladesh, CARE is not just a word, but a sound that resonates growth, affection and support for the rural and semi-urban population of the country. With a history that dates back beyond the history of the independent country. CARE has been a continuous development partner for the people of Bangladesh, for the Government of Bangladesh.

"I built myself anew, started studying again, crossed all obstacles, and completed my college education." Once a child bride, Rabeya started delivering healthcare in COVID-19 by becoming a telemedicine specialist. Now she's studying to become a pharmacist. Rabeya's story illustrates the kinds of impacts that people in Bangladesh—especially women—have made with support from CARE.

The journey which began with disaster relief and school nutrition programs in 1949 has today stretched to wider areas, ensuring lasting changes in the humanitarian and development sector of Bangladesh.

It has always been CARE's mandate to stay relevant and provide time-appropriate solutions that are easy for locals to accept. With a sharp focus on improving the lives of women and girls in every aspect, CARE works around the globe to save lives, defeat poverty and achieve social justice. CARE aims to build a world of hope, inclusion, and social justice, where poverty has been overcome and all people live in dignity and security.

The needs of modern-day Bangladesh are very different from the needs of a war-torn country. A country that is rapidly reaching high for middle-income country status, present day Bangladesh is a fast-growing economy with high needs for technical and innovative solution.

CARE feels humbled to be a partner of choice for the development journey of Bangladesh. Just as the needs of this rapidly growing country are changing, so is changing CARE's operation to stay aligned with the needs of times.

CARE has been working here since 1949, even before the birth of Bangladesh (before its independence), and has spent around US\$ 1.5 billion with support from various donors like USAID, UKAID, EU, DANIDA, CIDA etc. CARE's activities have covered all of Bangladesh (64 districts) through many programs, including Relief, Rehabilitation, and Development. The development program includes rural infrastructure building and repair, integrated food security, women empowerment, health & nutrition, climate smart agriculture, resilience, disaster risk reduction, market system strengthening, developing small economic activities, and many more.

CARE's long presence in Bangladesh has supported more than half of the population. CARE's proven impact rests on long term commitments, innovations and successful approaches, and deep partnership with many different people in Bangladesh. CARE has significantly contributed to meeting the Millennium Development Goals (MDGs) and Sustainable Development Goals (SDGs) as a trusted and valued partner of the Government of Bangladesh.

CARE adapted to fulfill the demands of time and addressed the shifting issues by adjusting its program activities, interventions and approaches from time to time. Some projects activities continued under different names and sometimes new projects were introduced, but one thing was common- the goal of development and transforming peoples' lives for the better. Thus, we align our work in every sector, every aspect to our organization's vision, mission, focus and values.



🔘 Vision 🛛 🞯 Mission

We seek a world of hope, inclusion and social justice, in dignity and security.

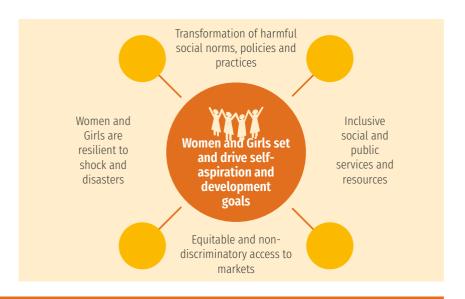


CARE works around the globe to save lives, defeat poverty and

🔍 Focus 🔇 🐼 Values

Theory of Change

The Theory of Change (ToC) presents the change that CARE believes needs to happen for poverty to be eradicated, for more social justice and for food and nutrition security to be achieved in a sustainable manner. It articulates the broad change needed to which CARE and many others, from government, CSOs, private sector, etc. The ToC is the guiding framework for designing program initiatives to ensure that CARE's work contributes to the overarching change.



1. The most socially, economically, politically marginalized women and girls in rural and urban settings

Impact sub-group

- Women traders/entrepreneurs 🖡 Pregnant women Women survivors from GBV and IPV or at risk 🙆 Women in agri-value chains 💩 Lactating mother Migrant women (overseas and internal) Frontline women service providers Female garments workers Slum dwellers a Indigenous women Sex worker and adolescent Day-laborers girls and youth group 2. Women and girls disproportionately impacted by climate change, shocks, social and political conflict Impact sub-group A Refugees
- Internally displaced
- Minority groups due to faith and ethnicity and men/boys impacted by humanitarian crisis/disaster

Through working with and for the impact groups, CARE aims to achieve the impact goal: Women and girls leading an equal and resilient life in a society with transformed socio-economic norms.

MESSAGE FROM COUNTRY DIRECTOR

Over seven decades, CARE has been a long-standing development partner for Bangladesh. In post-liberation war phase, CARE played an active role in rebuilding the country.

Keeping gender at the core of all our programs, CARE has partnered with local and national organizations to fulfill the development goals of the Government of Bangladesh, in addition to responding to every humanitarian emergency. As the nation is poised to transition into a middle-income country, CARE intends to continue as a dependable global organization with its network of partners local and global in building a Bangladesh that is fully developed, and self-reliant. With our new country strategy, we plan to embark on locally led and globally scaled solutions.

Ramesh Singh

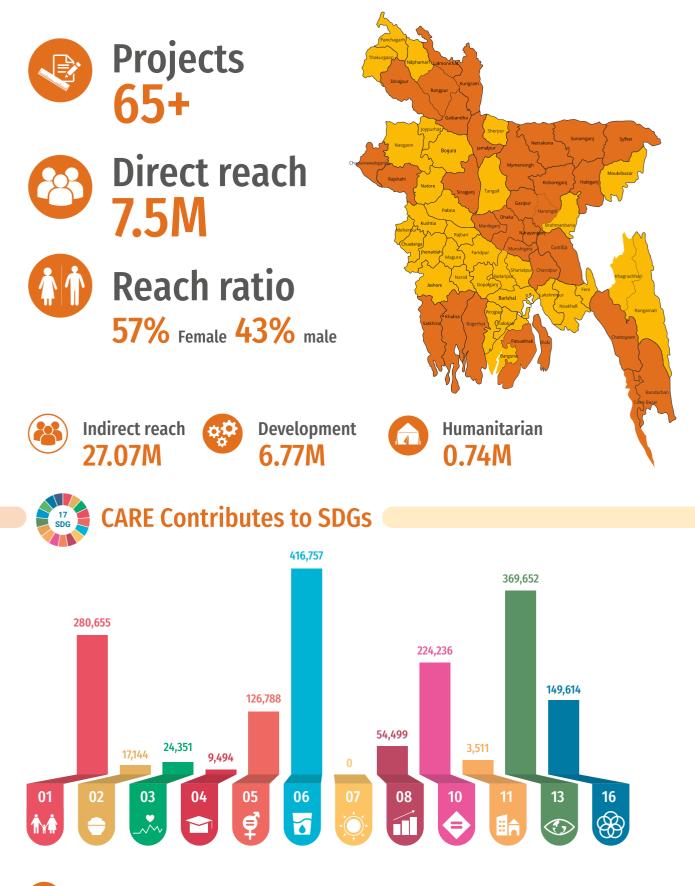
Country Director CARE Bangladesh





IMPACT DATA & REACH

Reach FY 22 (July 2021 – June 2022)





PROGRAM OVERVIEW OF CARE BANGLADESH

💎 Health Program

Program statement

CARE Bangladesh's Health Program's goal is to serve the most marginalized rural and urban populations, especially women and girls so that they have access to quality health and nutrition services for enjoying health & nutrition rights.

Focus areas

- b Maternal and child health
- ♥ Non-communicable disease
- 🐞 COVID-19 and public health emergency response
- 🖞 🛛 Building Resilient Health Systems in public sector
- 🌞 🛛 Mental Health well-being



Reach 3,289,739



Ratio Female- **54%** Male- **46%**



Donors Twillio, CISCO, CARE USA, CARE Austria, GSK, The Global Fund, UNICEF

19 Districts

Dhaka, Gazipur, Narayanganj, Mymensingh, Netrokona, Rajshahi, Chapainawabganj, Dinajpur, Manikganj, Munshiganj, Chandpur, Cumilla, Khulna, Satkhira, Sirajganj, Patuakhali, Sunamganj, Narsingdi, Cox's Bazar

Key milestones:

- Extended support to Government of Bangladesh to ensure 100% COVID 19 vaccination in hard-to-reach coastal areas in Khulna. Ensured vaccinations to over 1 million (54% male, 46% female) people in Khulna and 73% of the marginalized population of people who inject drugs.
- + Integrating HIV services into government health facilities, prison setting and police hospitals by CARE Bangladesh in association with NASP, DGHS.
- Multi-sectoral Approach to Nutrition is developed by CARE in Sunamganj (Sunamganj Model) and scaled-up by BNNC and development partners to other districts.



I felt another world was waiting for me besides cooking and raising children. I built myself anew, started studying again, crossed all obstacles, and completed my college education. ??

- Rabeya

Above are the words shared by Rabeya who is now a medical entrepreneur in the garment industry-heavy area in Gazipur, Bangladesh. By being with CARE, she received training as a doctor's assistant. She later completed a training on Rural Medical Practice and Pharmacy course. She is now well respected in her community and is popularly known as *Doctor Apa*.

Women and Girls Empowerment Program

Program statement

CARE Bangladesh's Women and Girls' Empowerment Program works to transform the lives female population in all ages and demographics by challenging the toxic social norms. Programs with adolescent girls helps them understand their rights and enforce them, while programs with adult women works to reduce gender-based violence and attain their social and financial independence. CARE's strength lies in designing evidence-based programs which aid the system mainstream the practices from learnings.







Donors

USAID, UNFPA, H&M Foundation, Bill & Melinda Gates Foundation, and the Kendeda Fund.

10 Districts

The most marginalized and vulnerable population in Rangpur, Kurigram, Gaibandha, Bogura, Sunamganj, Bagerhat, Potuakhali, as well as the RMG prevailing areas in Gazipur, Chattogram, and Dhaka.

Key milestones:

- + Stronger and more confident program participants (women and girls) they are well aware of their rights (education, marriage, career, life aspiration and more) and can advocate for themselves against gendered social norms, while family members of girl child/women are more accepting of non-traditional income generating activities.
- + A fairer workspace for female RMG workers decent work initiatives and skill trainings have resulted in confident, competent, growth-oriented female workers and accommodating factory environment.
- + CARE Bangladesh is the **partner of choice** for donors and research institutes **to challenge harmful social norms** and identify locally-led and sustainable solutions. CARE's models are taken up by many partners and donors for program implementation of women empowerment.



As women, we will face many obstacles; but only by overcoming these obstacles can we see the face of light. The project helped me realize this and chase my dreams. Now I know I can decide my own fate.

- Shahida Program Participant, IMAGINE project Women and Girls' Empowerment Program CARE Bangladesh



Scan this code to know about Shahida's story

Extreme Rural Poverty Program

Focus Areas

Program statement

The goal of Extreme Rural Poverty Program is to make the poor powerful through better access to, and use of resources and services, including markets and employment opportunities.

Reach

1,551,053

Resilient livelihoods, agriculture,



food system and nutrition Financing agriculture, enterprises and social protection

Access to safe water, hygiene and sanitation

Donors

European Union, Austrian Development Cooperation, UNICEF, The Embassy of Switzerland, Pool Fund



6 Projects

8 Districts

Rangpur, Nilphamari, Gaibandha, Dinajpur, Lalmonirhat, Khulna, Shatkhira, Narail

Key Milestones:



JANO:

- A total of 185,026 Pregnant and lactating women received counselling support on nutrition
- 16,595 farmers have been trained on climate smart homestead gardening. Of them 70% were women.
- Capacity of 7,484 CSG members have been developed, of them 55% were women.



ASWA-II:

413,000 people are living in a safe environment in terms of water safety, sanitation and hygiene



Market system development, private sector engagement

Promoting digital ecosystem

Social inclusion in planning

and governance process





Living Blue:

- USD 65,000 of revenue generated through securing orders engaging 55 artisans and 150 farmers.
- Under Living Blue project, an **ethnographic research** was conducted by the University of East Anglia in association with Bangladesh Agricultural University, CARE Bangladesh and Living Blue to promote the benefits of indigo cultivation by replacing tobacco plantation in the North of Bangladesh.



Here Shouhardo III

Program statement

Strengthening Household Ability to Respond to Development Opportunities (SHOUHARDO III) is a multi-sectoral program that addresses food and income insecurity, maternal and child health and nutrition, and women and youth empowerment. The program aims to improve gender-equitable food and nutrition security and the resilience of vulnerable people in northern Bangladesh's Char and Haor regions.

CARE Bangladesh is now implementing 'SHOUHARDO III Plus'. The program is build one the achievements of SHOUHARDO III, which will continue to deliver improved gender-equitable and resilient food and nutrition security to 475,000 vulnerable people in the target area.

Reach 2,020,177



Focus Areas

<u>69</u>	Agriculture & livelihoods
6	Financial inclusion
*	Health & nutrition
7	Water, sanitation, and hygiene
縌	Disaster risk reduction

Integrated in these result areas are cross-cutting components: gender, governance, private sector, and youth engagement

Donors

United States Agency for International Development/ Bureau of Humanitarian Assistance (USAID/BHA) with complementary funding from the Government of Bangladesh

8 Districts

The char and haor regions in Kurigram, Gaibandha, Sirajganj, Jamalpur, Kishoreganj, Sunamganj, Netrokona, Habiganj

Successful uptake of Village Savings and Loan Association (VSLA) by communities

When women have economic empowerment, there is a direct impact on food security status – with this idea, USAID funded SHOUHARDO III program implemented village saving and loan association (VSLA) – that have greatly improved the financial status of women at rural level.

With this savings approach, rural women can invest in income generating activities, while also save for emergencies.

A total of **3,123** VSLAs with around **68,000** members. The estimated accumulated savings of all VSLA groups is BDT **61.55** million (**USD \$699,530**) until the end of FY22.

The participants invested the share-out money in different income-generating activities

- + Homestead gardening
- + Rearing poultry and livestock
- + Handicrafts

- + Grocery businesses
- + Mitigating financial shocks caused by natural disasters
- + Starting or expanding business



I am managing three Village Savings and Loan Associations (VSLA). With facilitation support from SHOUHARDO, I am earning BDT 5,000 to 6,000 (USD \$ 58.09 to 69.71) every month from various sources of income (tailoring, selling eggs and milk) in addition to the service fee I get from managing VSLAs. SHOUHARDO III has changed my life and made my dream come true. Now my husband and I work together to fulfill our dream of providing a better life for our children. **97**

Aysha

Sanchay Sathi, SHOUHARDO III program

Comprehensive DRR Mechanism for ensuring Community Resilience

- + Created **2,841** DRR leaders (1,894 women), including **325** Religious Leaders
- + 77.1% (938 out of 1,171) respondent households received disaster-related information support from the DRR leaders
- The Union Parishads (UP) in all 115 program unions have developed capacities through training in providing DRR services in their communities over the past six years.



I take part in helping people in an emergency and feel happy that I can stand beside my people in times of crisis. We have to work together as a community to save our own assets.

Lucky Akter DRR Leader, SHOUHARDO III program

Focus areas in Humanitarian domain

Nexus Work (preparedness, FbA, DRR)

Ratio

+ Green Recovery

Needs Assessment and Information Management
Climate-Smart Humanitarian Response (sector wise)



Scan to know more about how Lucky mobilized her community for flood prevention

👝 Humanitarian and Resilience Program

Program statement

People prone to climate induced disasters and affected by major crises receive adequate quality, gender-responsive humanitarian assistance and protection which is locally-tailored and globally connected.

Focus areas in Climate Change domain

- + Climate Information Services
- + Climate Change Adaptation (Capacities and assets: structural and livelihood solutions)
- Climate Mitigation (Green solutions, advocacy)
- + Loss & Damage
- + Innovation and Market-based Approach



Reach 286,819



Donors

USAID, ECHO, FCDO, MACP, DANIDA, DFAT, ADH, GFFO, UNICEF

*****1



Female- **54%** Male- **46%**

11 Districts

Bandarban, Cox's Bazar, Kurigram, Sunamganj, Sylhet, Netrokona, Kishoregonj, Jamalpur, Gaibandha, Lalmonirhat, Bogra

Key Milestones

- Establishment of Flood Preparedness Program (FPP) where CARE partnered with Government of Bangladesh which is modeled after revolutionary CPP. In Northern Bangladesh, 2000+ volunteers are trained to support the community with flood awareness and resilience to reduce impact of flood at community level. The volunteers are linked with the Union Disaster Management Committees so that they can continue to support the communities in flood situations.
- Supporting Flood Forecast-based Action and Learning in Bangladesh SUFAL is the pioneer in introducing anticipatory approaches such as Forecast-based Early Action (FbA) and disaster risk financing among the INGOs, GoB, UN and donor community which has now become a robust approach for disaster risk reduction.

Parveen Akhter (21) is one of the recipients of SUFAL voice messages in Bharatkhali union of Saghata, Gaibandha. With the voice message, she and her family were able to know about the upcoming flood: when the flood may occur, how long it will stay, and which areas of the union can get flooded. She not only received the flood forecast and warning, but also the action-oriented advisories. Parveen said that the voice message was received in the evening at least three times; the time was convenient and as the call was repetitive if she missed one call, she was able to receive another. After receiving the voice messages, she recorded them for future reference and also shared them with her neighbors, especially the women who do not own mobile phones.



🏫 Programs in Cox's Bazar



10+ Projects

Running in Rohingya Refugee Community and Host Community



UNICEF, DFAT (Australian Aid), IOM, WFP, USAID, DANIDA, CARE Australia, Center for Reproductive Rights – Margaret A Cargill Foundation, CARE Austria, CARE Germany

Host community programs

The massive Rohingya influx instantaneously emerged as a severe humanitarian crisis, followed by the long-term development needs amidst the host community in Cox's Bazar. The refugee influx not only strained the already limited resources of the host community but also disrupted the local market system for the poor. CARE stepped up as one of the pioneering organizations to support the host communities in overcoming the changing context.

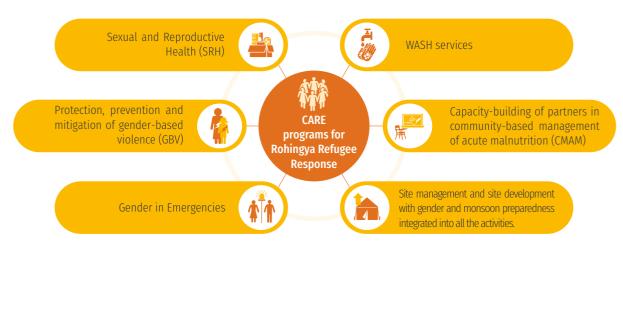






Rohingya Community Programs

Bangladesh currently houses about a million Rohingya Refugees in Cox's Bazar – living in 33 congested camps. CARE Bangladesh has been working to aid and support the Rohingya Refugees from August 2017.







Key Milestones

The site development and disaster risk reduction activities **combatted the negative coping mechanisms** of the refugee community. Members of the community, including women and people with disabilities took part in paid work which enhanced the structural resilience in the camps as well as strengthened community resistance to natural disasters.

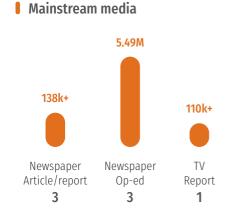
CARE manages two camps – 13 and 16. This entails ensuring seamless service delivery in the camps along with **safety and security.** In CARE managed camps, Complain Feedback and Response Mechanism (CFRM) has been established which has proved to be a highly efficient model for ensuring safe and security in the camps.

CARE established **accessible toilets**, specially designed for people with disabilities. This has significantly improved the WASH behavior of the disabled community. Further to this, CARE has also constructed menstrual hygiene management block – special facility curated for adolescent girls and women to use during their menstruation.











CARE is always looking for creating models and approaches suitable for the country context that can be easily adopted by local communities to ensure lasting changes.

Multi-sectoral Approach to Nutrition

Problem

Local authorities such as DNCC, UNCC, and Government line departments are unclear about their roles in improving nutrition outcomes. Inter-coordination mechanisms are also weak. It is learned that multi-sectoral interventions have the potential to increase nutritional outcomes.

Solution

Joint Action for Nutrition Outcome (JANO) is a consortium project that looked at the underlying problems of poor nutritional status in Northern Bangladesh.

To create a supportive system, JANO revived the local level platforms (Community Groups, Community Support Groups and Union Development Coordination Committees) so that community demands would reach the Upazila and District level platforms. The project also supported the District and Upazila Nutrition Coordination Committees (DNCC and UNCC) so they can implement effective, inclusive, and accountable nutrition programmes within their regions. The project also developed an online information system to ensure better monitoring and coordination among sub-national level departments. Finally, JANO also influenced the private sector so that they invest more in nutritional products locally.

Impact

	14.0% Women and adolescent girls have claim service providers (3.9% at Baseline)	ed nı	utrition spec	ific and sensitive extension services from relevant
**	74% of community support groups in targeted areas are functional (0% at baseline)			2 DNCC, 14 UNCC, 64 UDCC have allocated budgets to support nutrition (0 at baseline)
•	16.7% pregnant and lactating women received nutrition-specific safety net support (8.4% at baseline)		*** *	63.6% of women and adolescent girls meaningfully participated in government forums (0.2% at baseline)
	46.9% households involved in the production of higher value nutrition products (36.7% at baseline)		6	Union Parishads allocated 30% budget for nutrition initiatives.

Multiplying Impact

- + Bangladesh National Nutrition Council (BNNC) adopted JANO supported online M&E system to track the local action plans and progresses around national nutrition plan.
- Civil society groups mobilized to regularly conduct nutrition governance meetings and act as pressure group to ensure nutrition-specific objectives.
- Increased engagement with the Bangladesh National Nutrition Council (BNNC) and advocate government-level inter-departmental coordination at national level so that the sub-national level District Nutrition Coordination Committee and Upazila Nutrition Coordination Committee members are more accountable to implement their annual planned nutritional activities.

Flood Forecasting Model: An innovative early warning systems to save lives and assets during flood

Problem

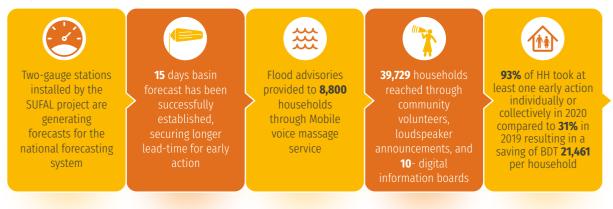
Inadequate gauge stations failed to generate timely localized flood forecast – as a result the response time was not enough to mobilize the affected community for preparation and evacuation.

Solution

Scaling-up Flood Forecast-based Action and Learning in Bangladesh (SUFAL-II) is a Forecast-based Early Action (FbA) and disaster risk reduction program aimed to increase the lead time for response and increase overall preparedness of vulnerable communities against monsoon floods.

SUFAL builds on a previous successful pilot. SUFAL scaled up the learnings and worked with the Government systems to enhance the forecast mechanism of flood warnings. Through the program, two additional river gauges were established further upstream, which enhanced the flood forecast mechanism while also localizing the flood forecast system. The project enabled community members to receive sector-specific forecast messages which aided the communities greatly for flood preparedness and evacuation.

Impact



Multiplying impact

- + The Flood Forecast & Warning Center (FFWC) has taken over the gauge stations so they will be sustainable.
- + Local administration would take over the digital display board for timely early warning message dissemination.
- + The native resource of interpreters and community volunteers are well placed to work closely with local-level DMCs to translate the early warnings into action.

ACKNOWLEDGEMENT

Thanks to all our donors, stakeholders and partners for their continuing support, collaboration and partnership.

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Current Partners

- 1. Ashokta Punarbashan Sangstha (APOSH)
- 2. Association of Voluntary Actions for Society (AVAS)
- **3.** Barguna Nari Jagaron Karmosucht (JAGO-NARI)
- 4. Bangladesh Institute of Labour Studies (BILS)
- 5. Dhaka Ahsania Mission (DAM)
- 6. Dushtha Shasthya Kendra (DSK)
- 7. Eco-Social Development Organization (ESDO)
- 8. Family Planning Association of Bangladesh (FPAB)
- 9. Gram Bikash Kendra (GBK)
- 10. GRAUS (Gram Unnayon Sangathon)
- **11.** Gonoshasthaya Kendra (GK)
- **12.** Internal National Development Enterprises (iDE)
- 13. Institute of Development Affairs (IDEA)
- **14.** Local Government Engineering Department (LGED)
- 15. Mahideb Jubo Somaj Kallayan Somity (MJSKS)

- 16. Mukto Akash Bangladesh (MAB)
- 17. Mukti Cox's Bazar
- 18. National Development Programme (NDP)
- **19.** Organization for the Poor Community Advancement (OPCA)
- 20. People's Oriented Program Implementation (POPI)
- **21.** PLAN International
- 22. RUPANTAR
- 23. Save the Children Federation Inc. (SC)
- **24.** SKS Foundation
- 25. Social and Economic Enhancement Programme- SEEP
- **26.** Society for Health Extension and Development (SHED)
- 27. Solidarity
- 28. Voluntary Service Overseas (VSO) Bangladesh
- 29. Village Education and Resource Centre (VERC)

Strategic Partners

NGOs and I/NGOs

- 1. Ain O Salish Kendra
- 2. Bangladesh Legal Aid and Services Trust (BLAST)
- 3. BRAC Institute of Governance and Development (BIGD), BRAC University
- 4. Breast Feeding Foundation (BBF)
- 5. German Red Cross
- 6. National Girl Child Advocacy Forum (NGCAF)
- 7. Social Marketing Company (SMC)
- 8. Unnayan Shamunnay

Media/campaigns

- 1. Right to Food
- 2. The Daily Star

Government organizations

- 1. ASPIRE
- 2. Bangladesh National Nutrition Council (BNNC)

University and research organizations

- 1. Centre for Policy Dialogue (CPD)
- 2. icddr,b
- 3. International Centre for Climate Change and Development (ICCCAD)
- 4. University of Arizona, USA
- 5. University of Bath, UK
- 6. University of Westminster, UK

Private sector

- **1.** Advanced Chemical Industries Limited (ACI)
- 2. Bangladesh Specialized Hospital Limited
- 3. Bank Asia Limited
- 4. Bengal Meat Processing Industries Limited
- 5. Coders Trust Bangladesh
- 6. Grameenphone
- 7. Marks and Spencer
- 8. Mayalogy Ltd.
- 9. Pragati Life Insurance Limited
- 10. RD Service Ltd (PULSE Healthcare)
- 11. Robi Axiata Ltd
- 12. Telenor Health

Government ministries and departments

- **1.** Ministry of Agriculture
- 2. Ministry of Disaster Management & Relief
- 3. Ministry of Environment, Forest and Climate Change
- 4. Ministry of Finance
- 5. Ministry of Fisheries and livestock
- 6. Ministry of Food
- 7. Ministry of Health and Family Welfare
 - **a)** Maternal Neonatal Child and Adolescent Health (MNCAH), DGHS
 - **b)** Community Based Health Care (CBHC), DGHS
- 8. Ministry of Labour and Employment
- 9. Ministry of Land
- **10.** Ministry of Law, Justice and Parliamentary Affairs
- 11. Ministry of LGRD and Co-operatives
- 12. Ministry of Primary and Mass Education
- 13. Ministry of Social Welfare
- 14. Ministry of Water Resources
- 15. Ministry of Women and Child Affairs
- 16. Ministry of Youth and Sports
- 17. National Nutrition Services (NNS) and Revitalization of Community Health Care Initiatives in BD (RCHCIB)
- **18.** Gazipur City Corporation (GCC)
- 19. Fire Service and Civil Defence (FSCD)







Ramesh Kumar Singh Country Director



Ram Narayan Das Deputy Country Director- Programs



Hasina Rahman Deputy Country Director, Program Support



Sajia Tareen Finance Director



Zehra Simeen Islam Rahim Director, People and Culture



Marc Nosbach Chief of Party, SHOUHARDO III Plus



Roberts Sila Head of Cox's Bazar Regional Office



Mehrul Islam

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