Bangladesh Development Cooperation Report 2010

August 2011

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This report summarises the aid program’s progress in 2010 towards the objectives of the Bangladesh program. In previous years the Bangladesh program’s performance has been reported as part of the South Asia Regional reports. These are available on the Australian Agency for International Development’s (AusAID) website.

Context

2010 was a positive year for Bangladesh. The economy grew at a rate of around 6% in 2010 from 5.8% in 2009, with sustained direct foreign investment in industry particularly in garment manufacturing. Slow global economic recovery, severe power shortages, infrastructure bottlenecks and labour unrest in the garment sector however remain prominent concerns. Inflation had a serious impact, especially on food prices and food insecurity.

Bangladesh was globally recognised in 2010 for its progress against the Millennium Development Goals (MDGs). At the 2010 United Nations (UN) Summit, Bangladesh won an award for progress towards achieving MDG4—to reduce child mortality. Bangladesh’s ranking in the UN Human Development Index also improved in 2010 to 129, from 140 in 2009. The country’s effective response to the seasonal floods in October that inundated southern parts of the country, affecting 150 000 people, was also praised by global commentators. More recently Bangladesh has been lauded for its 40% reduction in maternal mortality.[[1]](#footnote-2)

Despite these impressive gains, overall economic and social improvement has been accompanied by rising regional and social disparities. Women face extreme social and economic disadvantage and the extreme poor, including those living in remote parts of the country, remain particularly vulnerable to natural disasters, climate change and global food and fuel price rises. The poor in urban slums, people from the many small ethnic communities in Bangladesh and people living with disability continue to experience high levels of poverty and disadvantage.

Total aid flows to Bangladesh in 2009–10 were US$2.15 billion and around 2% of gross domestic product. While aid was 50% of the national annual development budget, it was only 4.5% of the combined recurrent and development budgets. Australia is regarded as a medium sized donor in Bangladesh. In 2009–10 our official development assistance (ODA) to

Bangladesh was around $60 million. Australia’s ODA to Bangladesh grew to approximately $74 million in 2010–11.

Program objectives

In 2010 AusAID worked with the Department of Foreign Affairs and Trade and other Australian government departments to develop *Australia’s strategic approach to aid in Bangladesh 2011-12 to 2015-16*. AusAID plans to review and finalise its strategic objectives for aid in Bangladesh following the release of Australia‘s new aid policy in 2011.

With an emphasis on reducing poverty and vulnerability, particularly for women, Australia’s interim strategic objectives for development cooperation in Bangladesh are: (1) to improve basic health and primary education services; and (2) to reduce vulnerabilities caused by natural disasters, climate change and lack of social protection.

Expenditure

Table 1: Estimated expenditure in 2010–11

| Objective  | Objective | A$ million | % of bilateral program |
| --- | --- | --- | --- |
| 1.1 Improve health services—with a focus on the quality, reach and management of women and children’s health and nutrition in rural and urban areas | 1.1 | 19.9  | 29 |
| 1.2 Improve primary education services—with a focus on the quality, reach and management of pre-primary and primary education for children in rural and urban areas | 1.2 | 22.9 | 33 |
| 2.1 Reduce extreme poverty and food insecurity—improve the quality and reach of social protection and food security measures for the poorest and most vulnerable in rural and urban areas. | 2.1 | 11.6 | 16.8 |
| 2.2 Improve climate change adaptation and disaster risk reduction | 2.2 | 1 | 1 |
| 3 Assist Bangladesh to strengthen leadership and human resource capacity working with the Government of Bangladesh and civil society institutions  | 5 | 15.5 | 22.5 |

Source: Asia Regional Branch, AusAID’s Bangladesh Country Overview—updated 3 February 2011

Progress against objectives

Objective 1.1: Improve health services—with a focus on the quality, reach and management of women and children’s health and nutrition in rural and urban areas

Bangladesh has made significant progress in reducing child mortality and improving maternal health (MDGs 4 and 5). While there is still need for further improvements, maternal mortality has fallen by an unprecedented 40% in Bangladesh in the last decade.[[2]](#footnote-3) Australia’s support for maternal and child programs, delivered in partnership with the Government of Bangladesh, United Nations Children's Fund (UNICEF) and BRAC–the largest NGO in Bangladesh and one of the largest NGOs in the world—is supporting improved health care for more than 27 million people, mostly poor women and children in 18 districts.

Key results in the health sector in 2010

* **Maternal, Neonatal and Child Health Project**—delivered by UNICEF, Government of Bangladesh and BRAC, contributed to an average annual 17% decrease in maternal mortality in four target districts between 2007 and 2010. This compares to the national annual average of a 5.5% decrease. District-level Ministry of Health officers have been trained in public health management to improve the capacity of local-level service providers and managers. More than 48,000 community health workers and community volunteers have also been trained and deployed to support women during pregnancy, childbirth and to care for newborn children.
* **Integrated Package of Maternal, Neonatal and Child Health** (separate to above project)**—**delivered by UNICEF, supported two ‘women friendly’ hospitals and complementary care to increase women’s confidence in the formal health system. By 2010 women giving birth in hospitals increased to 22%, from 13.5% in 2008, in four target districts. During the same period, women receiving medical care for pregnancy-related complications increased from 6% to 39.5%, while children receiving care from a medically trained provider rose to 47.3% from just 15.4%. Likewise, children with acute respiratory illness receiving trained medical treatment increased markedly from 22.7% to 75.1% in four target districts.
* **Hygiene, Sanitation and Water Fund (HYSAWA)**—through a partnership with the Government of Bangladesh and the Danish International Development Agency, Australia contributed to the construction of 5883 additional water points and 87 community latrines in the southern coastal districts of Bangladesh. In total, water and sanitation infrastructure built through the HYSAWA project benefits around 250 000 people.
* **Core funding for the International Centre of Diarrhoeal Research, Bangladesh** **(ICDDR,B)**— in 2010 the centre trained more than 1000 students, fellows and interns from 29 countries (including Bangladesh), treated 115 000 patients for acute diarrheal disease and published 269 research articles in high-impact journals (compared to 131 in 2007). Reform of the monitoring and evaluation framework, development of the centre’s strategic plan for 2010 to 2020 and the development of a fundraising strategy were key institutional strengthening outputs in 2010.

ICDDR,B also collaborated with the Government of Bangladesh and other research institutes in 2010 to conduct the second Bangladesh Maternal Mortality and Health Service Survey. This survey has provided a reliable updated baseline on the maternal mortality rate in Bangladesh and will help inform policies and programs to ensure continued improvements in maternal and newborn survival.

Objective 1.2 Improve primary education services—with a focus on the quality, reach and management of pre-primary and primary education for children in rural and urban areas

While considerable progress has been made towards reaching the Government of Bangladesh’s education goals, concerted efforts are still needed to reach the goal of universal primary education completion with gender parity by 2015 (MDG 2). In 2010, Australia continued to

support the Government of Bangladesh’s Second Primary Education Development Program through UNICEF. Australia also funded BRAC to deliver non-formal education for children who are not enrolled in, or who have dropped out of, the formal education system. BRAC provides education for 7% of the primary school age children in Bangladesh, complementing the Government of Bangladesh efforts to achieve their goal of Education for All.

Key results in the education sector in 2010

* **UNICEF support for the Primary Education Development Program 2**—In 2010, Australian funding enabled 8.8 million children in over 39,000 schools (including over 3,000 schools in urban slums) to benefit directly from teacher training, school improvements and improved district level planning through the Primary Education Development Program 2. The Government of Bangladesh embraced the School Level Improvement Plans approach of providing funds directly to primary schools. This reform, piloted by UNICEF with Australian funding, devolves responsibility for primary school improvements to the sub-district level of school administration.
	+ **BRAC Basic Education Program**—In 2010 Australia helped over 313,000 students to graduate from BRAC primary schools, of which 97% transitioned to mainstream secondary schools. Over 223,000 children (61% girls) received pre-primary education and 99 % of these children graduated and went on to enrol in mainstream primary schools. In 2010, 2,236 children from Bangladesh’s small ethnic communities completed BRAC pre-primary school.

79% of BRAC’s pre-primary students completed primary school compared to the national average of 50%. This included a 97% pass rate in Grade 5 terminal exams, compared to the national average of 89%. The Program included education for indigenous children from the Chittagong Hills Tracts (CHT) in their local language as well as non-formal education for children in urban slums. The Government of Bangladesh recently introduced pre-primary education into the public system, drawing on the positive experiences of BRAC and other civil society organisations working in this area.

Objective 2.1: Reduce extreme poverty and food insecurity—improve the quality and reach of social protection and food security measures for the poorest and most vulnerable in rural and urban areas.

Approximately 25 million people in Bangladesh (17% of the population) live below or on the lower poverty line and face a multiple set of disadvantages. Women and female-headed households are particularly vulnerable and disproportionately represented in this population, as are ethnic minority groups and people living with disability.

Key results for extreme poverty reduction in 2010

* + **Chars Livelihood Program Phase 2 (CLP II)**—through a delegated cooperation arrangement with the United Kingdom Department for International Development AusAID contributes 10% program funding for CLPII. This program aims to lift 67,000 households (300,500 people) out of extreme poverty, and improve the livelihoods of 1 million people living in the Chars (river islands) by 2016. In 2010 CLP II provided productive assets (for example, livestock and poultry), enterprise training, a daily stipend and subsidised health care—to more than 10,000 families. Further, in 2010: 10,090 people were engaged in cash-for-work activities to counter seasonal variations in cropping cycles and employment; 9,526 families received livestock assets for food security; and 2,393 households were raised above flood level.
	+ **BRAC’s Challenging the Frontiers of Poverty Reduction (CFPR)**—AusAID provided 20% of the funding for BRAC’s CFPR program ($10.7 million) in 2009–10. A total of 462,000 families were lifted out of extreme poverty between 2007 and 2010, as measured by improved income, food security and access to water and sanitation facilities. Through the program, families receive productive assets, skill development training and a daily stipend until they start to earn income from their assets. Families also receive access to basic health care.
* This program is producing solid results, a 2009 BRAC study found that 98% of beneficiary households sustained their improved income generation levels after four years, with participants having an average income 27% higher than non-participants. The study showed that CFPR participants had increased their consumption of protein, spent more on health care and increased their cash savings. Importantly, CFPR has been successful in building confidence among extremely poor women which is a driving force to take their enterprises forward after the support cycle ends. CFPR is also influencing gender-related behaviours with an increase in women and men sharing meals equally and having meals together as well as greater participation of men in childcare, cooking and washing. Due to the project’s success, five NGOs are now replicating CFPR with technical assistance from BRAC.
* **Policy dialogue with the Government of Bangladesh on social protection**—AusAID worked with a small group of other like-minded development partners to encourage greater discussion on social protection with the Government of Bangladesh. This group, initially established as an informal network, has now become a formal group and is working with the Government of Bangladesh to develop a comprehensive social protection framework for Bangladesh.

Objective 2.2: Improve climate change adaptation and disaster risk reduction

In 2010 the Government of Bangladesh directed more time and money to understanding and preparing for natural disasters and the impacts of climate change. Australia started to work more closely with the government and other development partners in the climate change sector.

Key results for climate change and disaster risk reduction in 2010

* **The Government of Bangladesh–United Nations Development Program Comprehensive Disaster Management Program–**Through our support to the Local Disaster Risk Reduction Facility of this program, Australia contributed to the development of a simplified cyclone signalling system and a comprehensive disaster management approach. The program has established a baseline database on national disaster risk reduction initiatives and trained over 670 district management committee members in disaster preparedness at union and district levels for communities considered most-at-risk. The comprehensive disaster management program will help to reduce the vulnerability of communities in 40 districts to disaster risks, build their resilience to the impacts of climate change and develop livelihood security and adaptation strategies.
* **AusAID–Commonwealth Scientific and Industrial Research Organisation Research for Development Alliance** is implementing a major research project with Bangladesh partners to examine groundwater and surface water dynamics.
* **Australian Centre for International Agricultural Research** also has a long-standing relationship with Bangladesh and in 2010 ran a program in Bangladesh to improve cropping systems.

Objective 3: Assist Bangladesh to strengthen leadership and human resource capacity, working with the Government of Bangladesh and civil society institutions

Australian Scholarships in 2010

Scholarships are a valued form of development cooperation between Australia and Bangladesh. Through scholarships, AusAID is strengthening the capacity of the Government of Bangladesh, key partner institutions and is also developing skills and expertise in disadvantaged communities.

* In 2010 75 scholarships were awarded to candidates from Bangladesh for study in Australia, an increase of 60% from the previous year. These included Australian Development Scholarships (ADS) and Australian Leadership Awards. The ADS program aims to develop the human resource base of the Bangladesh public service, build the capacity of ICDDR,B–a partner for the Australian aid program in Bangladesh, and improve the skills of communities living in the Chittagong Hill Tracts.

In 2010, work commenced on adopting a more strategic approach to scholarships. This will involve greater targeting–both within and outside of Government to meet key skills gaps in Bangladeshi government agencies and in civil society institutions that can influence poverty reduction–and using scholarships to empower people from the many small ethnic communities across the breadth of Bangladesh. This approach reflects a stronger results focus in Australia’s scholarships program.

Public Sector Linkages Program

With the support of AusAID’s South Asia Public Sector Linkages Program (PSLP), the Australian National University’s National Centre for Information Systems Research is helping to build e-government capacity in Bangladesh. This is improving the uptake of information and communication technology in the public sector and helping to change an entrenched paper-dependent and inefficient bureaucracy. The project has received a lot of media coverage in Bangladesh, while also being recognised in Australia through the university’s Vice Chancellor’s award for community outreach program in 2010. Other activities funded under PSLP are helping Bangladesh public institutions to address issues around money laundering and terrorism financing, climate change and child malnutrition.

Australian NGO Cooperation Program

The Australian NGO Cooperation Program supports Oxfam, Transformation Empowerment Advocacy Relief (TEAR) Australia, World Vision Australia, Baptist World Aid, Plan International, Fred Hollows, Christian Blind Mission and Interplast to deliver community based social development and disability support activities in Bangladesh in partnership with local organisations.

In 2010, with Australian NGO Cooperation Program funding, the Australian NGO Interplast supported the Bangladeshi Centre for Rehabilitation of the Paralysed to successfully influence the Government of Bangladesh to including burns in its next strategic health policy framework. Disability support projects in Bangladesh are an important area of work given that at least 10% of the population lives with a disability.

Gender

Gender is a priority for Australia’s development assistance to Bangladesh. The BRAC extreme poverty program, for example, is wholly focused on women and female headed households. The education program has a strong focus on girls and female teachers. Likewise, health programs focus on antenatal and postnatal women and their babies. AusAID is working to strengthen gender analysis and approaches to gender inequalities across the program.

Key results for gender in 2010

* The BRAC basic education program funded by Australia enabled over 535,000 girls (60% of BRAC students) to complete pre-primary and primary school. These girls, from the most disadvantaged groups, would otherwise not have had the opportunity to enrol or stay in school. Almost 100% of all BRAC teachers and facilitators at the community learning centres and in the community based adolescent clubs are female. This is in contrast to the national norm where the majority of primary school teachers are male.
* Through UNICEF’s Maternal Neonatal Child Survival project in Bangladesh, Australia supported two ‘women friendly’ hospitals to increase women’s confidence in the formal health system. By 2010 the two facilities had established an information desk for women, developed separate drug dispensing facilities, seating arrangements and separate examination rooms for women.
* In 2010 BRAC provided a comprehensive support package—including productive assets, for example, cows or goats, stipend and training—to over 21,600 extreme poor women in 2010 to develop sustainable income generating enterprises.

Quality of aid activities

Monitoring and evaluation at individual program level is generally strong, but requires more focus, particularly at the country strategy level and for scholarships. Through the Bangladesh country strategy process, AusAID is developing a country program Performance Assessment Framework. This will help AusAID to monitor and evaluate the Bangladesh Program better at the country strategy level.

Quality assessments undertaken in 2010 indicate a high quality program.

Relevance of individual programs was rated as generally good, with most (82%) receiving a rating of good or very good.

Effectiveness was also considered good with 73 % of programs rated as effective. There is a strong focus on women and girls across all programs and AusAID will continue to strengthen gender inequality in Bangladesh. Other key cross cutting issues need to be more consistently addressed and reflected in reporting in 2011, including through studies on urban poverty, ethnic minority groups, disability and gender. Nutrition and food insecurity is another key cross cutting issue needing attention.

AusAID made positive steps towards the Paris Declaration on Aid Effectiveness and the Accra Agenda in Bangladesh in 2010. An important milestone was reached in June 2010 when Australia signed a Joint Cooperation Strategy with the Government of Bangladesh and 18 development partners to improve aid effectiveness in the country. Programming decisions were shaped by a commitment to harmonise assistance and work through the Government of Bangladesh systems including with proposed support for the next phases of education and health-sector approach.

Further efforts to improve donor harmonisation were made by Australia becoming one of six development partner representatives on the Executive Committee of the Local Consultative Group, the coordination mechanism for development assistance in Bangladesh. Australia also engaged in the group plenary and several of its subgroups—health, education, poverty, urban, climate change, water and sanitation, and disaster and emergency relief.

Next steps

Australia’s forward agenda in Bangladesh is to support a more direct relationship with the Government of Bangladesh, while continuing to build upon our current partnerships with local NGOs and other international organisations. AusAID’s Bangladesh program will continue to deliver an increased amount of aid by 2015–16, with a clear focus on results.

Australia plans to review and finalise its strategic objectives for aid in Bangladesh following the release of Australia’s new aid policy in 2011. As part of this process in 2011-12 Australia and the Government of Bangladesh will agree on shared development outcomes. These will be articulated in a Performance Assessment Framework for the Bangladesh program.

To ensure that cross-cutting themes identified in the *Australia’s Strategic Approach to Aid in Bangladesh* are adequately addressed, in 2011 the Bangladesh program will conduct studies on cross-cutting issues. The resulting analysis will be used to develop recommendations on how the Australian aid program can strengthen its support for urban poverty, ethnic minority groups, disability and gender issues, working as much as possible through our existing programs.

A key focus in 2010 was to prepare the Bangladesh program to move towards supporting larger partnerships with the Government of Bangladesh and other development partners. In 2011 AusAID will enter into large Government of Bangladesh-led, multi-donor partnerships in health and education and join with United Kingdom Department for International Development in establishing a Strategic Partnership Agreement with BRAC.

AusAID will continue to build a team of internal managers and specialists to support this new style of engagement in Bangladesh. In 2011-12, the Bangladesh program will conduct workforce planning to ensure the right human resources are on hand to support the effective delivery of aid, as we move towards the expected future overall increase in Australian aid by 2015 to 0.5 % of the Gross National Income.

1. Bangladesh Maternal Mortality Survey released in 2011, co-funded by AusAID. [↑](#footnote-ref-2)
2. National Institute of Population Research and Training (NIPORT) 2011 *Bangladesh Maternal Mortality Survey* .co-funded by AusAID. [↑](#footnote-ref-3)