



# Epidemiological Highlights

Week 49 (27 Nov-3 Dec) 2022



World Health  
Organization

# Highlights: COVID-19

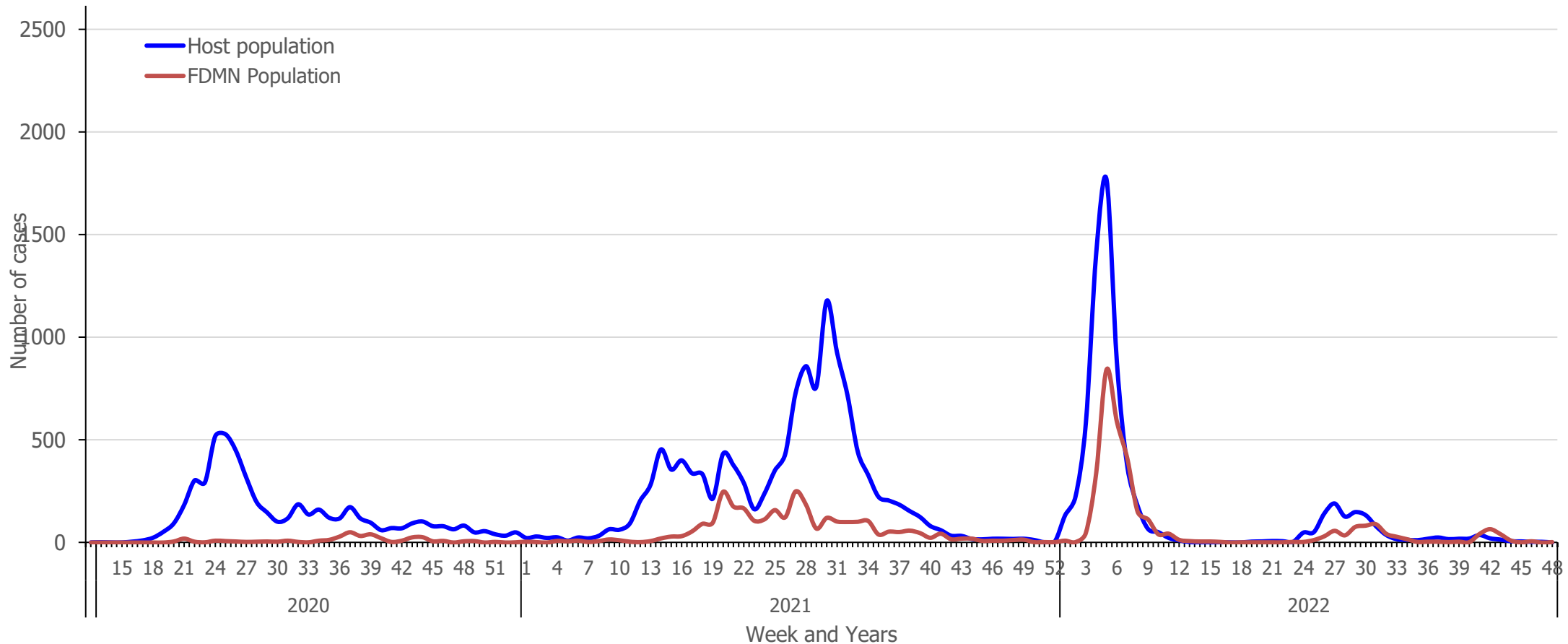
## **FDMN: Transmission almost under control (declining testing as caseload heads to zero)**

- **Two (02)** new confirmed cases were reported this week taking the total confirmed cases so far to **6585**
- The two cases were reported in camp 03 and 20 Ext
- Weekly Testing Positivity Rate (TPR) is **0.5%** while case incidence/new infections is 2.2 cases/1 million/week
- No new death reported, total deaths stabilized at **46** (CFR of 0.7%)
- Level of recovery continues to steady at 99%

## **Host Population: Steady decline in trends of cases (low weekly testing & few caseloads)**

- **No new** case reported this week (**3 cases** reported last week), cumulative cases remain **24,643**
- Weekly TPR and case incidence/new infection is **zero(0)**
- Recovery level continues to remain steady at 99%
- No new death and total deaths stand at 269 (CFR-1.1%)

# Highlights: COVID-19



**FDMNs:** 02 new confirmed cases were reported this week, and the weekly Test Positivity Rate(TPR) is 0.5%

**Host Population:** No new cases were reported this week hence Weekly TPR(%) and case incidence were 0

# EWARS Reporting Updates

Currently, a total of 161 health facilities are registered in EWARS

- Only 136/161 weekly reports were received on time in week 49
- Timeliness of reporting for this week was 85%
- Forty-eight (48) alerts were triggered
- All alerts were reviewed and verified by the WHO EWARS team; this was less than that of the previous week (95 alerts in week 48, 2022)

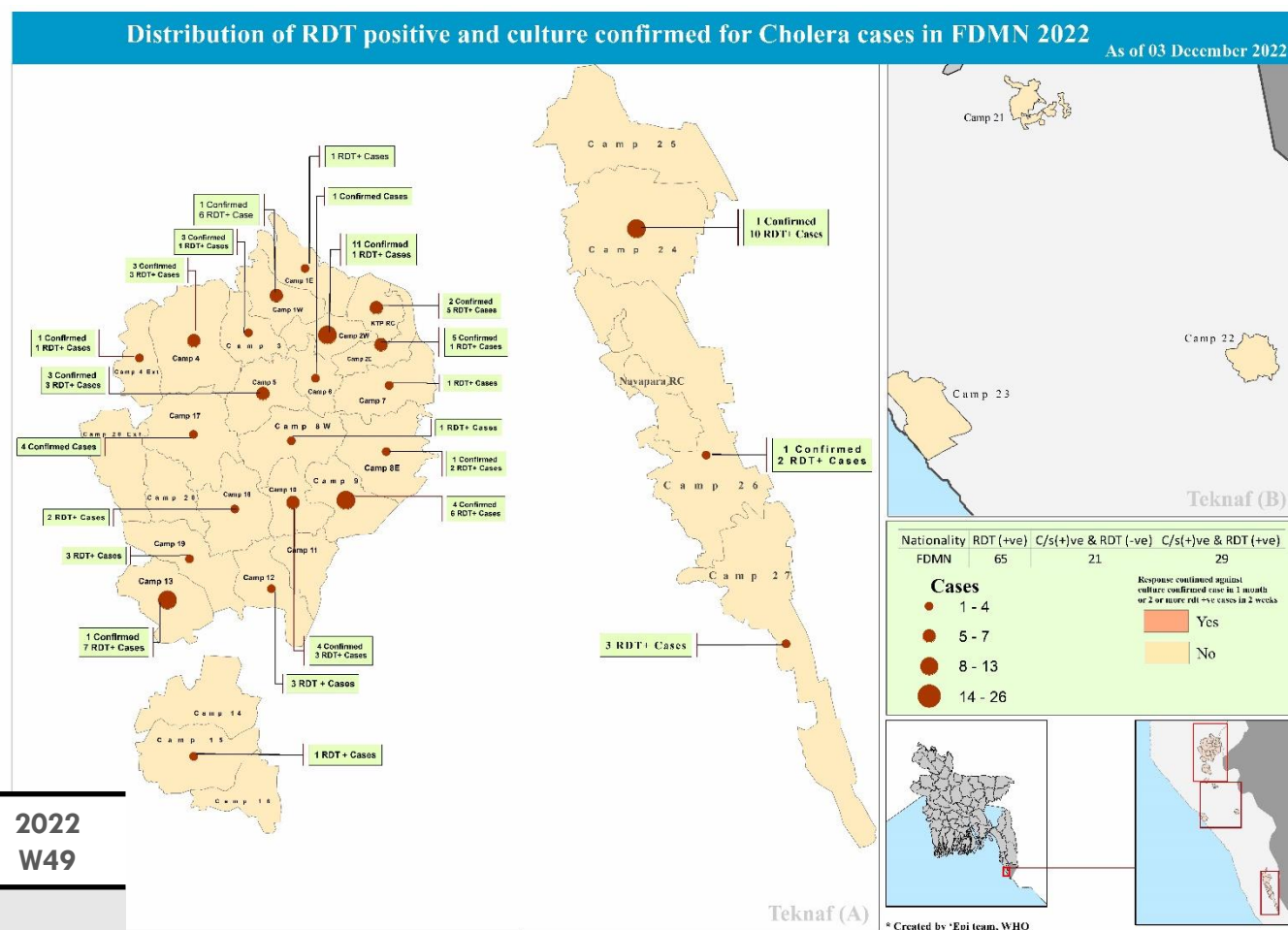
# Highlights: Morbidities and Mortalities

- Acute Respiratory Infections (17.2%), Diarrheal Diseases (4.0%) & Injuries, and Wounds (2.1%) were the diseases and health conditions with the highest proportional morbidity in week 49.
- Monitoring of suspected SARI death under enhanced Community-based mortality surveillance has been continued since week 28, 2020. A total of 133 SARI deaths have so far been reported in 2022 of which seven (07) deaths upon an investigation of all SARI deaths were reclassified as probable COVID-19 Deaths
- This Epi week, two new SARI death was reported as highlighted below:

Year	Suspected SARI death reported (current week)	Reclassified as death due to probable COVID-19
2022	133 (2)	7
2021	96	15
2020	49	2

# Cholera/AWD Surveillance Updates

- In this week, there is two (02) new cultured confirmed Cholera cases were reported, among samples sent for testing.
- In 2022 total of one hundred sixty-five (167) RDT-positive AWD cases/ cholera suspected cases including 68 culture-confirmed Cholera cases reported as of Epi Week 49 2022.
- Cumulatively there are 859 RDT and culture-confirmed cholera cases of which 400 cases were culture-confirmed since transmission in 2018



	2018	2019	2020	2021	2022 W49
--	------	------	------	------	----------

**RDT positive AWD cases & culture confirmed for Cholera cases**

	49	258	28	357	167
--	----	-----	----	-----	-----

**Culture confirmed for Cholera**

	7	184	5	136	68
--	---	-----	---	-----	----

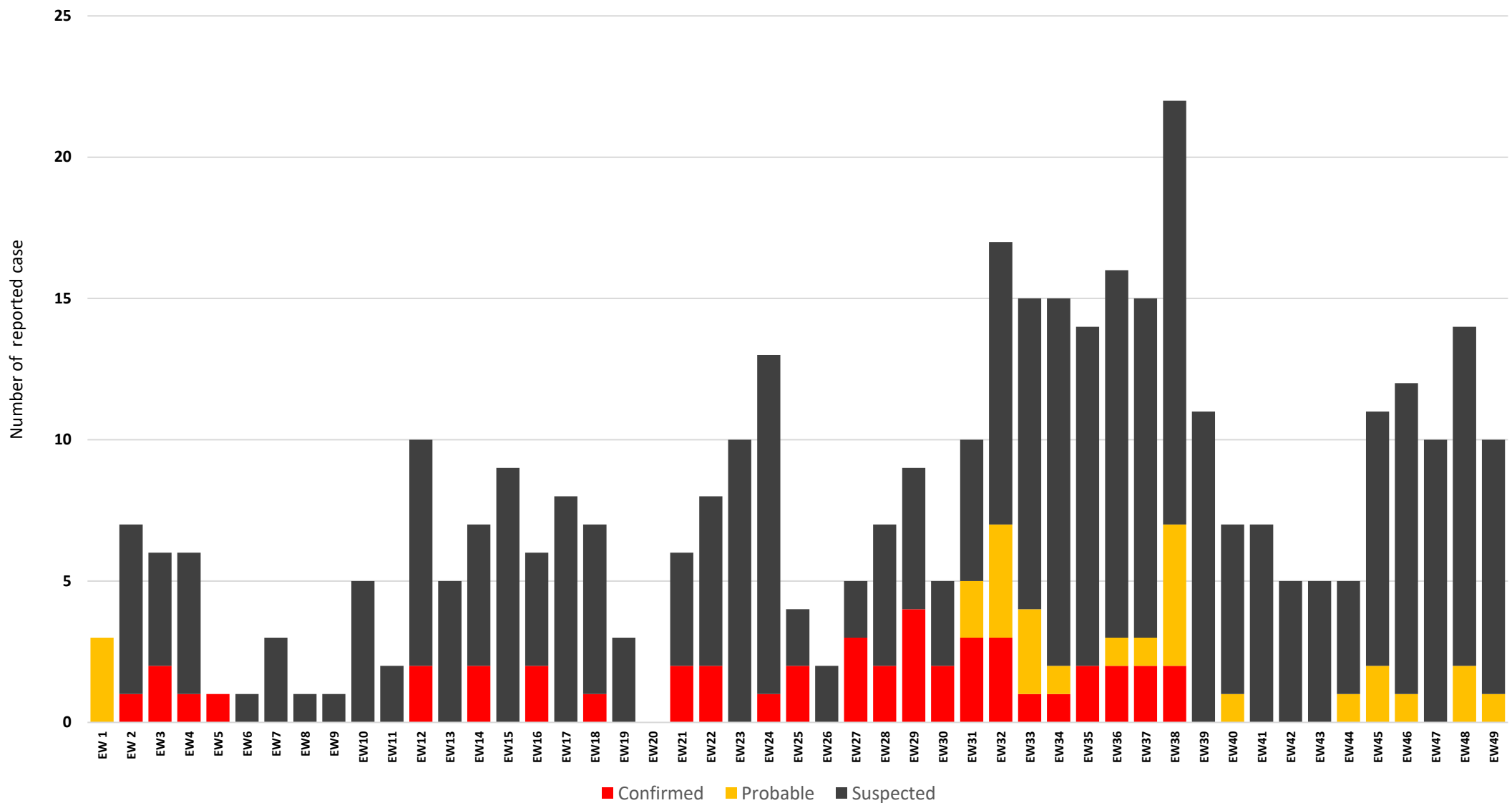
# Diphtheria Surveillance Updates

- One (1) probable and nine (9) suspected diphtheria cases were reported in go.data in this Epi week 49
- The last confirmed case was reported on 14 September 2022
- In total 54 deaths have so far been reported since 2017, with the last death reported on 18 October 2022

Classification	2017	2018	2019	2020	2021	2022
Confirmed	66	226	31	19	30	46
Probable	1154	1555	60	9	29	28
Suspected	1796	3549	523	198	118	307
Death	30	14	3	0	5	2

# Trends of Diphtheria cases

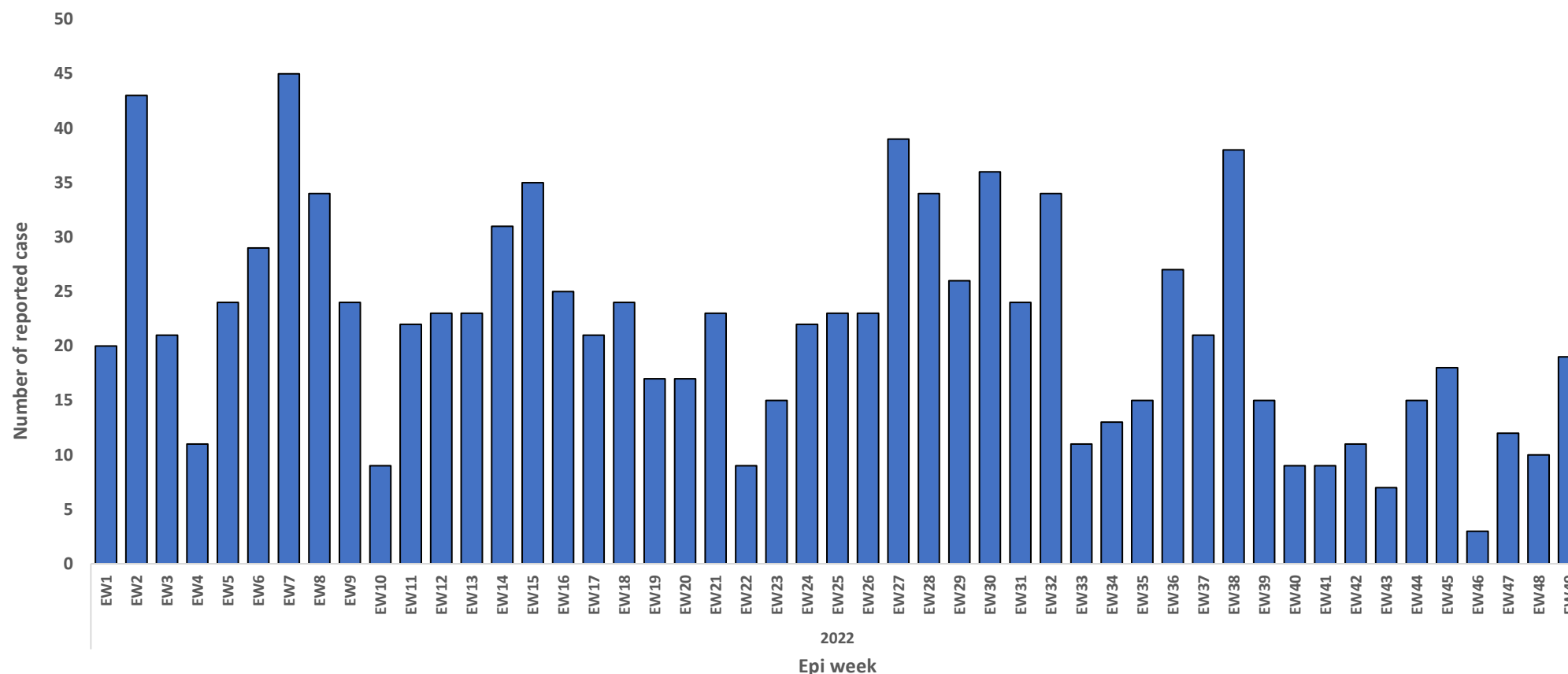
Total number of diphtheria case reported in EWARS from week 1-49, 2022





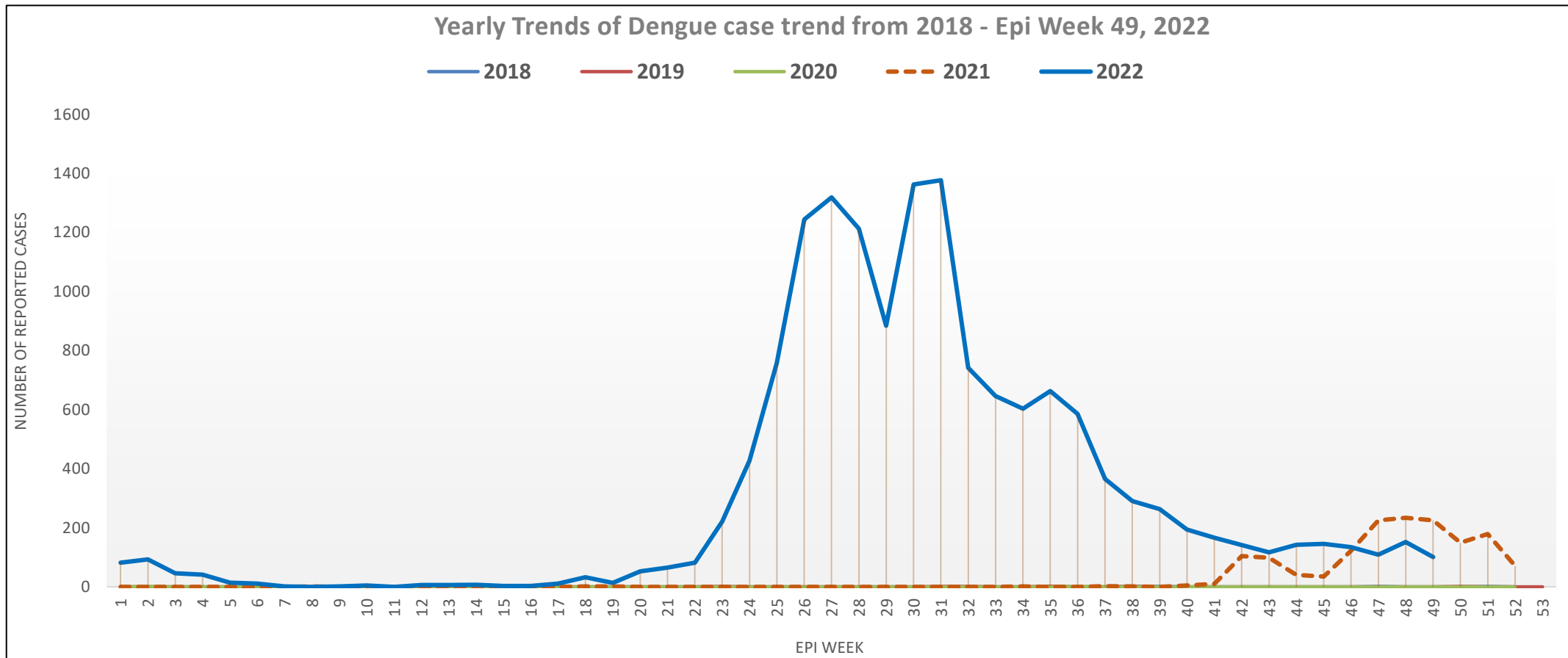
# Epi Curve of Suspected Measles Cases

Total number of Measles case reported in EWARS from week 1-49, 2022



- > In week 49, 19 suspected measles cases were reported through weekly reporting. This brings the total number of suspected measles cases to 1,059 reported in 2022
- > About 55% (579/1,059) of the total suspected measles cases were reported through case-based reporting and samples collected for laboratory confirmation

# Dengue Surveillance Updates



- ❑ Overall level of infection continues to decline in the past 16 weeks and transmission significantly reduced as weekly cases continue to drop
- ❑ Camp 3 and the three camps around it bear the greatest burden of confirmed cases so far reported as the main transmission foci but the level of transmission is equally declining in these camps

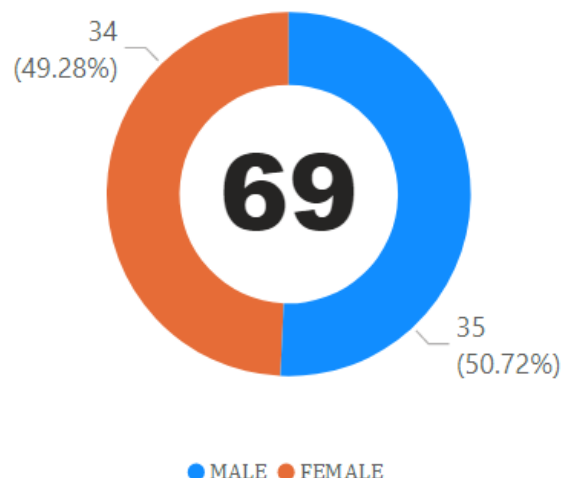
# Community-based Mortality surveillance updates Epi week 49

Probable causes of death	Epi week 49	In 2022
Still Birth	1 (1%)	211 (10%)
Neonatal Death (<28 days old)	8 (12%)	218 (11%)
Infectious Disease	2 (3%)	169 (8%)
Severe Acute Respiratory Infection (SARI)	2 (3%)	52 (3%)
Injury	--	42 (2%)
Maternal Death	2 (6%)	42 (2%)
Acute Malnutrition	--	1 (0%)
Other	54 (78%)	1315 (64%)
<b>Total</b>	<b>69 (100%)</b>	<b>2050 (100%)</b>

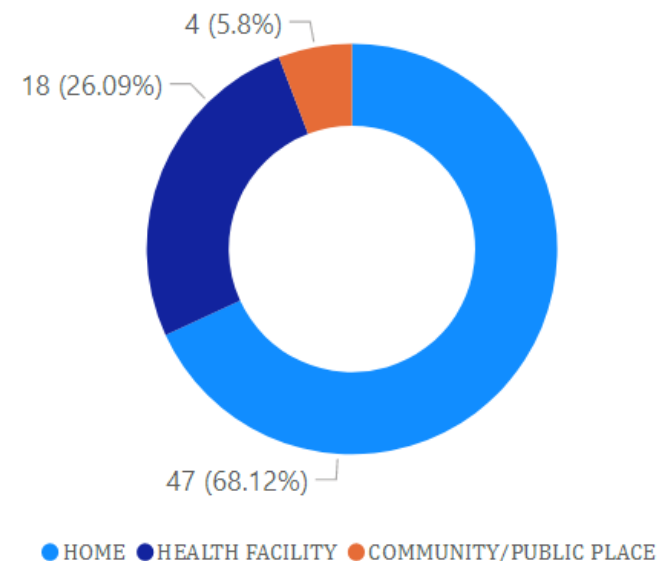
Partners to report all mortalities into the EWARS platform using both case and event-based reporting as applicable

# Community-based Mortality surveillance updates Epi week 49

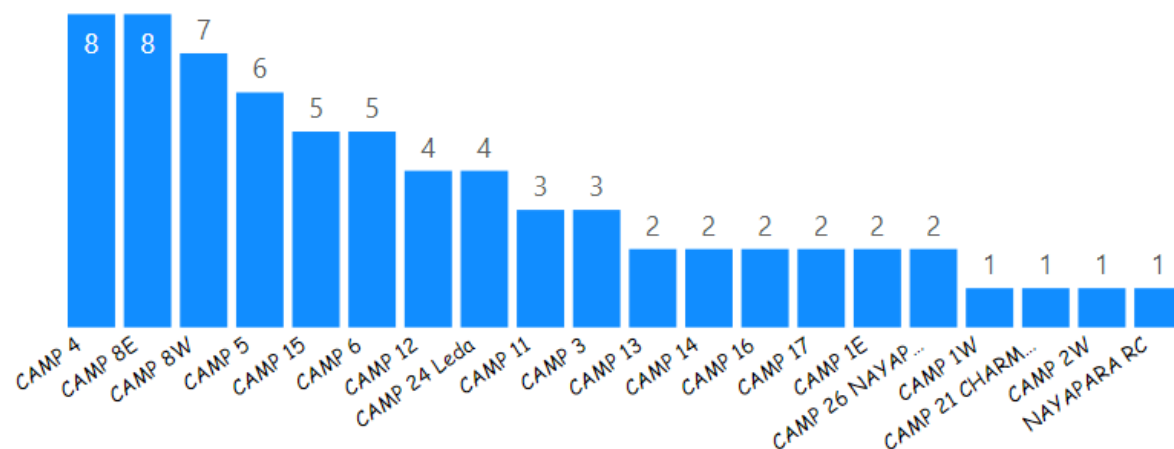
**Gender distribution**



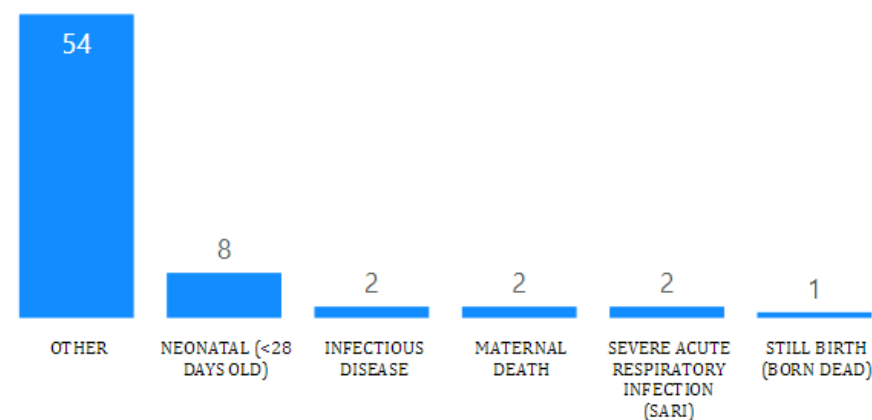
**Place of death**



**Distribution of deceased Camp**



**Distribution of Probable cause of death**



# Bangladesh

Rohingya Emergency Response

Early Warning, Alert and  
Response System (EWARS)

Epidemiological Bulletin W49 2022



Ministry of Health and Family  
Welfare Bangladesh



World Health  
Organization



HEALTH SECTOR  
COX'S BAZAR



Printed: 05:15 Thursday, 08 December 2022 UTC

# Contents

## Highlights

Slide 1	<b>Table 1</b> Coverage
	<b>Table 2</b> Early warning performance
	<b>Table 3</b> Alert performance

## Early Warning

Slide 2	<b>Map 1a</b> Ukhia completeness by site/zone
	<b>Map 1b</b> Teknaf completeness by site/zone
Slide 3	<b>Table 4</b> Ukhia (Northern group) performance by site/zone
	<b>Map 2</b> Ukhia (Northern group) completeness by site/zone
Slide 4	<b>Table 5</b> Ukhia (Southern group) performance by site/zone
	<b>Map 3</b> Ukhia (Southern group) completeness by site/zone
Slide 5	<b>Table 6</b> Teknaf performance by site/zone
	<b>Map 4</b> Teknaf completeness by site/zone
Slide 6	<b>Table 7</b> Performance by partner

## Alert

Slide 7	<b>Table 8</b> Ukhia (Northern group) alerts by site/zone
	<b>Map 5</b> Ukhia (Northern group) alerts site/zone
Slide 8	<b>Table 9</b> Ukhia (Southern group) alerts by site/zone
	<b>Map 6</b> Ukhia (Southern group) alerts site/zone
Slide 9	<b>Table 10</b> Teknaf alerts by site/zone
	<b>Map 7</b> Teknaf alerts site/zone
Slide 10	<b>Table 11</b> Performance by type of alert
	<b>Table 12</b> Risk Assessment

## Sources of data

1. Weekly EWARS Reporting Form
2. Mortality Case Report Form
3. Event-based Surveillance Form

## Highlights W49 2022

**Table 1 | Coverage**

#	%	
<b>918,841</b>	-	Estimated total Rohingya population <sup>1</sup>
<b>902,066</b>	<b>98%</b>	Total population under surveillance
<b>175</b>	-	Total number of health facilities
<b>161</b>	<b>92%</b>	Number of EWARS reporting sites

**Table 2 | Early warning performance indicators**

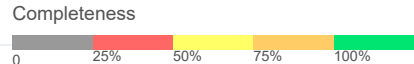
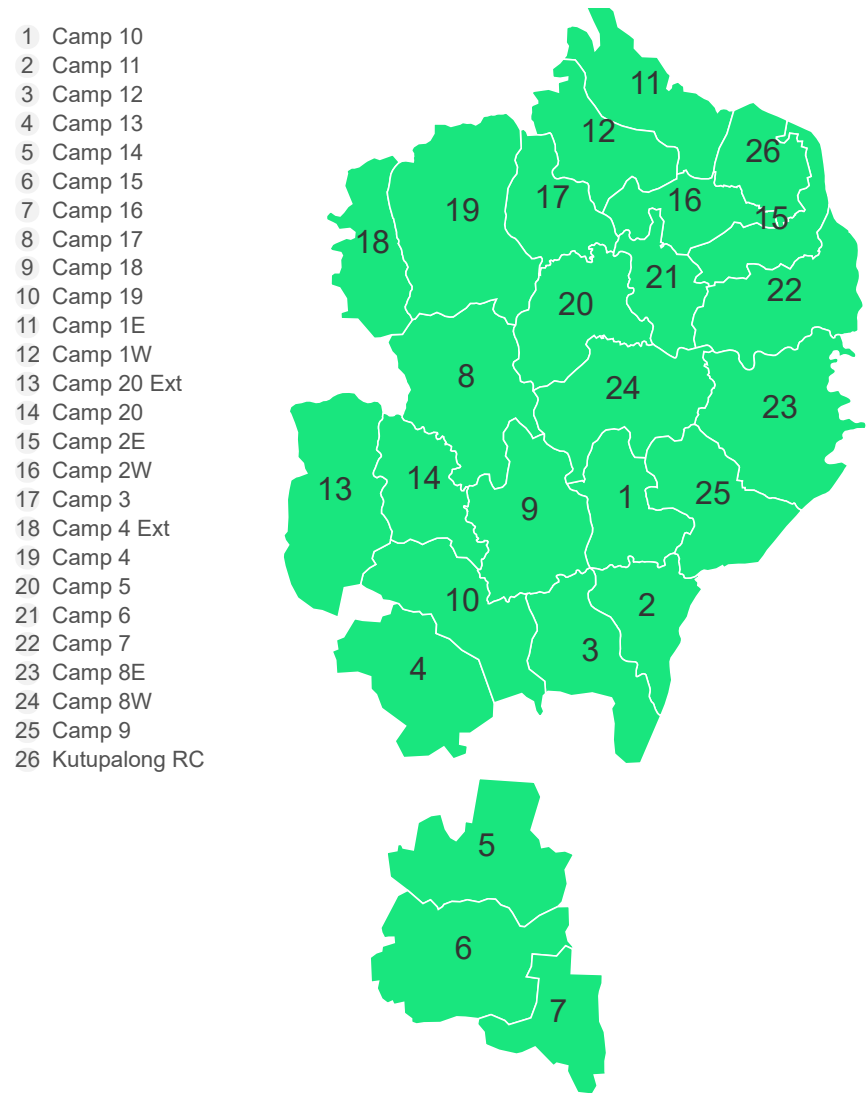
W49	Cumulative (2022)	
<b>136</b>	<b>7775</b>	Number of weekly reports received
<b>84%</b>	<b>93%</b>	Completeness
<b>84%</b>	<b>91%</b>	Timeliness

**Table 3 Alert performance indicators**

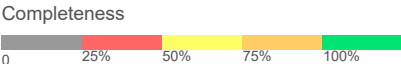
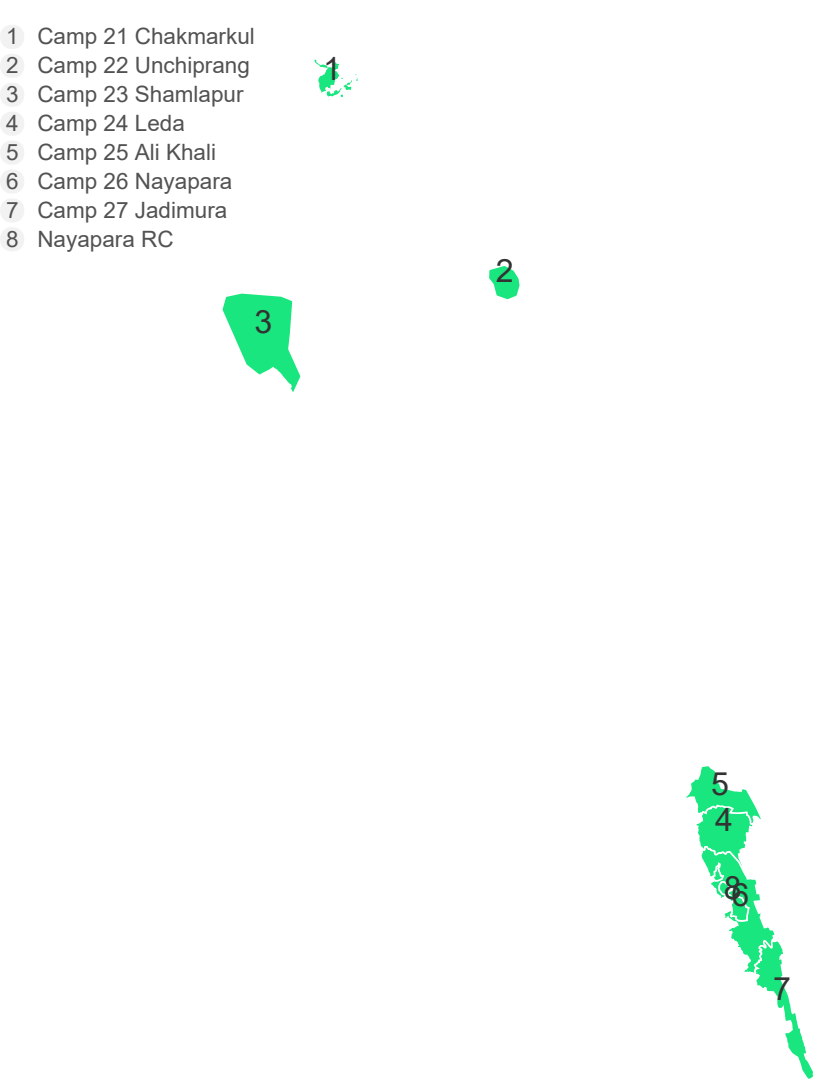
W49	Cumulative (2022)	
<b>48</b>	<b>4,511</b>	Total alerts raised
<b>100%</b>	<b>100%</b>	% verified
<b>0%</b>	<b>0%</b>	% auto-discarded
<b>0%</b>	<b>0%</b>	% undergoing risk assessment
<b>0%</b>	<b>0%</b>	% completed risk assessment

<sup>1</sup> Source: UNHCR. Bangladesh: Joint Government of Bangladesh- UNHCR Population Factsheet. 31 December 2021.

Map 1a | Ukhia completeness by camp



Map 1b | Teknaf completeness by camp



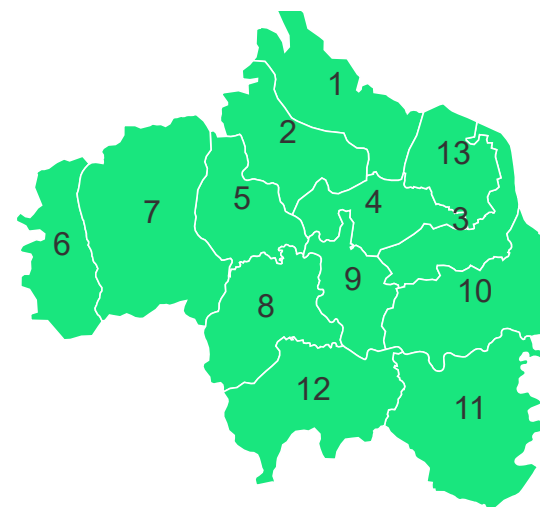


**Table 4 | Performance by camp (W49 2022)**

Northern group	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
Ukhia Northern Group				
Camp 1E	3	3	100%	0%
Camp 1W	5	5	100%	0%
Camp 2E	3	3	100%	0%
Camp 2W	3	4	100%	0%
Camp 3	5	4	80%	0%
Camp 4	5	4	80%	0%
Camp 4 Ext	1	1	100%	0%
Camp 5	5	4	100%	0%
Camp 6	3	3	100%	0%
Camp 7	6	3	50%	0%
Camp 8E	7	7	71%	0%
Camp 8W	4	4	100%	0%
Kutupalong RC	2	2	100%	0%

**Map 2 | Completeness by camp**

- 1 Camp 1E
- 2 Camp 1W
- 3 Camp 2E
- 4 Camp 2W
- 5 Camp 3
- 6 Camp 4 Ext
- 7 Camp 4
- 8 Camp 5
- 9 Camp 6
- 10 Camp 7
- 11 Camp 8E
- 12 Camp 8W
- 13 Kutupalong RC



Completeness



Table 5 | Performance by camp (W49 2022)

Southern group	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
Ukhia Southern Group				
Camp 10	4	3	75%	0%
Camp 11	6	6	100%	0%
Camp 12	6	4	100%	0%
Camp 13	9	6	89%	0%
Camp 14	6	5	100%	0%
Camp 15	8	7	88%	13%
Camp 16	7	6	100%	0%
Camp 17	5	5	80%	0%
Camp 18	4	4	100%	0%
Camp 19	4	4	100%	0%
Camp 20	4	2	75%	0%
Camp 20 Ext	3	3	100%	0%
Camp 9	6	5	100%	0%

Map 3 | Completeness by camp

- 1 Camp 10
- 2 Camp 11
- 3 Camp 12
- 4 Camp 13
- 5 Camp 14
- 6 Camp 15
- 7 Camp 16
- 8 Camp 17
- 9 Camp 18
- 10 Camp 19
- 11 Camp 20 Ext
- 12 Camp 20
- 13 Camp 9

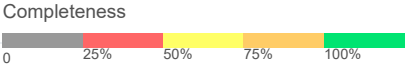
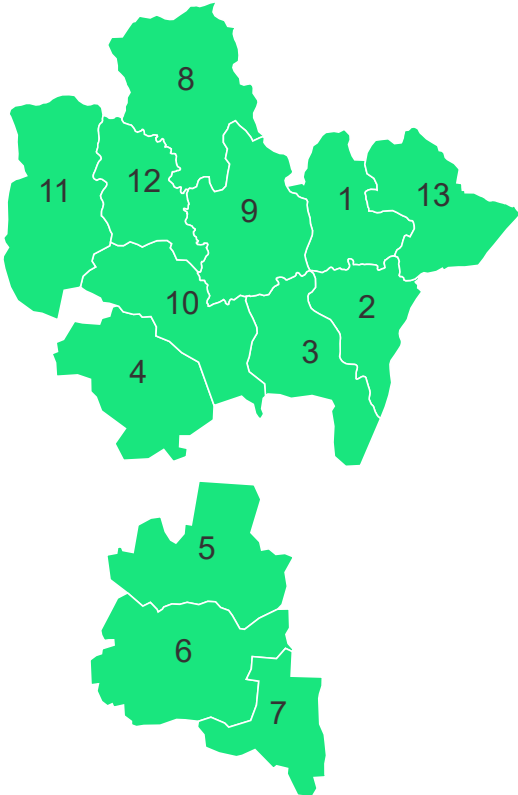


Table 6 | Performance by camp (W49 2022)

Teknaf	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
Ukhia Teknaf				
Camp 21 Chakmarkul	4	4	75%	0%
Camp 22 Unchiprang	5	3	60%	0%
Camp 23 Shamlapur	3	2	67%	0%
Camp 24 Leda	2	1	50%	0%
Camp 25 Ali Khali	3	2	100%	0%
Camp 26 Nayapara	5	5	100%	0%
Camp 27 Jadimura	2	2	100%	0%
Nayapara RC	2	2	100%	0%

Map 4 | Completeness by camp

- 1

Camp 21 Chakmarkul
- 2

Camp 22 Unchiprang
- 3

Camp 23 Shamlapur
- 4

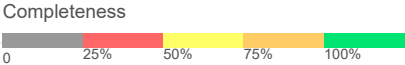
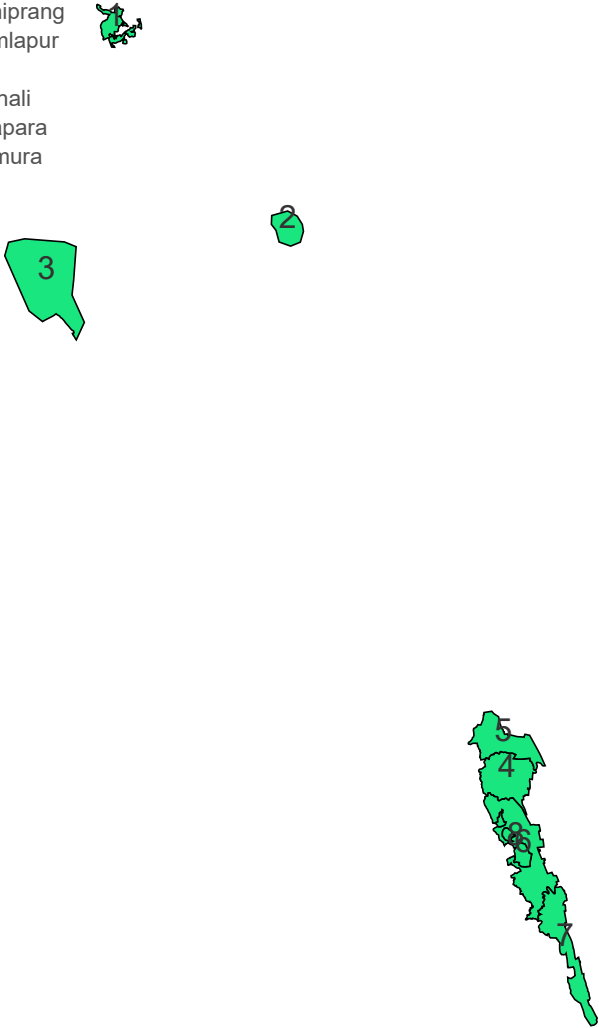
Camp 24 Leda
- 5

Camp 25 Ali Khali
- 6

Camp 26 Nayapara
- 7

Camp 27 Jadimura
- 8

Nayapara RC



**Table 7** | Performance by partner (W49 2022)

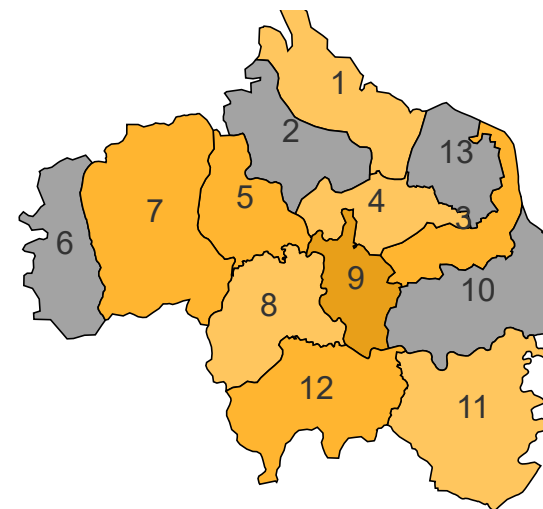
Partner	Performance		Reporting		Partner	Performance		Reporting	
	# sites	# reports received	Completeness	Timeliness		# sites	# reports received	Completeness	Timeliness
AKF	1	1	100%	100%	IRC	4	3	0%	0%
AWARD	6	6	100%	100%	MSF	9	8	0%	0%
BASHMAH	1	1	100%	100%	MoH	12	10	0%	0%
BDRCS	11	10	91%	91%	MHI	0	0		
BRAC	0	11	100%	100%	Medair	0	0		
CARE	4	4	100%	100%	FH/MTI	4	4	0%	0%
GH/CPI	1	1	100%	100%	PRANTIC	1	1	100%	100%
DBC	1	1	100%	100%	PULSE	1	1	100%	100%
DSK	1	0	0%	0%	QC	1	1	100%	100%
DCHT-PWJ	1	1	100%	100%	PHD	10	10	0%	0%
FRNDS	6	0	0%	0%	RPN	2	2	100%	100%
GK	10	10	0%	0%	RHU	3	3	100%	0%
Global One	1	1	100%	100%	RI	3	3	0%	0%
GUSS	1	1	100%	100%	RTMI	9	7	0%	0%
HAEFA	2	2	100%	100%	SALT	1	1	100%	100%
HAIB	0	0			SCI	7	6	0%	0%
HMBDF	2	2	0%	0%	DCHT-MM	1	1	100%	100%
HOPE	1	0	0%	0%	Turkish Government	1	1	100%	100%
ICRC	1	2	200%	200%	TdH	2	2	0%	0%
IOM	23	22	0%	0%					

Table 8 | Performance by camp

Northern group	W49		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
Alerts Northern group				
Camp 1E	1	100%	85	100%
Camp 1W	0	0%	219	100%
Camp 2E	4	100%	440	100%
Camp 2W	1	100%	149	100%
Camp 3	3	100%	207	100%
Camp 4	5	100%	182	100%
Camp 4 Ext	0	0%	66	100%
Camp 5	2	100%	144	100%
Camp 6	6	100%	111	100%
Camp 7	0	0%	97	100%
Camp 8E	2	100%	88	100%
Camp 8W	3	100%	244	100%
Kutupalong RC	0	0%	80	100%

Map 5 | Number of alerts by camp

- 1 Camp 1E
- 2 Camp 1W
- 3 Camp 2E
- 4 Camp 2W
- 5 Camp 3
- 6 Camp 4 Ext
- 7 Camp 4
- 8 Camp 5
- 9 Camp 6
- 10 Camp 7
- 11 Camp 8E
- 12 Camp 8W
- 13 Kutupalong RC



# of alerts

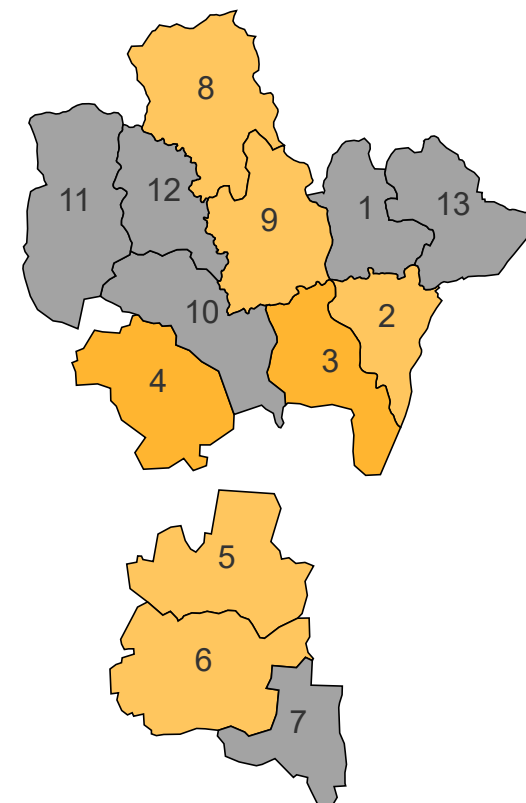


Table 9 | Performance by camp

Southern group	W49		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
Alerts Northern group				
Camp 10	0	0%	97	100%
Camp 11	2	100%	133	100%
Camp 12	3	100%	145	100%
Camp 13	3	100%	160	100%
Camp 14	1	100%	96	100%
Camp 15	2	100%	179	100%
Camp 16	0	0%	144	100%
Camp 17	2	100%	121	100%
Camp 18	2	100%	197	100%
Camp 19	0	0%	72	100%
Camp 20	0	0%	78	100%
Camp 20 Ext	0	0%	66	100%
Camp 9	0	0%	240	100%

Map 6 | Number of alerts by camp

- 1 Camp 10
- 2 Camp 11
- 3 Camp 12
- 4 Camp 13
- 5 Camp 14
- 6 Camp 15
- 7 Camp 16
- 8 Camp 17
- 9 Camp 18
- 10 Camp 19
- 11 Camp 20 Ext
- 12 Camp 20
- 13 Camp 9



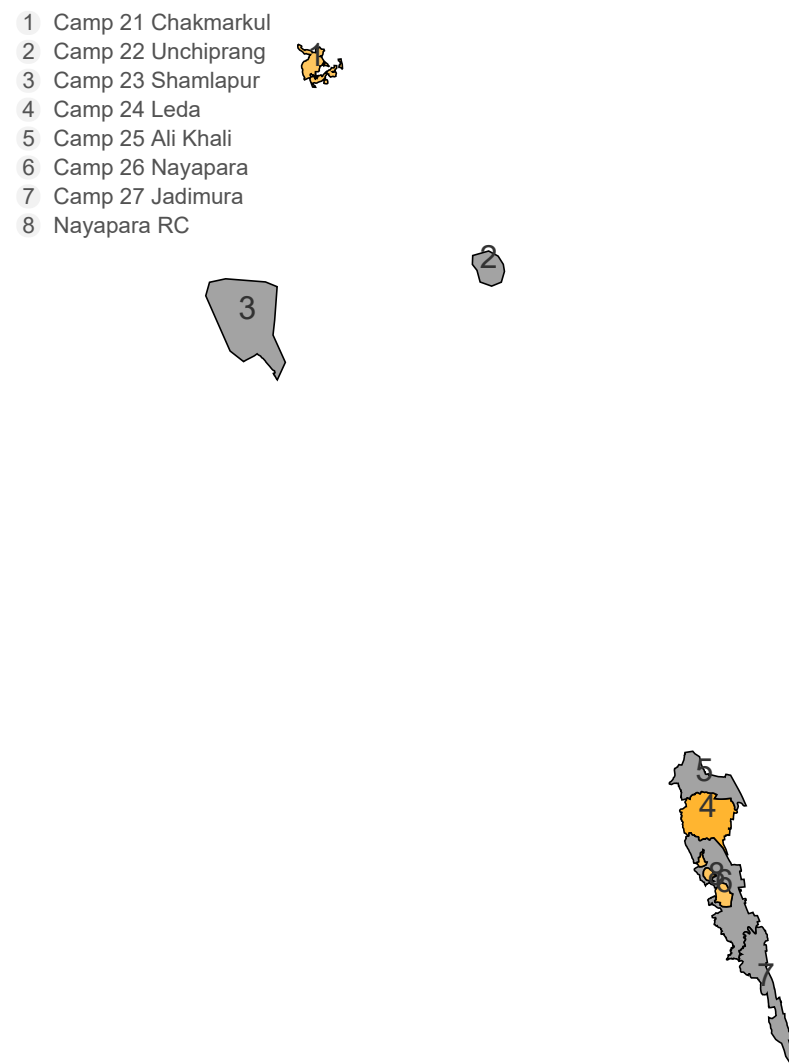
# of alerts



### Table 10 | Performance by camp

Teknaf	W49		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
Alerts Northern group				
Camp 21 Chakmarkul	1	100%	63	100%
Camp 22 Unchiprang	0	0%	80	100%
Camp 23 Shamlapur	0	0%	17	100%
Camp 24 Leda	4	100%	126	100%
Camp 25 Ali Khali	0	0%	40	100%
Camp 26 Nayapara	0	0%	145	100%
Camp 27 Jadimura	0	0%	71	100%
Nayapara RC	1	100%	42	100%

### Map 7 | Number of alerts by camp



# of alerts



**Table 11** | Performance by type of alert

Event	W49		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
<b>Indicator-based surveillance</b>				
Malaria	0	0%	3	100%
Measles	0	0%	482	100%
Bloody Diarr.	0	0%	0	0%
AFP	0	0%	37	100%
Meningitis	0	0%	31	100%
Haem. fever (susp.)	0	0%	47	100%
NNT	0	0%	3	100%
Unexp. fever	0	0%	135	100%
AWD	0	0%	220	100%
ARI	0	0%	199	100%
AJS	0	0%	112	100%
Varicella (Susp.)	0	0%	107	100%
Suspected COVID-19	0	0%	0	0%
<b>Event-based surveillance</b>				
EBS total	1	100%	224	100%

**Table 12** | Risk assessment

W49	Cumulative (2022)	
0	9	Low risk
0	1	Moderate risk
0	0	High risk
0	0	Very high risk



## For more help and support, please contact:

Dr. Imrul Kayes  
Medical Officer - Civil Surgeon Office (MO-CS)  
Ministry of Health and Family Welfare  
Cox's Bazar, Bangladesh  
Telephone: +88 01726296025  
Email: mailkayesk65@gmail.com

Dr. David Odhiambo Otieno  
Team Lead\_Epidemiology  
World Health Organization  
Cox's Bazar, Bangladesh  
Telephone: +88 017 01202994  
Email: otienod@who.int

## Notes

WHO and the Ministry of Health and Family Welfare gratefully acknowledge all partners who have reported the data used in this bulletin.

The data been collected with support from the EWARS project. This is an initiative to strengthen early warning, alert and response in emergencies. It includes an online, desktop and mobile application that can be rapidly configured and deployed in the field. It is designed with frontline users in mind, and built to work in difficult and remote operating environments. This bulletin has been automatically published from the EWARS application.

More information can be found at <http://ewars-project.org>

Sign up for an account with EWARS Bangladesh at <http://bd.ewars.ws>



Ministry of  
Health and  
Family  
Welfare  
Bangladesh



World Health  
Organization



HEALTH SECTOR  
COX'S BAZAR



Global  
**EWARS**

# Bangladesh

## Rohingya Emergency Response

## Early Warning, Alert and Response System (EWARS)

Annex W49 2022



Ministry of Health and Family  
Welfare Bangladesh



World Health  
Organization



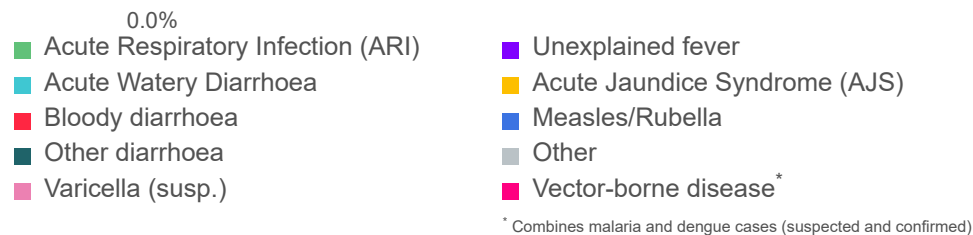
HEALTH SECTOR  
COX'S BAZAR



Printed: 05:08 Thursday, 08 December 2022 UTC

# Proportional morbidity

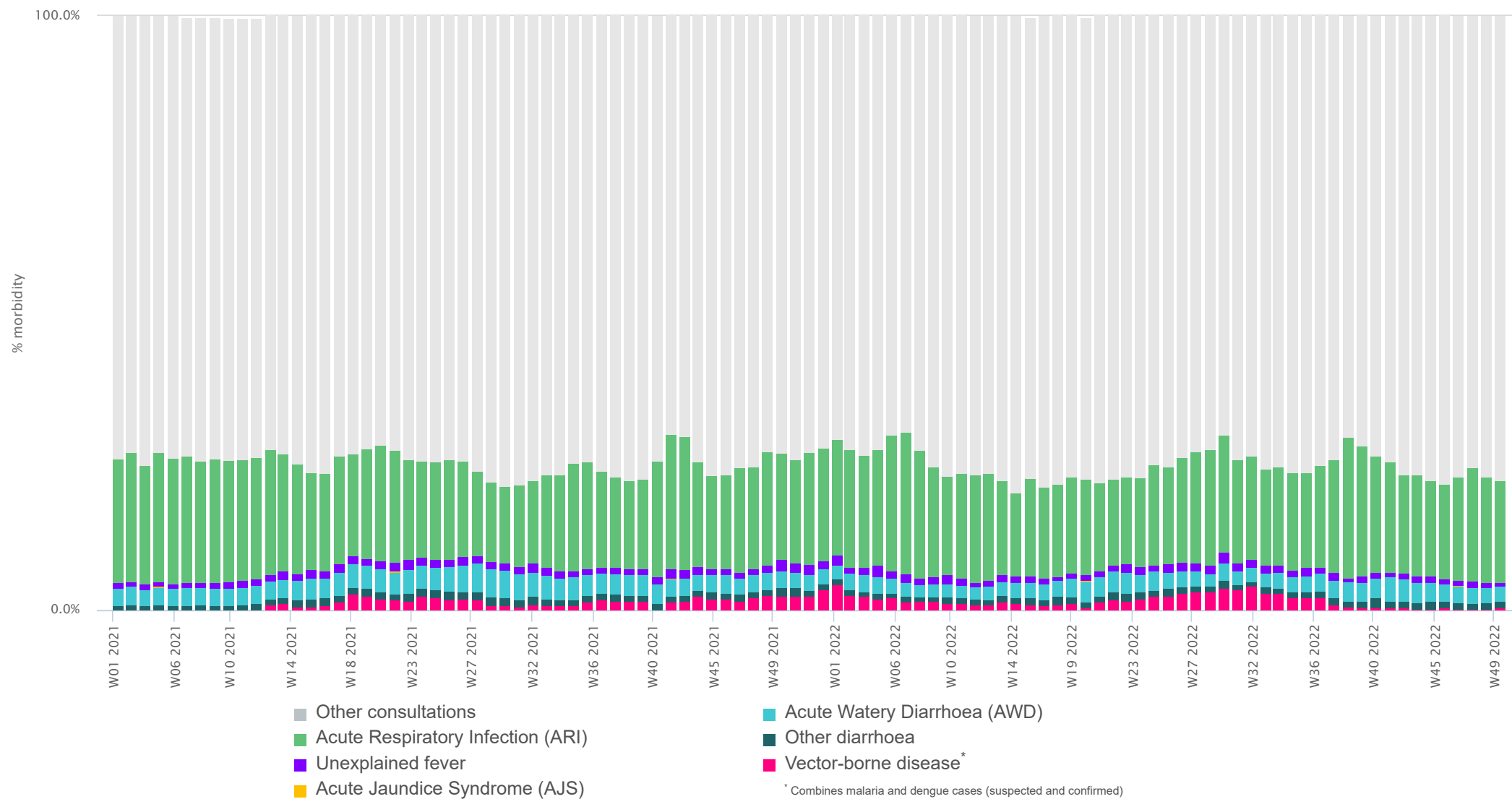
**Figure 1 | Proportional morbidity (W49 2022)**



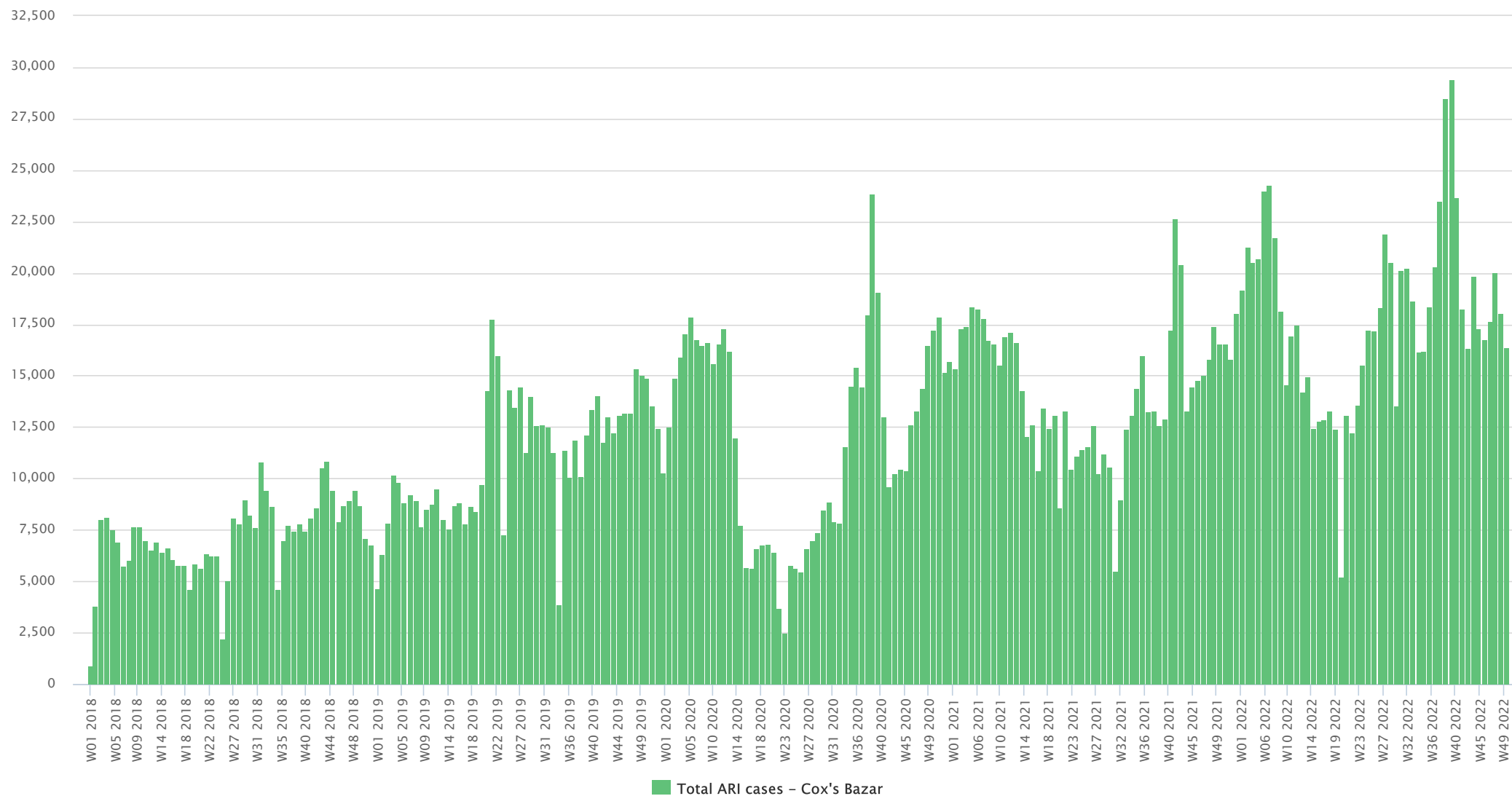
Disease	W49		2022	
	# cases	% morbidity	# cases	% morbidity
AWD	2,538	2.5%	140,027	2.8%
Bloody diarr.	344	0.3%	17,267	0.3%
Other diarr.	1,228	1.2%	54,535	1.1%
Susp. Varicella	45	0.0%	9,266	0.2%
ARI	17,172	17.2%	907,567	17.9%
Measles/Rub.	19	0.0%	1,169	0.0%
AFP	0	0.0%	75	0.0%
Susp. menin.	3	0.0%	186	0.0%
AJS	28	0.0%	1,257	0.0%
Susp. HF	8	0.0%	430	0.0%
Neo. tetanus	0	0.0%	9	0.0%
Adult tetanus	0	0.0%	19	0.0%
Malaria (conf.)	1	0.0%	386	0.0%
Malaria (susp.)	60	0.1%	53,249	1.0%
Dengue (conf.)	214	0.2%	19,801	0.4%
Dengue (susp.)	32	0.0%	8,545	0.2%
Unexpl. fever	641	0.6%	58,481	1.2%
Sev. Malnut.	57	0.1%	2,402	0.0%
Inj./Wounds	2,126	2.1%	105,949	2.1%
Other	75,152	75.3%	3,694,555	72.7%
<b>Total</b>	<b>99,104</b>	<b>100%</b>	<b>5,083,125</b>	<b>100%</b>

## Trend in consultations and key diseases

**Figure 2** | Trend in proportional morbidity for key diseases (W49)

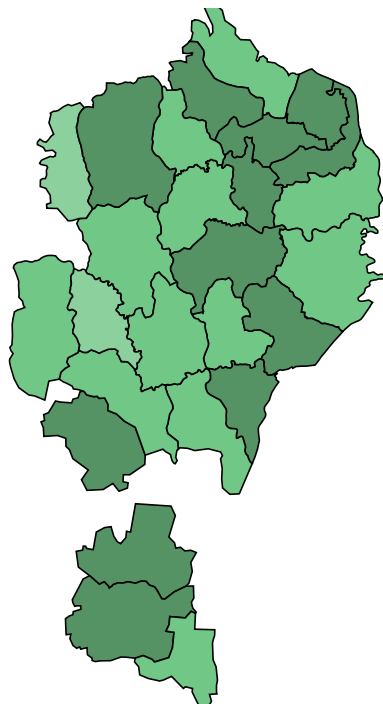


**Figure 3** | Trend in number of cases over time (W38 2017 - W49 2022)

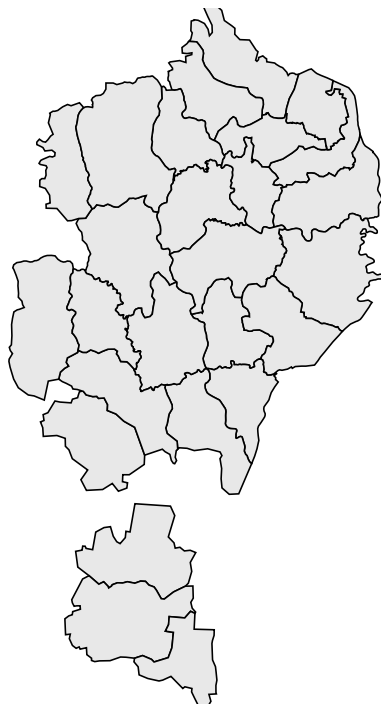


**Map 1** | Map of cases by camp (W49 2022)

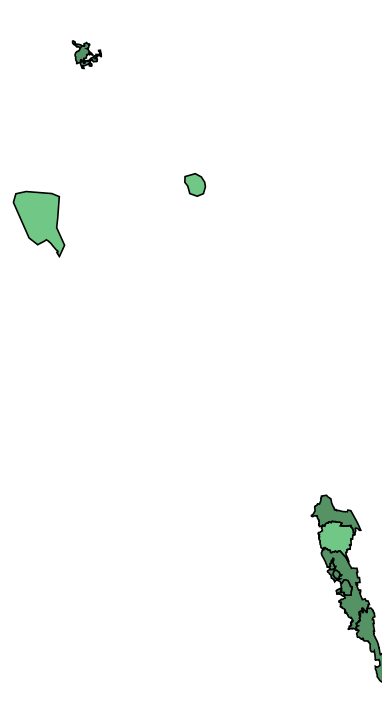
**a. Ukhia** | Number of cases



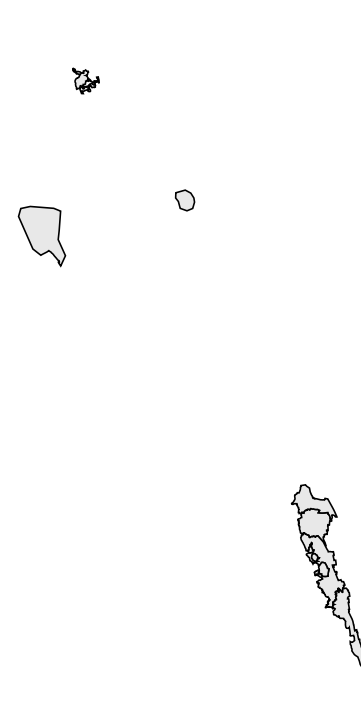
**b. Ukhia** | Number of alerts



**c. Teknaf** | Number of cases



**d. Teknaf** | Number of alerts



## Map legend

Number of cases



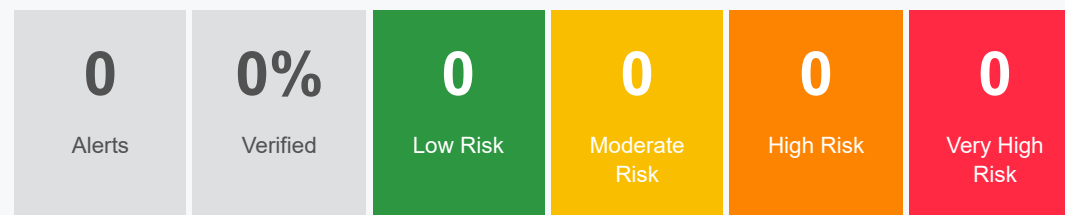
Number of alerts



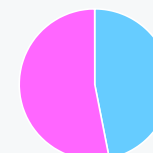
## Alert threshold

Twice the average number of cases over the past 3 weeks. *Source: IEDCR*

## Alert management (W49 2022)



## Figure | % sex



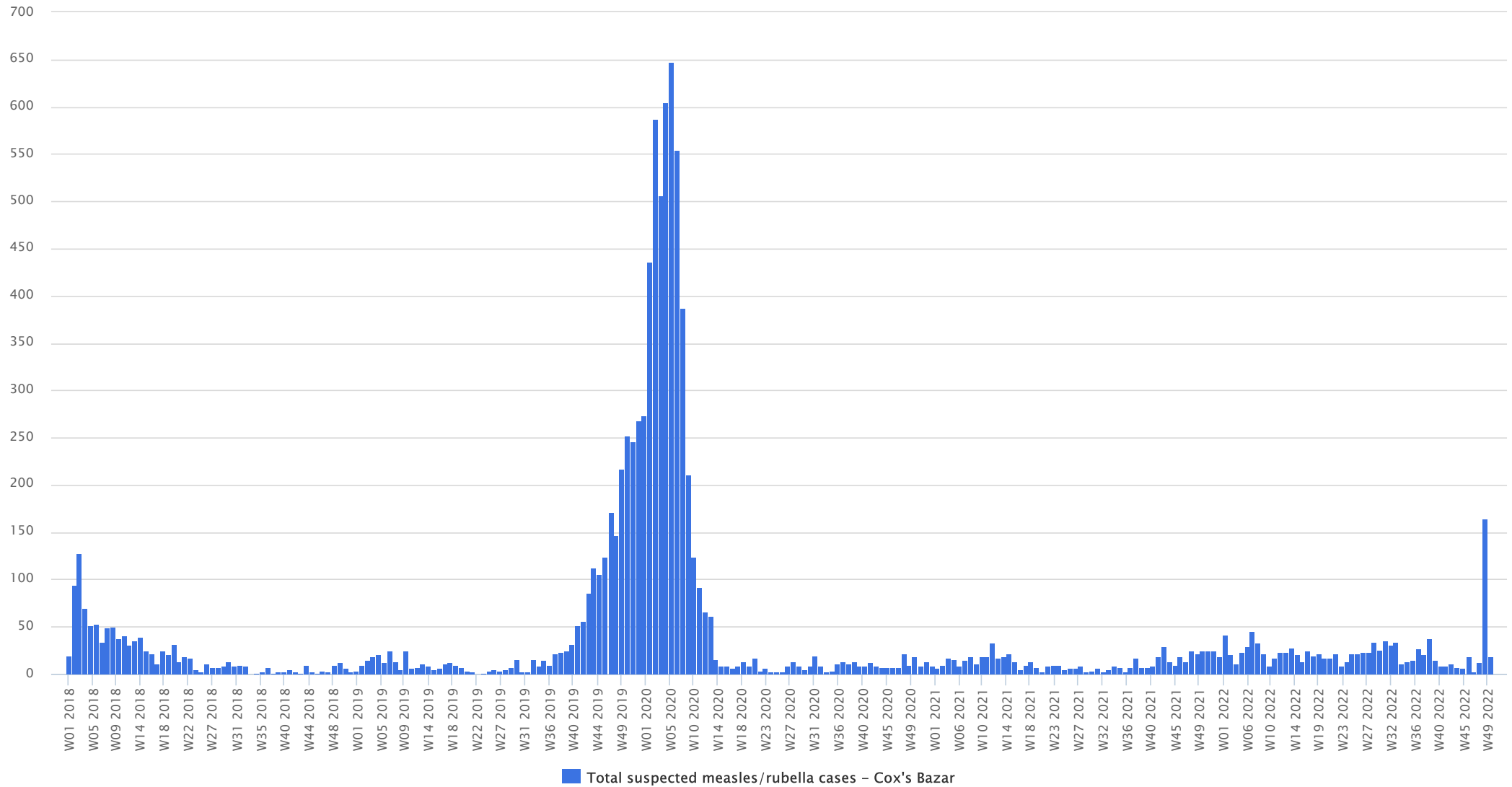
Male Female

## Figure | % age



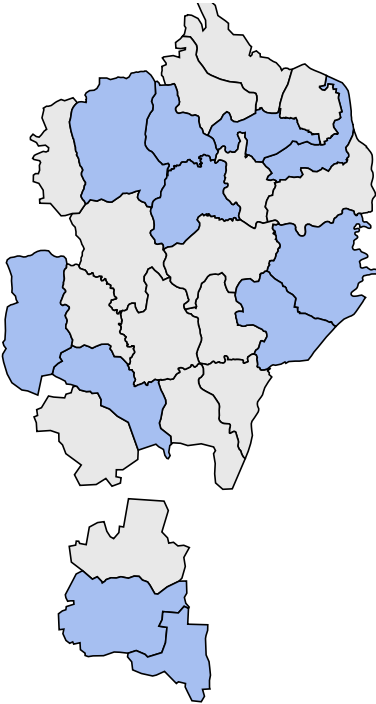
< 5 >= 5

**Figure 4** | Trend in number of suspected cases over time (W38 2017 - W49 2022)



Map 2 | Map of cases by camp (W49 2022)

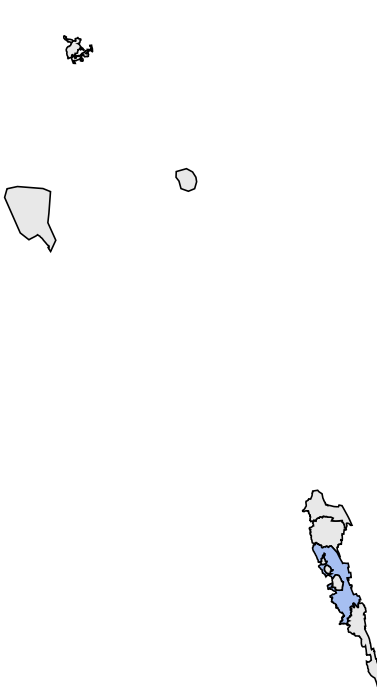
a. Ukhia | Number of cases



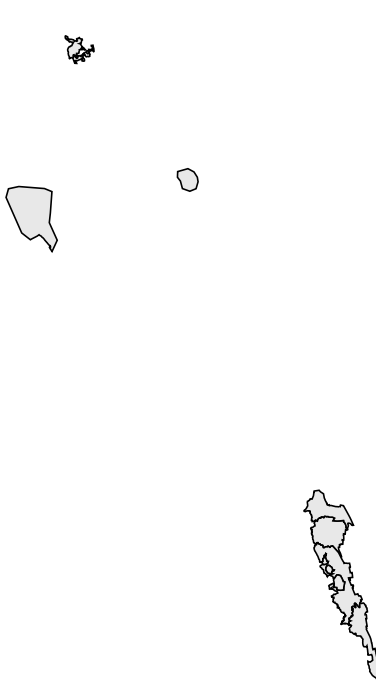
b. Ukhia | Number of alerts



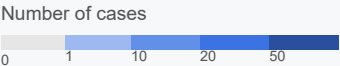
c. Teknaf | Number of cases



d. Teknaf | Number of alerts



Map legend



Alert threshold  
1 case. Source: IEDCR

Alert management (W49 2022)

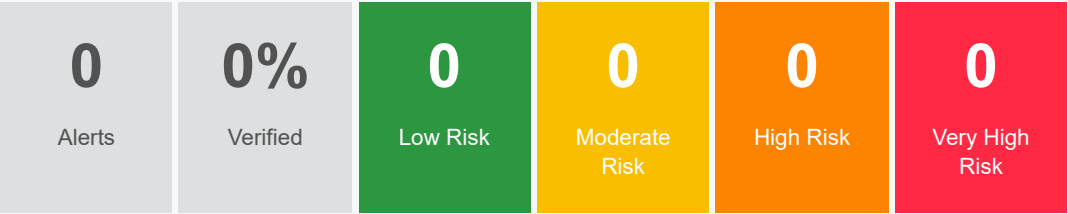


Figure | % sex

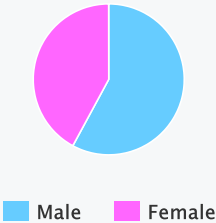
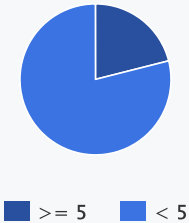
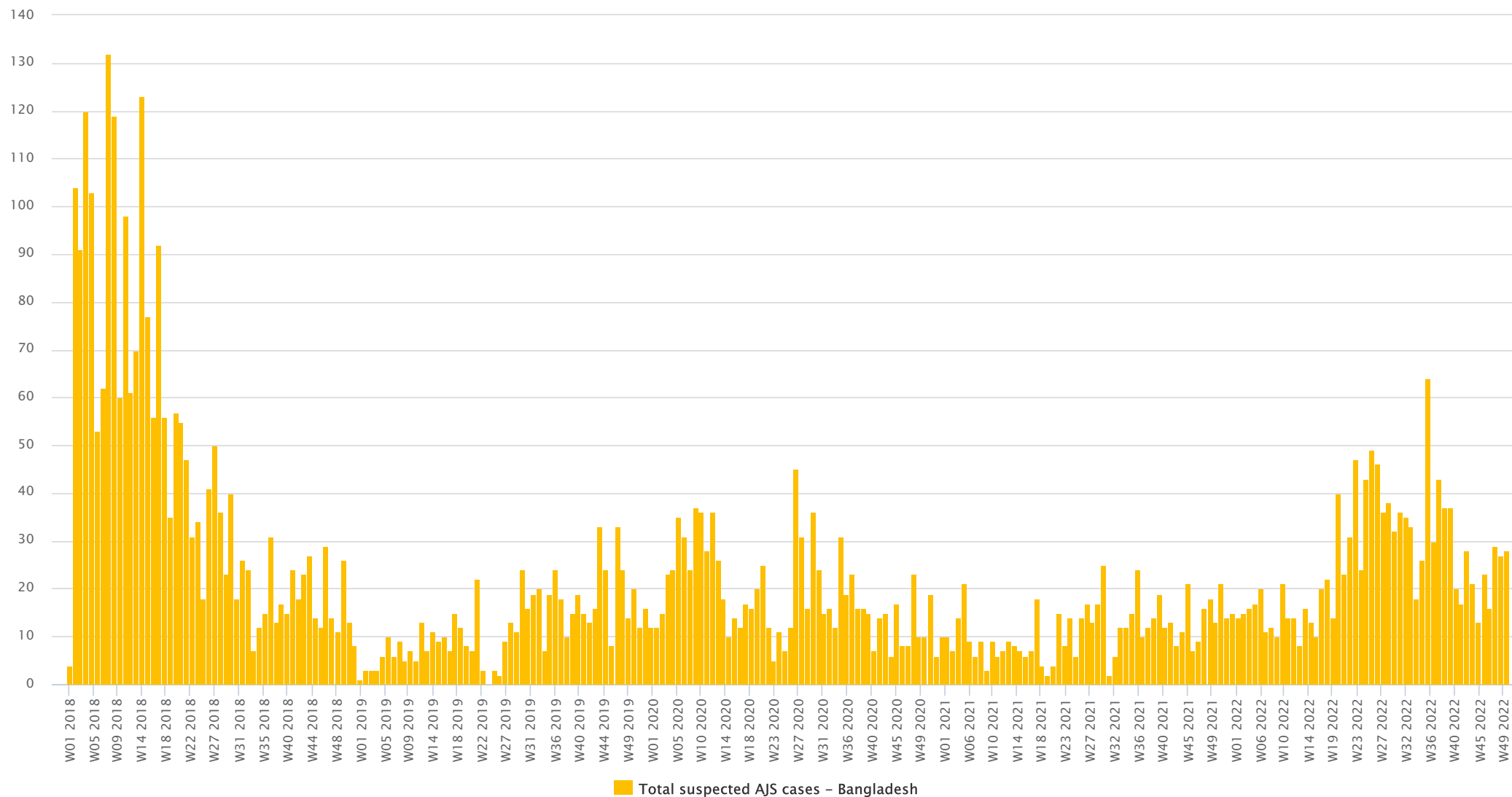


Figure | % age



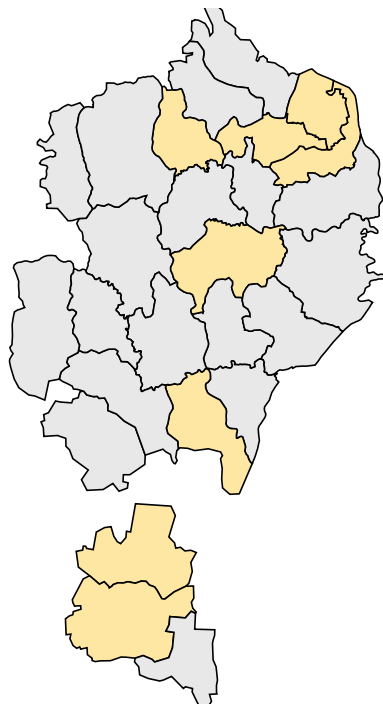


**Figure 5** | Trend in number of cases over time (W38 2017 - W49 2022)

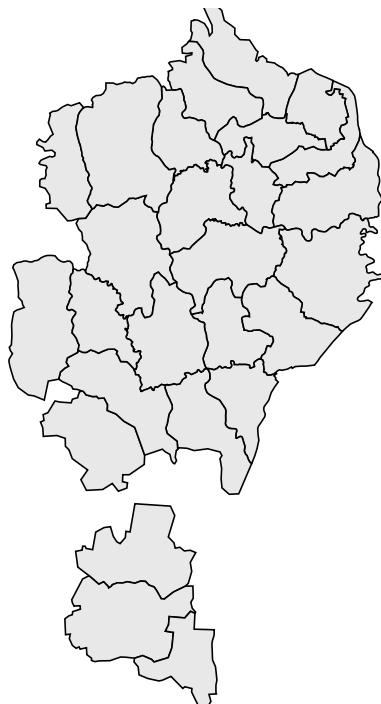


**Map 3 | Map of cases by camp (W37 2017 - W49 2022)**

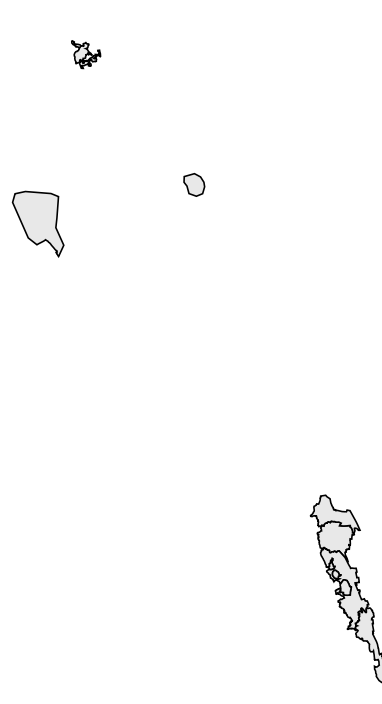
**a. Ukhia | Number of cases**



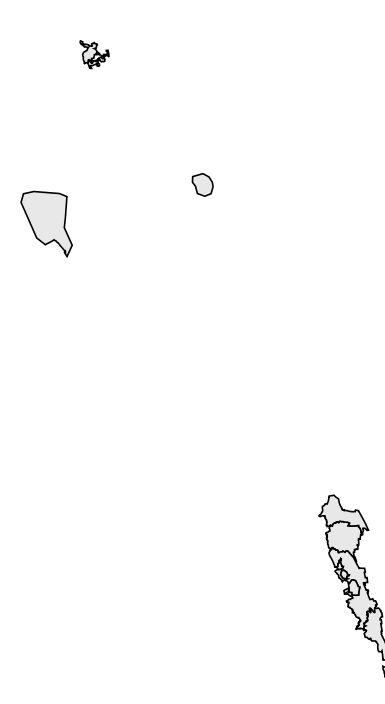
**b. Ukhia | Number of alerts**



**c. Teknaf | Number of cases**

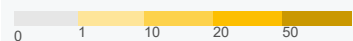


**d. Teknaf | Number of alerts**



## Map legend

Number of cases



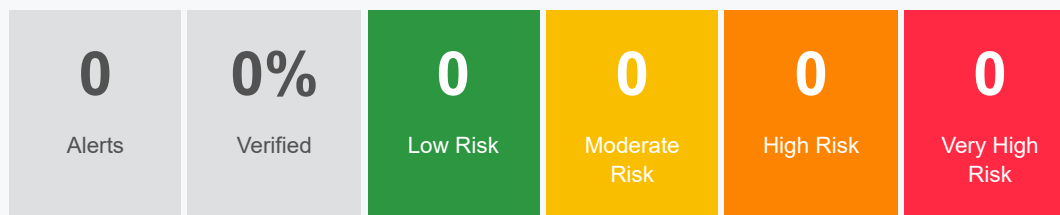
Number of alerts



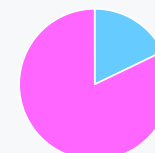
## Alert threshold

A cluster of 3 or more cases seen in a health facility. *Source: IEDCR*

## Alert management (W49 2022)

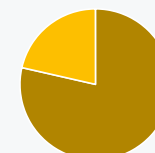


## Figure | % sex



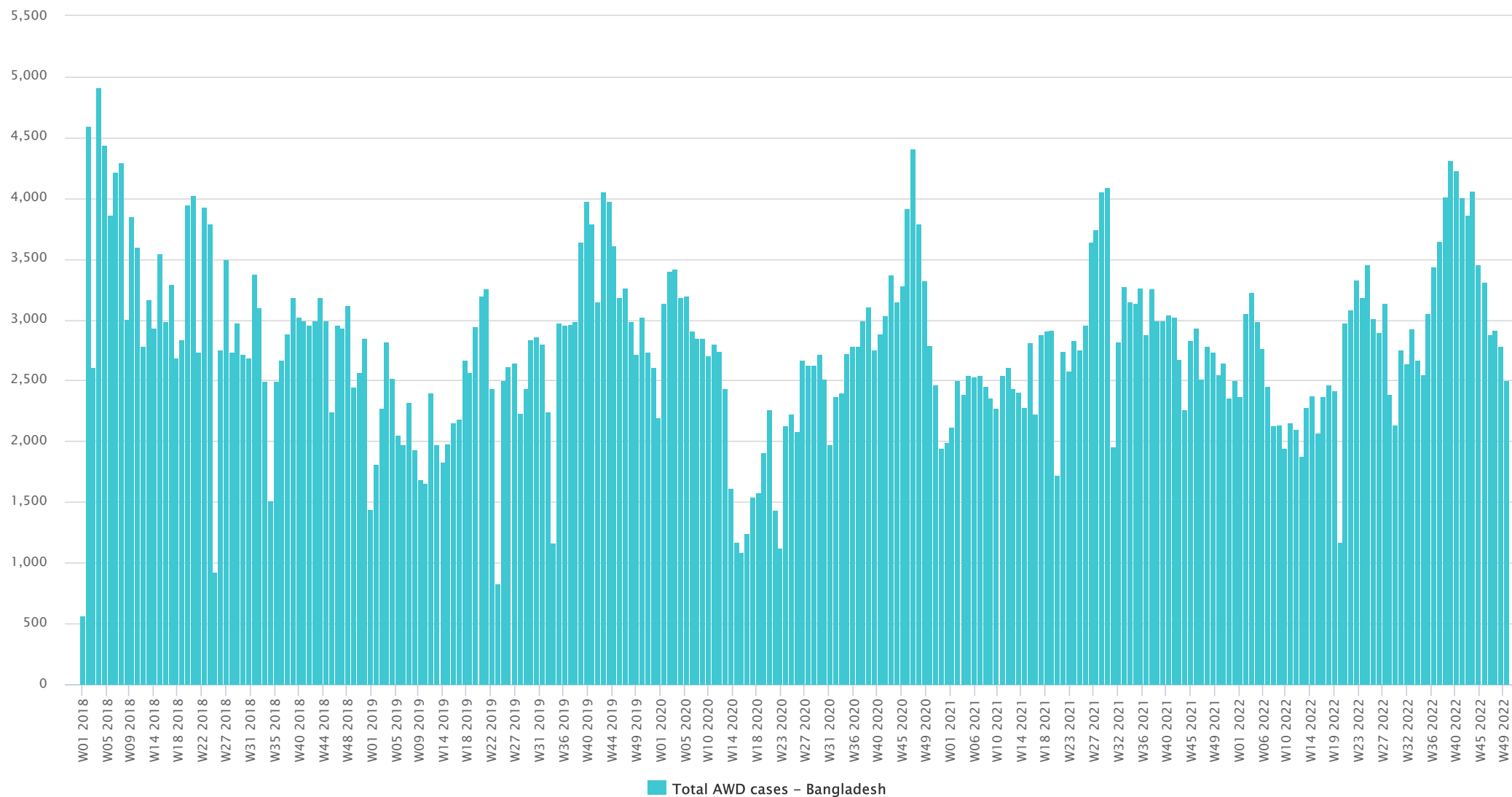
Male Female

## Figure | % age

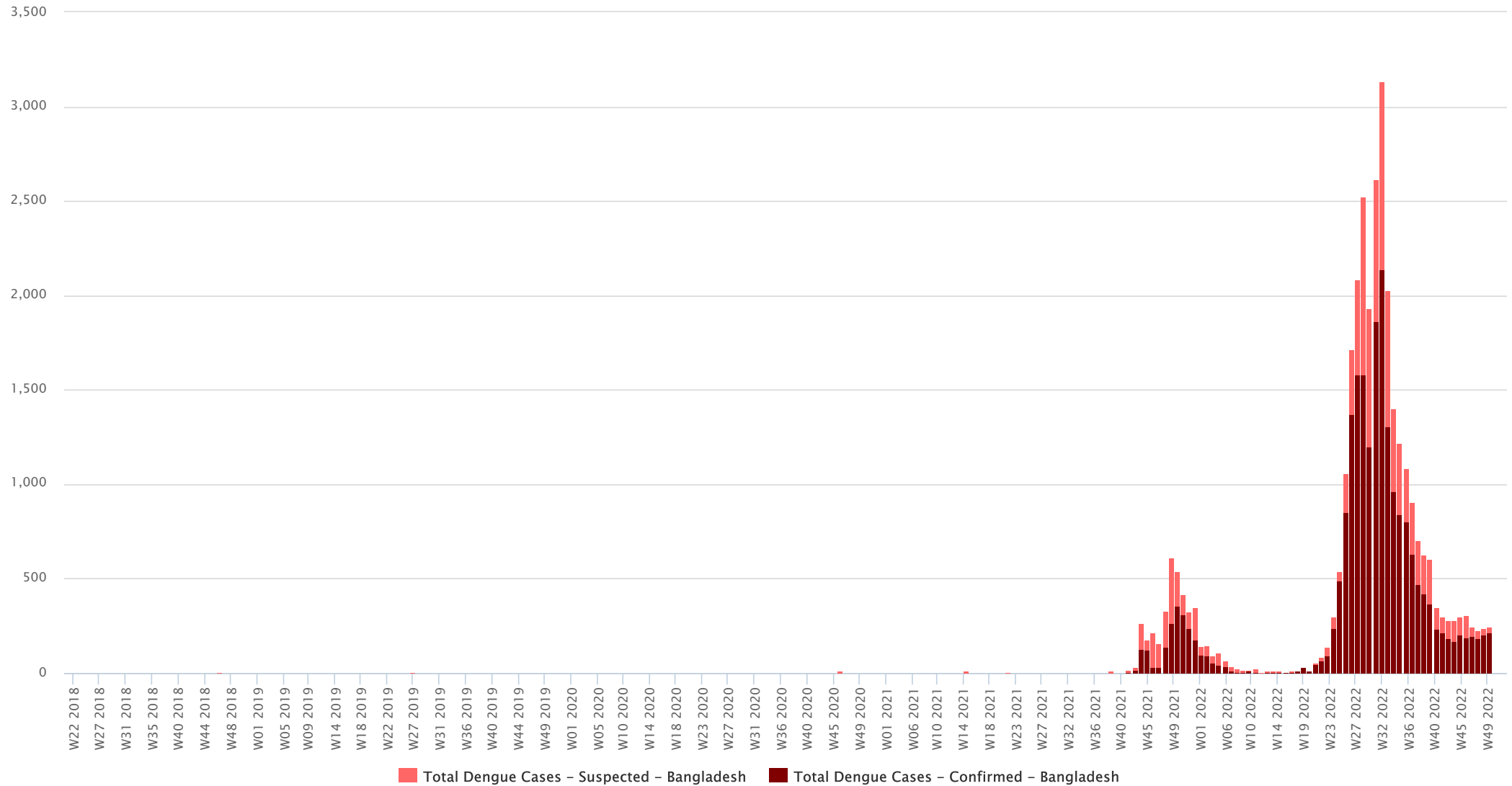


>= 5 < 5

**Figure 6** | Trend in number of cases over time (W38 2017 - W49 2022)

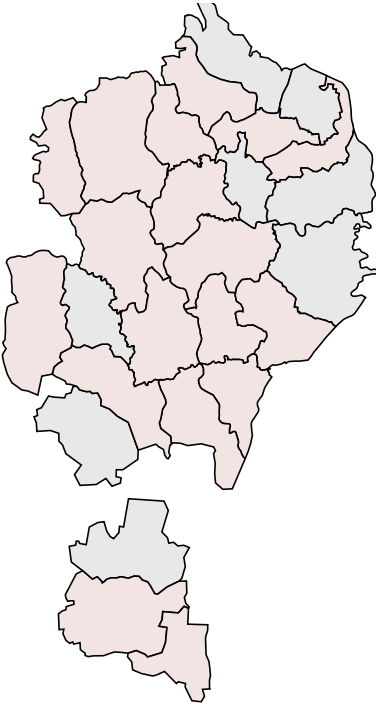


**Figure 7** | Trend in number of cases over time (W38 2017 - W49 2022)



Map 4 | Map of cases by camp (W37 2017 - W49 2022)

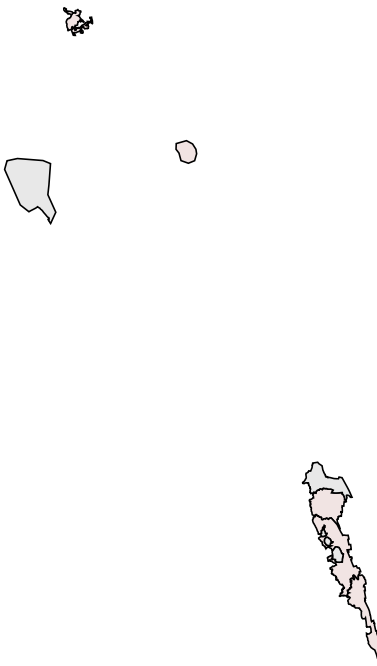
a. Ukhia | Number of cases



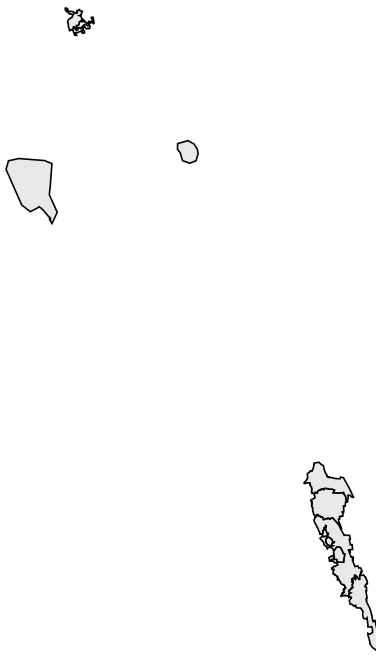
b. Ukhia | Number of alerts



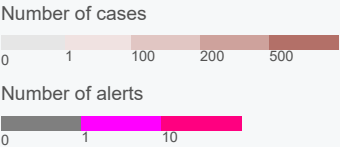
c. Teknaf | Number of cases



d. Teknaf | Number of alerts



Map legend



Alert threshold

Twice the average number of cases over the past 3 weeks. Source: IEDCR

Alert management (W49 2022)

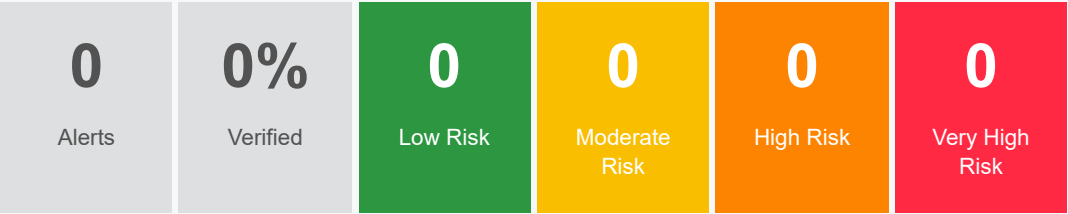


Figure | % sex

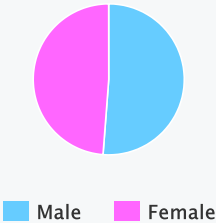
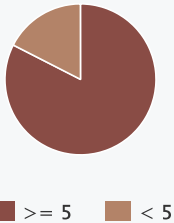
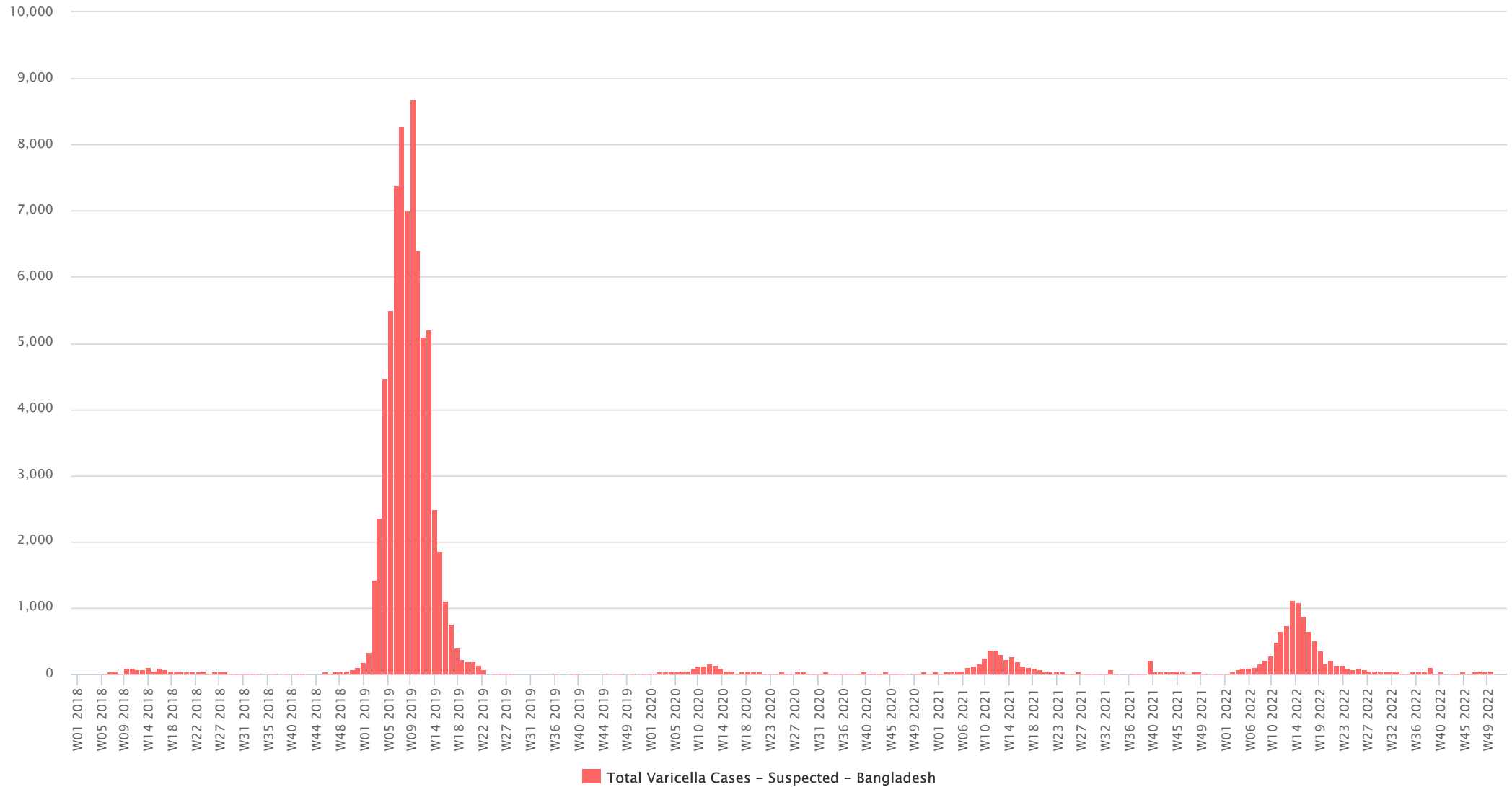


Figure | % age

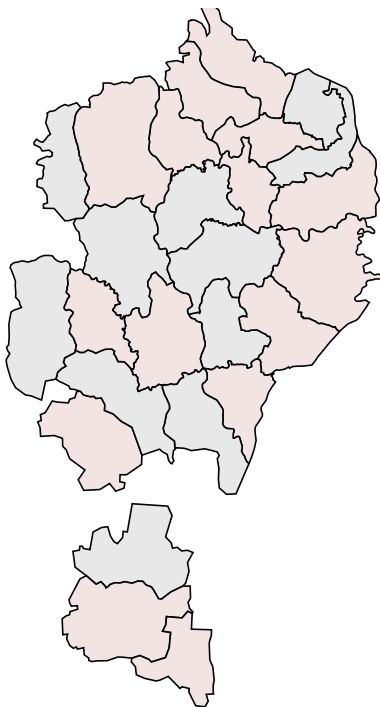


**Figure 7** | Trend in number of cases over time (W38 2017 - W49 2022)

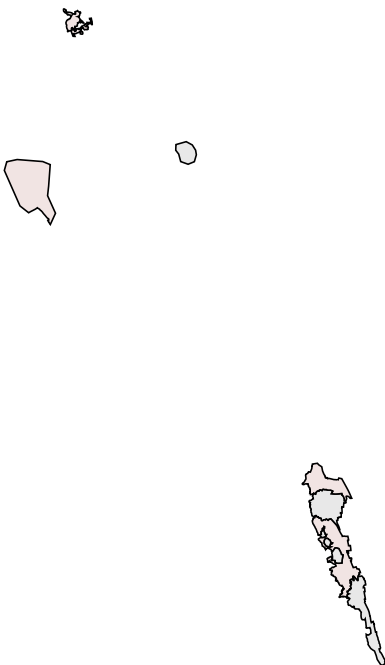


Map 4 | Map of cases by camp (W37 2017 - W49 2022)

a. Ukhia | Number of cases



c. Teknaf | Number of cases



Map legend

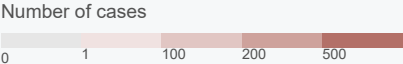


Figure | % sex

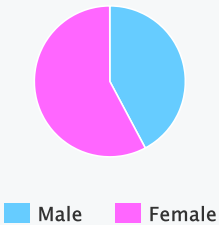
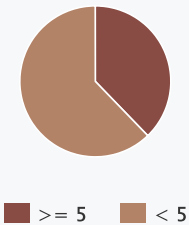


Figure | % age



## For more help and support, please contact:

Dr. Imrul Kayes  
Medical Officer - Civil Surgeon Office (MO-CS)  
Ministry of Health and Family Welfare  
Cox's Bazar, Bangladesh

Telephone: +88 017826296025

Email: mailkayesk65@gmail.com

Dr. David Odhiambo Otieno  
Team Lead\_Epidemiology  
World Health Organization  
Cox's Bazar, Bangladesh

Telephone: +88 017 01202994

Email: otienod@who.int

## Notes

WHO and the Ministry of Health and Family Welfare gratefully acknowledge all partners who have reported the data used in this bulletin.

The data been collected with support from the EWARS project. This is an initiative to strengthen early warning, alert and response in emergencies. It includes an online, desktop and mobile application that can be rapidly configured and deployed in the field. It is designed with frontline users in mind, and built to work in difficult and remote operating environments. This bulletin has been automatically published from the EWARS application.

More information can be found at <http://ewars-project.org>

Sign up for an account with EWARS Bangladesh at <http://bd.ewars.ws>



Ministry of  
Health and  
Family  
Welfare  
Bangladesh



World Health  
Organization



HEALTH SECTOR  
COX'S BAZAR



Global

EWARS