

# Bangladesh

2004 Josh Estey/CARE



## **Country Snapshot**

Population: 159 million

Life expectancy at birth: 64 years

Adult literacy rate: 54%

Access to improved water source: 80%

GDP per capita: US\$1,241\*

Infant mortality rate: 47 per 1,000 live births

Maternal mortality rate: 570 per 100,000 live births

Sources: UNICEF State of the World's Children Report 2009, \*UNDP Human Development Report 2009

Program Overview CARE started its operations in Bangladesh (then East Pakistan) in 1949. Today, CARE Bangladesh amplifies the voices of the poor and the marginalized in ways that influence public opinion, development practices, and policy at all levels by drawing on grassroots experience and relationships with civil society, government, and the private sector. CARE Bangladesh has made a long-term commitment to specific marginalized and vulnerable groups to achieve a lasting impact on the underlying causes of poverty and social injustice.

#### **Empowerment of Women and Girls**

The underlying causes of marginalization of women and girls in Bangladesh stem from existing patriarchal systems and structures; unequal gender relations; lack of access to and control over resources; and exploitation. All CARE Bangladesh projects have a strong focus on empowering women and girls. CARE works to reduce violence against women and reinforce the fulfillment of women's rights, particularly marginalized women such as sex workers and the rural poor. By working in partnership with the Government of Bangladesh, aid agencies, community-based organizations, research institutions, universities, the private sector, and civil society groups, CARE improves food security for some of the country's poorest and most vulnerable households in remote areas, especially women and girls. One of its largest food security programs, SHOUHARDO, seeks to strengthen livelihoods and accountability of service providers, improve health and nutrition, empower women, achieve preparedness for natural disasters, and improve local governance.

### **Economic Empowerment and Private Sector Partnerships**

CARE coordinates with businesses, government and civil society to enable the poorest and most marginalized, especially women, to share in the benefits of economic growth in Bangladesh. As part of CARE Bangladesh's strategic plan, CARE has been promoting the economic empowerment of the poor by engaging in social processes that build solidarity with these communities, analyzing the underlying causes of extreme poverty, and building relationships with a wide variety of private sector leaders, businesses, and government agencies that provide regulatory frameworks and shape the business environment.







Rick Perera/CARE

Through these relationships, CARE enables poor and marginalized communities to take advantage of existing market opportunities, create new opportunities, and participate more effectively in the economy as wage earners, producers, consumers, traders, and 'middlemen'.

Rick Perera/CARE

#### Civil Society and Pro-poor Governance

CARE Bangladesh works to strengthen civil society, promote accountability and transparency, and empower marginalized communities and women to demand improved governance and recognition of their rights. Projects work in partnership with local aid agencies and local regional government officials and policymakers, with specific goals including improved policies on urban poverty and reducing violence against women.

#### Health and HIV/AIDS

CARE's work in the health sector aims to reduce maternal mortality rates through maternal, neonatal, and reproductive health initiatives. Program goals include improving the quality of and access to services through the country's Department of Family Planning; enabling Bangladeshi organizations to become self-sufficient in providing essential health services; and working in cooperation with private sector employers to improve the lives of factory workers. A key objective of the HIV/AIDS program is to share and disseminate the lessons learnt from CARE's extensive field experience in order to influence Bangladesh's national HIV policies, resource allocation and programming.

## Disaster Risk Reduction, Emergency Response and Climate Change

CARE provides immediate emergency supplies and relief when a disaster hits, and works with survivors in the long term to help them rebuild. To reduce the impact of future disasters, CARE works with communities to implement mitigation and risk-reduction strategies, for example in the floodprone areas of Sunamqonj district. CARE helps communities implement flood-risk reduction measures, protect crops and household assets, and build capacity of community institutions and links with government and non-government service providers. CARE has responded to all major disasters including the 2007 Cyclone Sidr, providing emergency relief to more than 500,000 survivors.

#### **Food Security**

CARE works with communities to develop solutions to the underlying causes (e.g., discrimination and social exclusion) of long-term food insecurity. CARE assists communities living in highly vulnerable geographic areas such as the wetlands of northeastern Bangladesh. Throughout its work CARE has supported local ownership and capacity building.

#### **Major Donors**

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