



Epidemiological Highlights

Week 33 (7-13 August) 2022



World Health
Organization

Highlights: COVID-19

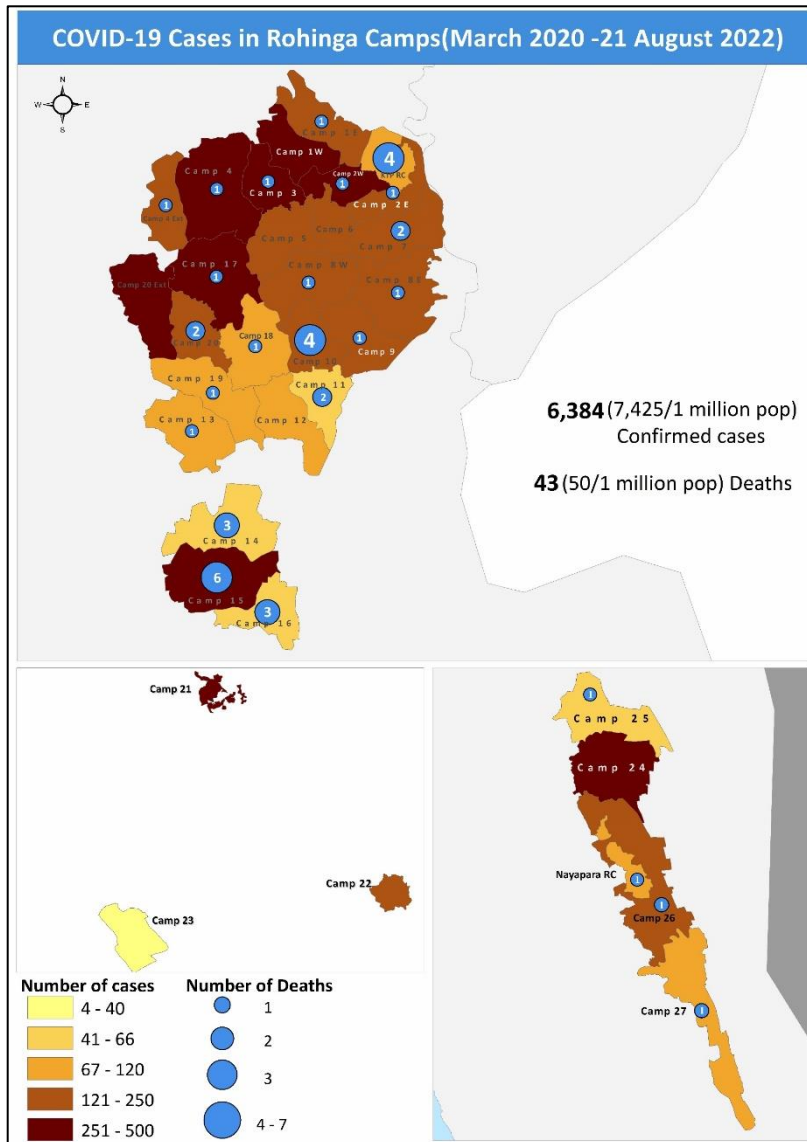
As of week 33, 2022 there were **6,384 confirmed cases** of COVID-19 (SARS-CoV-2), out of 108,989 **samples** that had been submitted for testing. The **Total Positivity Rate (TPR)** now stands at **5.9%**

In the reporting week, again 28 new confirmed case was detected out of 500 total samples tested. This translated to a 5.6% TPR which is less than that of the previous week's 7.7%.

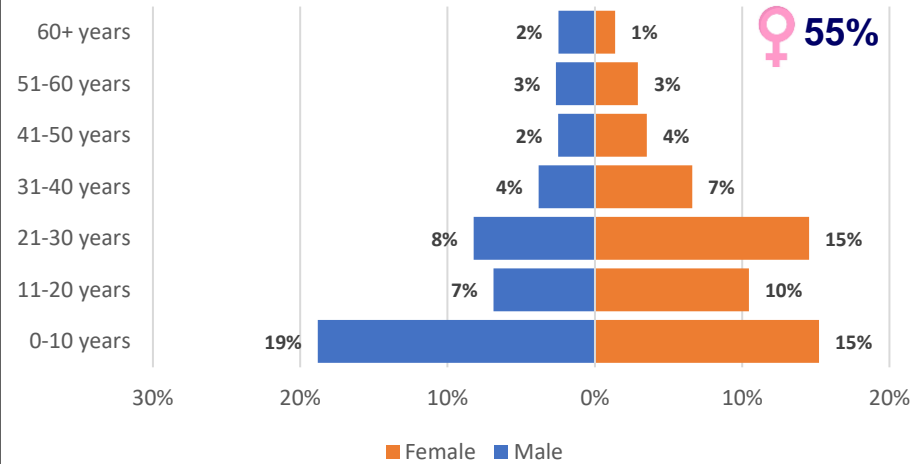
As of this week (week 33)

- **Median age** of tested and confirmed cases were 11 (0-120) and 20 (0-100) years respectively
- **Proportion of females** among tested and confirmed cases were 54% and 55% respectively
- **All the 34 camps**, have so far reported confirmed cases since the outbreak began, while the five camps with the highest number of reported cases were; C24-475, C17-445, C2W-412, C4-391, and C3-343
- No new death was reported in this Epi week. Total confirmed COVID-19 deaths so far reported to date stands at 43 with the average **case fatality ratio** of 0.7%
- The **weekly incidence** was 32.6 cases/1 million population in this Epi week which is less than that of the previous week's 48.8 cases/1 million population.

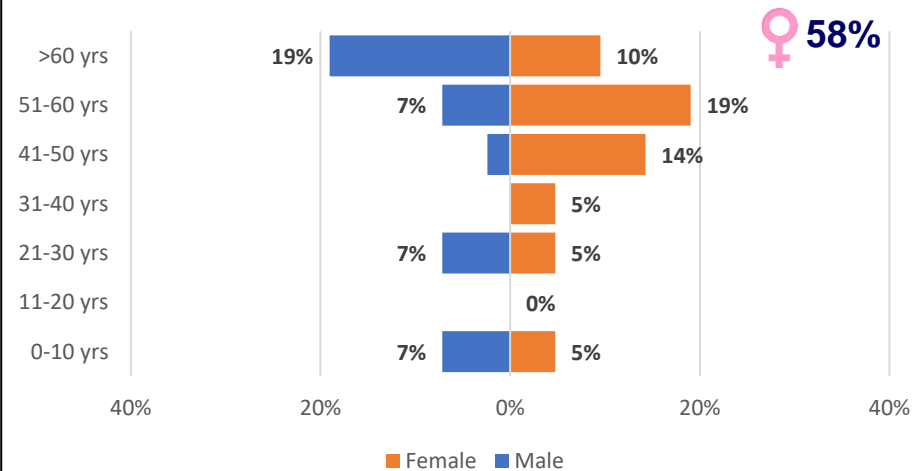
Highlights: COVID-19



Age and sex distribution (%) (n=6,384)

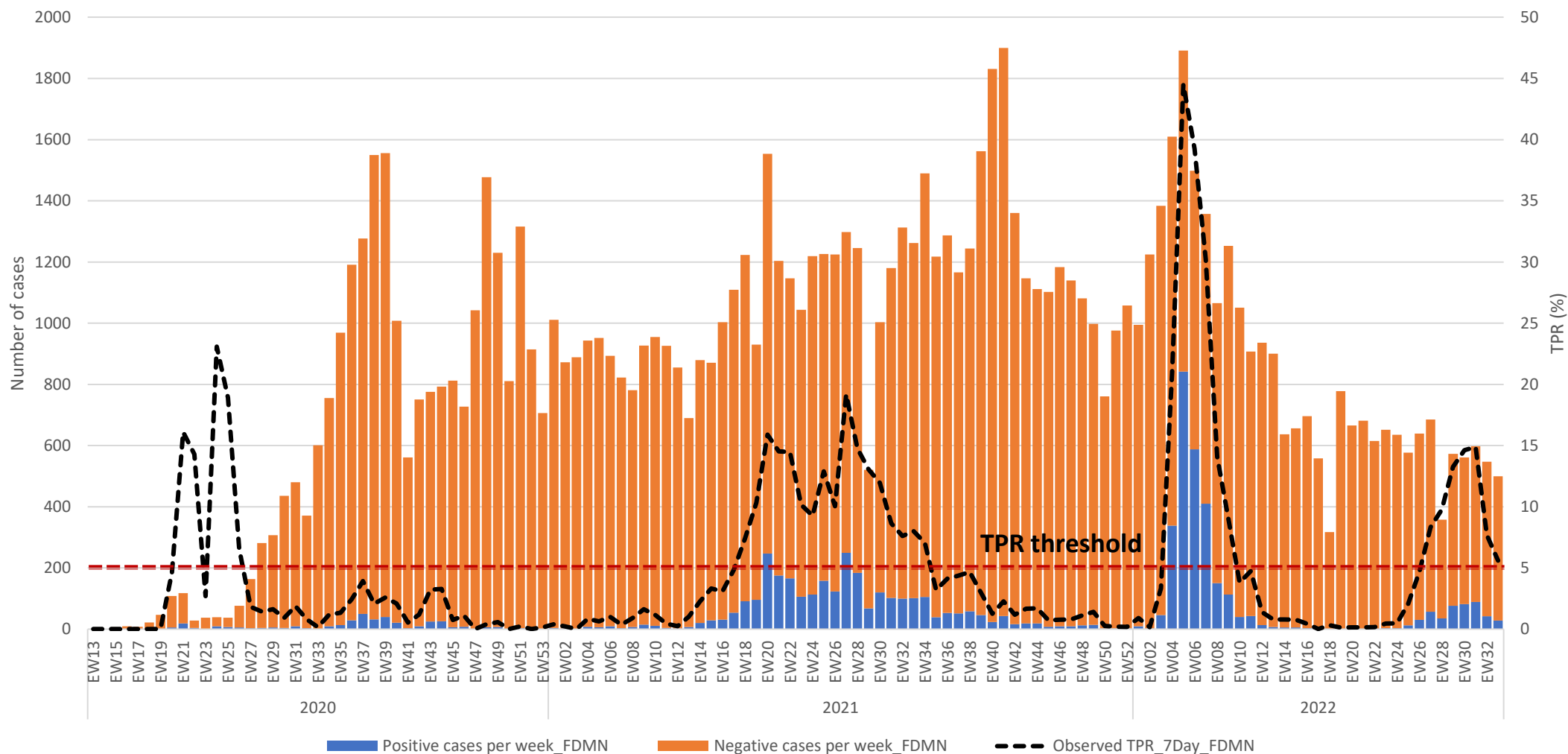


Death reported by age and sex (%) (n=43)



Highlights: COVID-19

Weekly observed TPR, FDMN/Rohingya Refugees, Cox's Bazar



EWARS Reporting Updates

- Currently, a total of 169 health facilities are registered in EWARS
 - Only 130/169 weekly reports were received on time in week 33
 - Timeliness of reporting for this week was 83%
 - One forty-four (144) alerts were triggered
 - All alerts were reviewed and verified by the WHO EWARS team; this was more than the previous week (75 alerts in week 32, 2022).

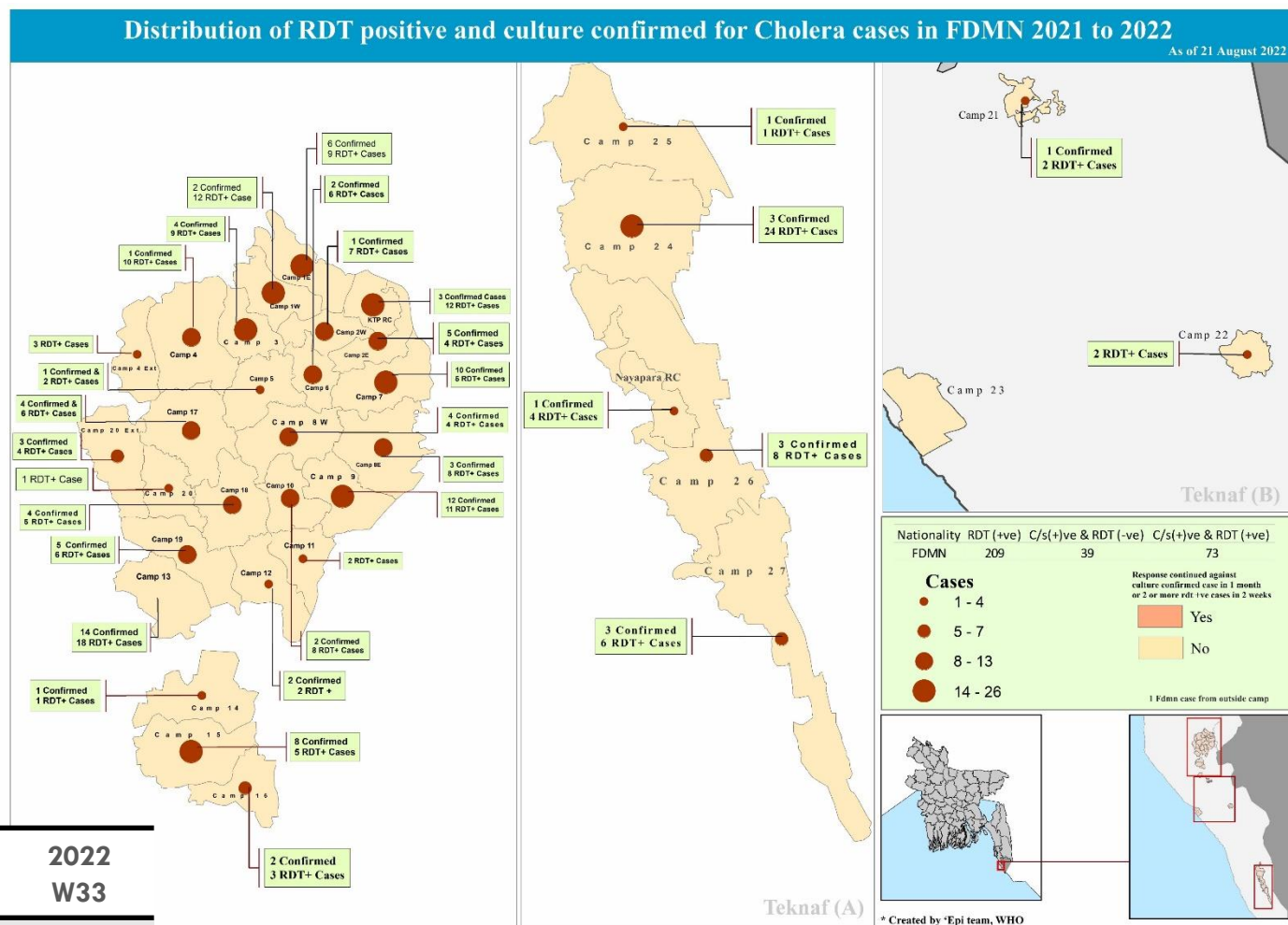
Highlights: Morbidities and Mortalities

- Acute Respiratory Infections (15.8%), Diarrheal Diseases (3.7%) & suspected malaria (1.7%) were the diseases and health conditions with the highest proportional morbidity in week 33.
- Monitoring of suspected SARI death under enhanced Community-based mortality surveillance has been continued since week 28, 2020.
- This Epi week, five (5) new SARI death was reported as highlighted below:

Year	Suspected SARI death reported	Reclassified as death due to probable COVID-19
2022	92	7
2021	96	15
2020	49	2

Cholera/AWD Surveillance Updates

- In this week, there is three (3) new RDT-positive case was reported, among samples sent for testing.
- In 2022 total of ninety-two (92) RDT-confirmed cholera cases were reported as of W33 2022. Of these 16 were positive for culture, and 76 were negative for culture.
- Cumulatively there are 739 RDT and culture-confirmed cholera cases of which 333 cases were culture-confirmed since transmission in 2018



	2018	2019	2020	2021	2022 W33
RDT positive/culture confirmed for Cholera	49	258	28	357	92
Culture confirmed for Cholera	7	184	5	136	16

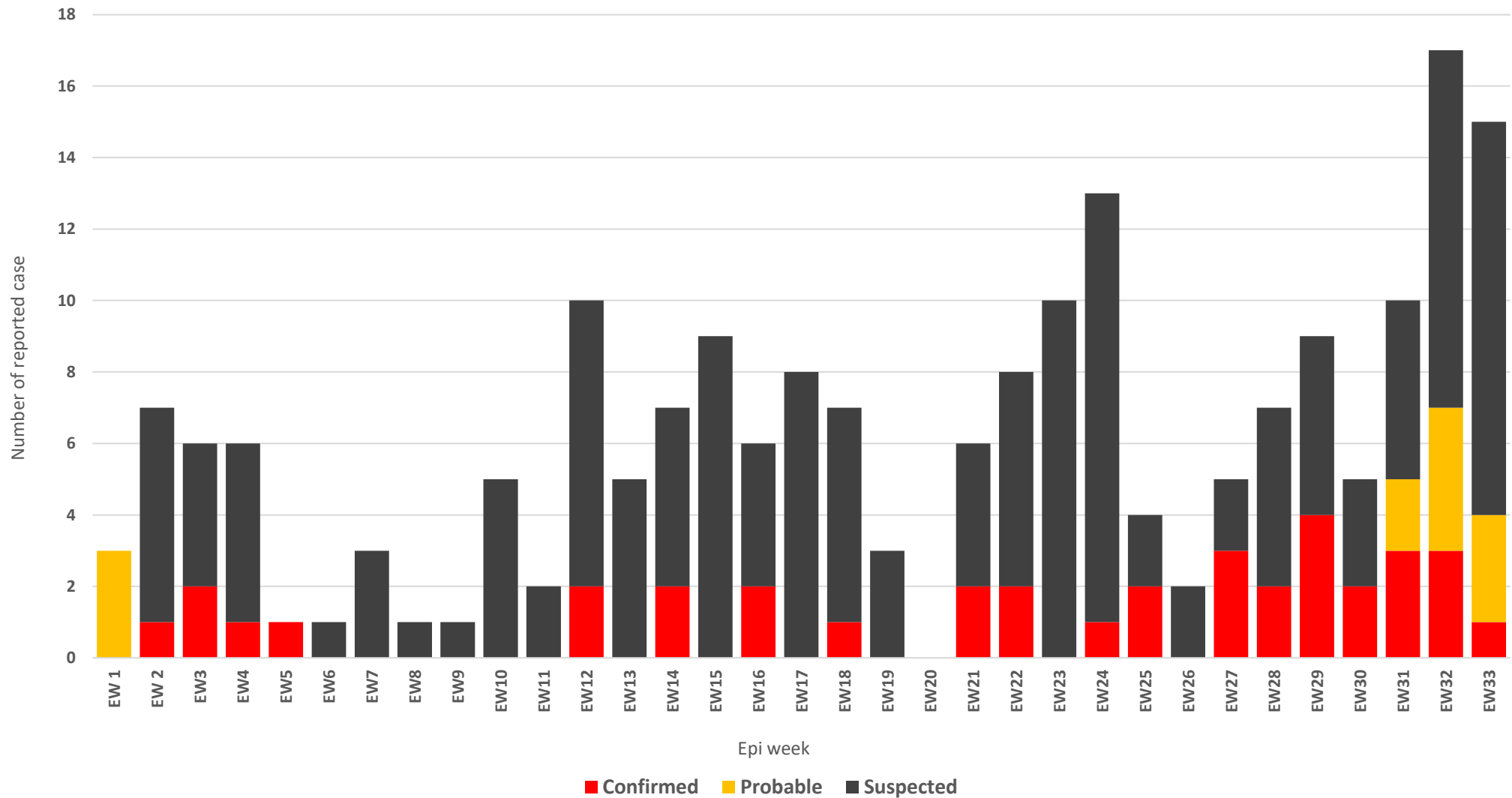
Diphtheria Surveillance Updates

- One (1) confirmed and 3 probable and 11 suspected diphtheria cases were reported in go.data in this Epi week 33
- The last confirmed case was reported on 12 August 2022
- In total 53 deaths have so far been reported since 2017, with the last death reported on 25 April 2022

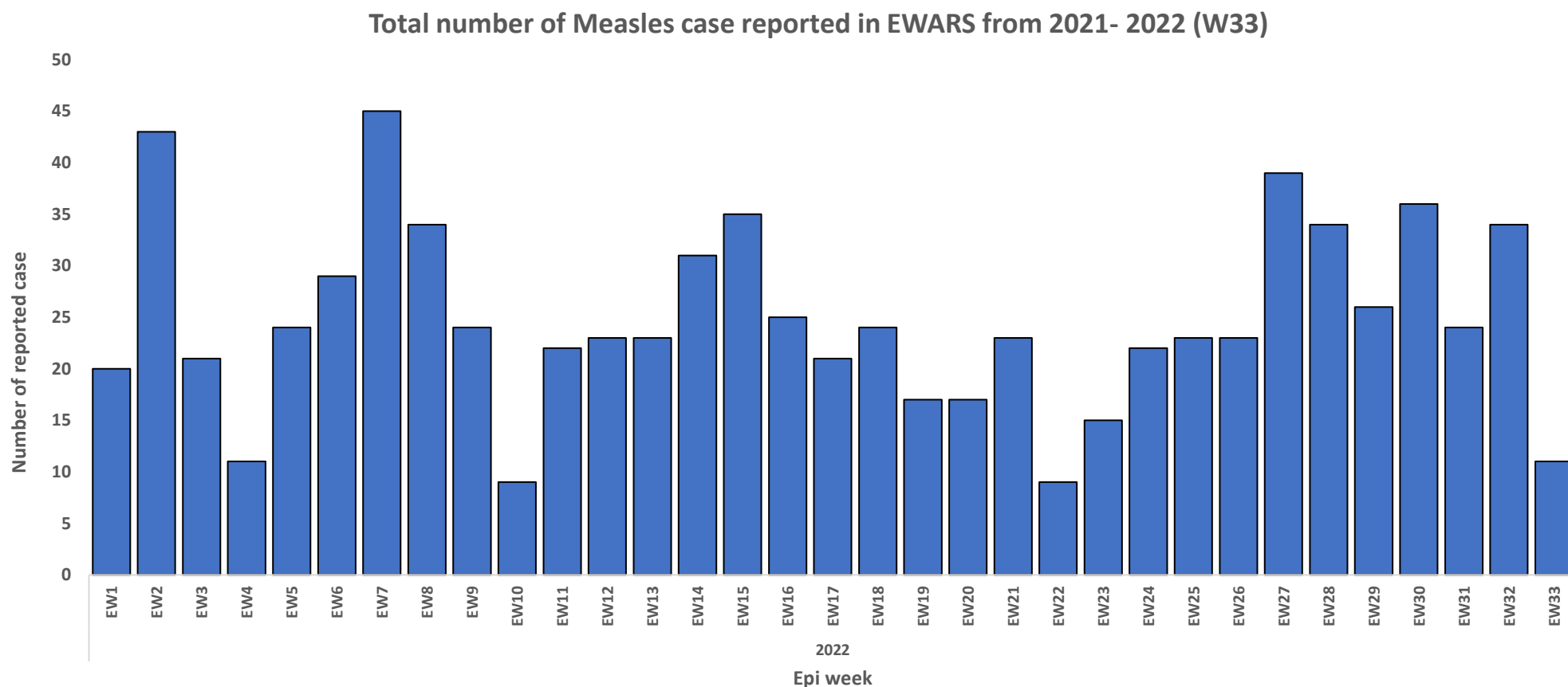
Classification	2017	2018	2019	2020	2021	2022
Confirmed	66	226	31	19	30	37
Probable	1154	1555	60	9	29	12
Suspected	1796	3549	523	198	118	153
Death	30	14	3	0	5	1

Trends of Diphtheria cases

Total number of diphtheria case reported in EWARS from week 1-33, 2022



Epi Curve of Suspected Measles Cases



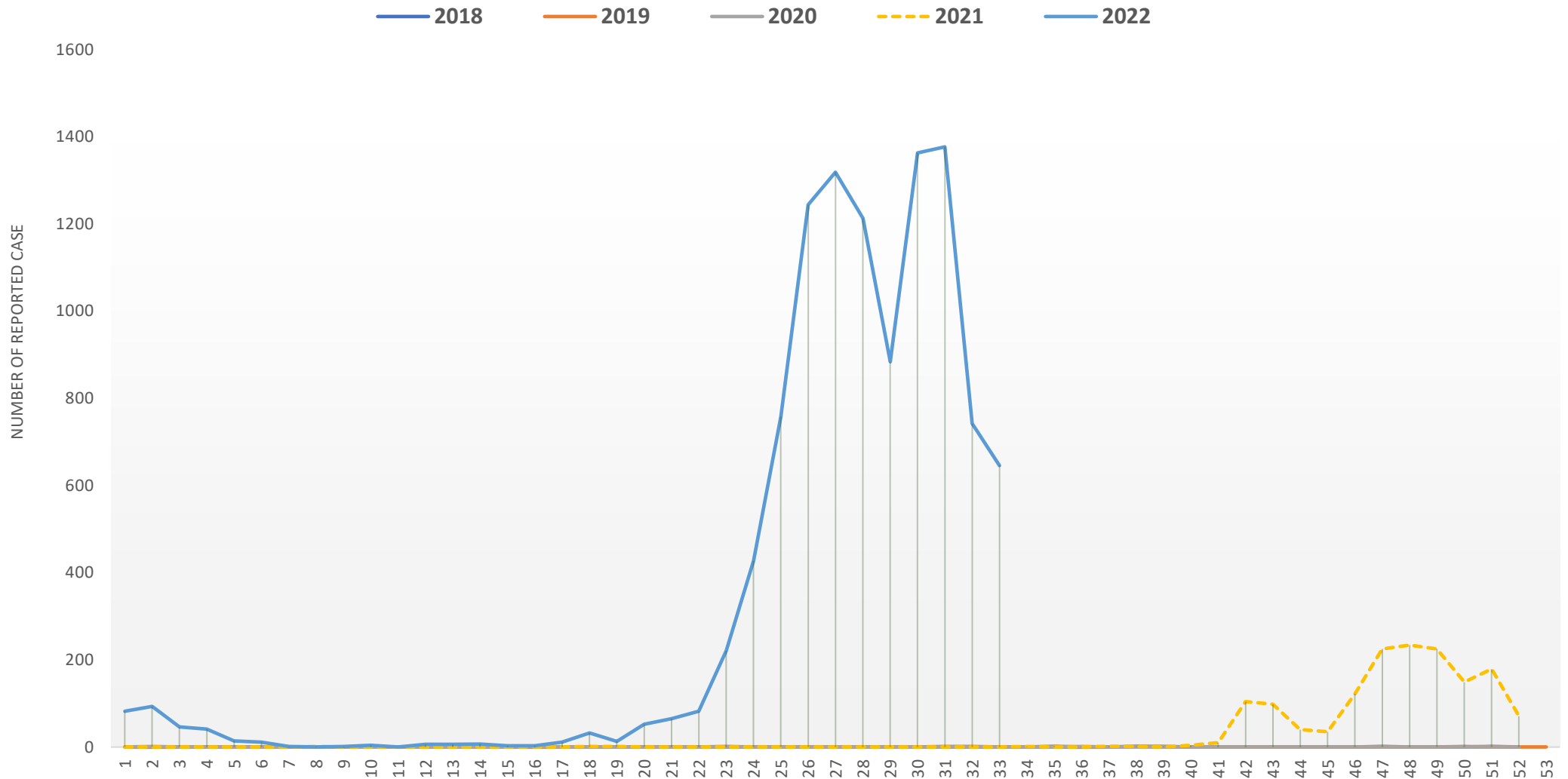
- > In week 33, 11 suspected measles cases were reported through weekly reporting. This brings the total number of suspected measles cases to 817 reported in 2022
- > About 54% (440/817) of the total suspected measles cases were reported through case-based reporting and samples collected for laboratory confirmation

Dengue Surveillance Updates

Year	Month/Epi Week	Confirmed case	Death	Confirmed case (cumulative)	Death (cumulative)
2022	Jan (Ew1-5)	276	0	276	0
	Feb (Ew6-9)	13	0	289	0
	March (Ew10-14)	23	0	312	0
	April (Ew15-18)	49	0	361	0
	May (Ew19-22)	212	0	573	0
	June (Ew23-27)	3,969	2	4,542	2
	July (Ew28-31)	4,837	8	9,379	10
	August (as of 13 August)	1,388	0	10,767	10

Dengue Surveillance Updates

Yearly Trends of Dengue case trend from 2018 - Epi Week 33, 2022



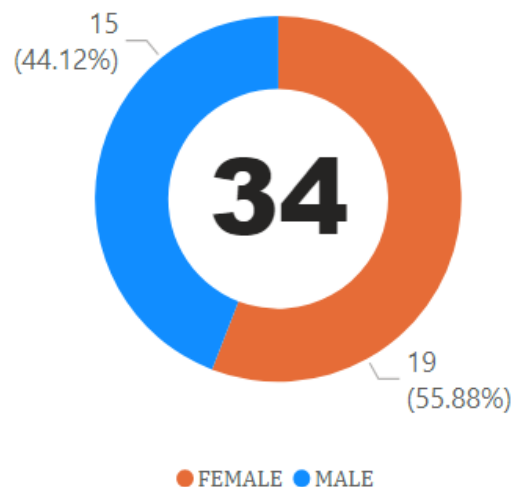
Community-based Mortality surveillance updates Epi week 33

Probable causes of death	Epi week 33	In 2022
Still Birth	3 (9%)	128 (10%)
Neonatal Death (<28 days old)	3 (9%)	116 (10%)
Infectious Disease	3 (9%)	37 (3%)
Severe Acute Respiratory Infection (SARI)	1 (3%)	34 (2%)
Injury	1 (3%)	31 (3%)
Maternal Death	1 (3%)	30 (3%)
Acute Malnutrition	--	1 (0%)
Other	22 (65%)	841 (69%)
Total	34 (100%)	1,218 (100%)

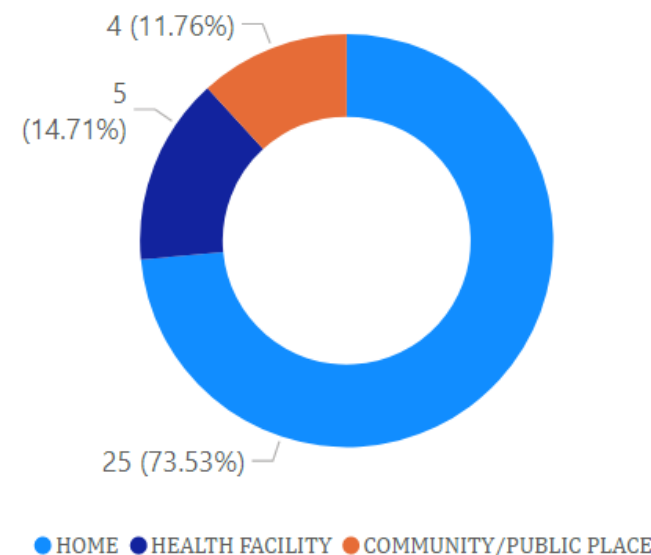
Partners to report all mortalities into the EWARS platform using both case and event-based reporting as applicable

Community-based Mortality surveillance updates Epi week 33

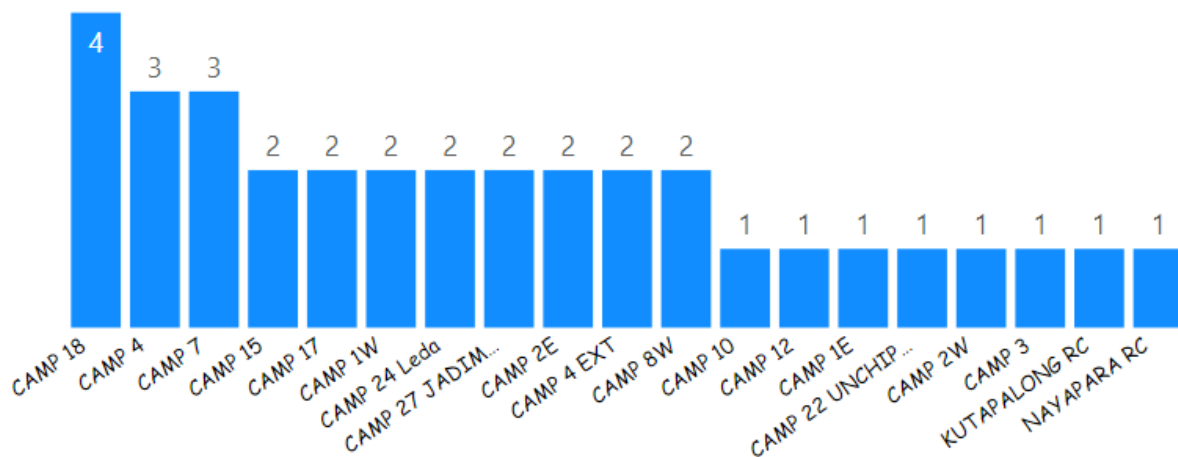
Gender distribution



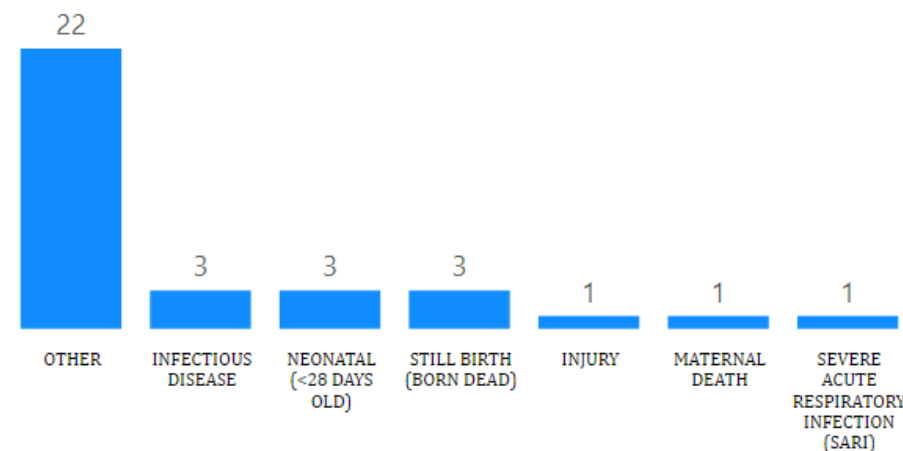
Place of death



Distribution of deceased Camp



Distribution of Probable cause of death



Bangladesh

Rohingya Emergency Response

Early Warning, Alert and
Response System (EWARS)

Epidemiological Bulletin W33 2022



Ministry of Health and Family
Welfare Bangladesh



World Health
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Sources of data

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

Highlights W33 2022

Table 1 | Coverage

#	%	
918,841	-	Estimated total Rohingya population ¹
0	0%	Total population under surveillance
175	-	Total number of health facilities
169	97%	Number of EWARS reporting sites

Table 2 | Early warning performance indicators

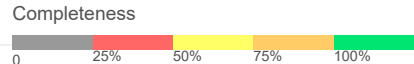
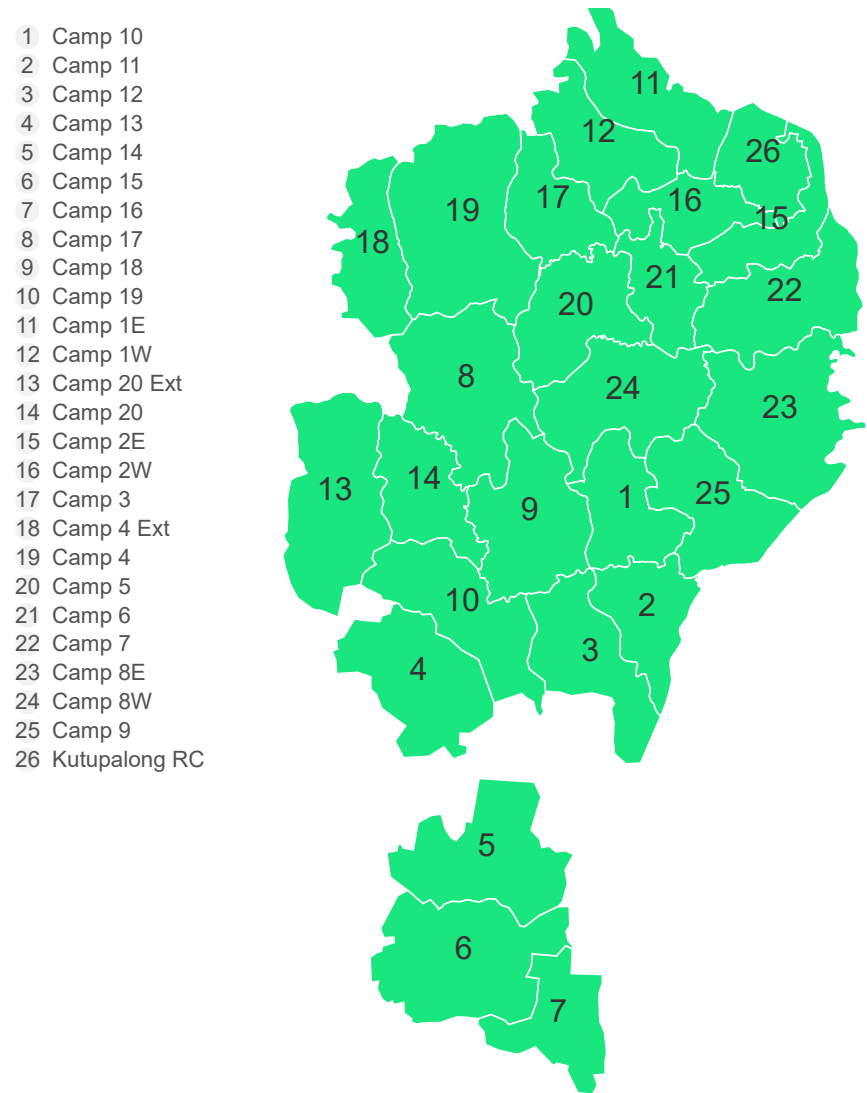
W33	Cumulative (2022)	
130	5239	Number of weekly reports received
83%	92%	Completeness
83%	90%	Timeliness

Table 3 Alert performance indicators

W33	Cumulative (2022)	
144	2,835	Total alerts raised
100%	100%	% verified
0%	0%	% auto-discarded
0%	0%	% undergoing risk assessment
0%	0%	% completed risk assessment

¹ 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

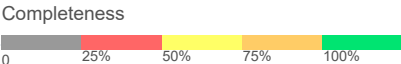
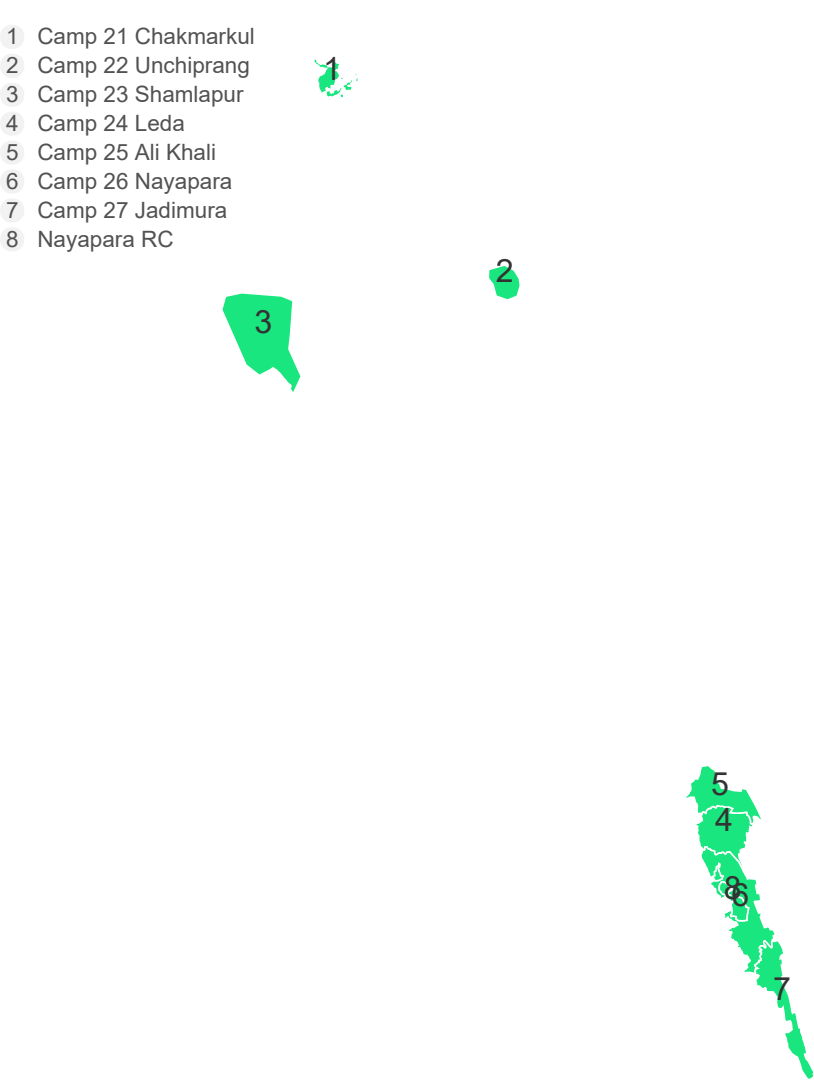
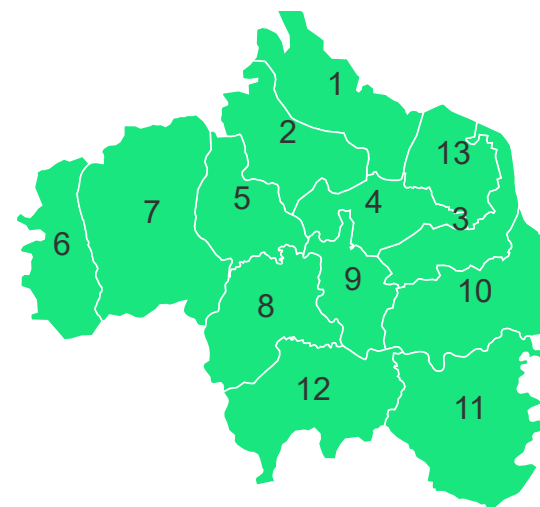


Table 4 | Performance by camp (W33 2022)

Northern group	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
Ukhia Northern Group				
Camp 1E	3	3	100%	0%
Camp 1W	5	4	80%	0%
Camp 2E	3	3	100%	0%
Camp 2W	3	3	100%	0%
Camp 3	5	5	100%	0%
Camp 4	5	3	80%	0%
Camp 4 Ext	1	1	100%	0%
Camp 5	5	5	100%	0%
Camp 6	3	2	67%	0%
Camp 7	6	4	67%	0%
Camp 8E	8	6	88%	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 (W33 2022)

Southern group	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
Ukhia Southern Group				
Camp 10	4	3	75%	0%
Camp 11	8	6	75%	0%
Camp 12	6	4	100%	0%
Camp 13	10	8	90%	0%
Camp 14	7	5	86%	0%
Camp 15	9	6	67%	11%
Camp 16	7	5	86%	0%
Camp 17	5	3	100%	0%
Camp 18	5	3	80%	0%
Camp 19	5	4	80%	0%
Camp 20	4	2	100%	0%
Camp 20 Ext	3	3	100%	0%
Camp 9	6	5	83%	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

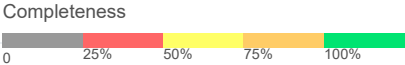
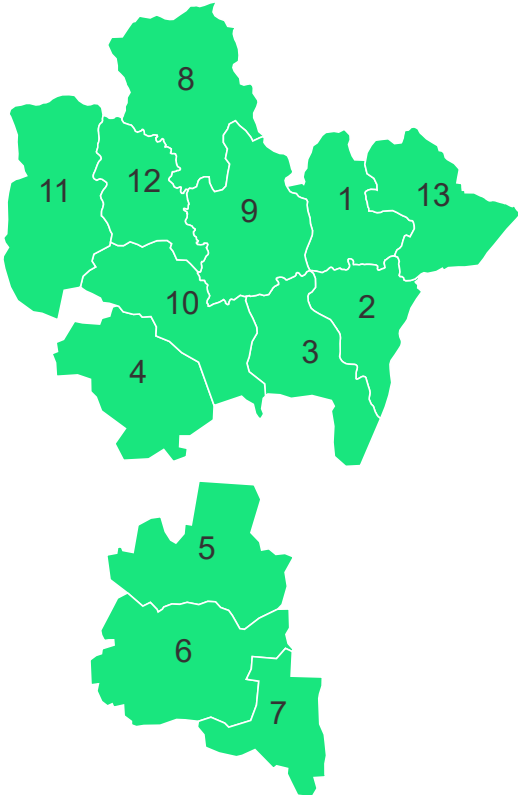


Table 6 | Performance by camp (W33 2022)

Teknaf	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
Ukhia Teknaf				
Camp 21 Chakmarkul	4	4	100%	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

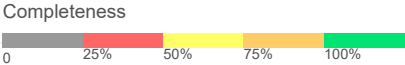
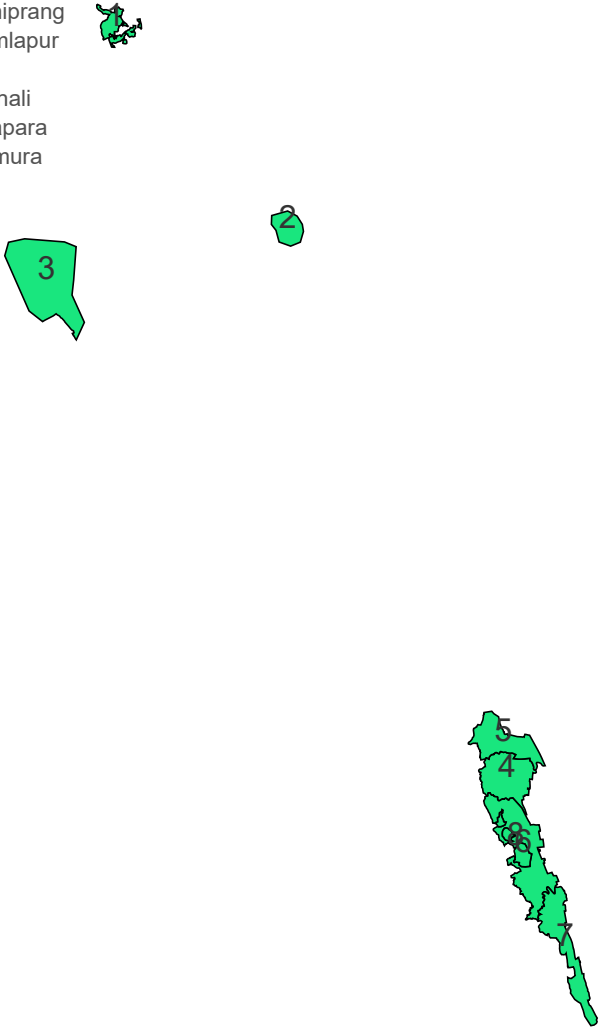


Table 7 | Performance by partner (W33 2022)

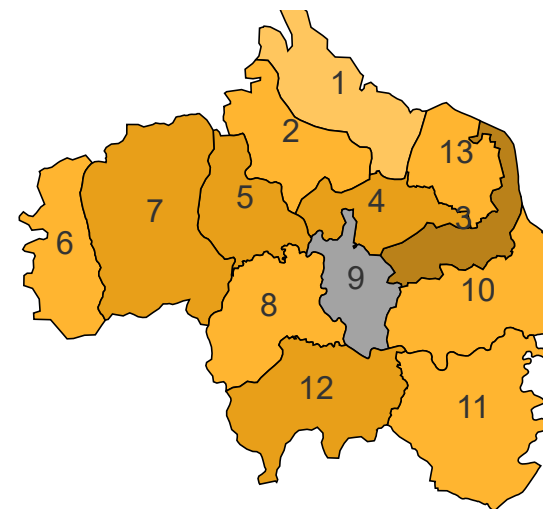
Partner	Performance		Reporting		Partner	Performance		Reporting	
	# sites	# reports received	Completeness	Timeliness		# sites	# reports received	Completeness	Timeliness
AKF	1	0	0%	0%	IRC	4	2	25%	25%
AWARD	6	6	100%	100%	MSF	9	6	67%	67%
BASHMAH	1	1	100%	100%	MoH	12	9	75%	75%
BDRCS	11	10	91%	91%	MHI	0	0		
BRAC	11	11	100%	100%	Medair	0	0		
CARE	4	4	100%	100%	FH/MTI	4	4	100%	100%
GH/CPI	1	1	100%	100%	PRANTIC	1	0	0%	0%
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	80%	80%
FRNDS	6	4	50%	50%	RPN	2	2	100%	100%
GK	10	10	100%	100%	RHU	3	3	100%	100%
Global One	1	1	100%	100%	RI	3	3	100%	100%
GUSS	1	1	100%	100%	RTMI	9	8	89%	89%
HAEFA	2	2	100%	100%	SALT	1	1	100%	100%
HAIB	8	0	0%	0%	SCI	7	7	100%	100%
HMBDF	2	2	100%	100%	DCHT-MM	1	1	100%	100%
HOPE	1	1	100%	100%	Turkish Government	1	1	100%	100%
ICRC	1	1	100%	100%	TdH	2	2	100%	100%
IOM	23	22	87%	87%					

Table 8 | Performance by camp

Northern group	W33		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
Alerts Northern group				
Camp 1E	1	100%	65	100%
Camp 1W	5	100%	155	100%
Camp 2E	12	100%	313	100%
Camp 2W	9	100%	90	100%
Camp 3	8	100%	139	100%
Camp 4	6	100%	121	100%
Camp 4 Ext	3	100%	41	100%
Camp 5	4	100%	101	100%
Camp 6	0	0%	76	100%
Camp 7	3	100%	52	100%
Camp 8E	5	100%	53	100%
Camp 8W	7	100%	146	100%
Kutupalong RC	3	100%	60	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

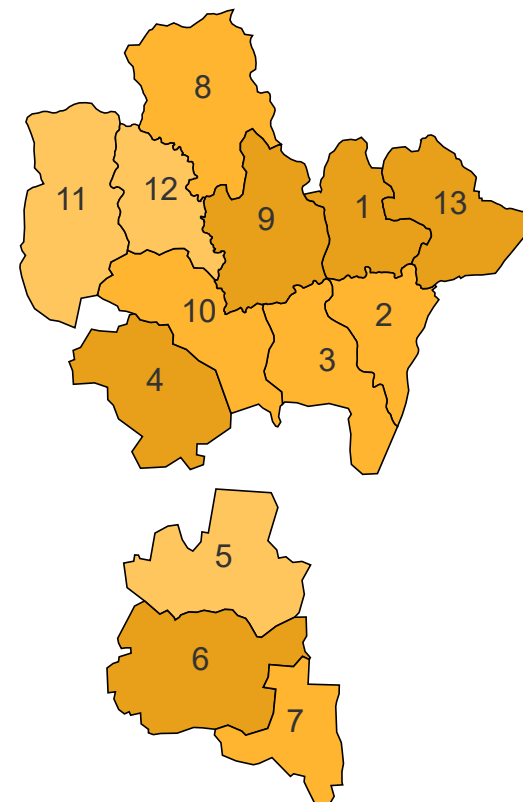


Table 9 | Performance by camp

Southern group	W33		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
Alerts Northern group				
Camp 10	6	100%	56	100%
Camp 11	3	100%	72	100%
Camp 12	4	100%	97	100%
Camp 13	7	100%	111	100%
Camp 14	2	100%	61	100%
Camp 15	6	100%	103	100%
Camp 16	5	100%	83	100%
Camp 17	5	100%	77	100%
Camp 18	8	100%	117	100%
Camp 19	5	100%	42	100%
Camp 20	2	100%	40	100%
Camp 20 Ext	2	100%	32	100%
Camp 9	7	100%	126	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	W33		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
Alerts Northern group				
Camp 21 Chakmarkul	0	0%	35	100%
Camp 22 Unchiprang	2	100%	49	100%
Camp 23 Shamlapur	1	100%	16	100%
Camp 24 Leda	3	100%	64	100%
Camp 25 Ali Khali	1	100%	21	100%
Camp 26 Nayapara	5	100%	85	100%
Camp 27 Jadimura	1	100%	50	100%
Nayapara RC	2	100%	30	100%

Map 7 | Number of alerts 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

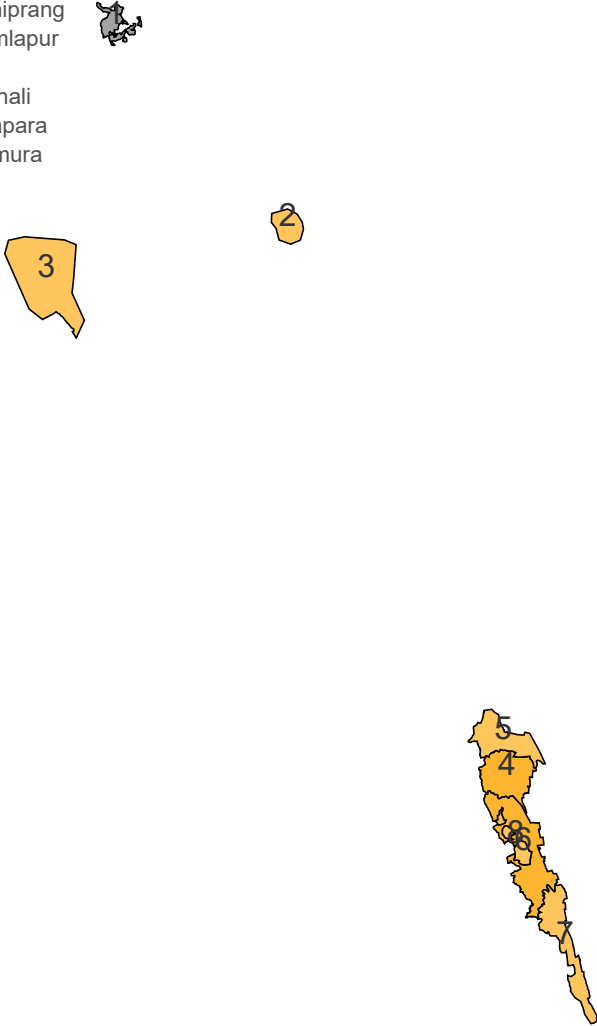


Table 11 | Performance by type of alert

Event	W33		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
Indicator-based surveillance				
Malaria	0	0%	3	100%
Measles	11	100%	342	100%
Bloody Diarr.	0	0%	0	0%
AFP	1	100%	20	100%
Meningitis	2	100%	18	100%
Haem. fever (susp.)	1	100%	15	100%
NNT	0	0%	3	100%
Unexp. fever	2	100%	104	100%
AWD	1	100%	160	100%
ARI	1	100%	139	100%
AJS	0	0%	63	100%
Varicella (Susp.)	0	0%	107	100%
Suspected COVID-19	0	0%	0	0%
Event-based surveillance				
EBS total	7	100%	162	100%

Table 12 | Risk assessment

W33	Cumulative (2022)	
0	7	Low risk
0	1	Moderate risk
0	0	High risk
0	0	Very high risk

For more help and support, please contact:

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Cox's Bazar, Bangladesh
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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>



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Global
EWARS

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Rohingya Emergency Response

Early Warning, Alert and Response System (EWARS)

Annex W33 2022



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Welfare Bangladesh



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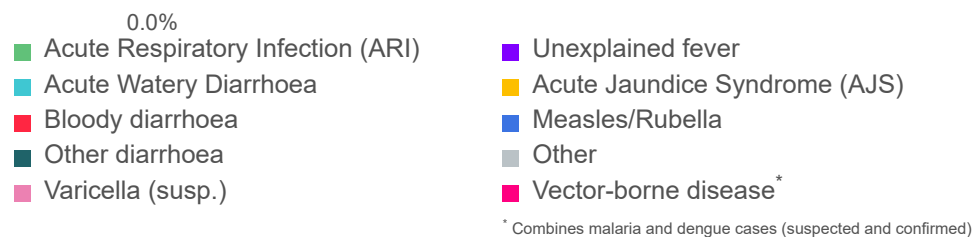
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Proportional morbidity

Figure 1 | Proportional morbidity (W33 2022)



Disease	W33		2022	
	# cases	% morbidity	# cases	% morbidity
AWD	2,098	2.5%	83,090	2.6%
Bloody diarr.	277	0.3%	11,592	0.4%
Other diarr.	789	0.9%	33,082	1.0%
Susp. Varicella	14	0.0%	8,712	0.3%
ARI	13,389	15.8%	563,580	17.5%
Measles/Rub.	10	0.0%	716	0.0%
AFP	1	0.0%	52	0.0%
Susp. mening.	11	0.0%	119	0.0%
AJS	15	0.0%	728	0.0%
Susp. HF	22	0.0%	76	0.0%
Neo. tetanus	0	0.0%	8	0.0%
Adult tetanus	0	0.0%	12	0.0%
Malaria (conf.)	3	0.0%	333	0.0%
Malaria (susp.)	1,413	1.7%	48,023	1.5%
Dengue (conf.)	926	1.1%	13,486	0.4%
Dengue (susp.)	389	0.5%	6,028	0.2%
Unexpl. fever	1,069	1.3%	38,569	1.2%
Sev. Malnut.	43	0.1%	1,303	0.0%
Inj./Wounds	1,436	1.7%	69,388	2.2%
Other	62,672	74.0%	2,327,008	72.4%
Total	83,570	100%	3,212,583	100%

Trend in consultations and key diseases

Figure 2 | Trend in proportional morbidity for key diseases (W33)

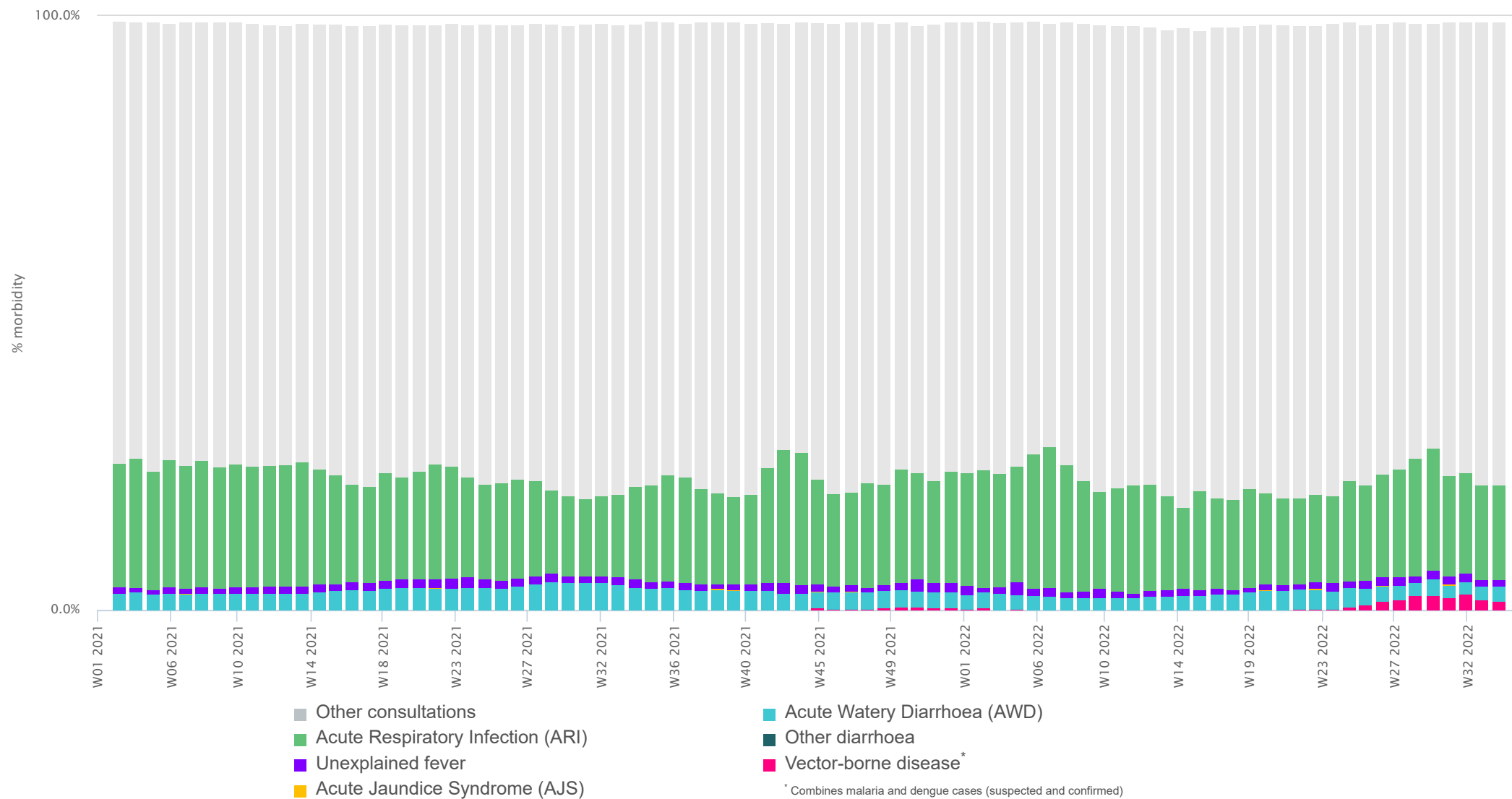
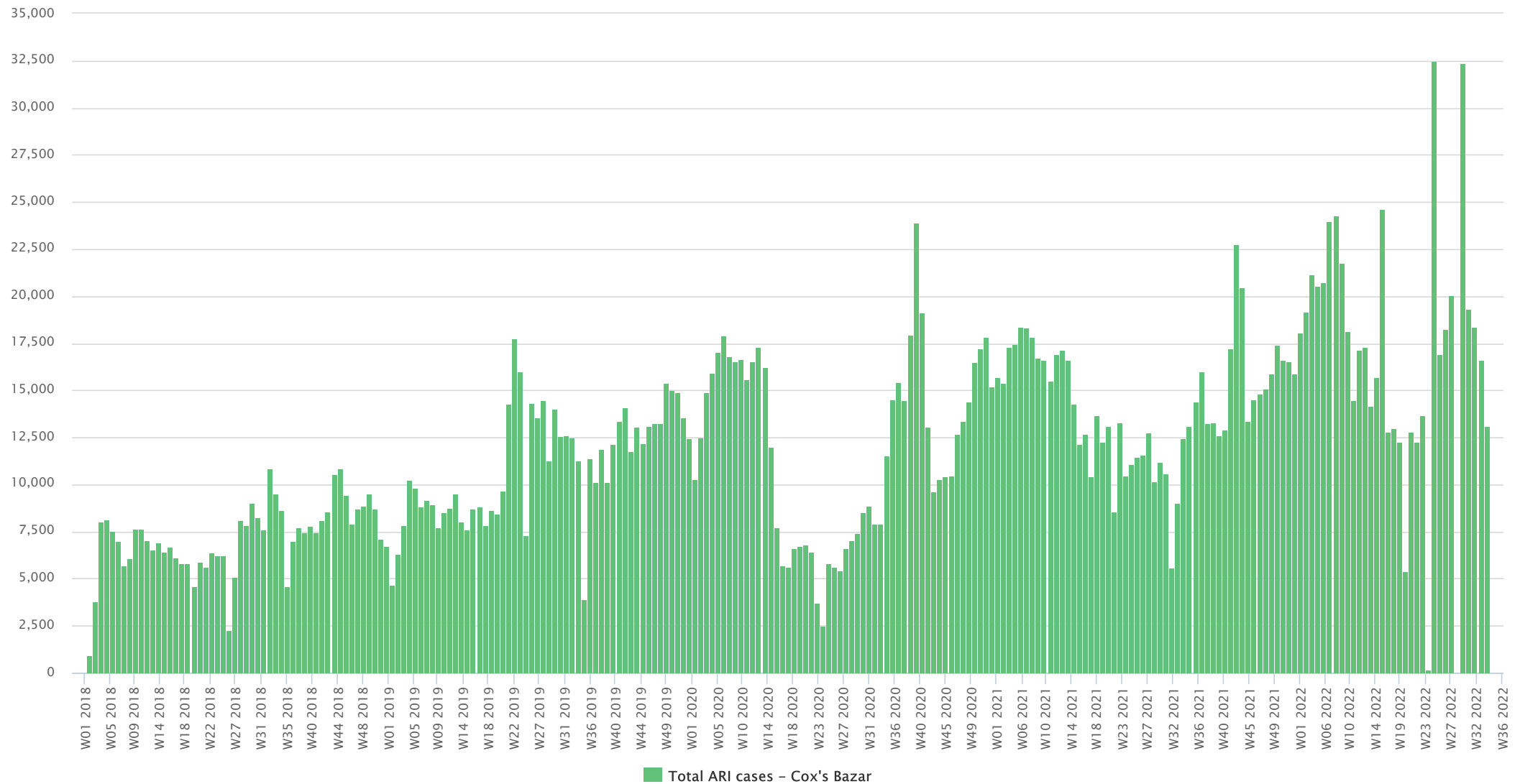
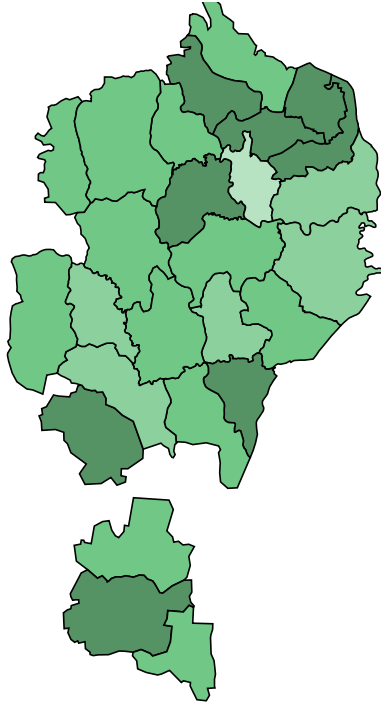


Figure 3 | Trend in number of cases over time (W38 2017 - W33 2022)

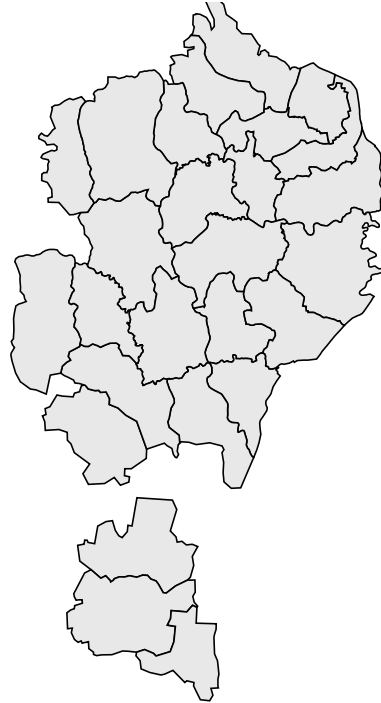


Map 1 | Map of cases by camp (W33 2022)

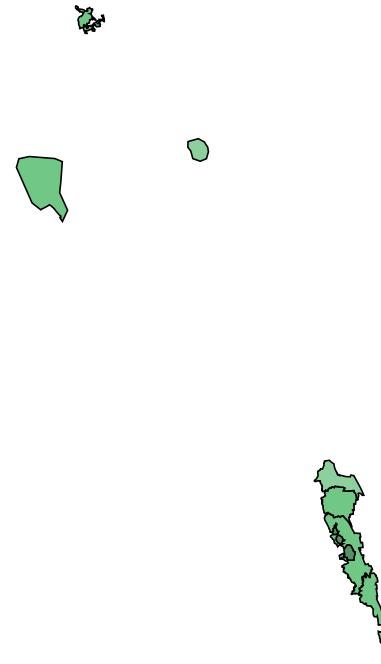
a. Ukhia | Number of cases



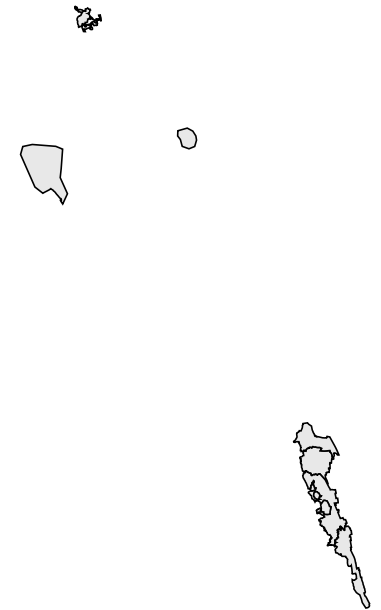
b. Ukhia | Number of alerts



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 (W33 2022)

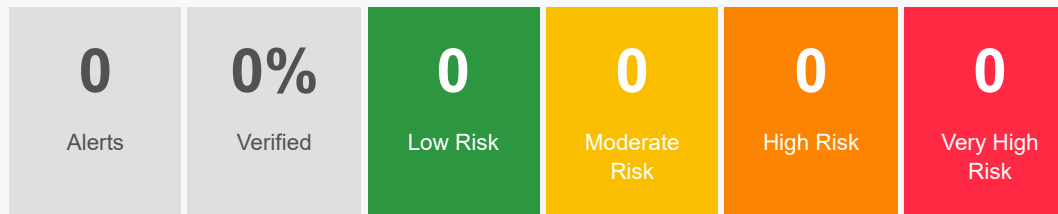
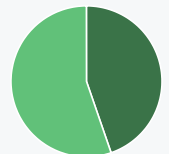


Figure | % sex



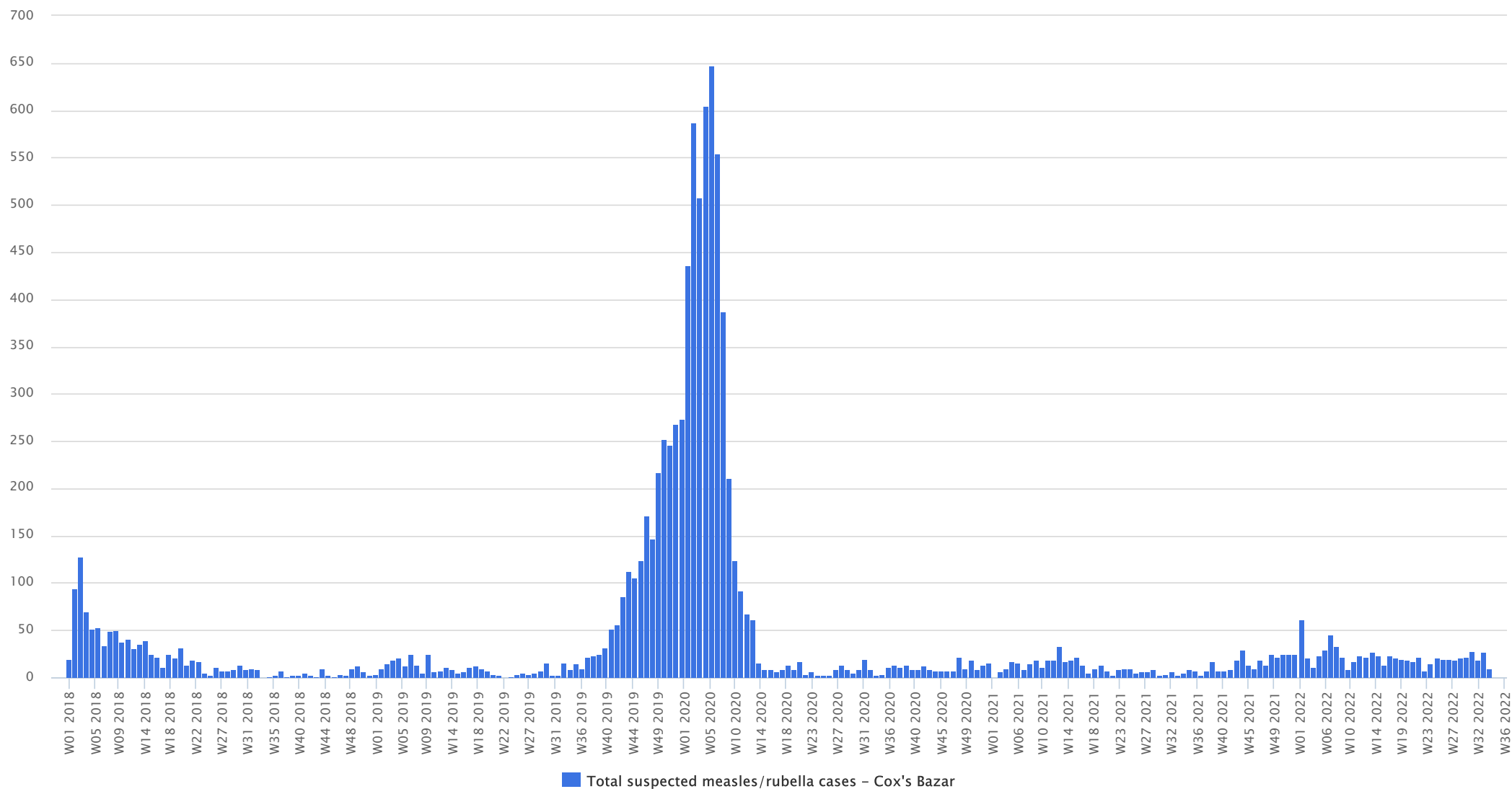
Female Male

Figure | % age



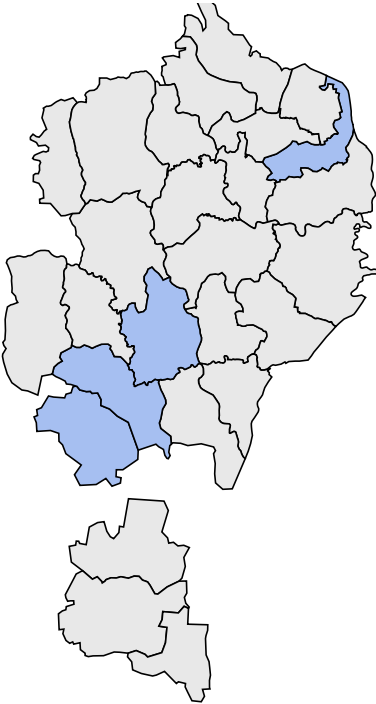
>=5 < 5

Figure 4 | Trend in number of suspected cases over time (W38 2017 - W33 2022)

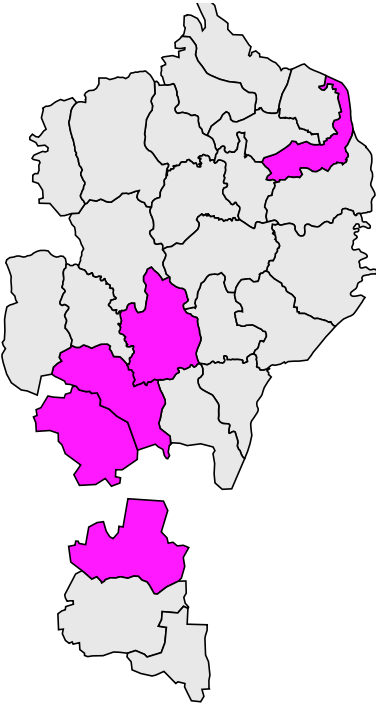


Map 2 | Map of cases by camp (W33 2022)

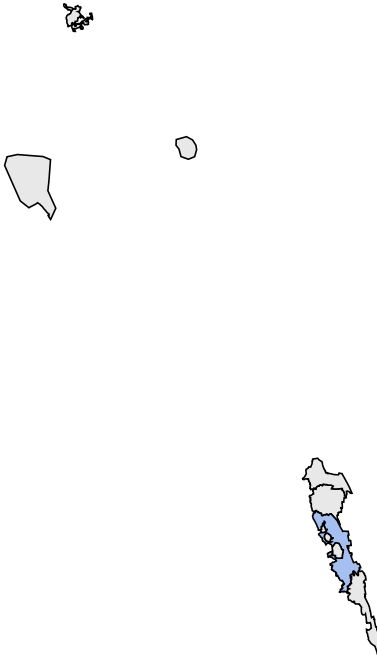
a. Ukhia | Number of cases



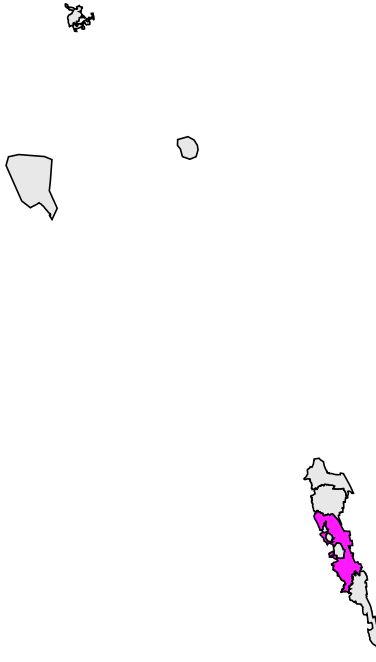
b. Ukhia | Number of alerts



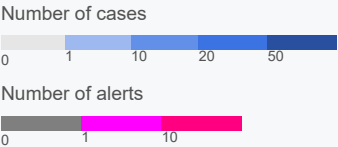
c. Teknaf | Number of cases



d. Teknaf | Number of alerts



Map legend



Alert threshold
1 case. Source: IEDCR

Alert management (W33 2022)

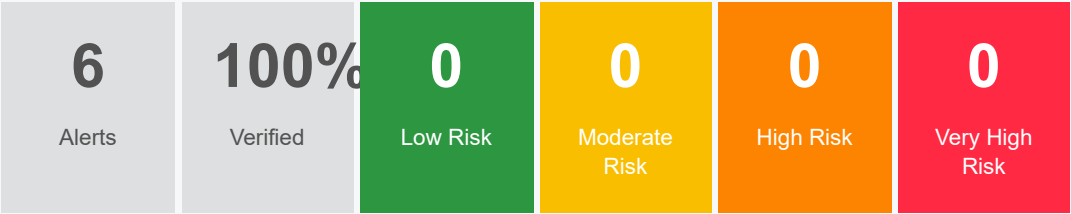


Figure | % sex

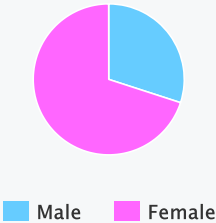


Figure | % age

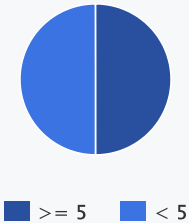
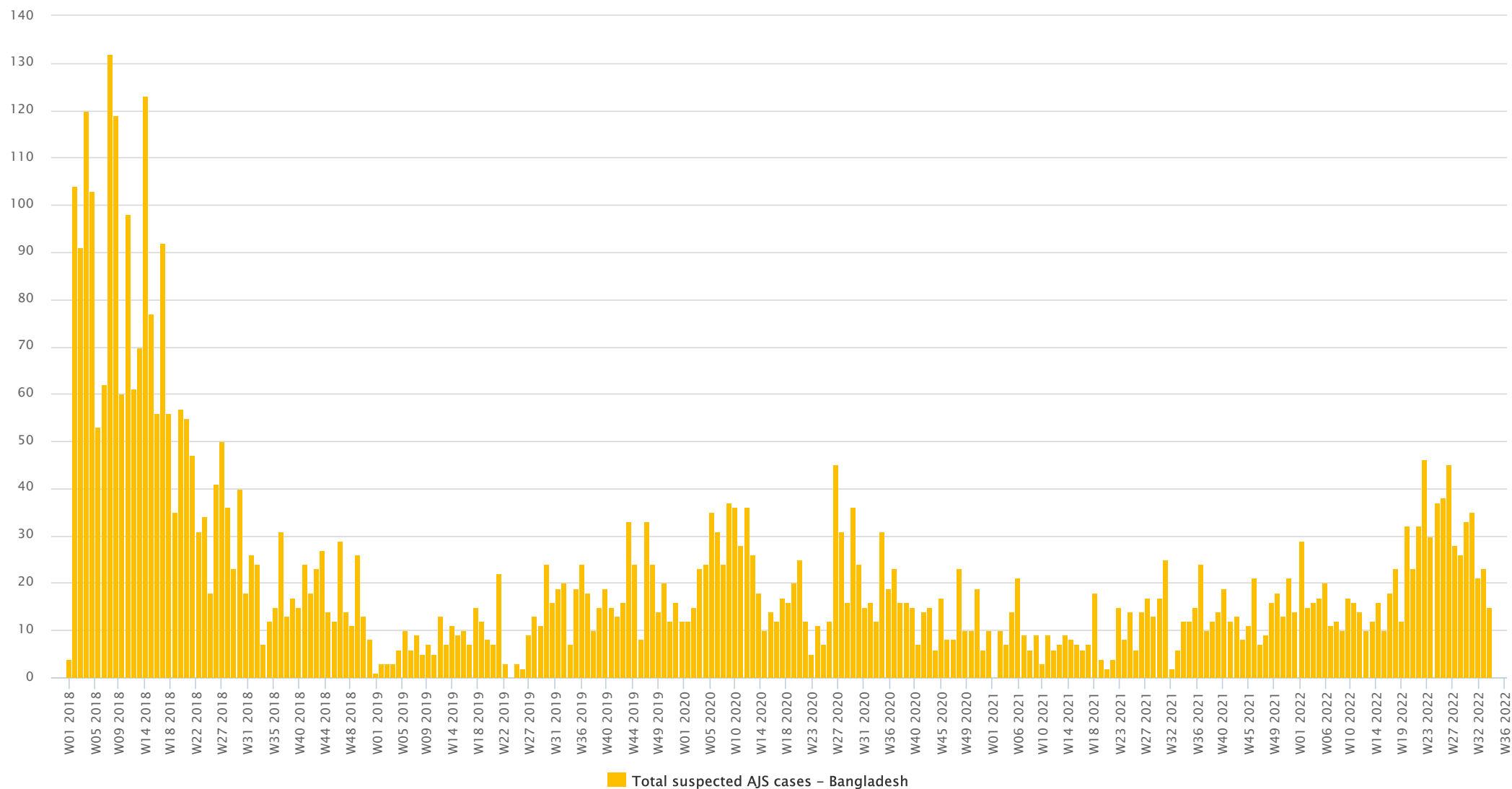
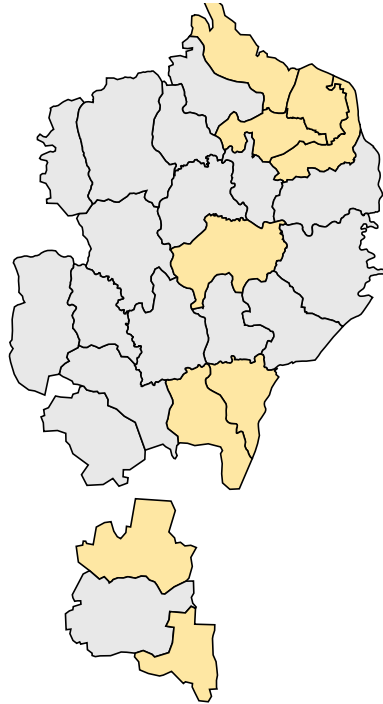


Figure 5 | Trend in number of cases over time (W38 2017 - W33 2022)

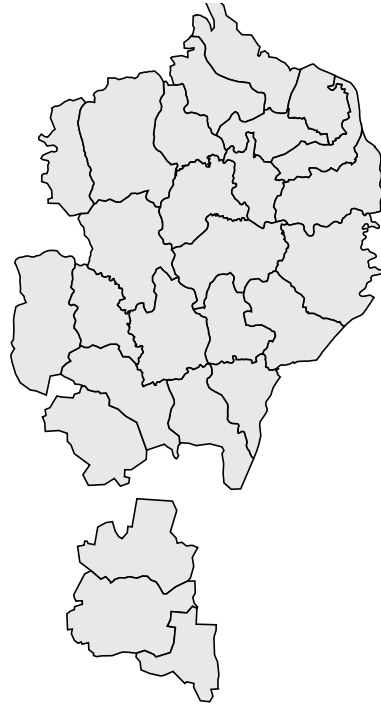


Map 3 | Map of cases by camp (W37 2017 - W33 2022)

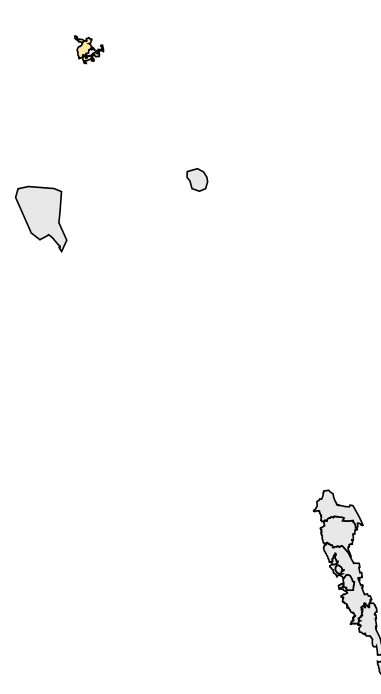
a. Ukhia | Number of cases



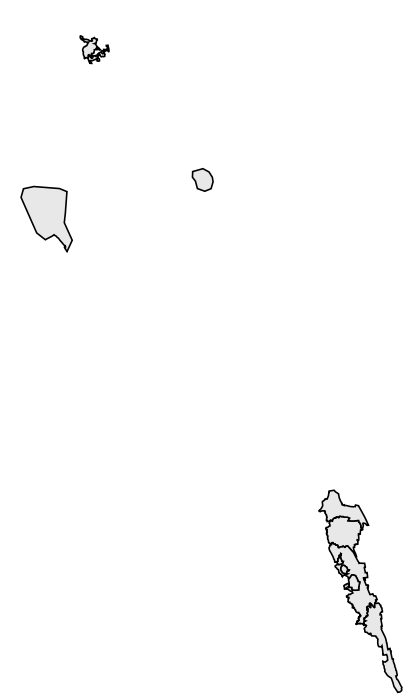
b. Ukhia | Number of alerts



c. Teknaf | Number of cases



d. Teknaf | Number of alerts

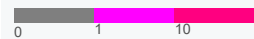


Map legend

Number of cases



Number of alerts



Alert threshold

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

Alert management (W33 2022)

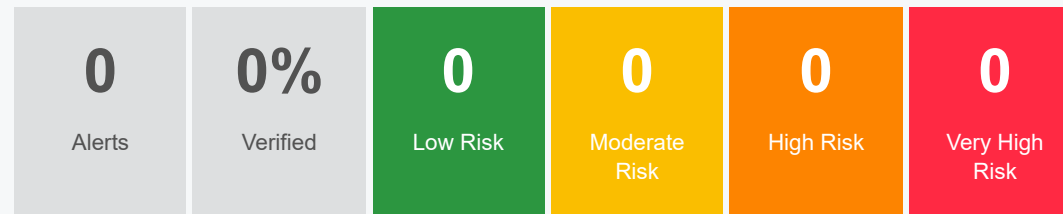
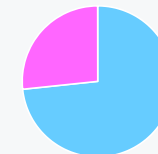
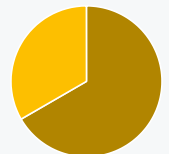


Figure | % sex



Male Female

Figure | % age



>= 5 < 5

Figure 6 | Trend in number of cases over time (W38 2017 - W33 2022)

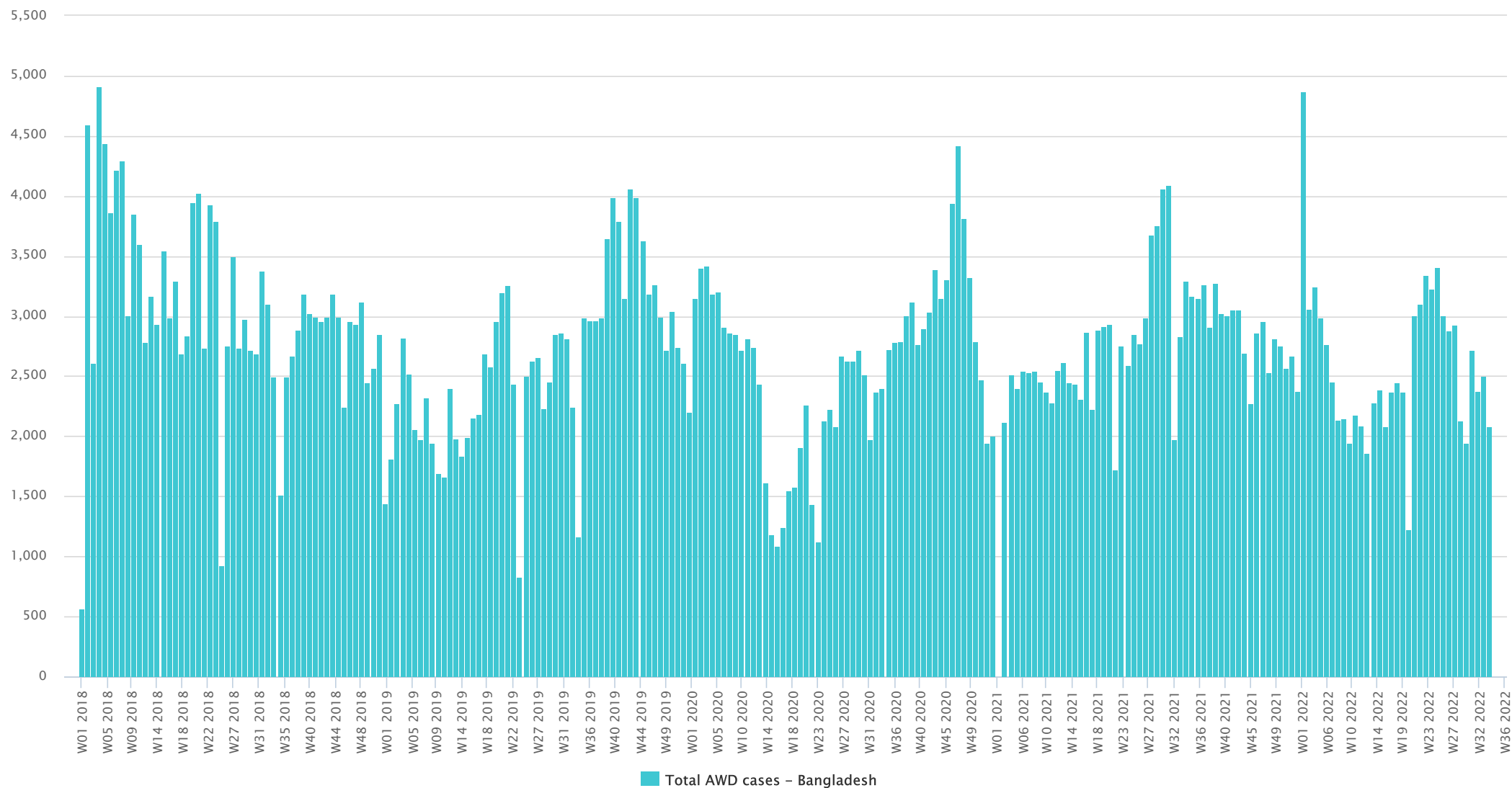
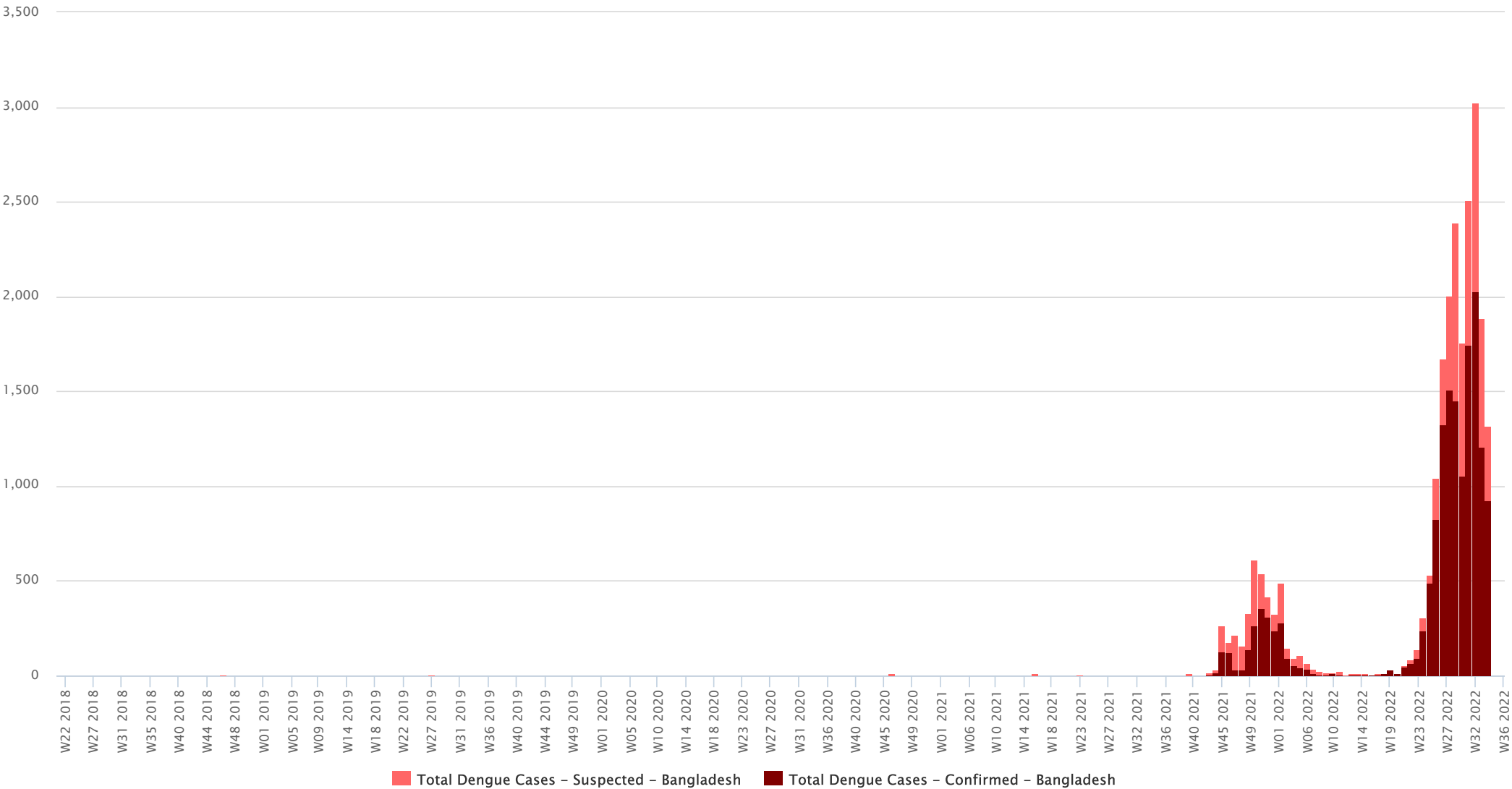
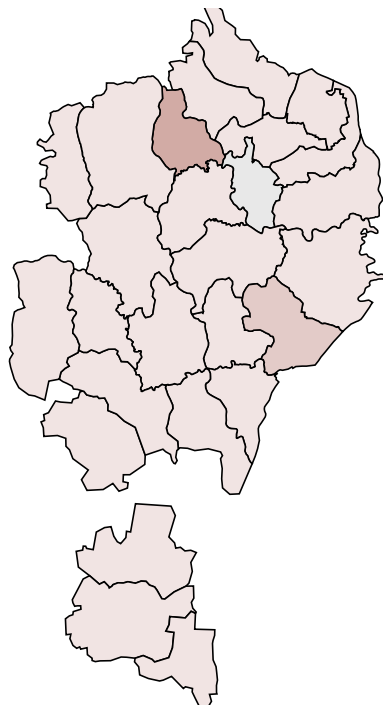


Figure 7 | Trend in number of cases over time (W38 2017 - W33 2022)

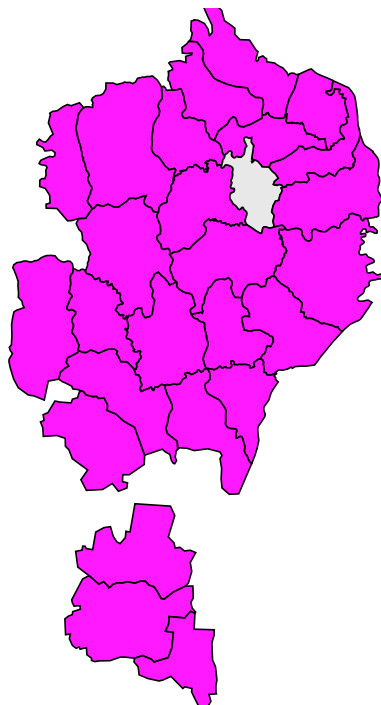


Map 4 | Map of cases by camp (W37 2017 - W33 2022)

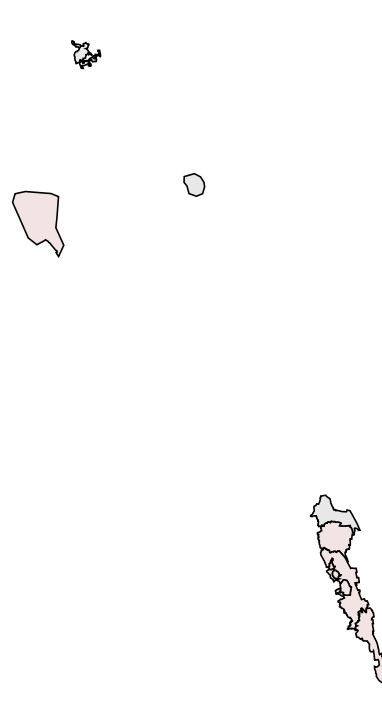
a. Ukhia | Number of cases



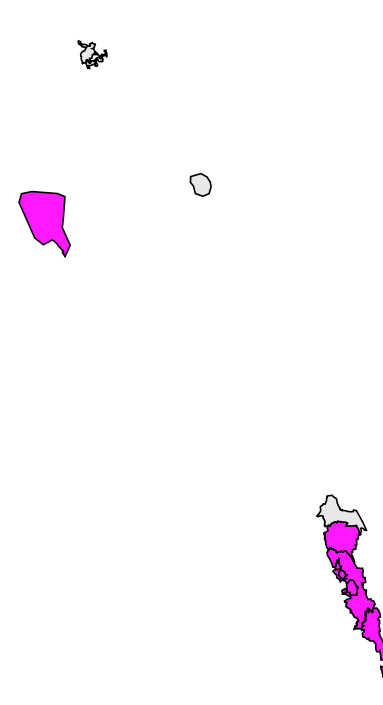
b. Ukhia | Number of alerts



c. Teknaf | Number of cases

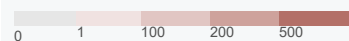


d. Teknaf | Number of alerts



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 (W33 2022)

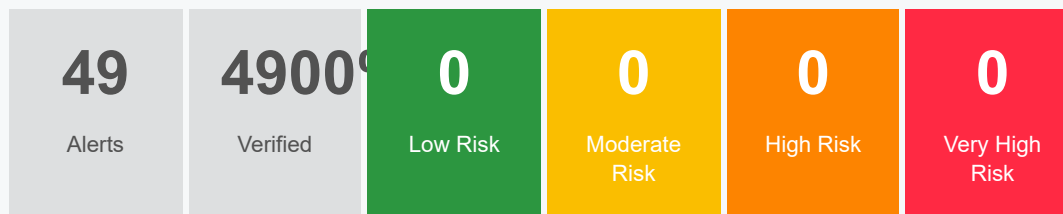
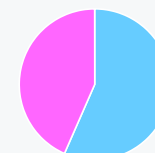
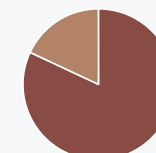


Figure | % sex



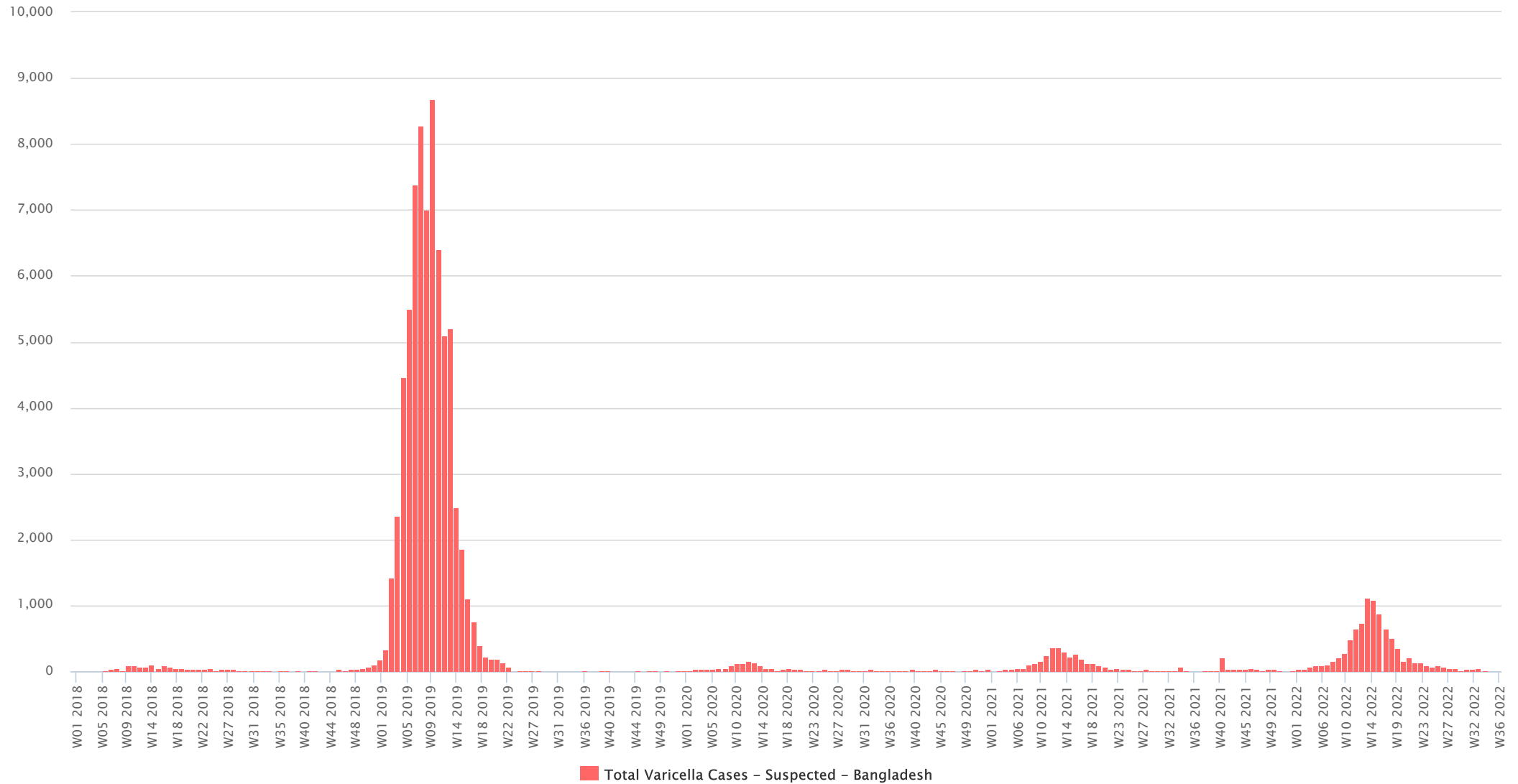
Male Female

Figure | % age



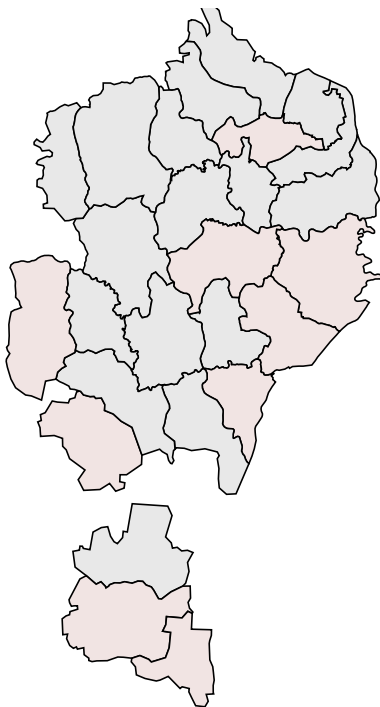
>= 5 < 5

Figure 7 | Trend in number of cases over time (W38 2017 - W33 2022)



Map 4 | Map of cases by camp (W37 2017 - W33 2022)

a. Ukhia | Number of cases



c. Teknaf | Number of cases

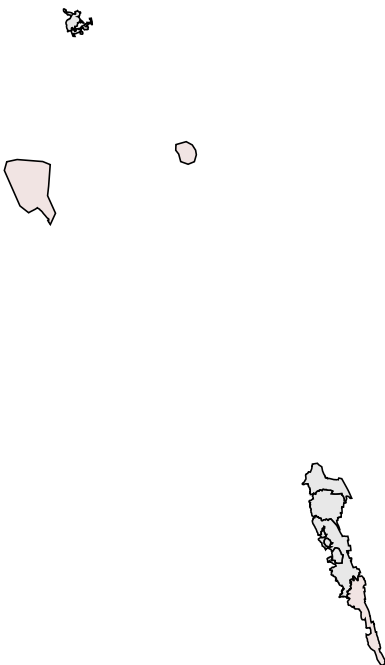


Figure | % sex

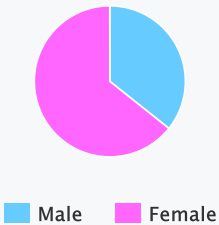
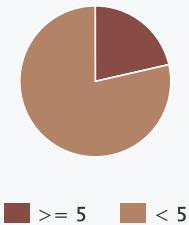


Figure | % age



For more help and support, please contact:

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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>

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