



# Epidemiological Highlights

Week 50 (4-10 Dec) 2022



World Health  
Organization

# Highlights: COVID-19

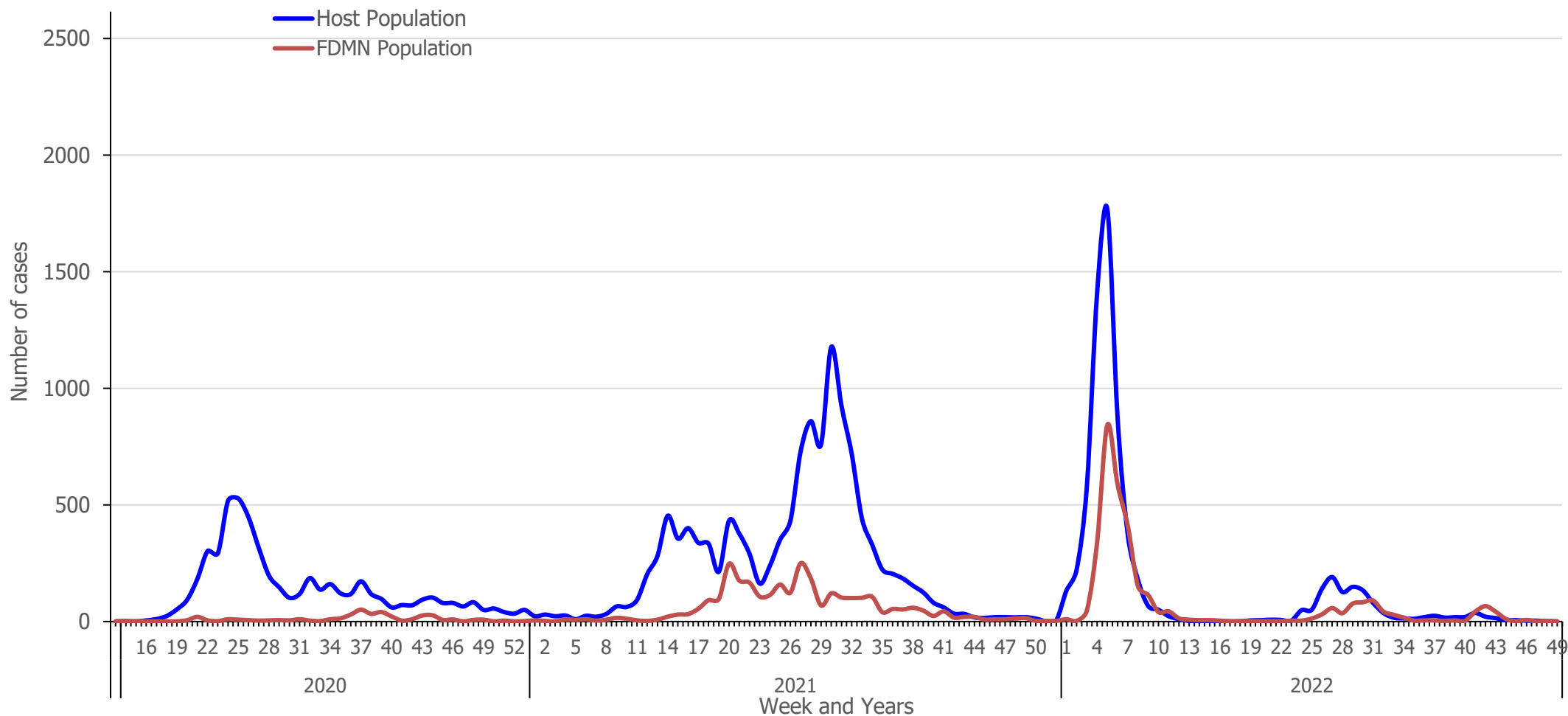
**FDMN: Transmission almost under control (declining testing as caseloads hit zero)**

- No** new confirmed cases were reported this week taking the total confirmed cases are **6585**
- Weekly Testing Positivity Rate(TPR) and case incidence/new infections **are zero**
- No new death reported, total deaths stabilized at **46** (CFR of 0.7%)
- Level of recovery continues to steady at 99%

**Host Population: Transmission under control as zero weekly caseloads sustained for two weeks**

- **No new** cases were reported this week similar to last week, cumulative cases remain at **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:** No new confirmed case was reported this week, and weekly TPR and case incidence are zero

**Host Population:** No new cases reported in the week which is similar to last week, weekly TPR and case incidence steady at zero

# EWARS Reporting Updates

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

- Only 149/161 weekly reports were received on time in week 50
- Timeliness of reporting for this week was 93%
- Sixty-four (64) alerts were triggered
- All alerts were reviewed and verified by the WHO EWARS team; this was more than that of the previous week (48 alerts in week 49, 2022)

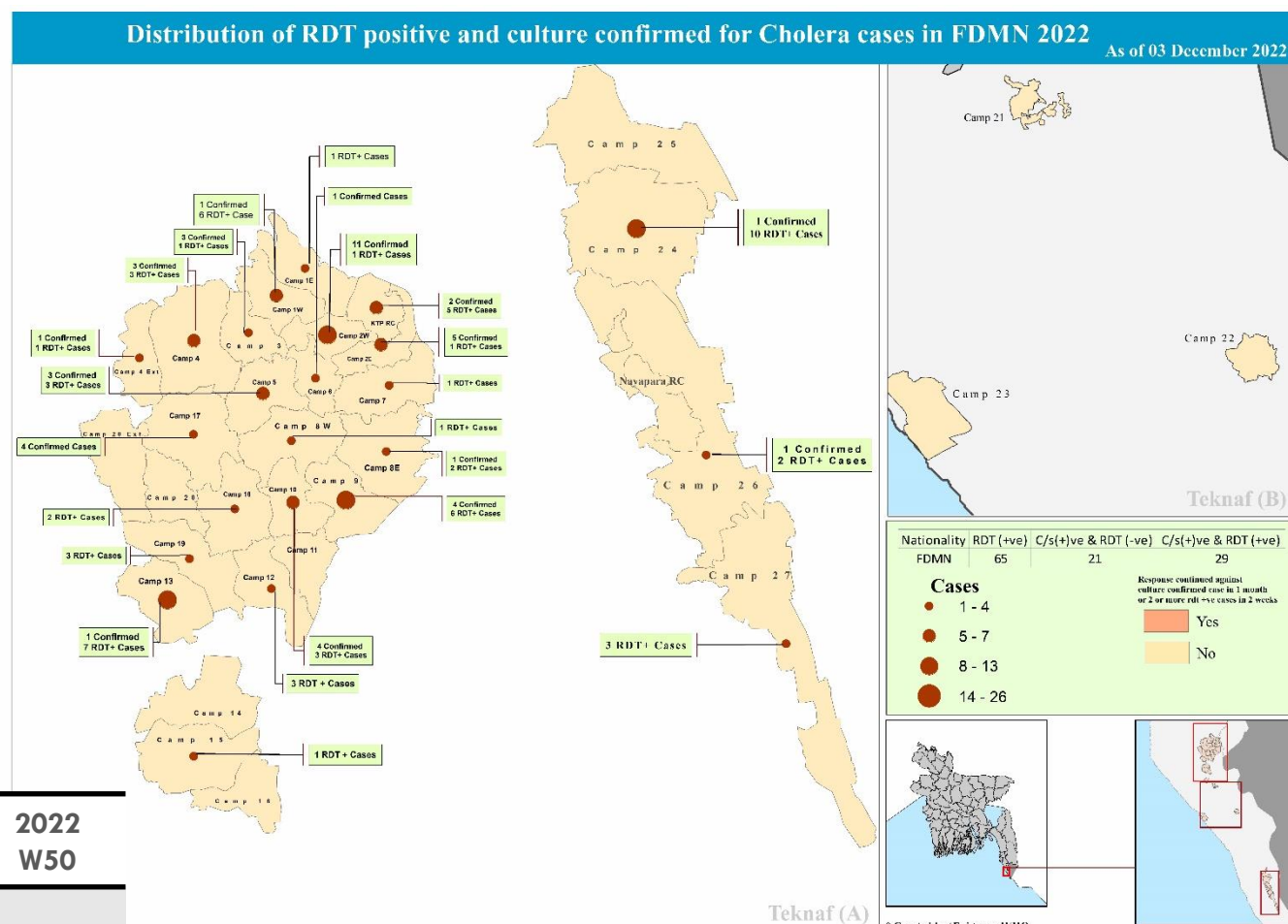
# Highlights: Morbidities and Mortalities

- Acute Respiratory Infections (19.6%), Diarrheal Diseases (3.6%) & Injuries, and Wounds (2.5%) were the diseases and health conditions with the highest proportional morbidity in week 50.
- Monitoring of suspected SARI death under enhanced Community-based mortality surveillance has been continued since week 28, 2020. A total of 135 SARI deaths have so far been reported in 2022 of which eight (08) deaths upon investigation, were reclassified as probable COVID-19 Deaths
- This Epi week, two new SARI death were reported as highlighted below:

Year	Suspected SARI death reported (current week)	Reclassified as death due to probable COVID-19
2022	135 (2)	8
2021	96	15
2020	49	2

# Cholera/AWD Surveillance Updates

- In this week, there is no new cultured confirmed Cholera cases reported, among samples sent for testing.
- A total of one hundred sixty-seven (167) RDT-positive AWD cases/ cholera suspected cases including 68 culture-confirmed Cholera cases have so far been reported as of Epi Week 50 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 W50
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**RDT positive AWD cases & culture confirmed for Cholera cases**

	49	258	28	357	167
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**Culture confirmed for Cholera**

	7	184	5	136	68
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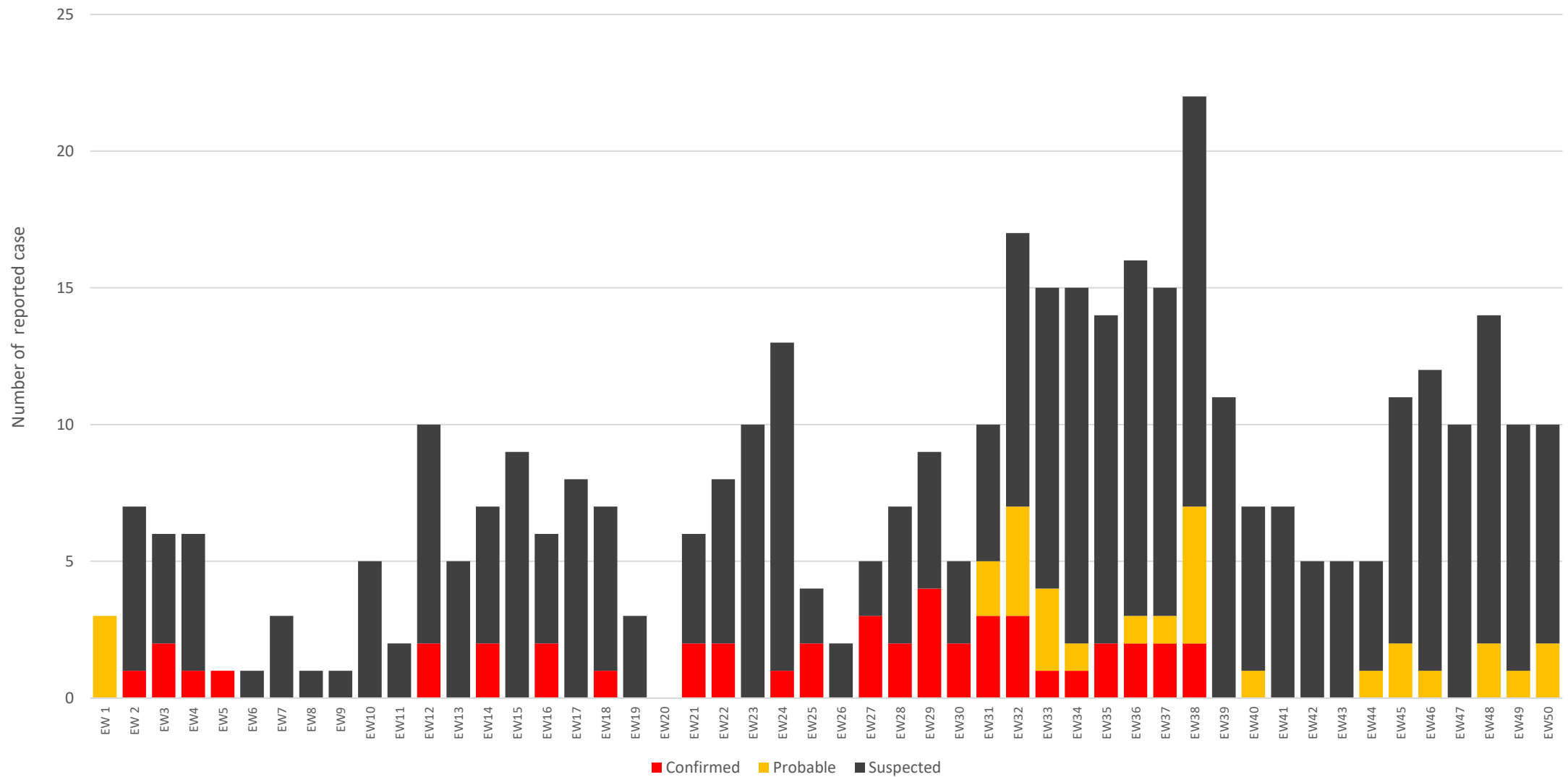
# Diphtheria Surveillance Updates

- Two (2) probable and eight (8) suspected diphtheria cases were reported in go.data in the Epi week
- 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	30
Suspected	1796	3549	523	198	118	315
Death	30	14	3	0	5	2

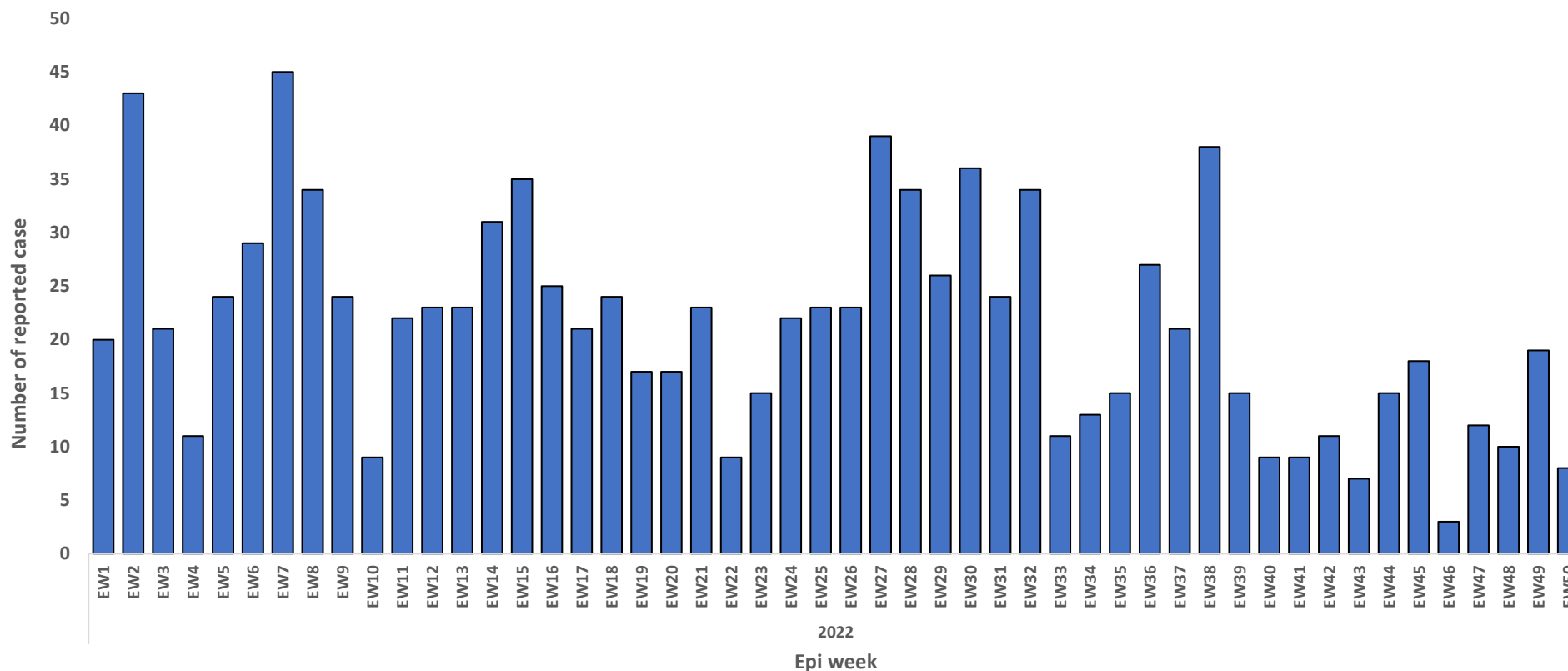
# Trends of Diphtheria cases

Total number of diphtheria case reported in EWARS from week 1-50, 2022



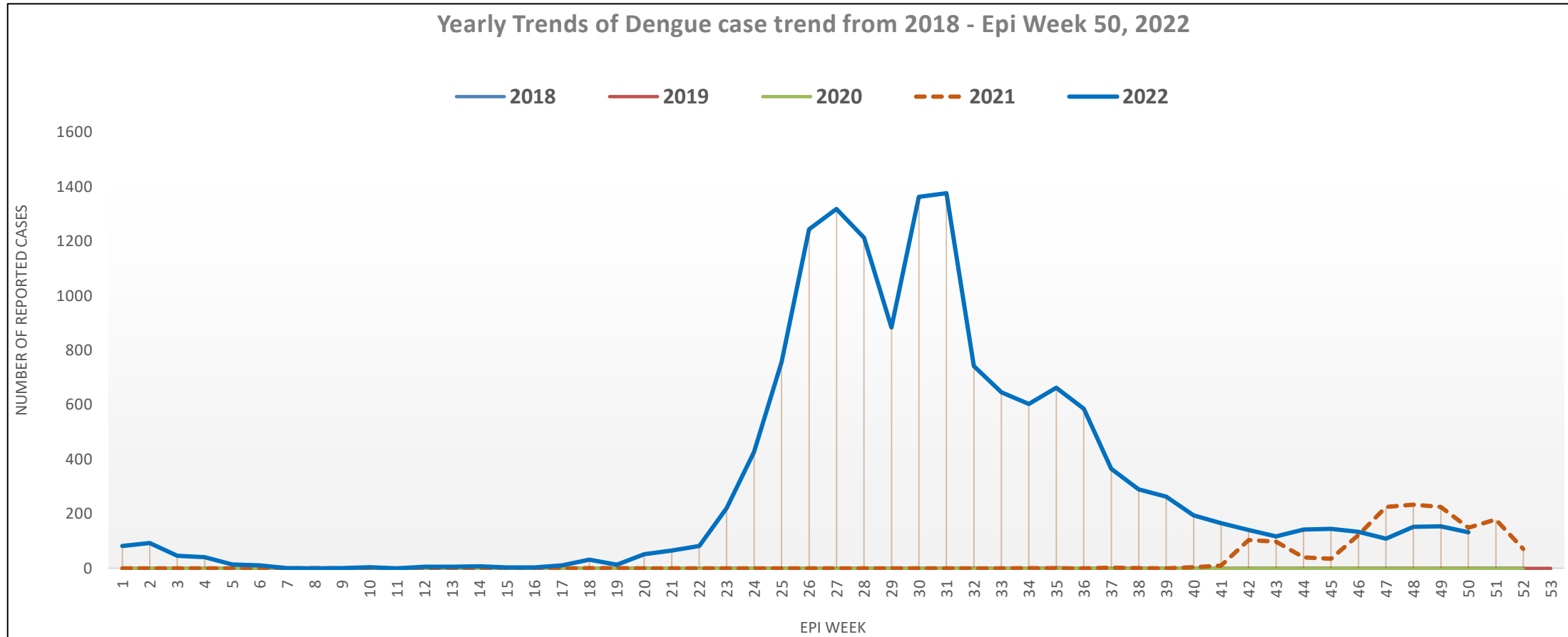
# Epi Curve of Suspected Measles Cases

Total number of Measles case reported in EWARS from week 1-50, 2022



- > In week 50, 8 suspected measles cases were reported through weekly reporting. This brings the total number of suspected measles cases to 1,067 reported in 2022
- > About 55% (584/1,067) 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 17 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 has gradually declined in these camps

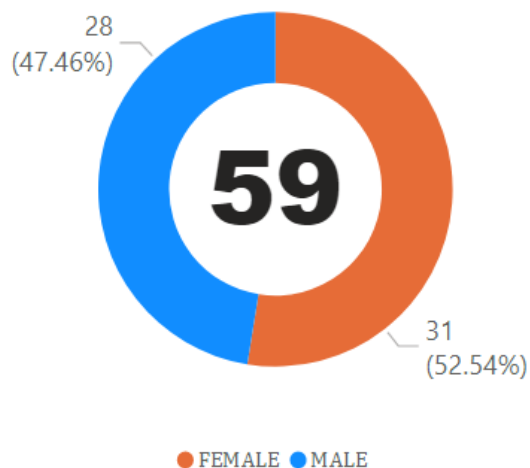
# Community-based Mortality surveillance updates Epi week 50

Probable causes of death	Epi week 50	In 2022
Still Birth	4 (7%)	215 (10%)
Neonatal Death (<28 days old)	7 (12%)	225 (11%)
Infectious Disease	2 (3%)	171 (8%)
Severe Acute Respiratory Infection (SARI)	2 (3%)	54 (3%)
Injury	--	42 (2%)
Maternal Death	1 (2%)	45 (2%)
Acute Malnutrition	--	1 (0%)
Other	43 (73%)	1358 (64%)
<b>Total</b>	<b>59 (100%)</b>	<b>2111 (100%)</b>

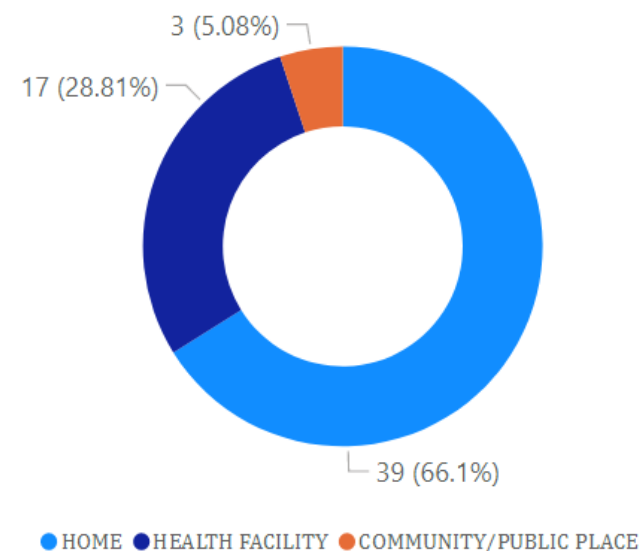
Partners to report all mortalities into the EWARS platform using both case and event-based reporting as applicable

# Community-based Mortality surveillance updates Epi week 50

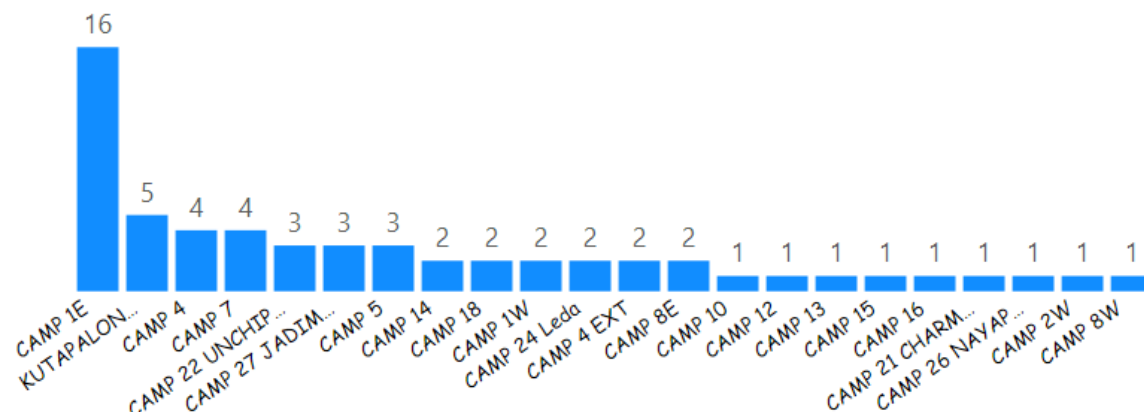
**Gender distribution**



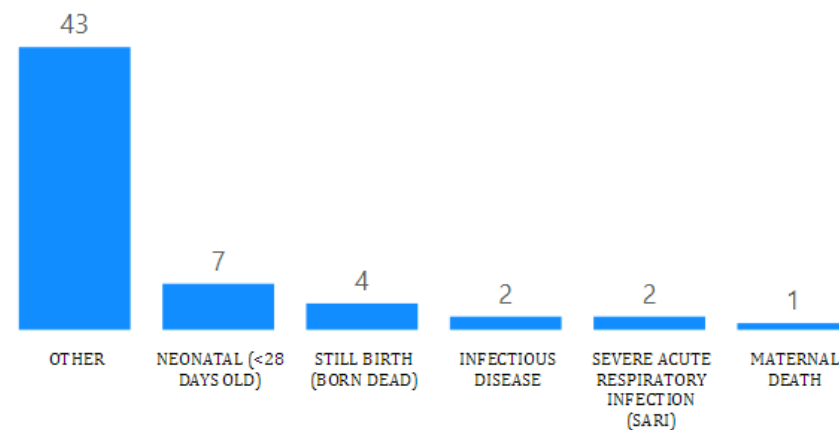
**Place of death**



**Distribution of deceased Camp**



**Distribution of Probable cause of death**



# Bangladesh

Rohingya Emergency Response

Early Warning, Alert and  
Response System (EWARS)

Epidemiological Bulletin W50 2022



Ministry of Health and Family  
Welfare Bangladesh



World Health  
Organization



HEALTH SECTOR  
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Printed: 11:34 Sunday, 11 December 2022 UTC

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## Sources of data

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

# Highlights W50 2022

**Table 1 | Coverage**

#	%	
<b>918,841</b>	-	Estimated total Rohingya population <sup>1</sup>
<b>0</b>	<b>0%</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**

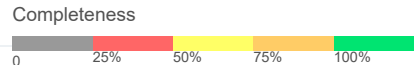
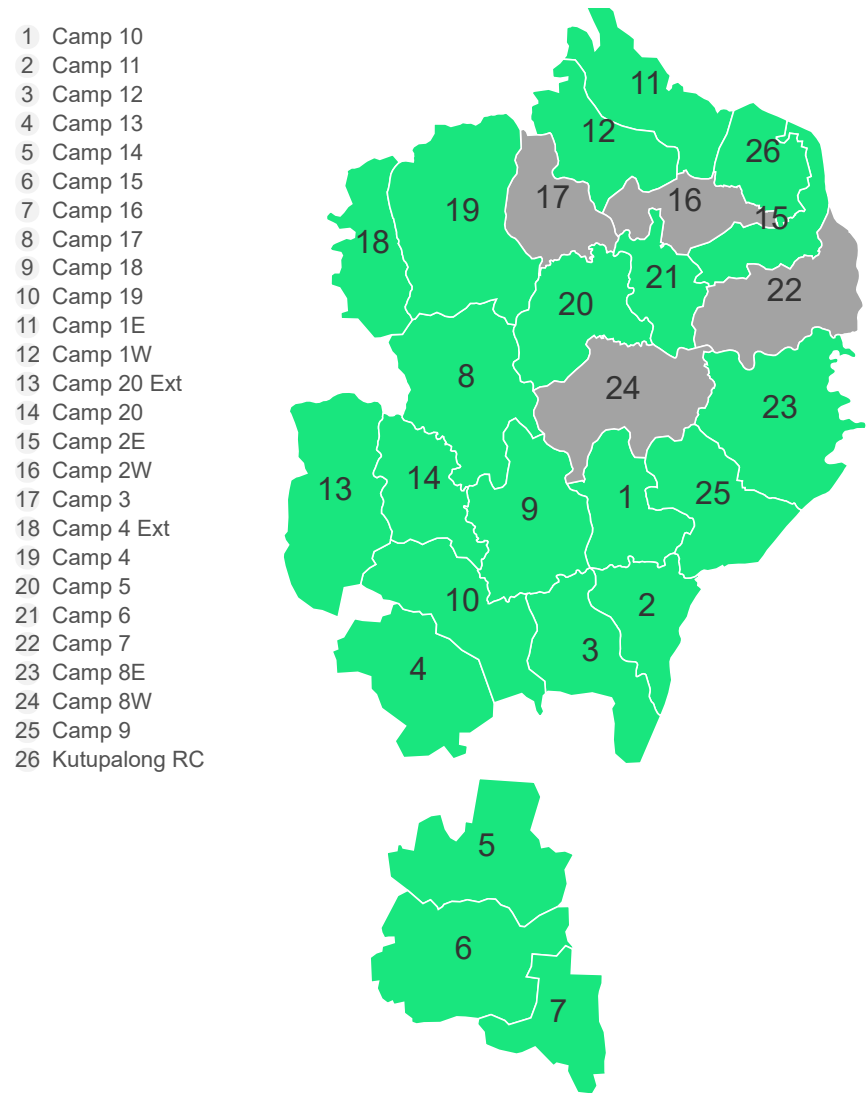
W50	Cumulative (2022)	
<b>149</b>	<b>7854</b>	Number of weekly reports received
<b>93%</b>	<b>92%</b>	Completeness
<b>93%</b>	<b>91%</b>	Timeliness

**Table 3 Alert performance indicators**

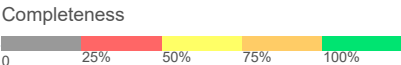
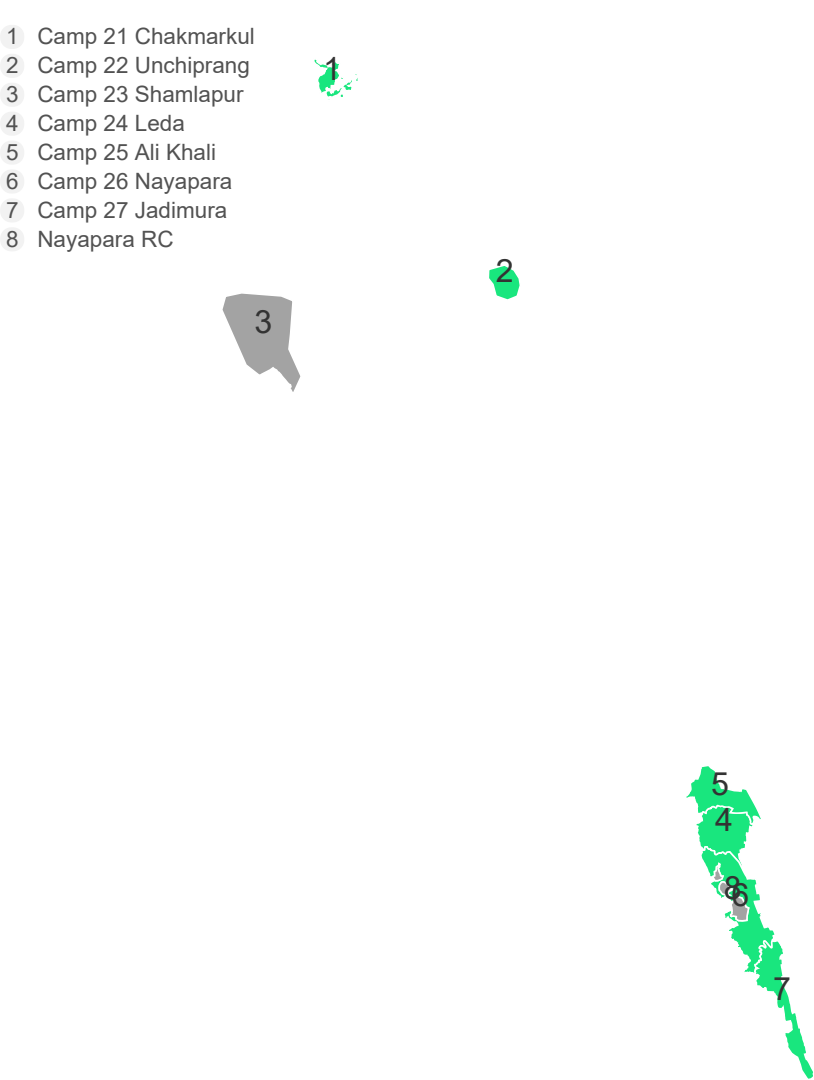
W50	Cumulative (2022)	
<b>64</b>	<b>4,568</b>	Total alerts raised
<b>0%</b>	<b>100%</b>	% verified
<b>0%</b>	<b>0%</b>	% auto-discarded
<b>0%</b>	<b>0%</b>	% undergoing risk assessment
<b>0%</b>	<b>0%</b>	% completed risk assessment

<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

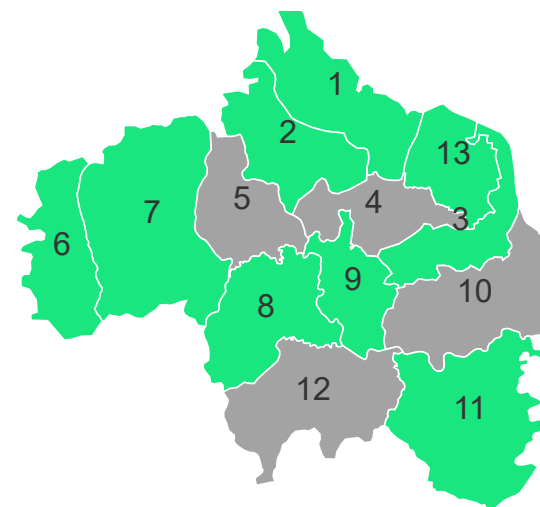


**Table 4 | Performance by camp (W50 2022)**

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

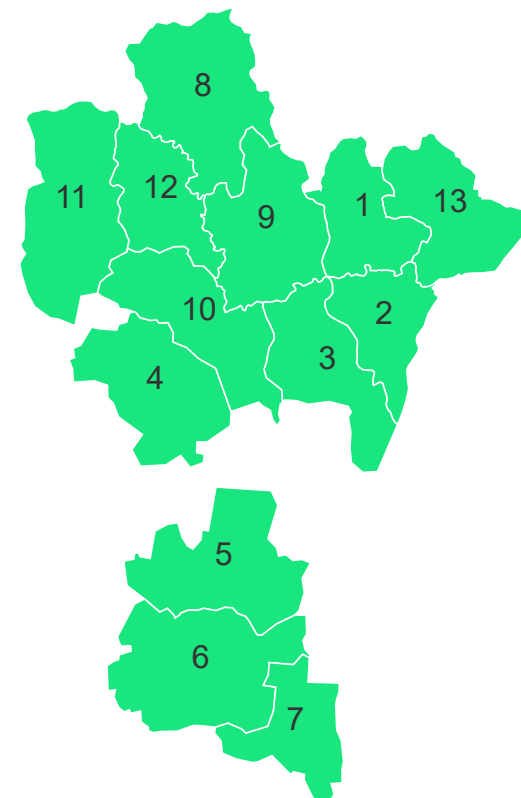


**Table 5 | Performance by camp (W50 2022)**

Southern group	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
Ukhia Southern Group				
Camp 10	4	2	100%	0%
Camp 11	6	1	100%	0%
Camp 12	6	2	100%	0%
Camp 13	9	3	89%	0%
Camp 14	6	1	100%	0%
Camp 15	8	3	88%	13%
Camp 16	7	1	86%	0%
Camp 17	5	4	100%	0%
Camp 18	4	2	100%	0%
Camp 19	4	2	100%	0%
Camp 20	4	2	100%	0%
Camp 20 Ext	3	3	100%	0%
Camp 9	6	1	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



Completeness

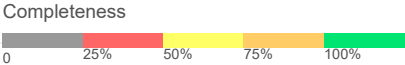
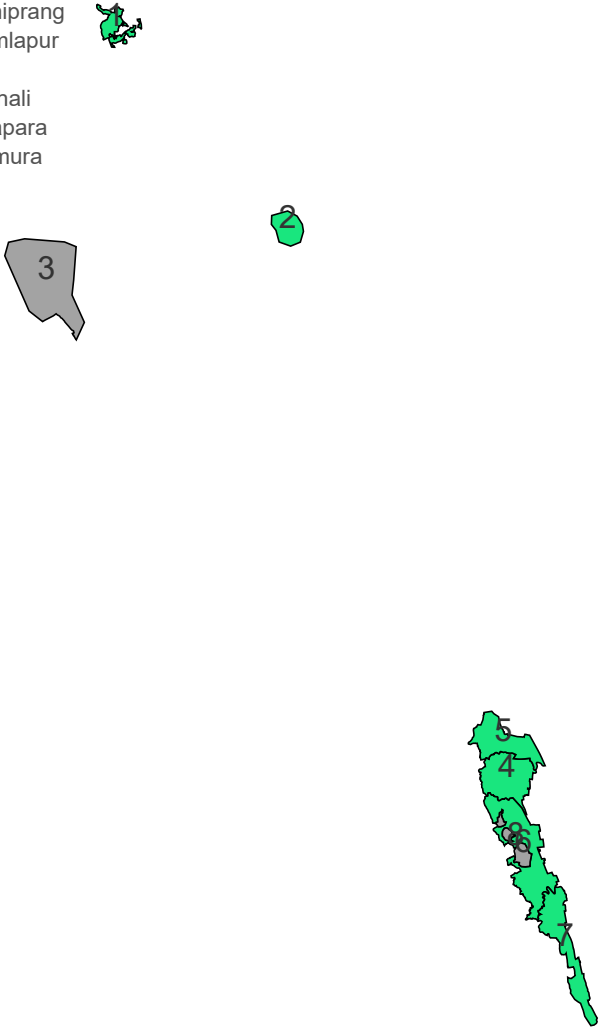


Table 6 | Performance by camp (W50 2022)

Teknaf	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
Ukhia Teknaf				
Camp 21 Chakmarkul	4	2	100%	0%
Camp 22 Unchiprang	5	2	60%	0%
Camp 23 Shamlapur	3	0	67%	0%
Camp 24 Leda	2	1	50%	0%
Camp 25 Ali Khali	3	2	100%	0%
Camp 26 Nayapara	5	2	100%	0%
Camp 27 Jadimura	2	1	100%	0%
Nayapara RC	2	0	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 (W50 2022)

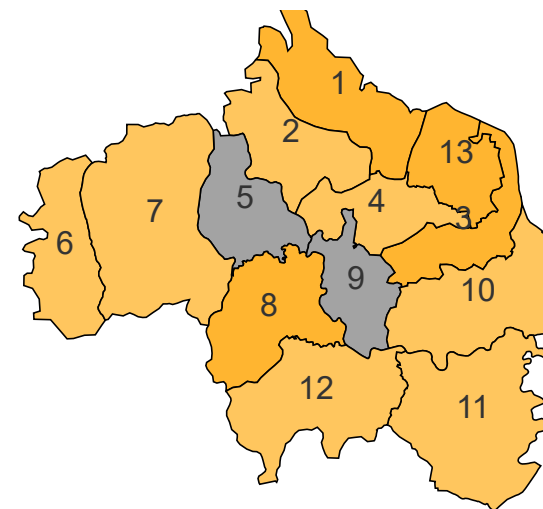
Partner	Performance		Reporting		Partner	Performance		Reporting	
	# sites	# reports received	Completeness	Timeliness		# sites	# reports received	Completeness	Timeliness
AKF	1	1	100%	100%	IRC	4	3	0%	0%
AWARD	6	6	100%	100%	MSF	9	8	0%	0%
BASHMAH	1	1	100%	100%	MoH	12	10	42%	42%
BDRCS	11	11	100%	100%	MHI	0	0		
BRAC	11	11	100%	100%	Medair	0	0		
CARE	4	4	100%	100%	FH/MTI	4	4	75%	75%
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	6	0%	0%	RPN	2	2	100%	100%
GK	10	10	50%	50%	RHU	3	3	100%	0%
Global One	1	1	100%	100%	RI	3	3	0%	0%
GUSS	1	1	100%	100%	RTMI	9	7	78%	78%
HAEFA	2	2	100%	100%	SALT	1	1	100%	100%
HAIB	0	0			SCI	7	7	100%	100%
HMBDF	2	2	0%	0%	DCHT-MM	1	1	100%	100%
HOPE	1	0	0%	0%	Turkish Government	1	1	100%	100%
ICRC	1	1	100%	100%	TdH	2	2	0%	0%
IOM	23	22	57%	57%					

Table 8 | Performance by camp

Northern group	W50		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
Alerts Northern group				
Camp 1E	3	100%	85	100%
Camp 1W	2	100%	219	100%
Camp 2E	3	33%	442	100%
Camp 2W	2	50%	150	99%
Camp 3	0	0%	207	100%
Camp 4	2	50%	183	99%
Camp 4 Ext	2	50%	67	99%
Camp 5	5	20%	149	97%
Camp 6	0	0%	112	99%
Camp 7	1	100%	97	100%
Camp 8E	2	50%	89	99%
Camp 8W	1	0%	245	100%
Kutupalong RC	3	100%	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

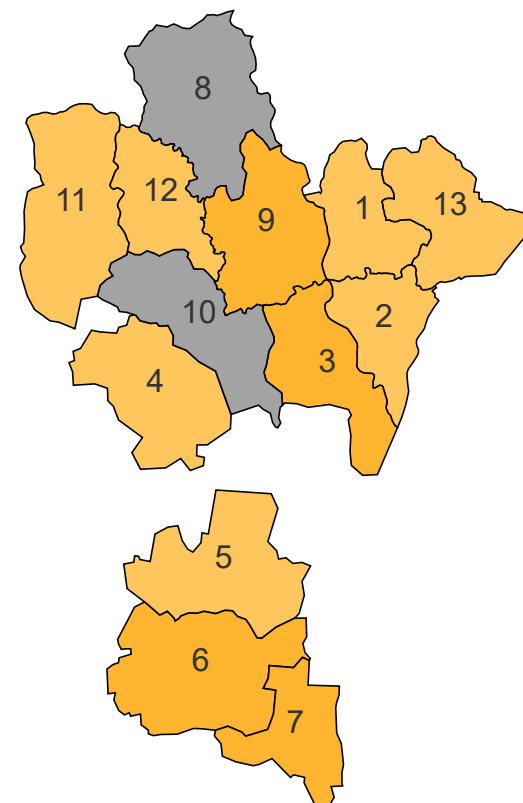


Table 9 | Performance by camp

Southern group	W50		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
Alerts Northern group				
Camp 10	1	0%	106	92%
Camp 11	1	0%	134	99%
Camp 12	3	0%	148	98%
Camp 13	2	50%	162	99%
Camp 14	1	100%	98	98%
Camp 15	3	33%	182	98%
Camp 16	4	100%	145	99%
Camp 17	0	0%	122	99%
Camp 18	5	20%	201	98%
Camp 19	0	0%	73	99%
Camp 20	1	0%	79	99%
Camp 20 Ext	2	0%	68	97%
Camp 9	3	67%	243	99%

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

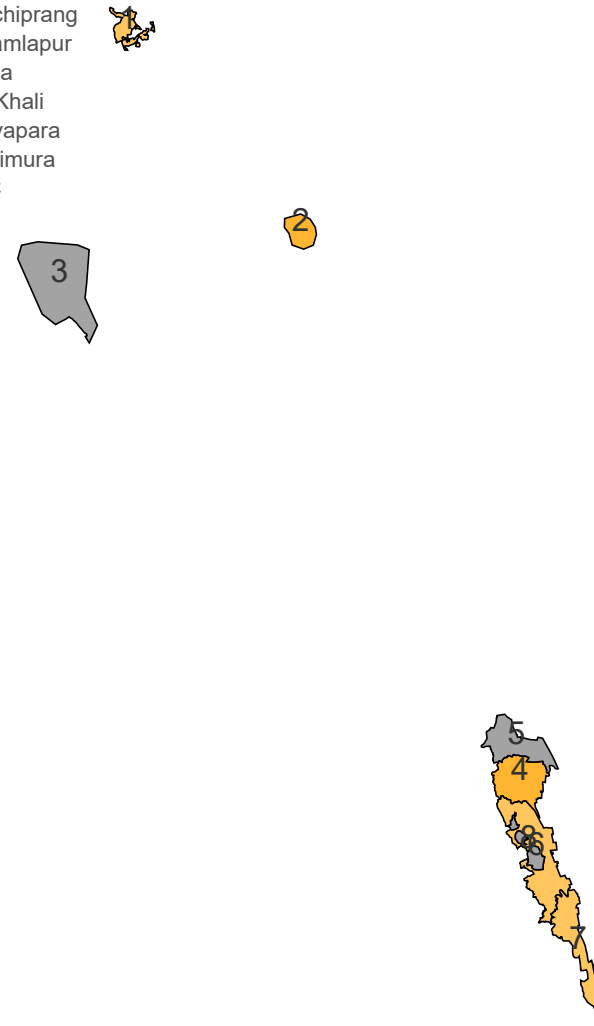


Table 10 | Performance by camp

Teknaf	W50		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
Alerts Northern group				
Camp 21 Chakmarkul	1	100%	63	100%
Camp 22 Unchiprang	4	50%	83	96%
Camp 23 Shamlapur	0	0%	17	100%
Camp 24 Leda	3	33%	130	97%
Camp 25 Ali Khali	0	0%	40	100%
Camp 26 Nayapara	1	0%	146	99%
Camp 27 Jadimura	1	100%	71	100%
Nayapara RC	0	0%	43	98%

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



# of alerts



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

Event	W50		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
<b>Indicator-based surveillance</b>				
Malaria	0	0%	3	100%
Measles	5	40%	487	99%
Bloody Diarr.	0	0%	0	0%
AFP	1	0%	38	97%
Meningitis	1	100%	31	100%
Haem. fever (susp.)	1	0%	48	98%
NNT	0	0%	3	100%
Unexp. fever	0	0%	135	100%
AWD	1	0%	223	99%
ARI	0	0%	199	100%
AJS	1	0%	113	99%
Varicella (Susp.)	0	0%	107	100%
Suspected COVID-19	0	0%	0	0%
<b>Event-based surveillance</b>				
EBS total	2	0%	227	99%

**Table 12** | Risk assessment

W50	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:

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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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# Bangladesh

Rohingya Emergency Response

Early Warning, Alert and  
Response System (EWARS)

Annex W50 2022



Ministry of Health and Family  
Welfare Bangladesh



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Organization



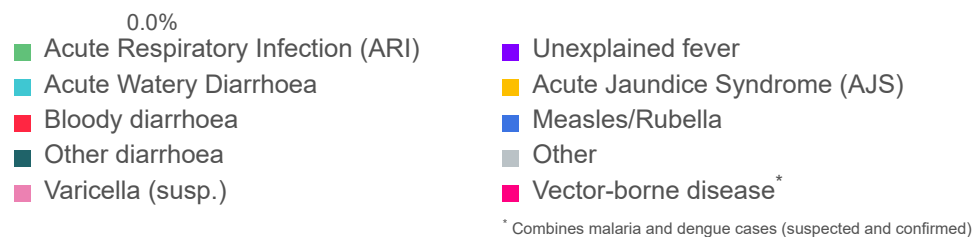
HEALTH SECTOR  
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Printed: 03:32 Tuesday, 13 December 2022 UTC

# Proportional morbidity

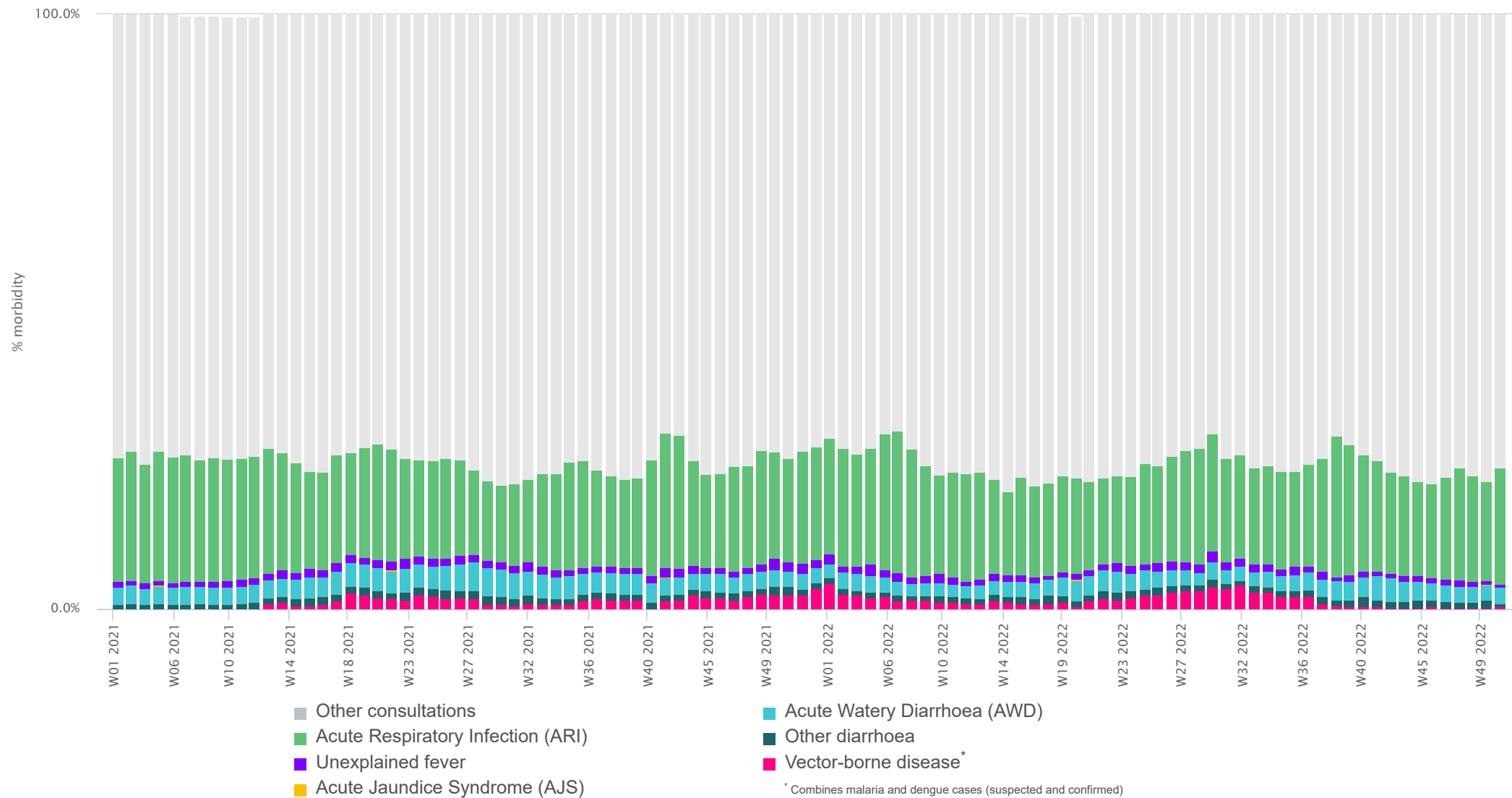
Figure 1 | Proportional morbidity (W50 2022)



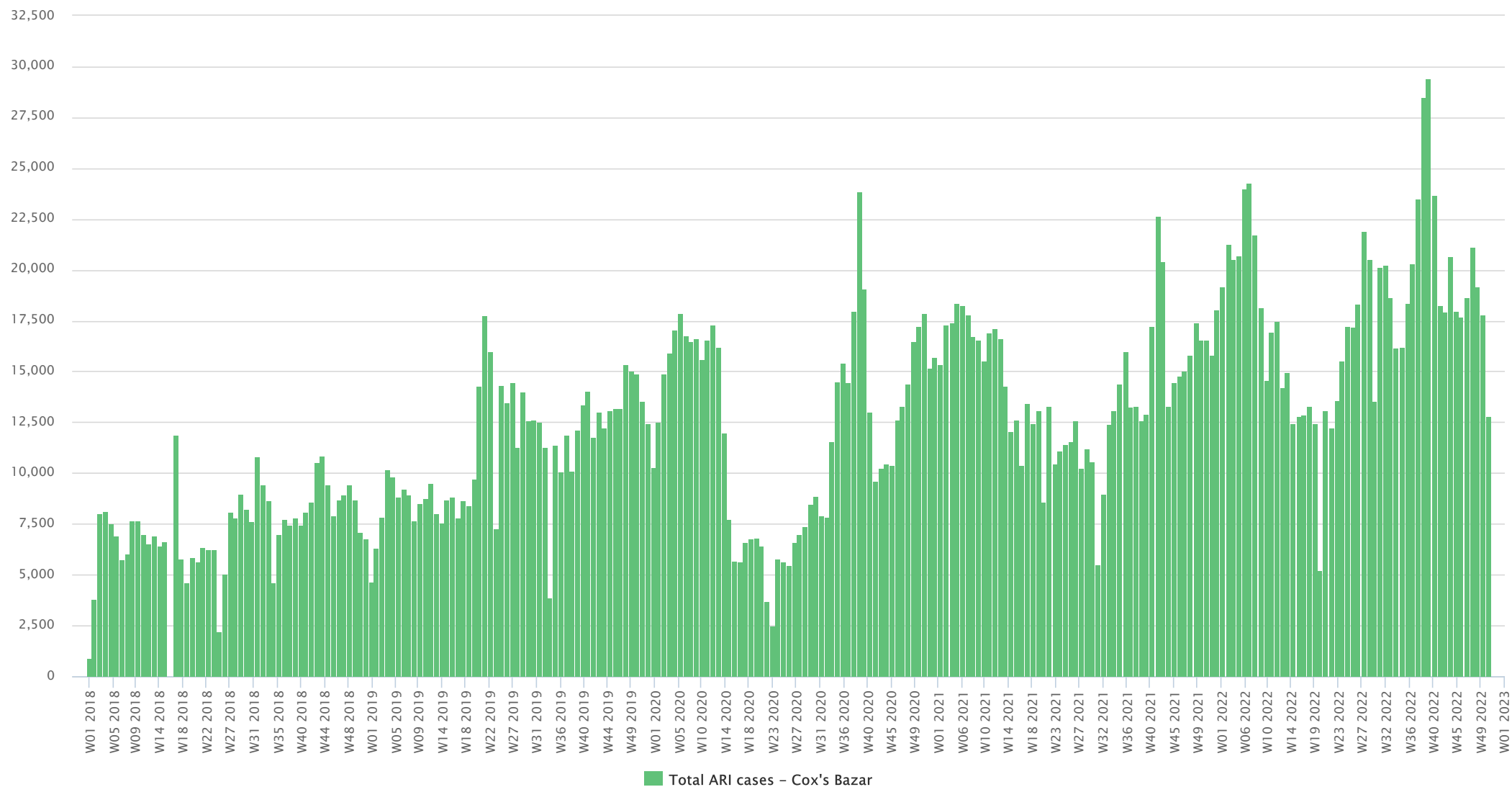
Disease	W50		2022	
	# cases	% morbidity	# cases	% morbidity
AWD	1,863	2.7%	143,891	2.8%
Bloody diarr.	166	0.2%	17,593	0.3%
Other diarr.	477	0.7%	55,637	1.1%
Susp. Varicella	42	0.1%	9,323	0.2%
ARI	13,594	19.6%	929,768	17.8%
Measles/Rub.	8	0.0%	1,182	0.0%
AFP	1	0.0%	76	0.0%
Susp. menin.	2	0.0%	188	0.0%
AJS	15	0.0%	1,282	0.0%
Susp. HF	2	0.0%	432	0.0%
Neo. tetanus	0	0.0%	9	0.0%
Adult tetanus	0	0.0%	19	0.0%
Malaria (conf.)	1	0.0%	387	0.0%
Malaria (susp.)	0	0.0%	53,249	1.0%
Dengue (conf.)	173	0.2%	19,998	0.4%
Dengue (susp.)	32	0.0%	8,619	0.2%
Unexpl. fever	492	0.7%	59,143	1.1%
Sev. Malnut.	35	0.1%	2,518	0.0%
Inj./Wounds	1,735	2.5%	108,710	2.1%
Other	50,533	73.0%	3,791,519	72.8%
<b>Total</b>	<b>68,750</b>	<b>100%</b>	<b>5,211,633</b>	<b>100%</b>

## Trend in consultations and key diseases

**Figure 2** | Trend in proportional morbidity for key diseases (W50)

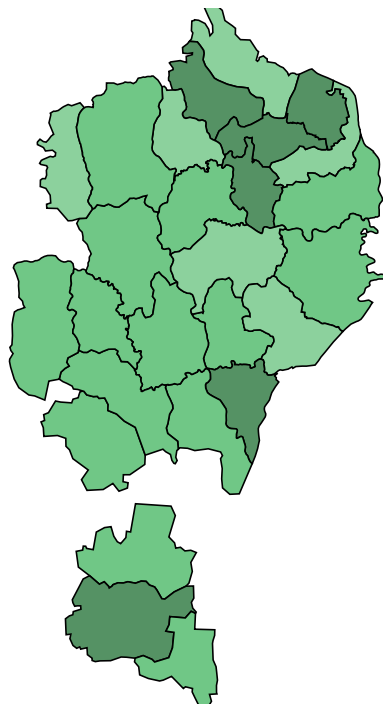


**Figure 3** | Trend in number of cases over time (W38 2017 - W50 2022)

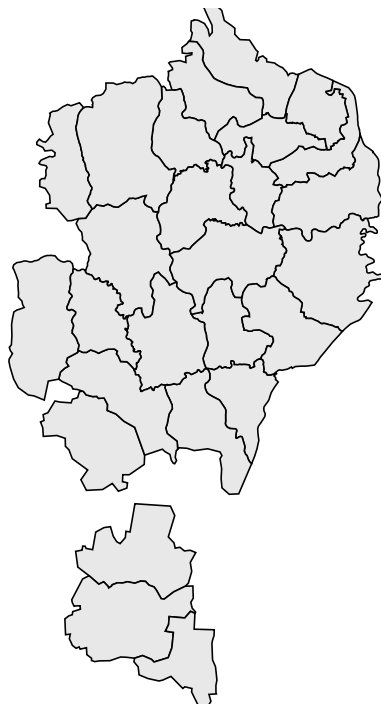


**Map 1** | Map of cases by camp (W50 2022)

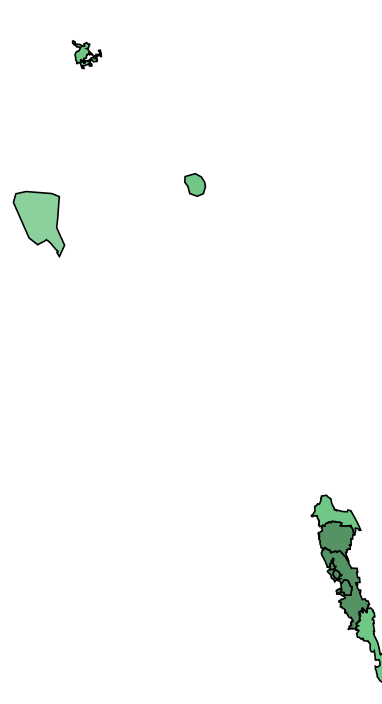
**a. Ukhia** | Number of cases



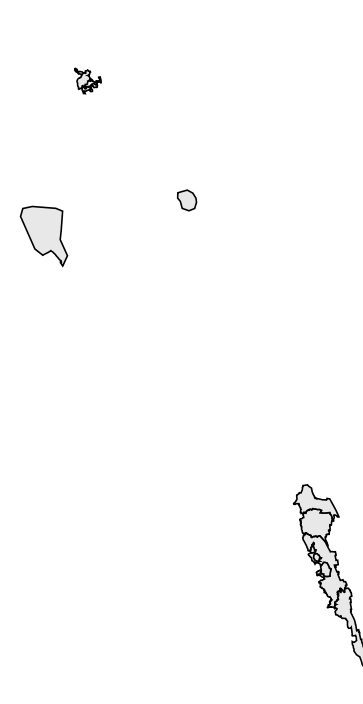
**b. Ukhia** | Number of alerts



**c. Teknaf** | Number of cases



**d. Teknaf** | Number of alerts



## Map legend

Number of cases



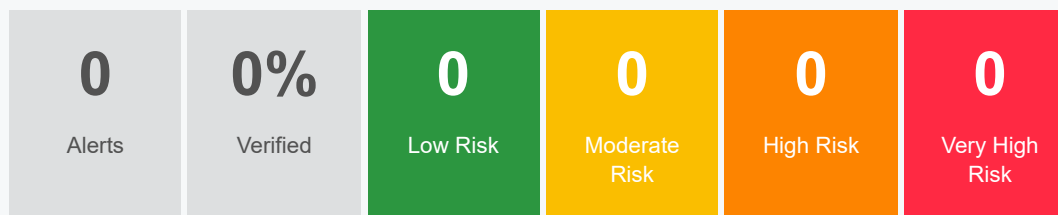
Number of alerts



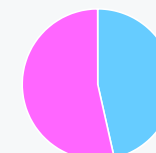
## Alert threshold

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

## Alert management (W50 2022)

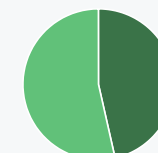


## Figure | % sex



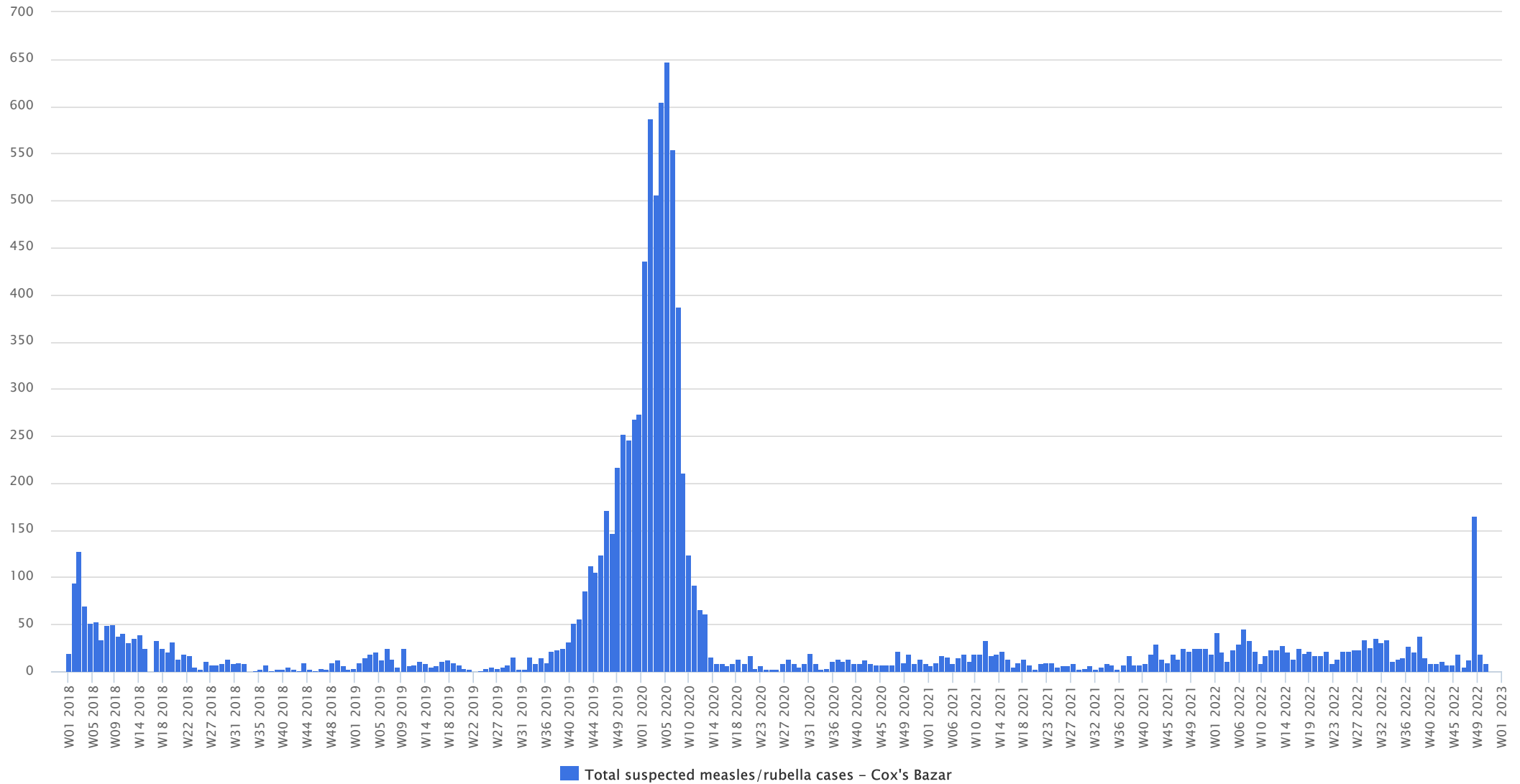
Male Female

## Figure | % age



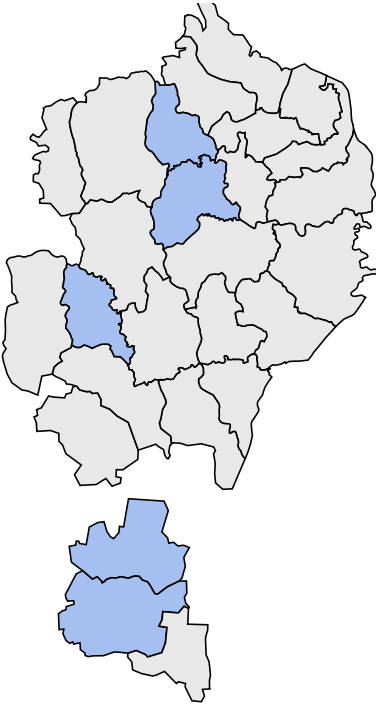
>=5 <5

**Figure 4** | Trend in number of suspected cases over time (W38 2017 - W50 2022)

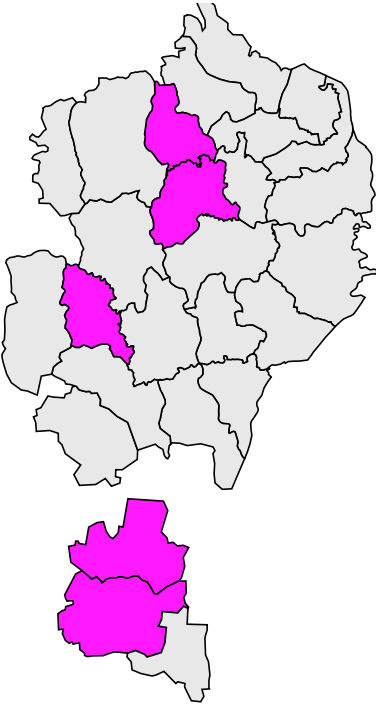


Map 2 | Map of cases by camp (W50 2022)

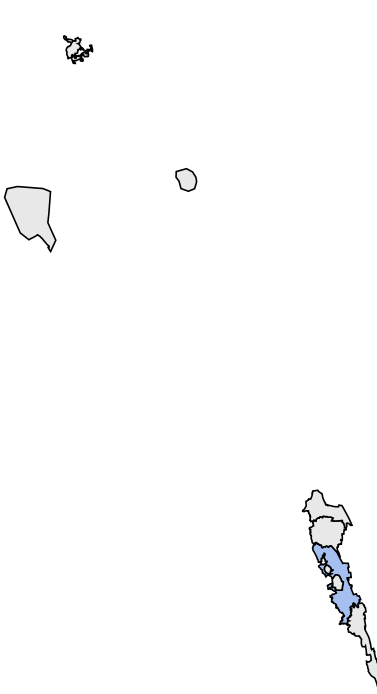
a. Ukhia | Number of cases



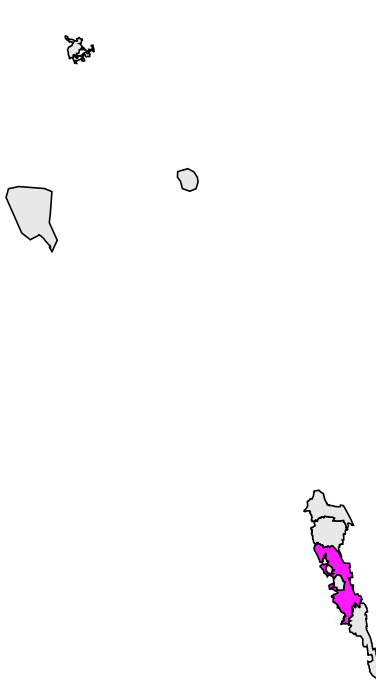
b. Ukhia | Number of alerts



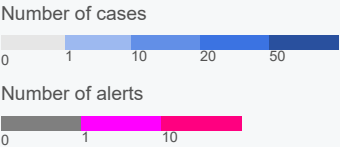
c. Teknaf | Number of cases



d. Teknaf | Number of alerts



Map legend



Alert threshold  
1 case. Source: IEDCR

Alert management (W50 2022)

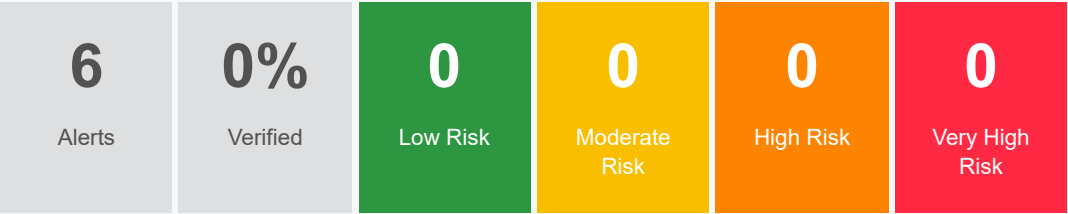


Figure | % sex

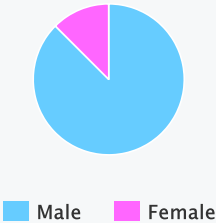
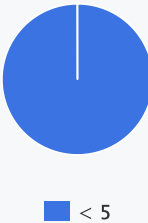
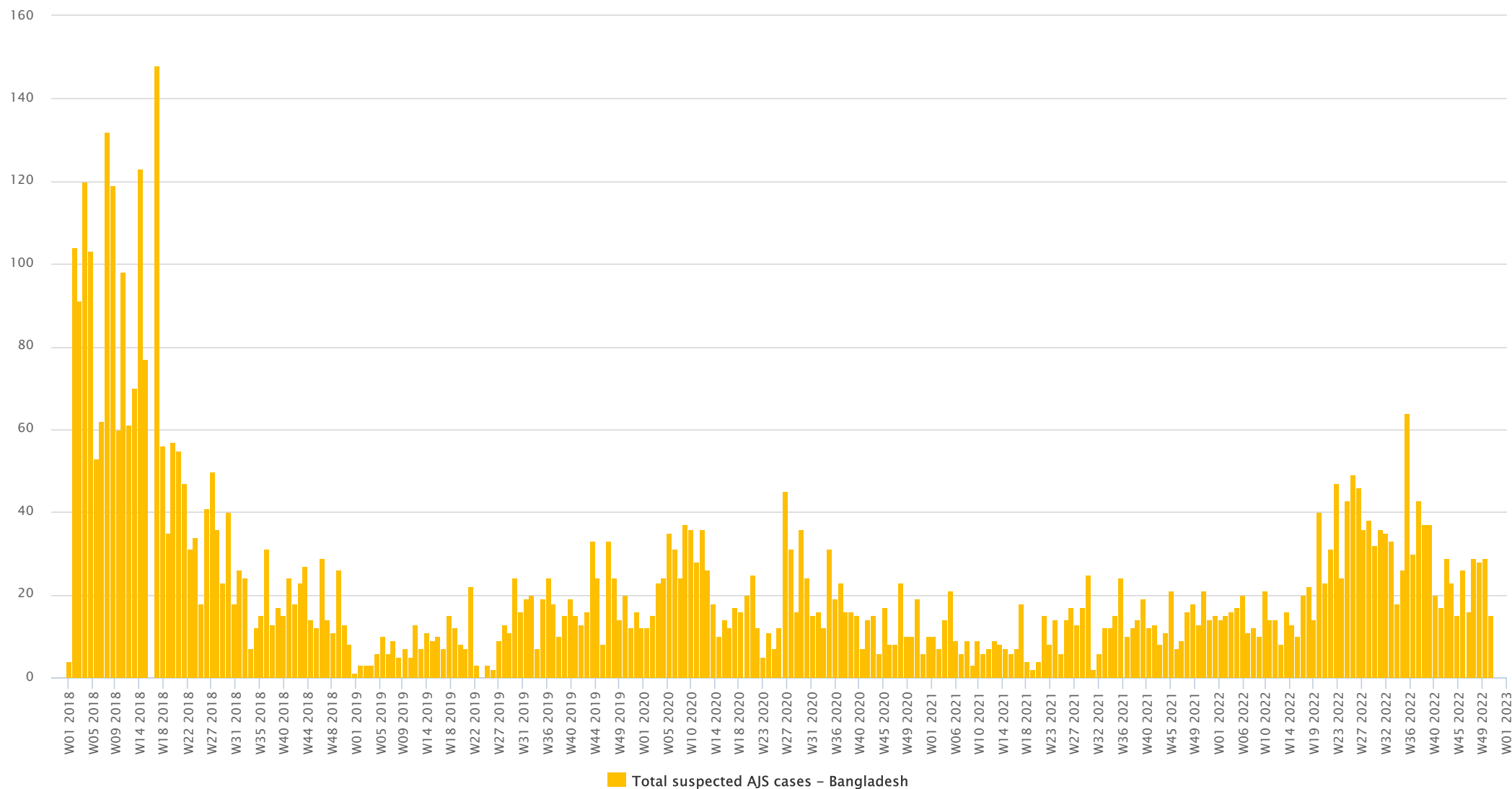


Figure | % age

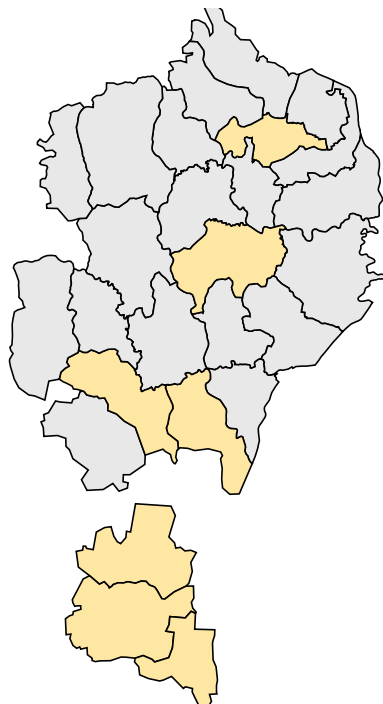


**Figure 5** | Trend in number of cases over time (W38 2017 - W50 2022)

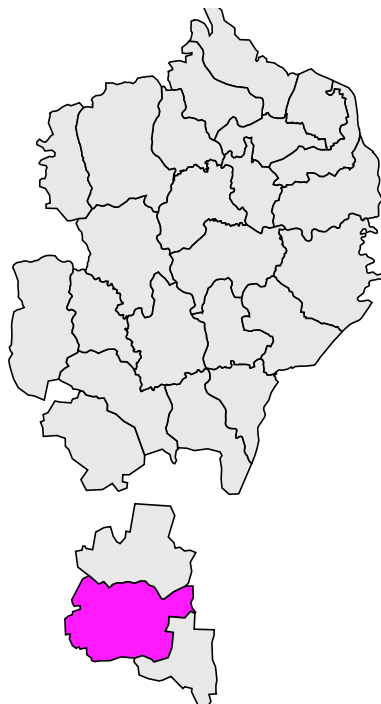


**Map 3 | Map of cases by camp (W37 2017 - W50 2022)**

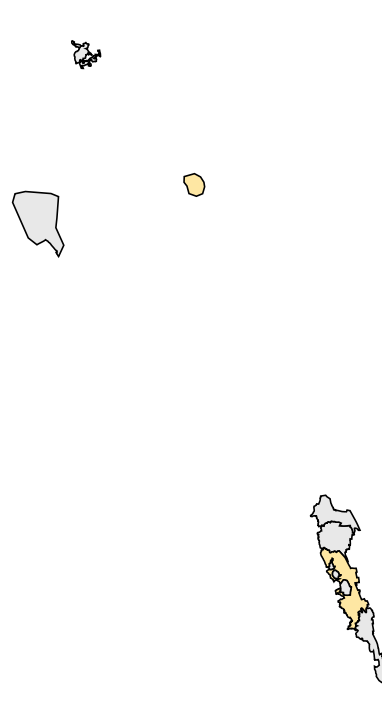
**a. Ukhia | Number of cases**



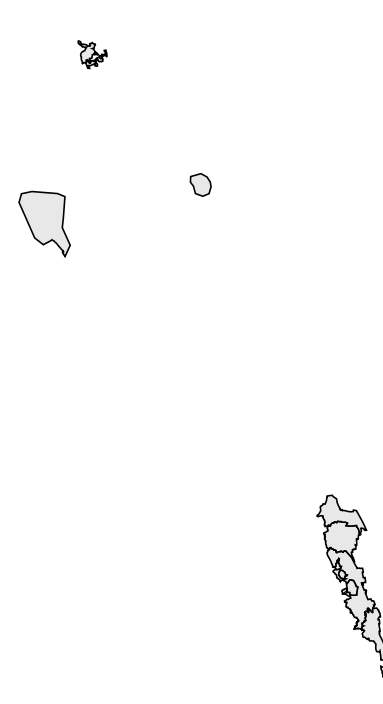
**b. Ukhia | Number of alerts**



**c. Teknaf | Number of cases**

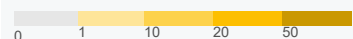


**d. Teknaf | Number of alerts**



## Map legend

Number of cases



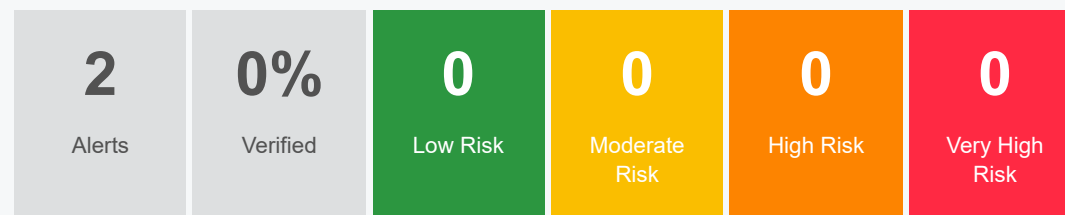
Number of alerts



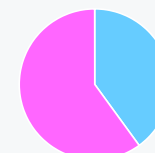
## Alert threshold

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

## Alert management (W50 2022)

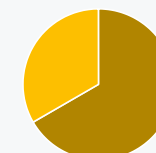


## Figure | % sex



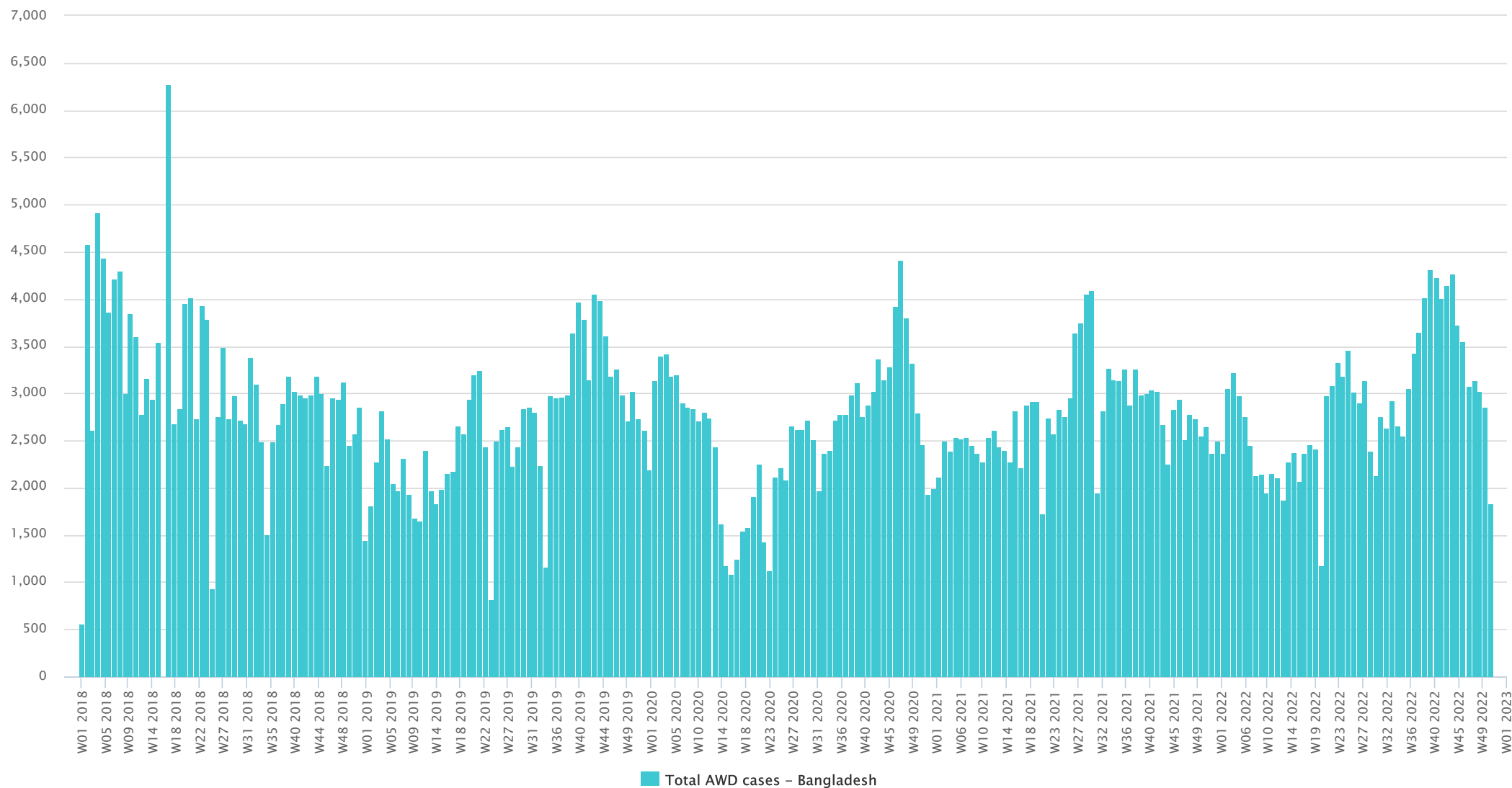
Male Female

## Figure | % age

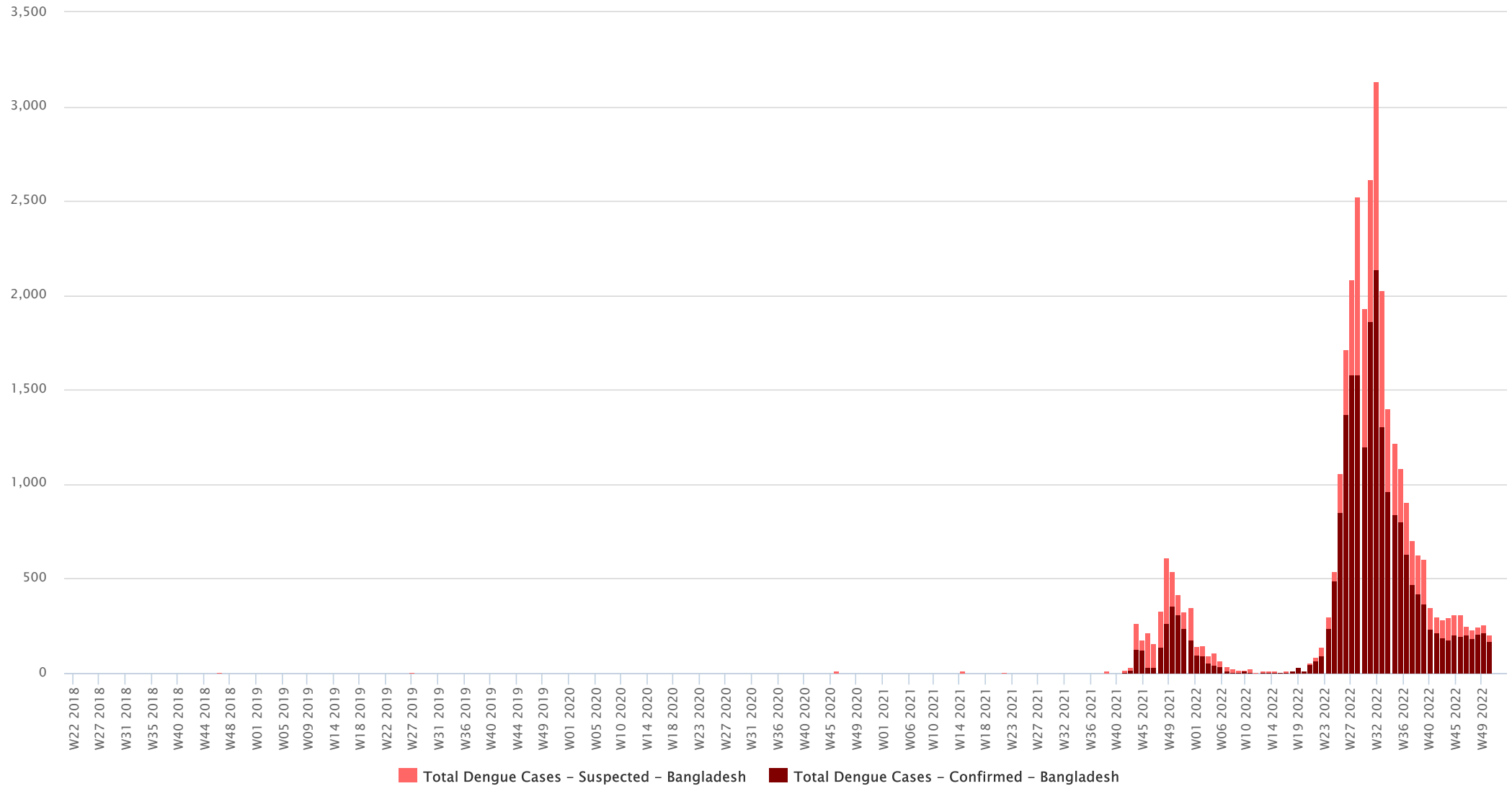


>= 5 < 5

**Figure 6** | Trend in number of cases over time (W38 2017 - W50 2022)

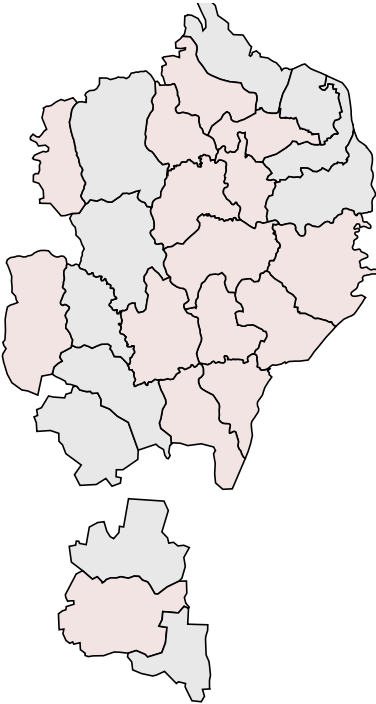


**Figure 7** | Trend in number of cases over time (W38 2017 - W50 2022)

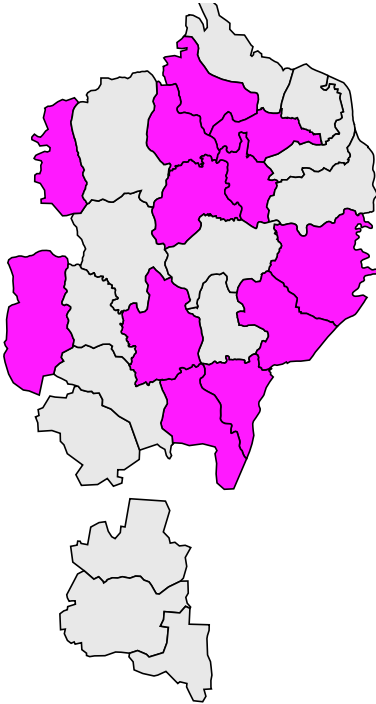


Map 4 | Map of cases by camp (W37 2017 - W50 2022)

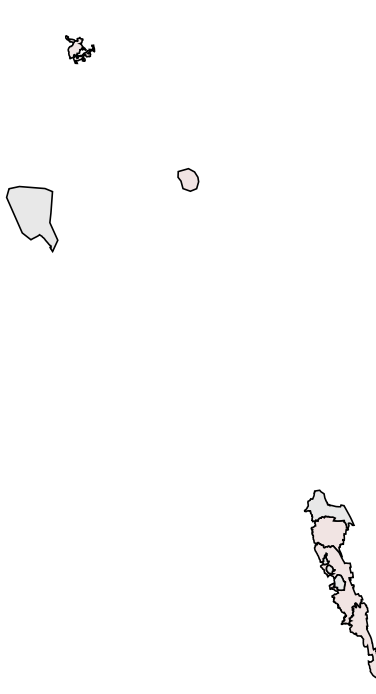
a. Ukhia | Number of cases



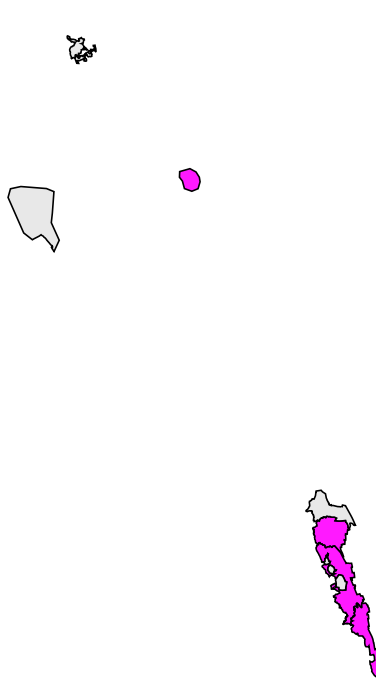
b. Ukhia | Number of alerts



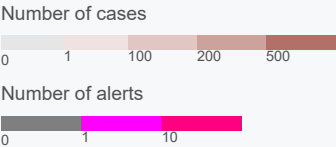
c. Teknaf | Number of cases



d. Teknaf | Number of alerts



Map legend



Alert threshold

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

Alert management (W50 2022)

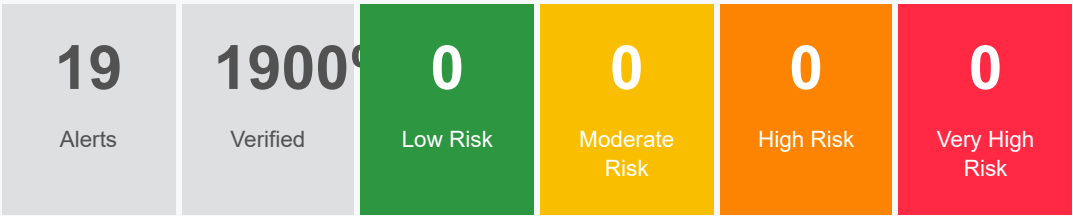


Figure | % sex

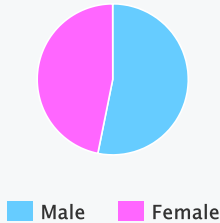


Figure | % age

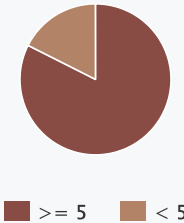
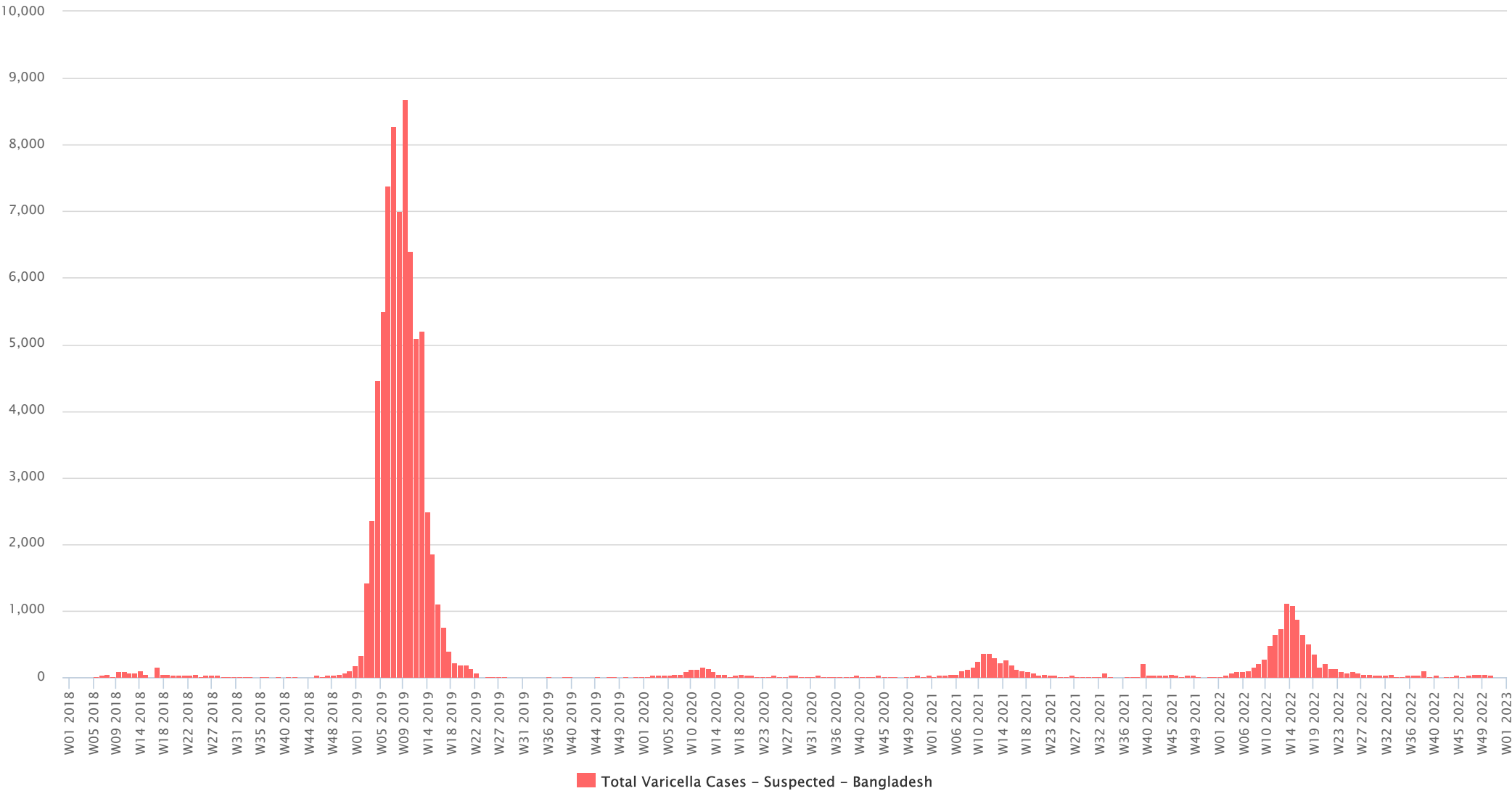
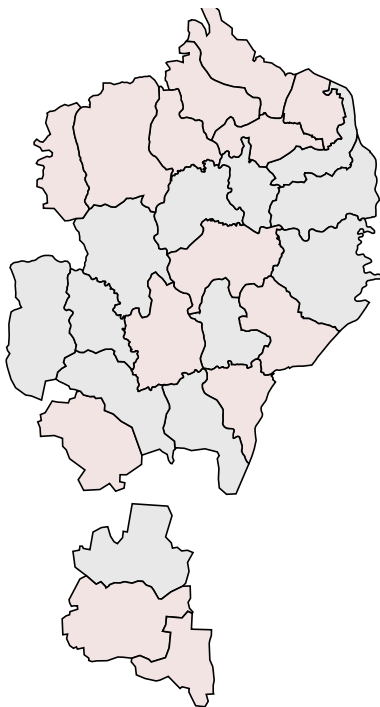


Figure 7 | Trend in number of cases over time (W38 2017 - W50 2022)

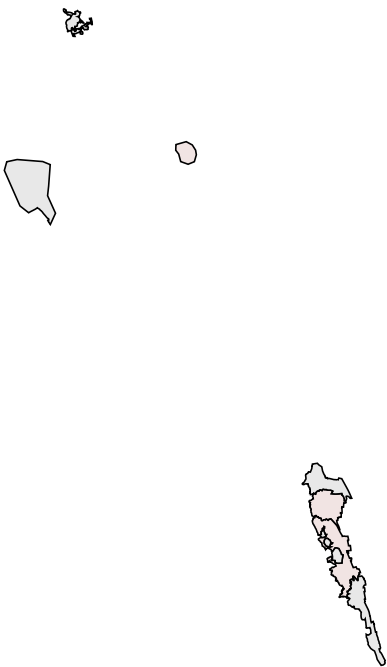


Map 4 | Map of cases by camp (W37 2017 - W50 2022)

a. Ukhia | Number of cases



c. Teknaf | Number of cases



Map legend

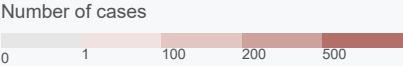


Figure | % sex

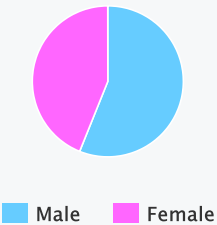
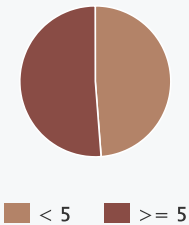


Figure | % age



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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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