



Epidemiological Highlights

Week 52 (18-24 Dec) 2022



World Health
Organization

Highlights: COVID-19

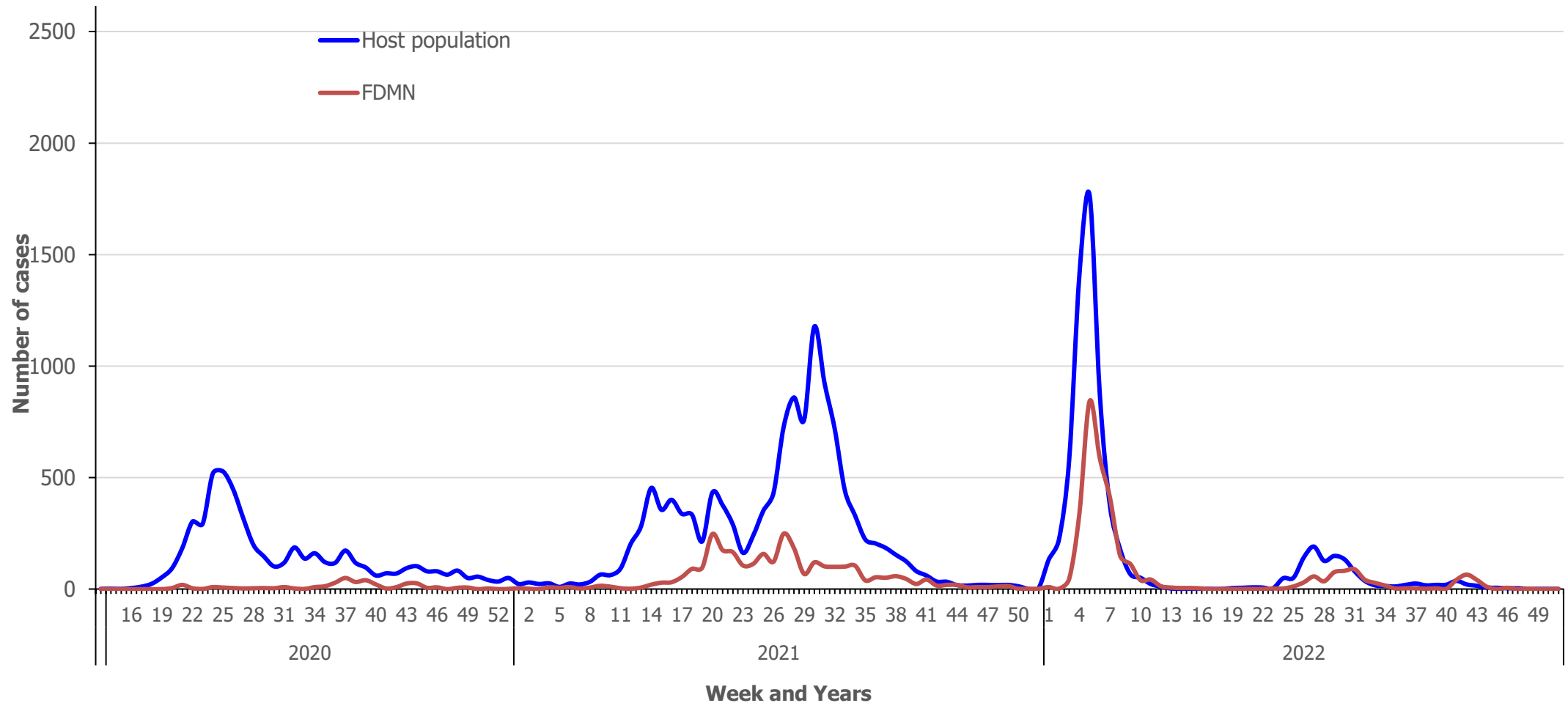
FDMN:

- One (01)** new confirmed case was reported this week, takes the cumulative cases to 6,586
- Weekly TPR is **0.3%** and incidence/new infection is **1.1 cases/1 million population/week**
- No new death reported, total deaths stabilized at **46** (CFR of 0.7%)
- Level of recovery continues to peak at 99% with **one case** in the isolation facility

Host Population:

- No new confirmed cases were reported this week, the total caseload is 24,643
- Weekly TPR and case incidence remain **zero**
- Recovery level continues to steady at 99% with zero cases in the isolation facility
- No new death and total deaths remain at 269 (CFR-1.1%)

Highlights: COVID-19



FDMNs: 01 new confirmed case has been reported this week after two weeks of zero caseloads

Host Population: No new case has been reported this week which is sustained for the past four weeks/1 month

EWARS Reporting Updates

Currently, a total of 164 health facilities are registered in EWARS

- Only 142/164 weekly reports were received on time in week 52
- Timeliness of reporting for this week was 87%
- Fifty-six (56) alerts were triggered
- All alerts were reviewed and verified by the WHO EWARS team; this was less than that of the previous week (96 alerts in week 51, 2022)

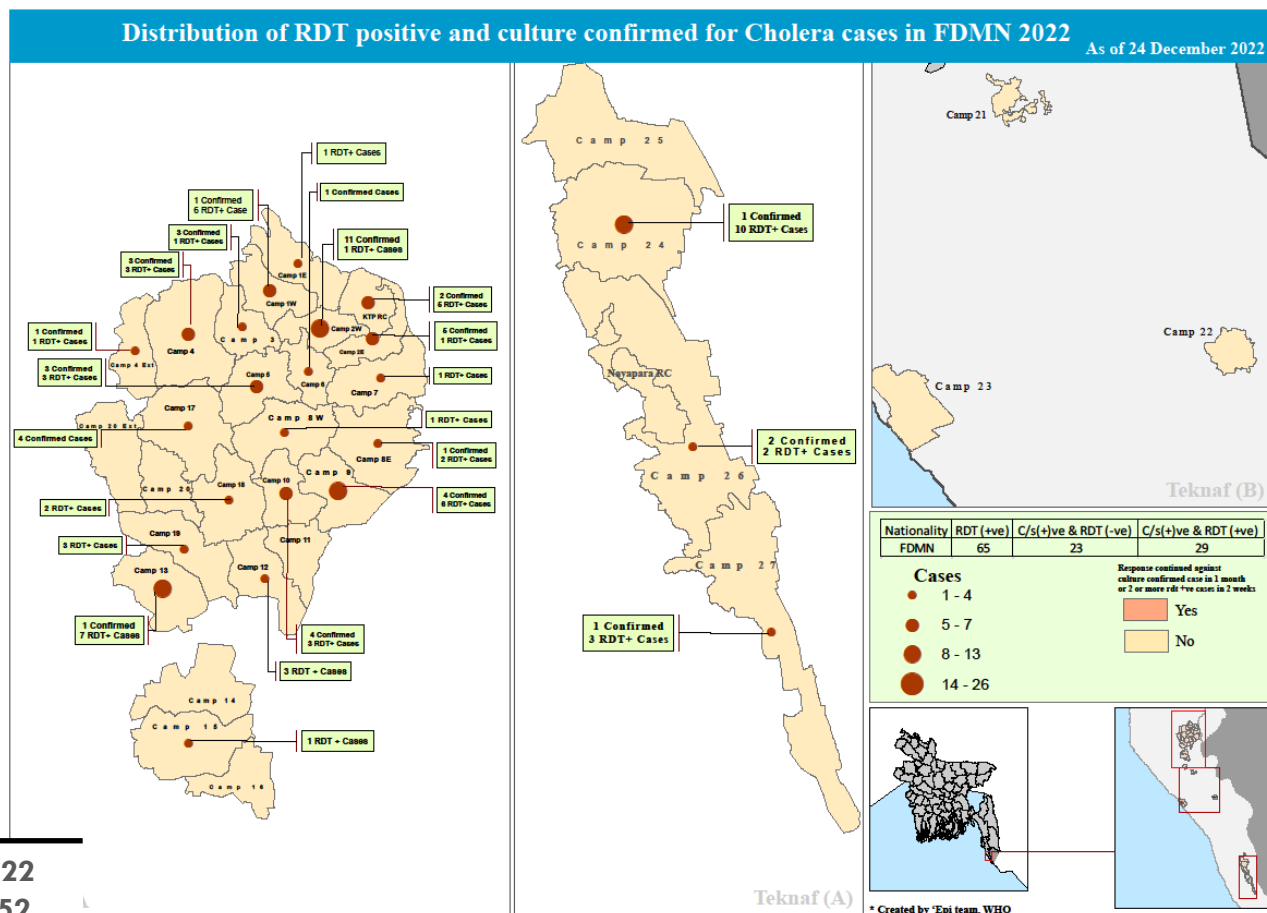
Highlights: Morbidities and Mortalities

- Acute Respiratory Infections (18.8%), Diarrheal Diseases (3.6%) & Injuries, and Wounds (2.0%) were the diseases and health conditions with the highest proportional morbidity in week 52.
- Monitoring of suspected SARI death under enhanced Community-based mortality surveillance has been continued since week 28, 2020. A total of 136 SARI deaths have so far been reported in 2022 of which eight (08) deaths upon an investigation of all SARI deaths were reclassified as probable COVID-19 Deaths
- This Epi week, one new SARI deaths were reported as highlighted below:

Year	Suspected SARI death reported (current week)	Reclassified as death due to probable COVID-19
2022	136 (1)	8
2021	96	15
2020	49	2

Cholera/AWD Surveillance Updates

- In this week, there is two new cultured confirmed Cholera cases were reported, among samples sent for testing.
- In 2022 total of one hundred sixty-nine (169) RDT-positive AWD cases/ cholera suspected cases including 70 culture-confirmed Cholera cases reported as of Epi Week 52 2022.
- Cumulatively there are 861 RDT and culture-confirmed cholera cases of which 402 cases were culture-confirmed since transmission in 2018



	2018	2019	2020	2021	2022 W52
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RDT positive AWD cases & culture confirmed for Cholera cases

	49	258	28	357	169
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Culture confirmed for Cholera

	7	184	5	136	70
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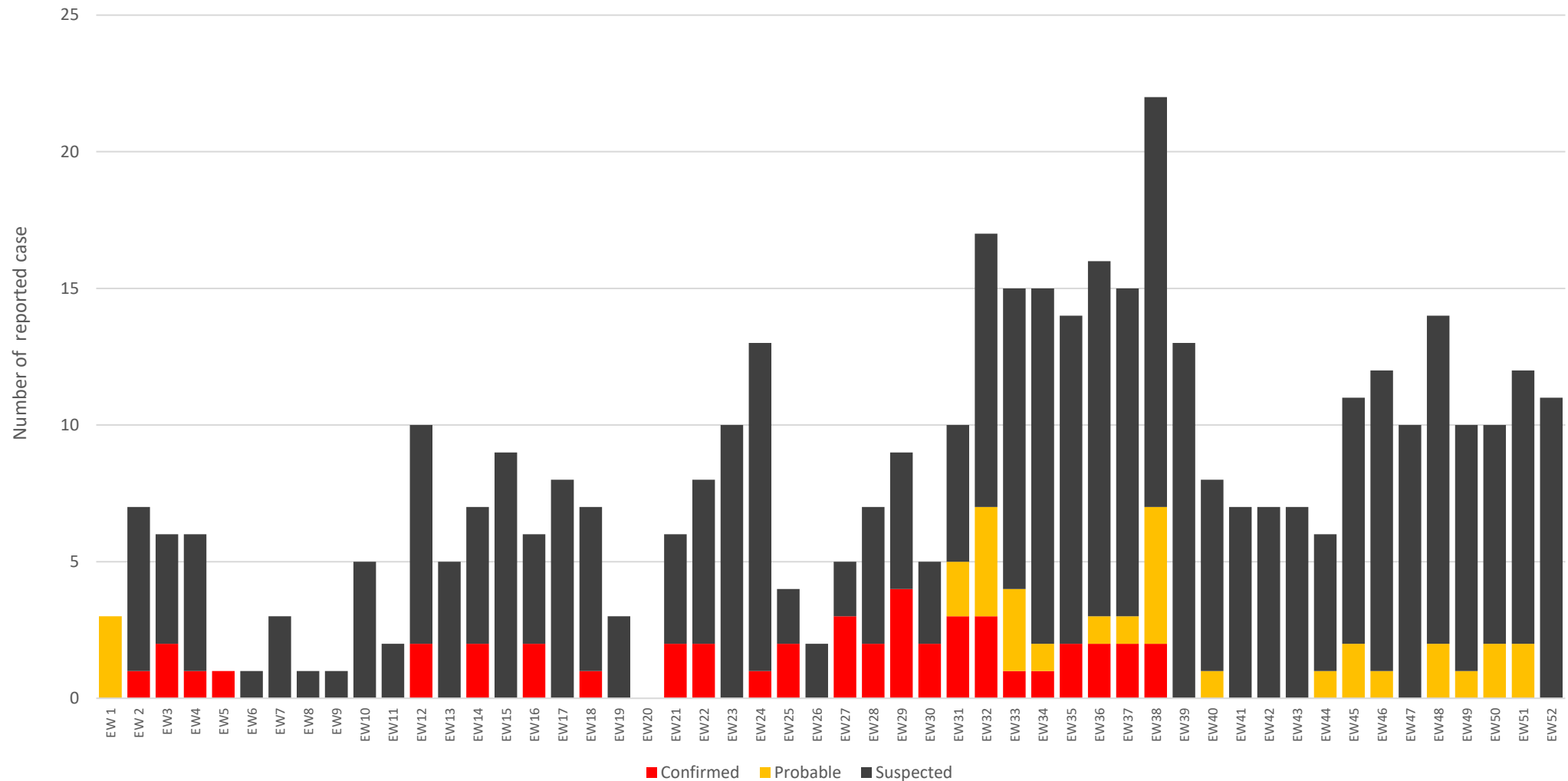
Diphtheria Surveillance Updates

- Eleven (11) suspected diphtheria cases were reported in go.data in this Epi week 52
- 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	32
Suspected	1796	3549	523	198	118	344
Death	30	14	3	0	5	2

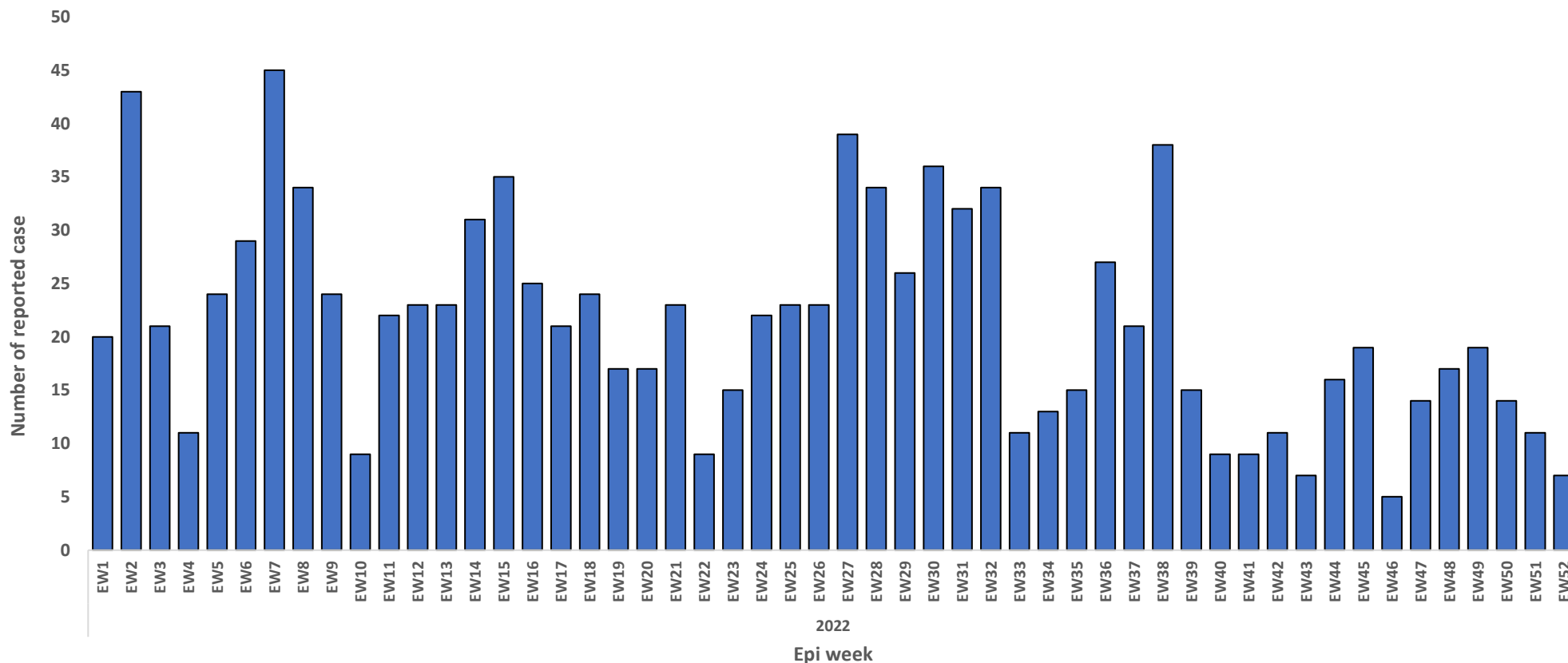
Trends of Diphtheria cases

Total number of diphtheria case reported in EWARS from week 1-52, 2022



Epi Curve of Suspected Measles Cases

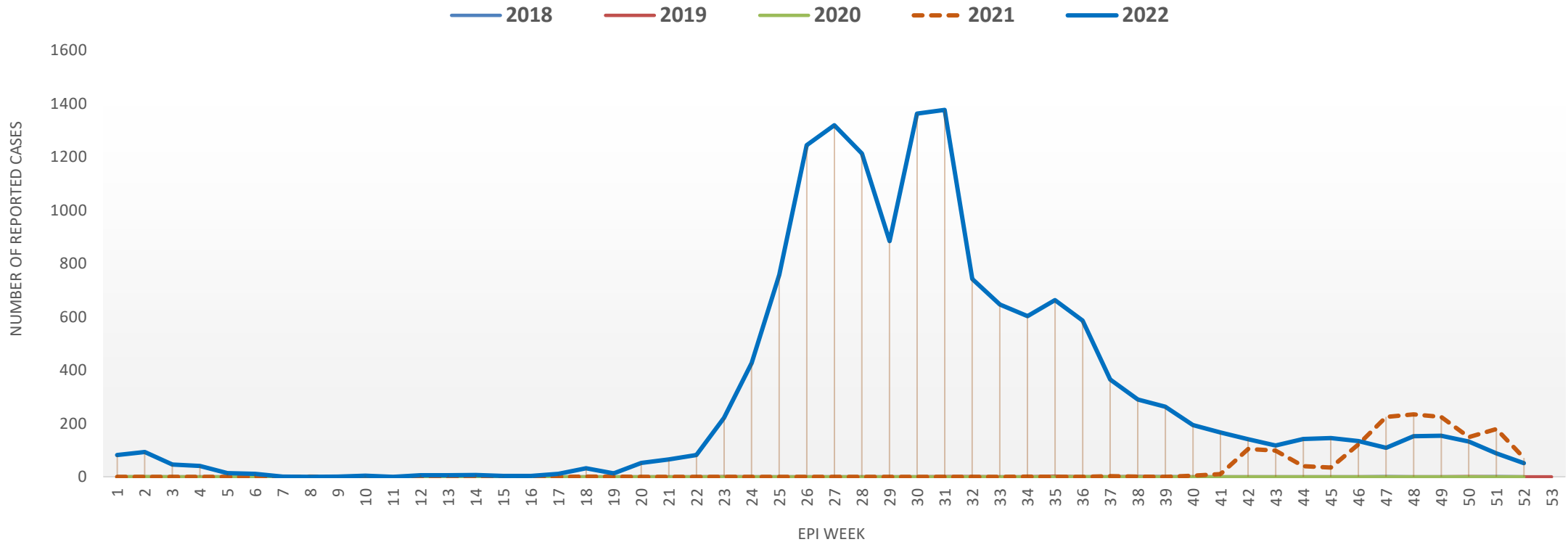
Total number of Measles case reported in EWARS from week 1-52, 2022



- > In week 52, 7 suspected measles cases were reported through weekly reporting. This brings the total number of suspected measles cases to 1,112 reported in 2022
- > About 54% (597/1,112) of the total suspected measles cases were reported through case-based reporting and samples collected for laboratory confirmation

Dengue Surveillance Updates

Yearly Trends of Dengue case trend from 2018 - Epi Week 52, 2022



- ❑ Overall level of infection continues to decline since October 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

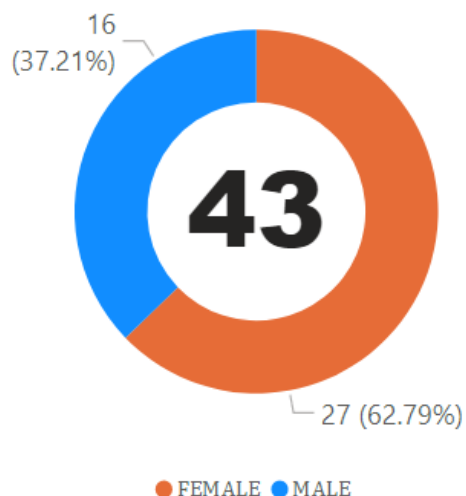
Community-based Mortality surveillance updates Epi week 52

Probable causes of death	Epi week 52	In 2022
Still Birth	7 (16%)	226 (10%)
Neonatal Death (<28 days old)	7 (16%)	241 (11%)
Infectious Disease	--	172 (8%)
Severe Acute Respiratory Infection (SARI)	1 (2%)	55 (3%)
Injury	1 (2%)	44 (2%)
Maternal Death	--	45 (2%)
Acute Malnutrition	--	1 (0%)
Other	27 (63%)	1,426 (65%)
Total	43 (100%)	2,210 (100%)

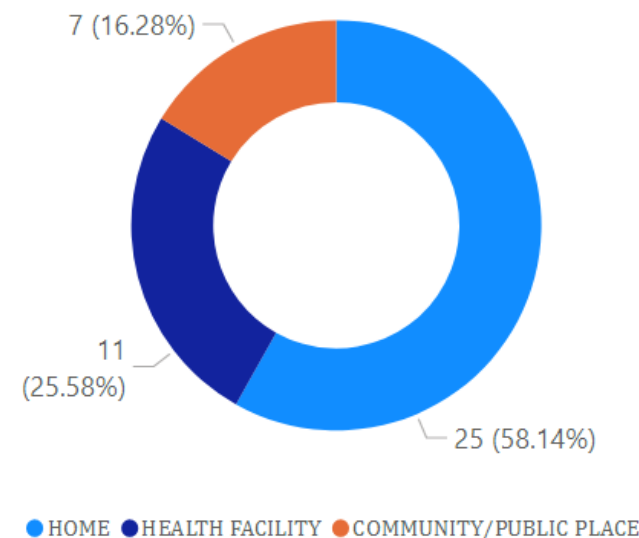
Partners to report all mortalities into the EWARS platform using both case and event-based reporting as applicable

Community-based Mortality surveillance updates Epi week 52

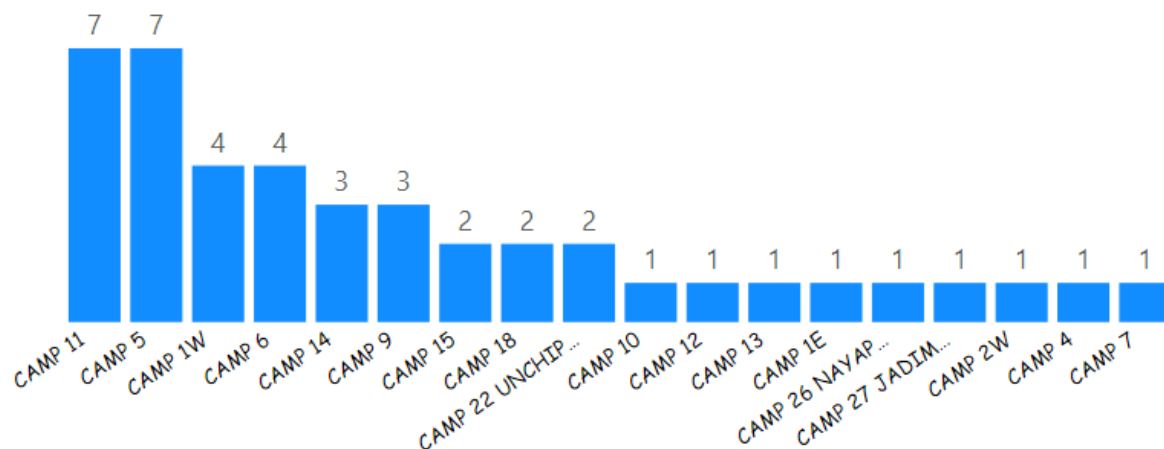
Gender distribution



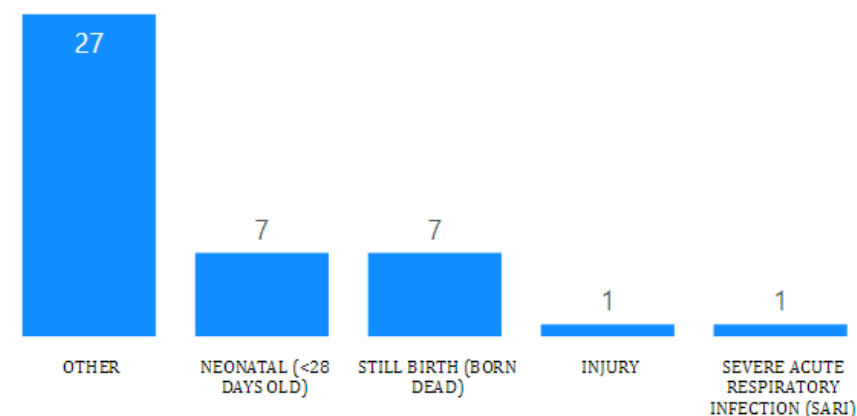
Place of death



Distribution of deceased Camp



Distribution of Probable cause of death



Bangladesh

Rohingya Emergency Response

Early Warning, Alert and
Response System (EWARS)

Epidemiological Bulletin W52 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 W52 2022

Table 1 | Coverage

#	%	
918,841	-	Estimated total Rohingya population ¹
902,066	98%	Total population under surveillance
175	-	Total number of health facilities
164	94%	Number of EWARS reporting sites

Table 2 | Early warning performance indicators

W52	Cumulative (2022)	
142	8432	Number of weekly reports received
87%	93%	Completeness
87%	92%	Timeliness

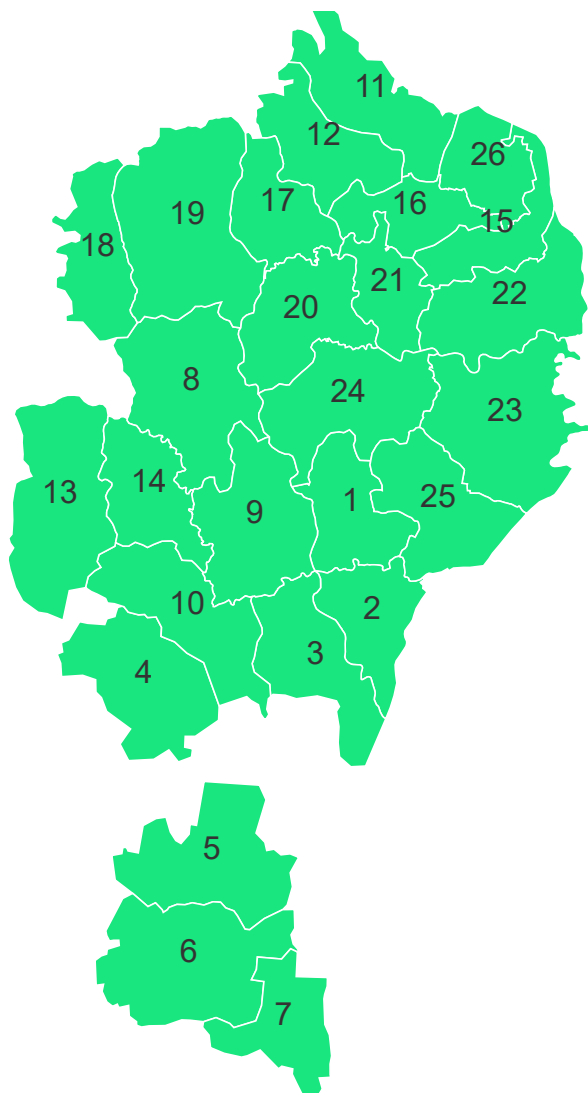
Table 3 Alert performance indicators

W52	Cumulative (2022)	
56	4,818	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

- 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 1E
- 12 Camp 1W
- 13 Camp 20 Ext
- 14 Camp 20
- 15 Camp 2E
- 16 Camp 2W
- 17 Camp 3
- 18 Camp 4 Ext
- 19 Camp 4
- 20 Camp 5
- 21 Camp 6
- 22 Camp 7
- 23 Camp 8E
- 24 Camp 8W
- 25 Camp 9
- 26 Kutupalong RC

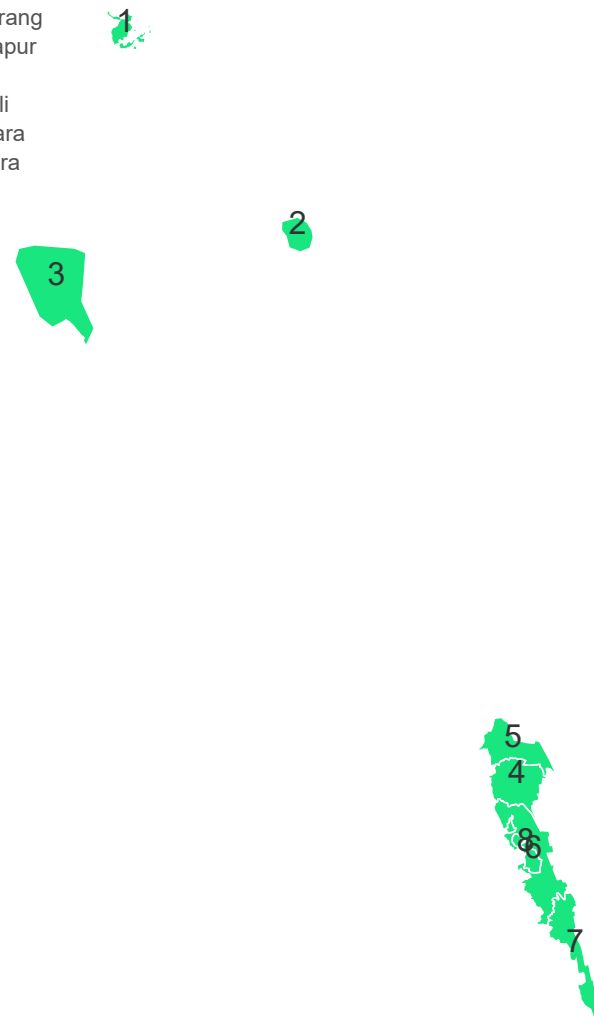


Completeness



Map 1b | Teknaf 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



Completeness

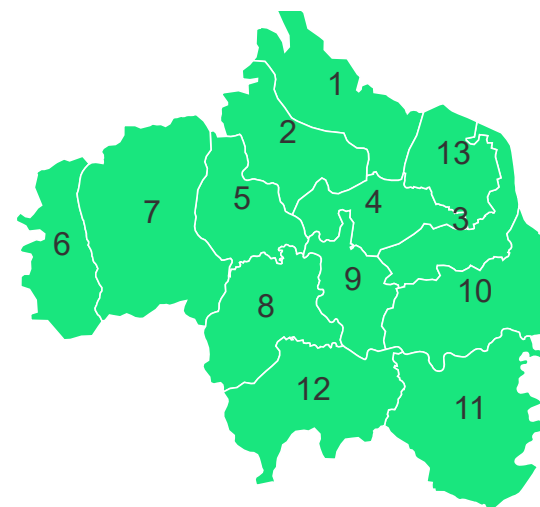


Table 4 | Performance by camp (W52 2022)

Northern group	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
Ukhia Northern Group				
Camp 1E	4	4	100%	0%
Camp 1W	5	4	100%	0%
Camp 2E	3	3	100%	0%
Camp 2W	3	3	100%	0%
Camp 3	5	3	80%	0%
Camp 4	5	4	80%	0%
Camp 4 Ext	1	1	100%	0%
Camp 5	5	5	100%	0%
Camp 6	3	3	133%	0%
Camp 7	6	6	100%	0%
Camp 8E	8	6	88%	0%
Camp 8W	4	3	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 (W52 2022)

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

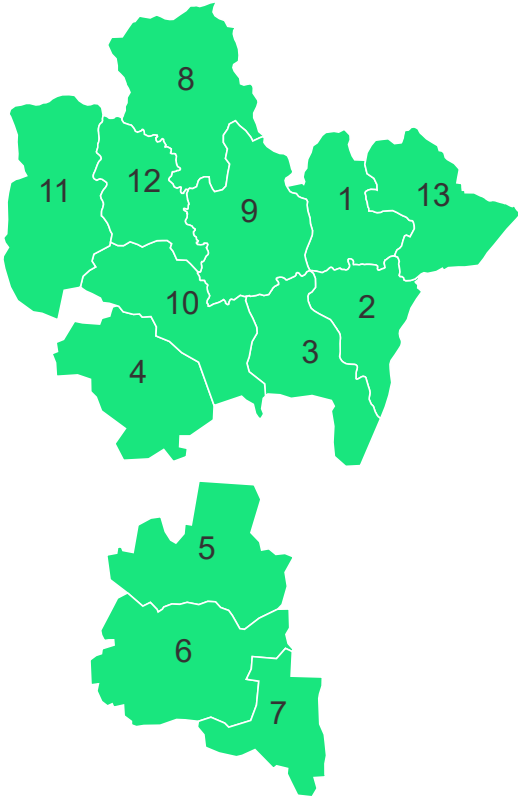


Table 6 | Performance by camp (W52 2022)

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	3	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 (W52 2022)

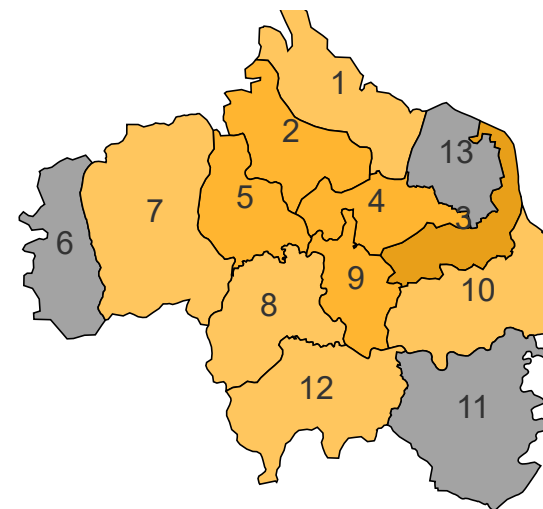
Partner	Performance		Reporting		Partner	Performance		Reporting	
	# sites	# reports received	Completeness	Timeliness		# sites	# reports received	Completeness	Timeliness
AKF	1	1	100%	100%	IRC	4	3	75%	75%
AWARD	6	6	100%	100%	MSF	9	8	78%	56%
BASHMAH	1	1	100%	100%	MoH	12	10	83%	83%
BDRCS	11	12	109%	100%	MHI	0	0		
BRAC	11	11	100%	100%	Medair	0	0		
CARE	4	3	75%	75%	FH/MTI	4	4	100%	100%
GH/CPI	1	1	100%	100%	PRANTIC	1	1	100%	100%
DBC	1	1	100%	100%	PULSE	1	1	100%	100%
DSK	1	1	0%	0%	QC	1	1	100%	100%
DCHT-PWJ	1	1	100%	100%	PHD	10	10	20%	20%
FRNDS	6	6	100%	100%	RPN	2	2	100%	100%
GK	11	11	100%	100%	RHU	3	3	100%	100%
Global One	1	1	100%	100%	RI	3	3	100%	100%
GUSS	1	1	100%	100%	RTMI	10	8	80%	80%
HAEFA	2	2	100%	100%	SALT	1	1	100%	100%
HAIB	0	0			SCI	7	7	100%	100%
HMBDF	2	2	100%	100%	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	100%	100%
IOM	23	23	104%	104%					

Table 8 | Performance by camp

Northern group	W52		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
Alerts Northern group				
Camp 1E	1	100%	90	100%
Camp 1W	3	100%	228	100%
Camp 2E	6	100%	464	100%
Camp 2W	4	100%	162	100%
Camp 3	3	100%	219	100%
Camp 4	2	100%	189	100%
Camp 4 Ext	0	0%	71	100%
Camp 5	2	100%	156	100%
Camp 6	4	100%	121	100%
Camp 7	1	100%	107	100%
Camp 8E	0	0%	97	100%
Camp 8W	2	100%	255	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

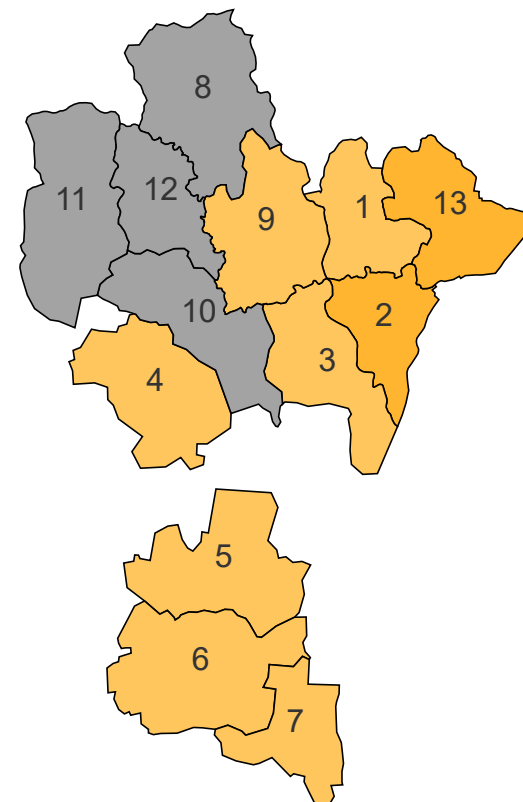


Table 9 | Performance by camp

Southern group	W52		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
Alerts Northern group				
Camp 10	2	100%	115	100%
Camp 11	3	100%	147	100%
Camp 12	1	100%	153	100%
Camp 13	1	100%	171	100%
Camp 14	2	100%	105	100%
Camp 15	2	100%	191	100%
Camp 16	2	100%	150	100%
Camp 17	0	0%	126	100%
Camp 18	2	100%	211	100%
Camp 19	0	0%	75	100%
Camp 20	0	0%	86	100%
Camp 20 Ext	0	0%	69	100%
Camp 9	5	100%	260	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	W52		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
Alerts Northern group				
Camp 21 Chakmarkul	0	0%	65	100%
Camp 22 Unchiprang	3	100%	90	100%
Camp 23 Shamlapur	0	0%	18	100%
Camp 24 Leda	2	100%	142	100%
Camp 25 Ali Khali	1	100%	43	100%
Camp 26 Nayapara	1	100%	154	100%
Camp 27 Jadimura	0	0%	73	100%
Nayapara RC	0	0%	44	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

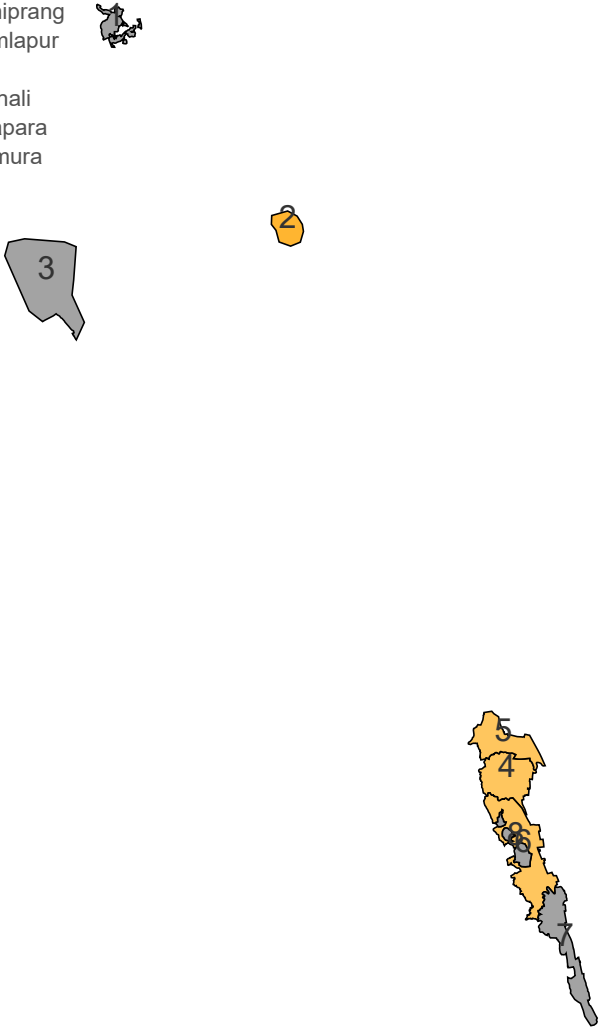


Table 11 | Performance by type of alert

Event	W52		Cumulative (2022)	
	# alerts	% verif.	# alerts	% verif.
Indicator-based surveillance				
Malaria	0	0%	3	100%
Measles	3	100%	507	100%
Bloody Diarr.	0	0%	0	0%
AFP	1	100%	43	100%
Meningitis	1	100%	34	100%
Haem. fever (susp.)	1	100%	51	100%
NNT	0	0%	3	100%
Unexp. fever	0	0%	143	100%
AWD	2	100%	232	100%
ARI	1	100%	206	100%
AJS	1	100%	119	100%
Varicella (Susp.)	0	0%	107	100%
Suspected COVID-19	0	0%	0	0%
Event-based surveillance				
EBS total	1	100%	231	100%

Table 12 | Risk assessment

W52	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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Rohingya Emergency Response

Early Warning, Alert and
Response System (EWARS)

Annex W52 2022



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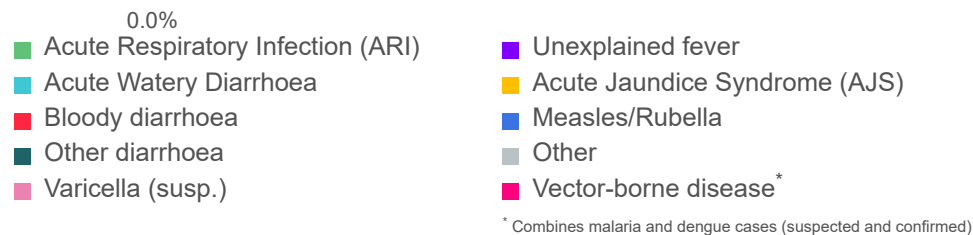
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Proportional morbidity

Figure 1 | Proportional morbidity (W52 2022)



Disease	W52		2022	
	# cases	% morbidity	# cases	% morbidity
AWD	2,401	2.4%	152,303	2.7%
Bloody diarr.	224	0.2%	18,424	0.3%
Other diarr.	1,020	1.0%	59,374	1.1%
Susp. Varicella	69	0.1%	9,534	0.2%
ARI	19,106	18.8%	991,791	17.9%
Measles/Rub.	7	0.0%	1,067	0.0%
AFP	2	0.0%	83	0.0%
Susp. menin.	4	0.0%	201	0.0%
AJS	16	0.0%	1,367	0.0%
Susp. HF	12	0.0%	447	0.0%
Neo. tetanus	0	0.0%	9	0.0%
Adult tetanus	0	0.0%	21	0.0%
Malaria (conf.)	4	0.0%	402	0.0%
Malaria (susp.)	43	0.0%	53,374	1.0%
Dengue (conf.)	107	0.1%	20,341	0.4%
Dengue (susp.)	27	0.0%	8,670	0.2%
Unexpl. fever	791	0.8%	61,910	1.1%
Sev. Malnut.	41	0.0%	2,670	0.0%
Inj./Wounds	2,028	2.0%	115,528	2.1%
Other	75,773	74.5%	4,045,529	72.9%
Total	100,955	100%	5,551,373	100%

Trend in consultations and key diseases

Figure 2 | Trend in proportional morbidity for key diseases (W52)

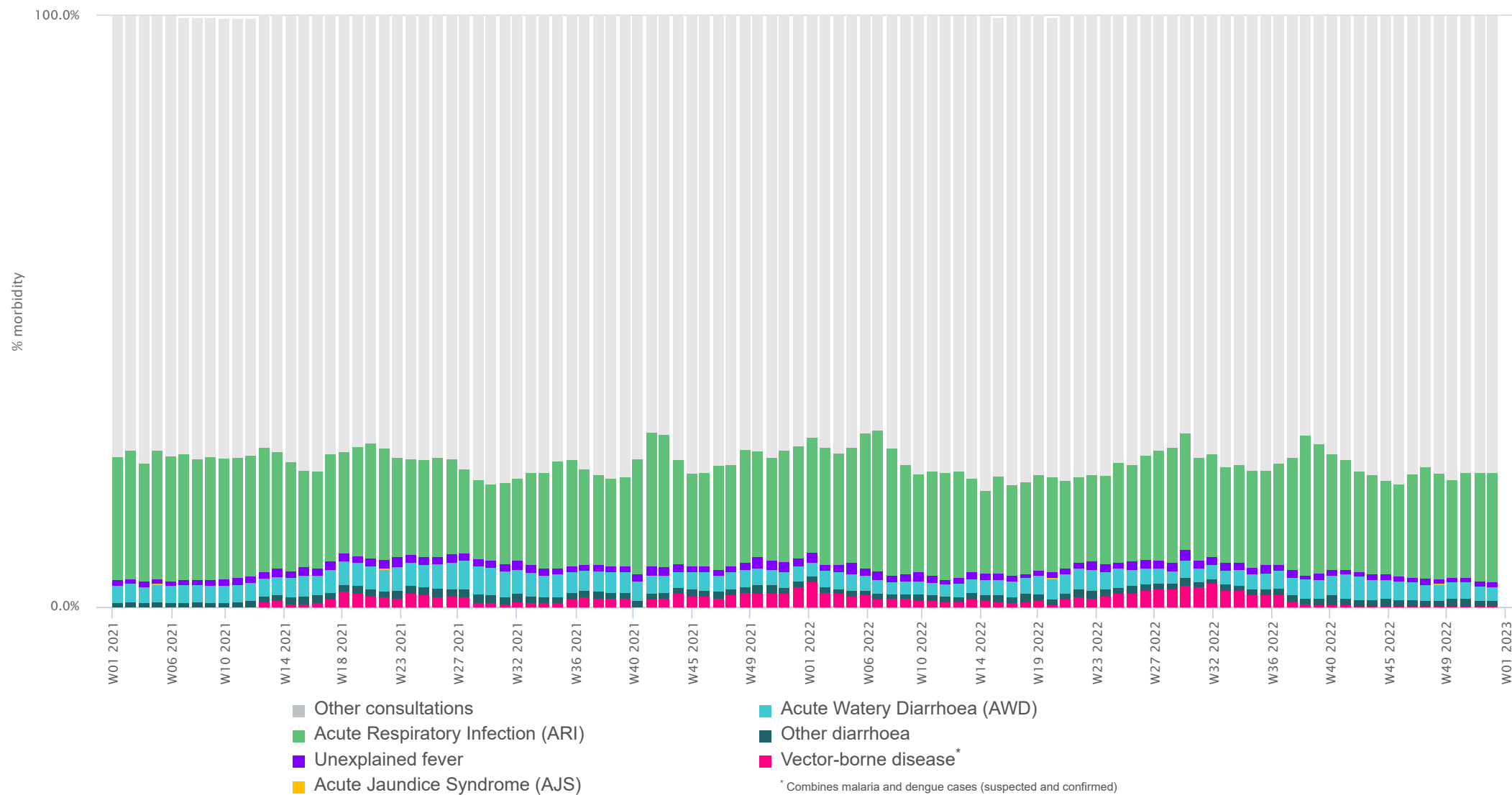
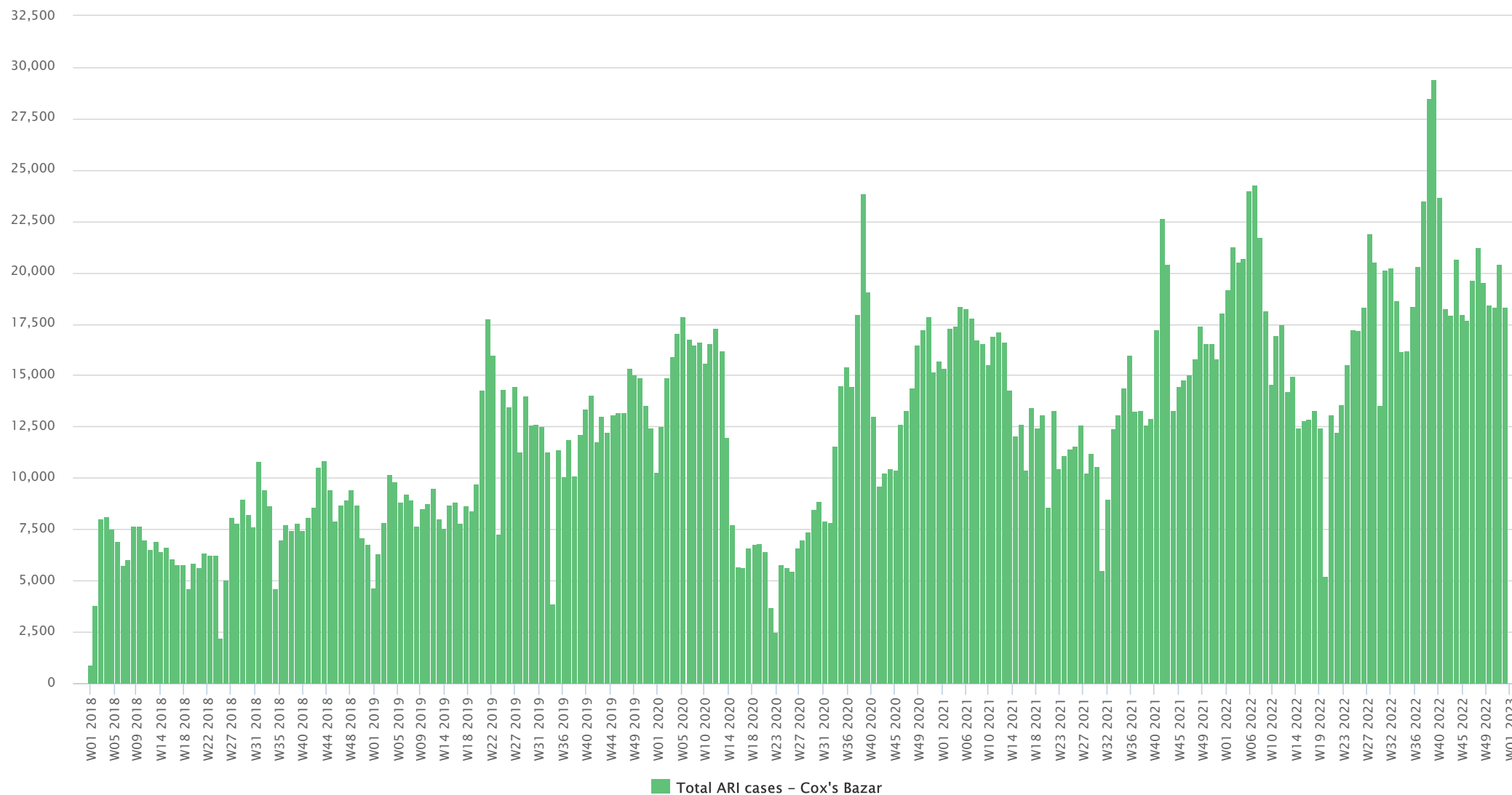
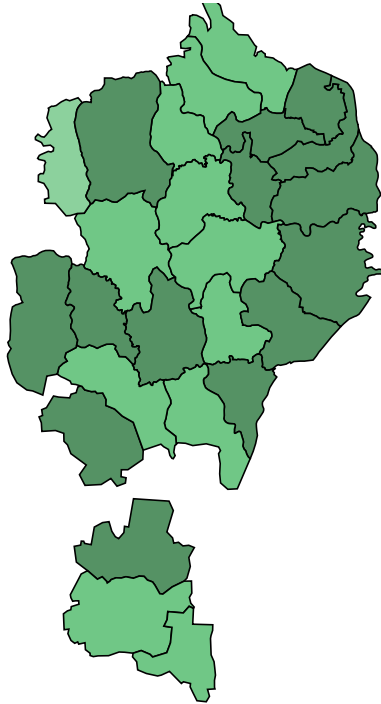


Figure 3 | Trend in number of cases over time (W38 2017 - W52 2022)

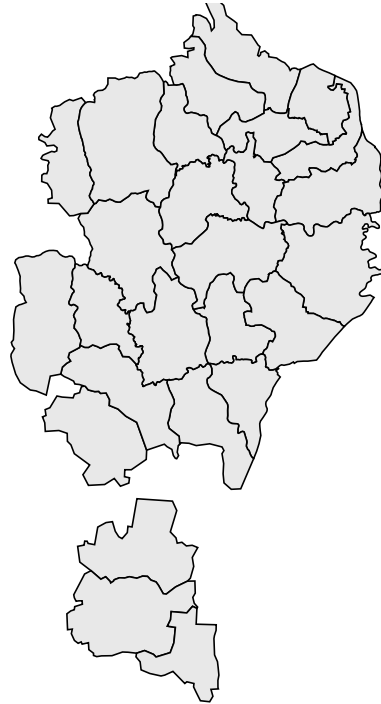


Map 1 | Map of cases by camp (W52 2022)

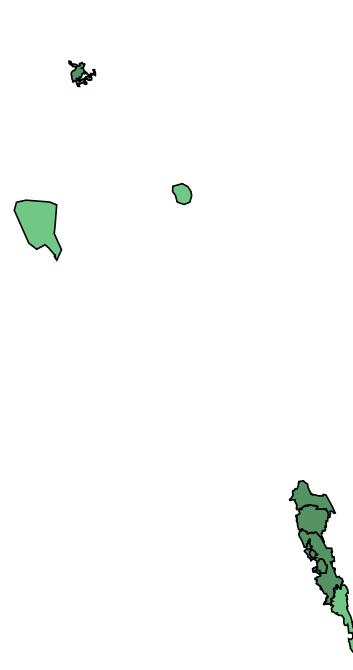
a. Ukhia | Number of cases



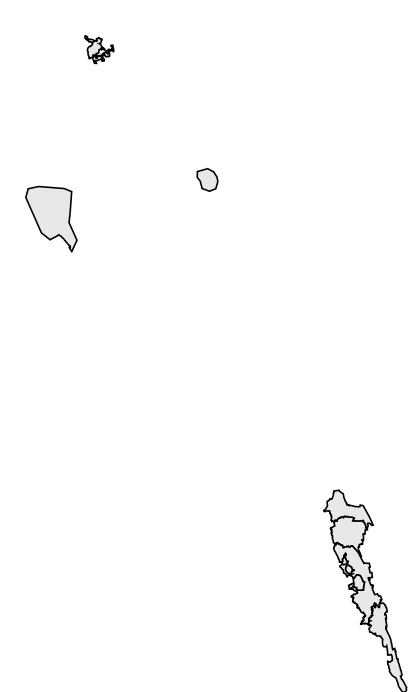
b. Ukhia | Number of alerts



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 (W52 2022)

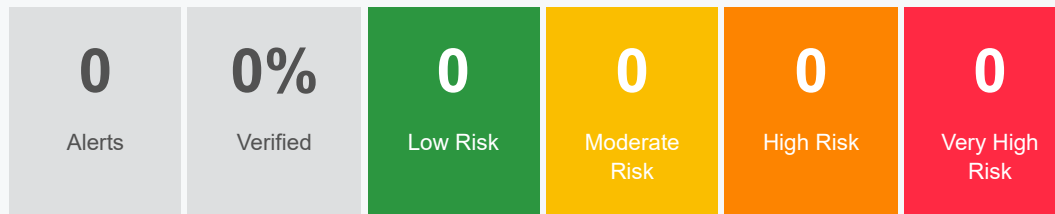
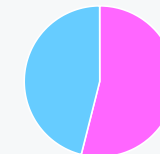


Figure | % sex



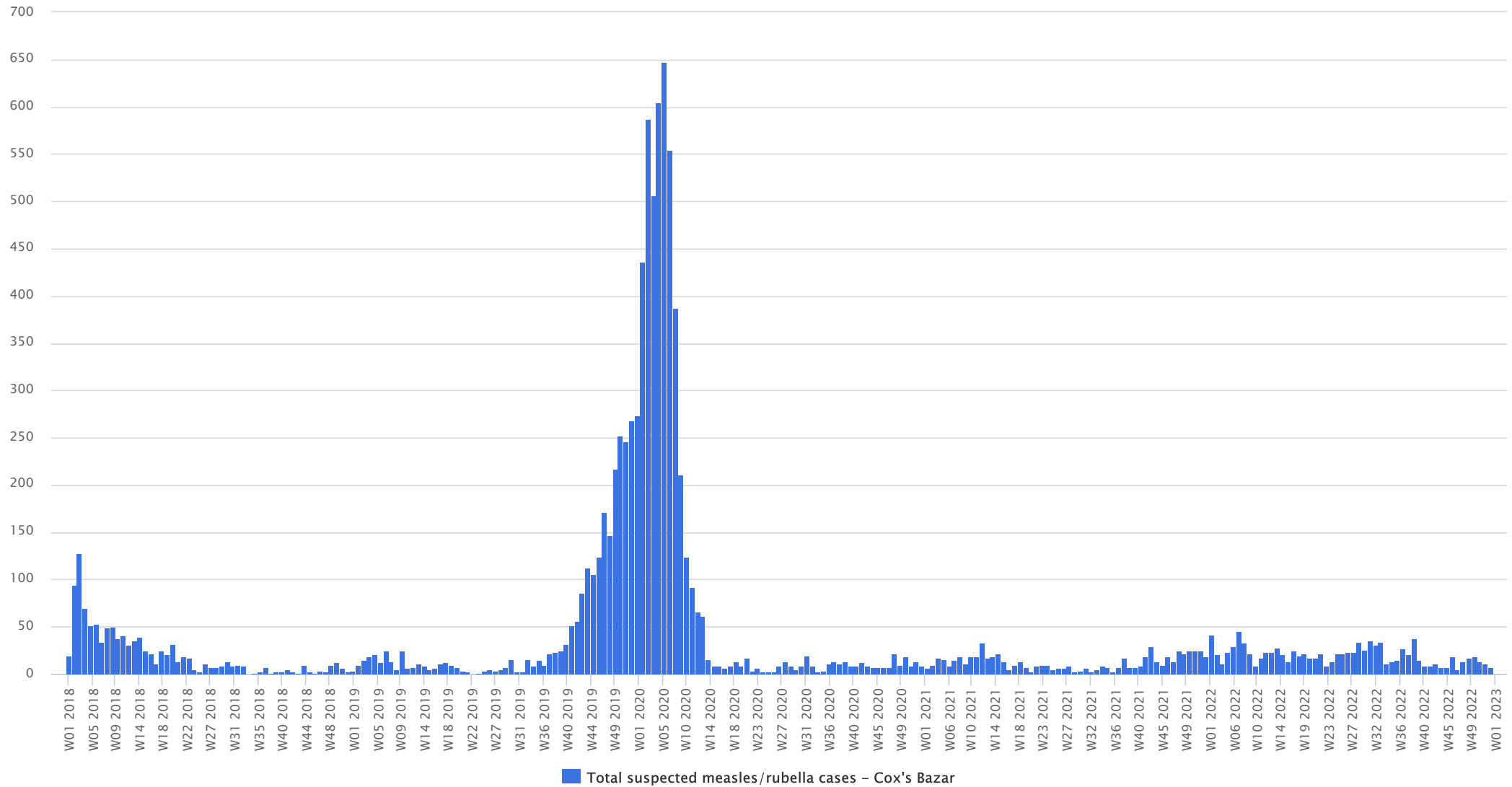
Female Male

Figure | % age



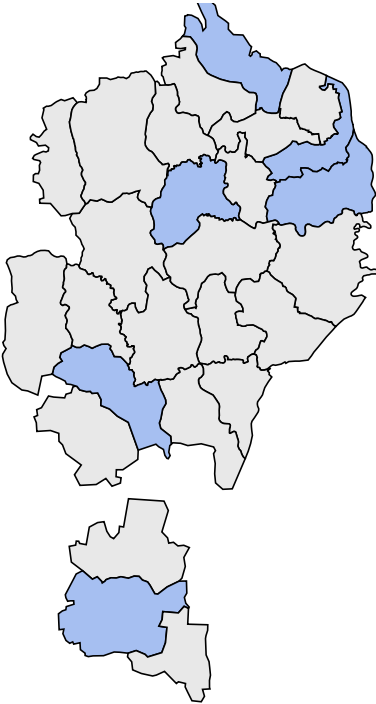
>=5 **< 5**

Figure 4 | Trend in number of suspected cases over time (W38 2017 - W52 2022)

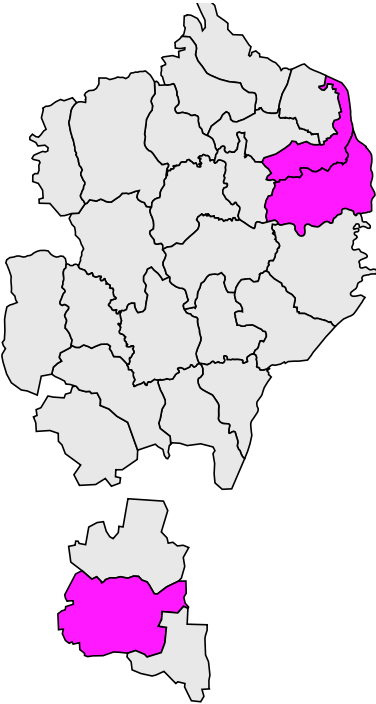


Map 2 | Map of cases by camp (W52 2022)

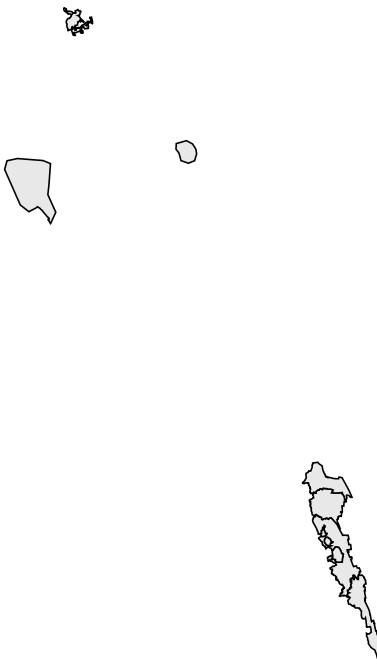
a. Ukhia | Number of cases



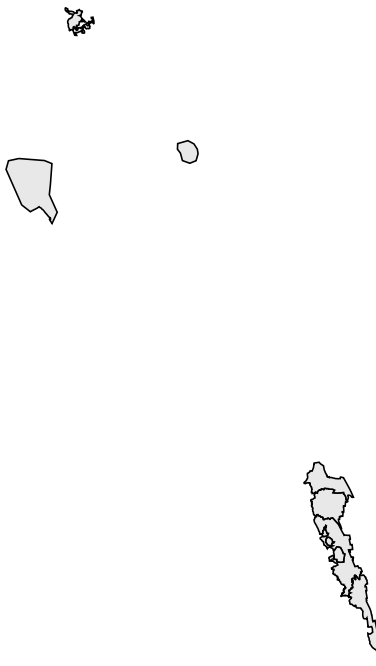
b. Ukhia | Number of alerts



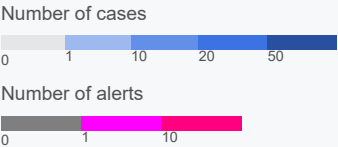
c. Teknaf | Number of cases



d. Teknaf | Number of alerts



Map legend



Alert threshold
1 case. Source: IEDCR

Alert management (W52 2022)

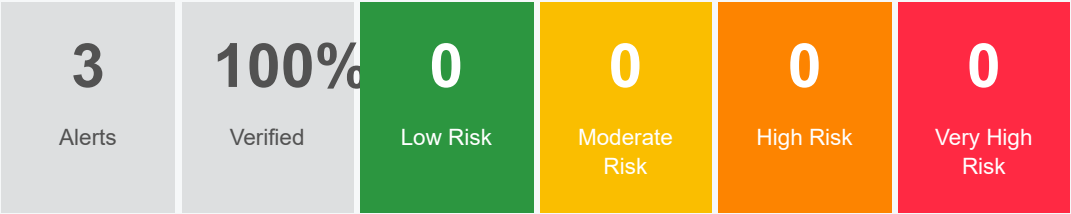


Figure | % sex

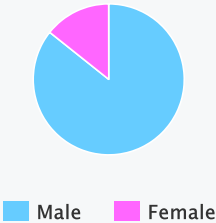


Figure | % age

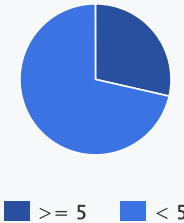
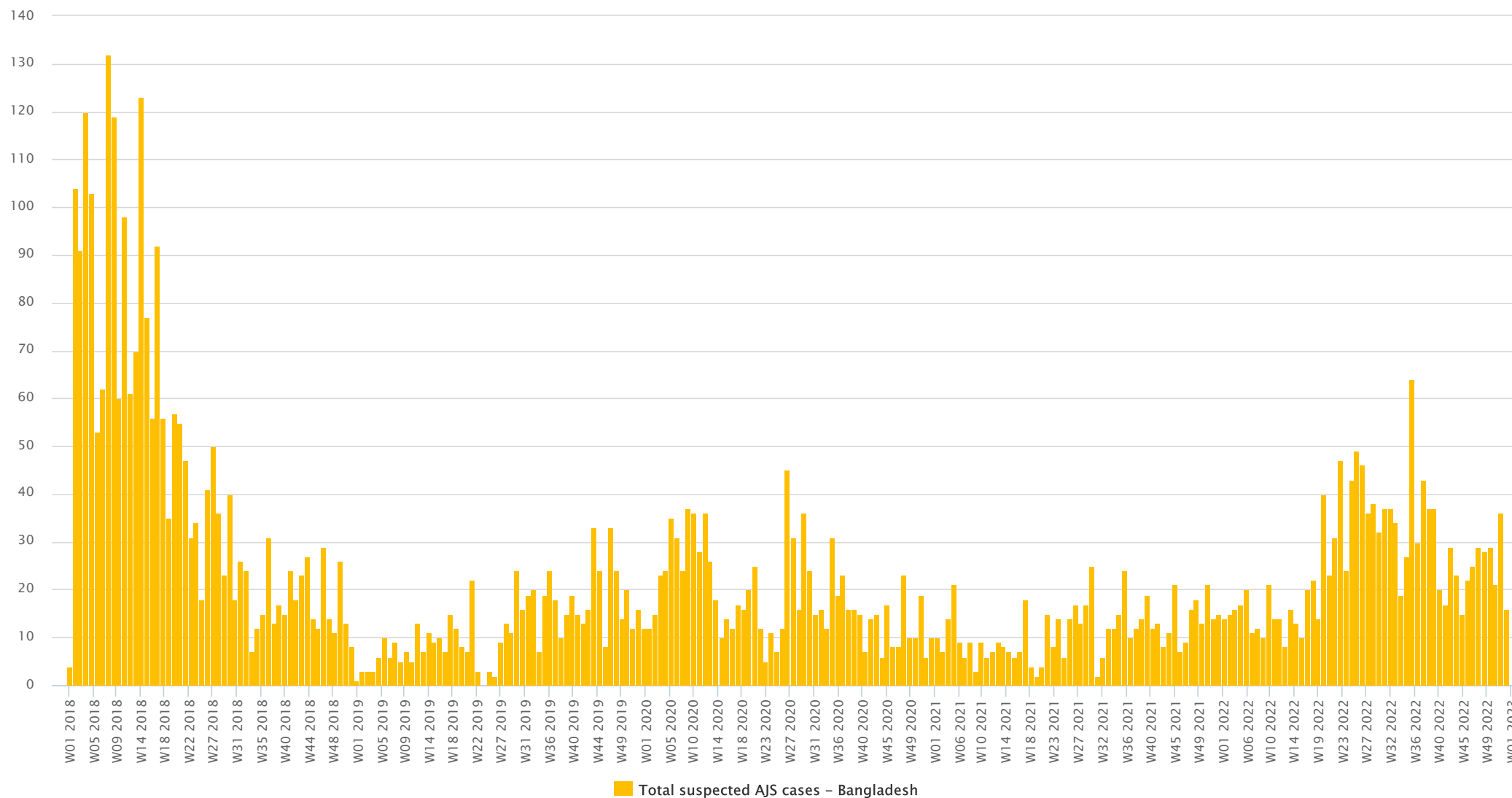
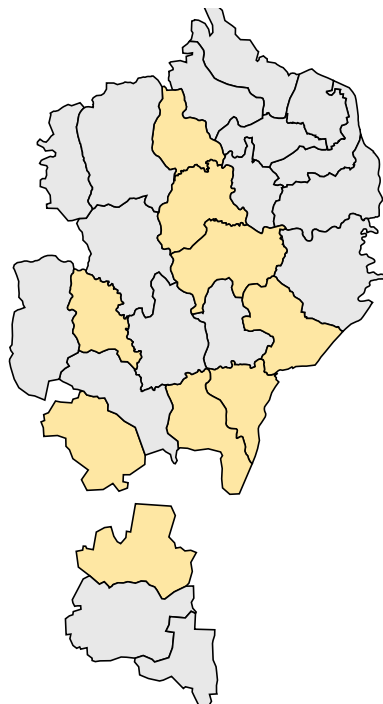


Figure 5 | Trend in number of cases over time (W38 2017 - W52 2022)

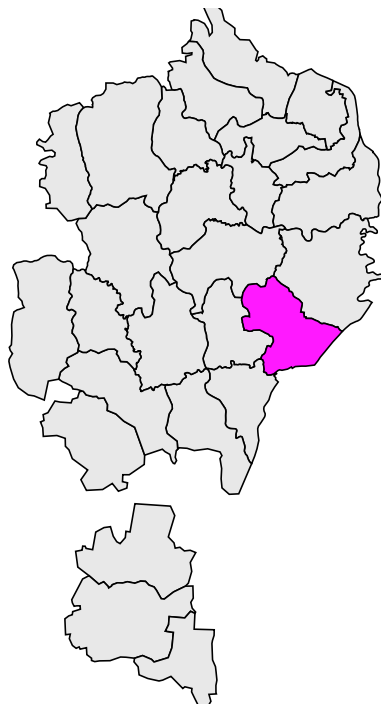


Map 3 | Map of cases by camp (W37 2017 - W52 2022)

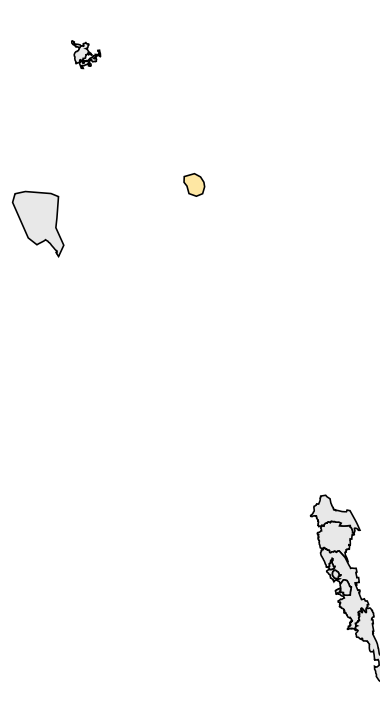
a. Ukhia | Number of cases



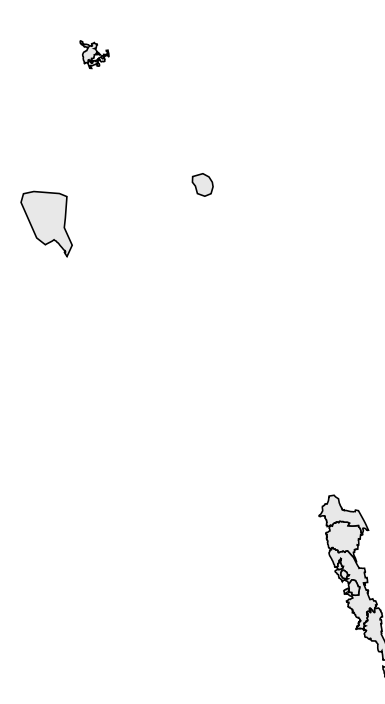
b. Ukhia | Number of alerts



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 (W52 2022)

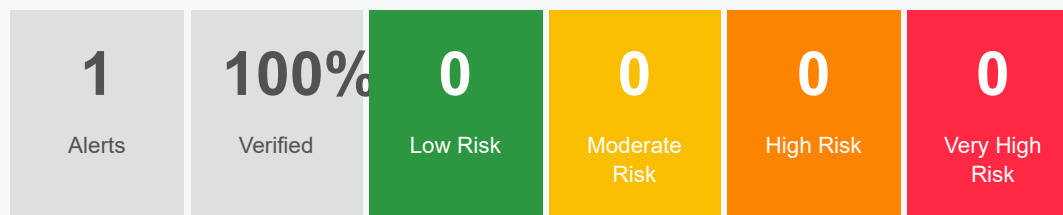
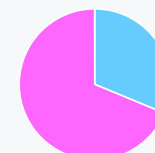
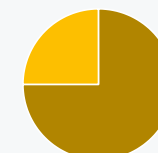


Figure | % sex



Male Female

Figure | % age



>= 5 < 5

Figure 6 | Trend in number of cases over time (W38 2017 - W52 2022)

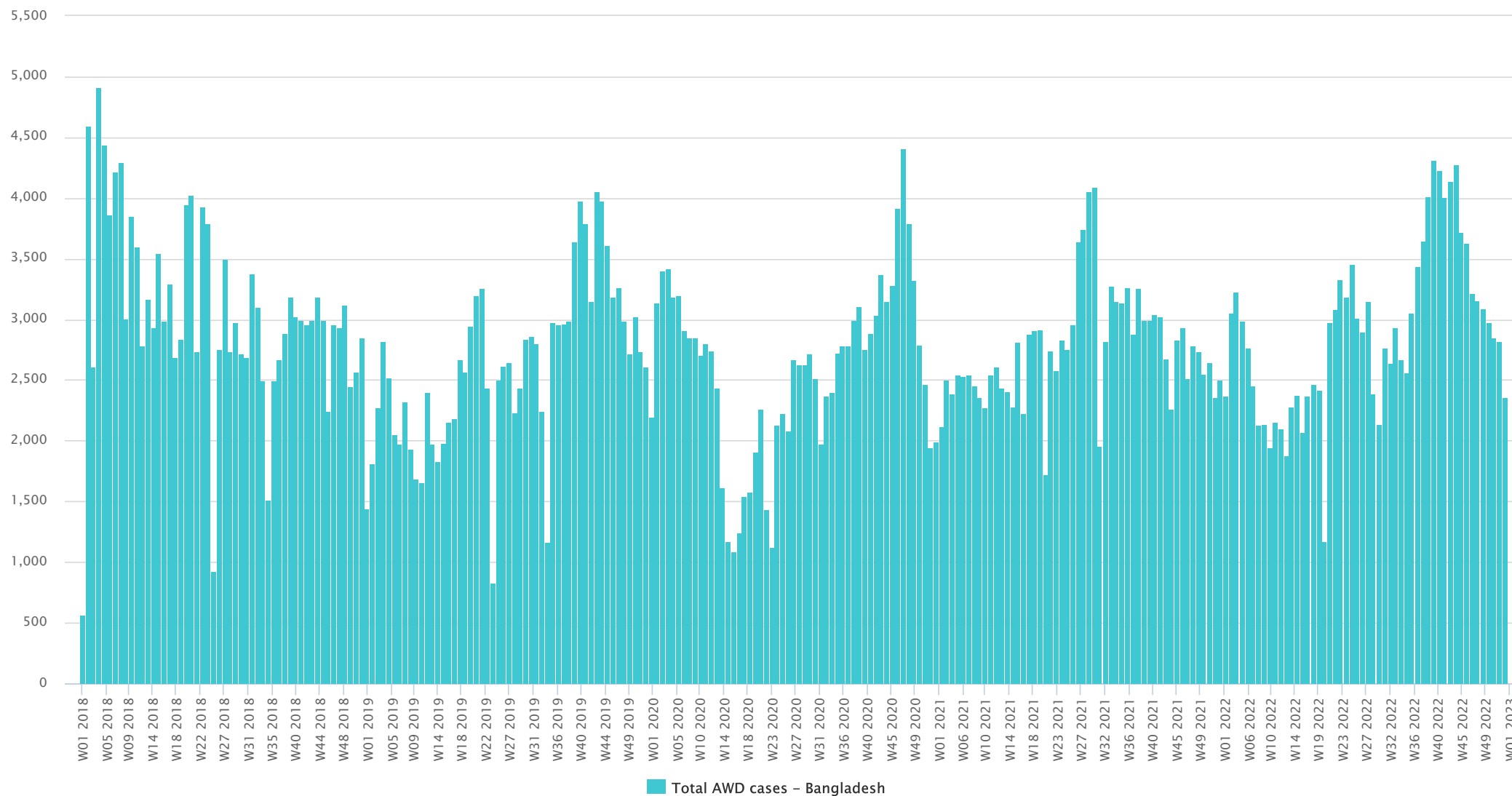
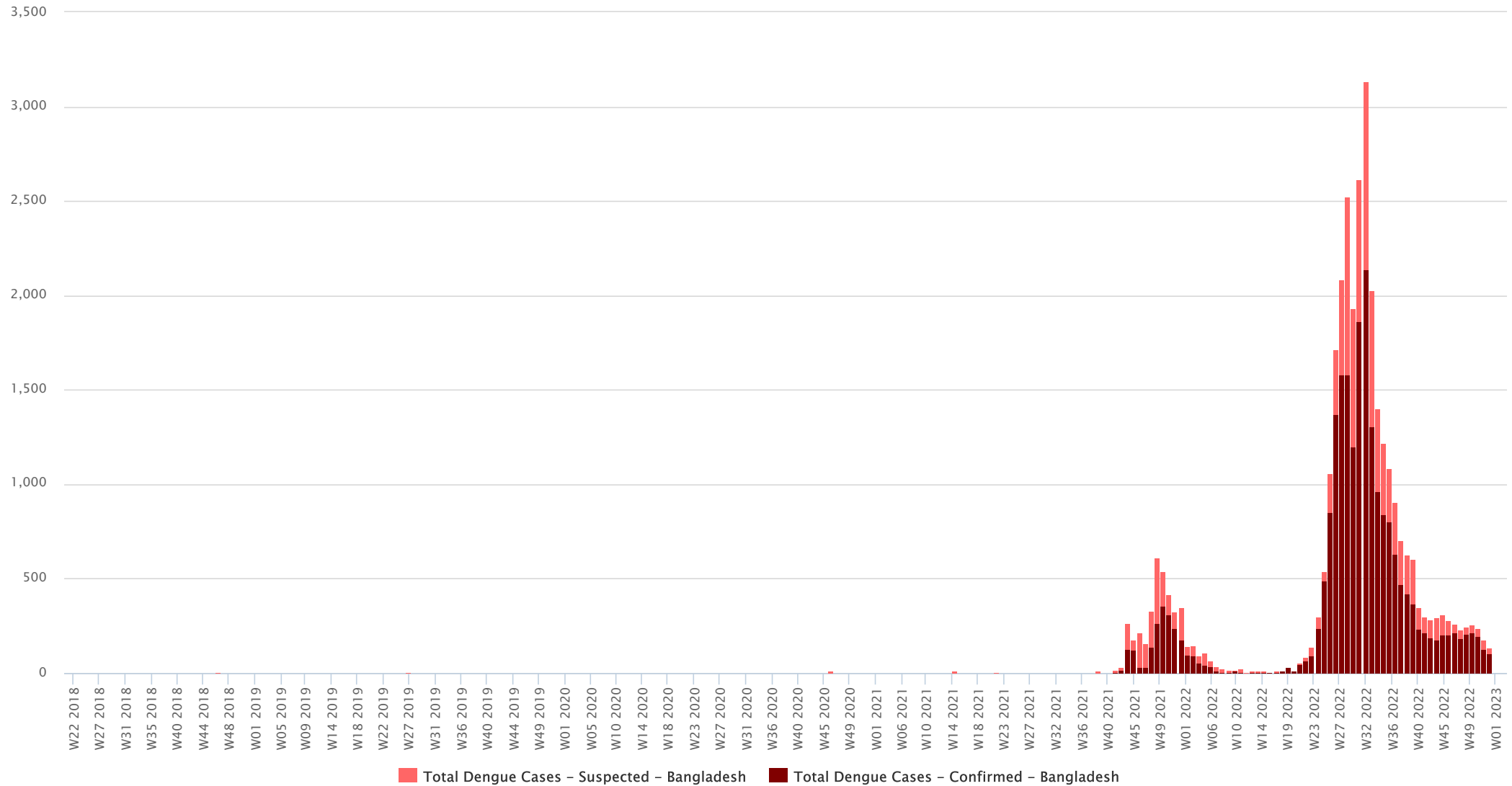
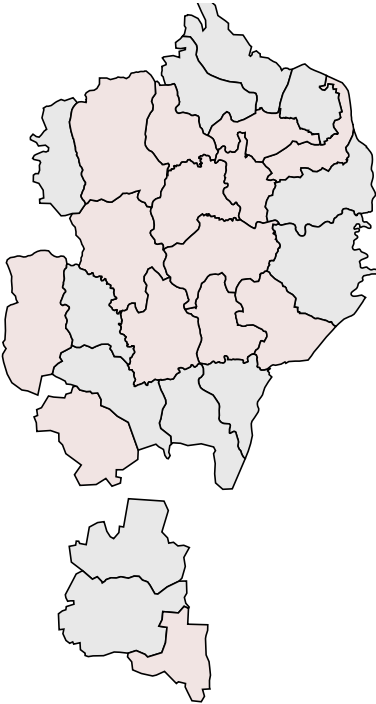


Figure 7 | Trend in number of cases over time (W38 2017 - W52 2022)

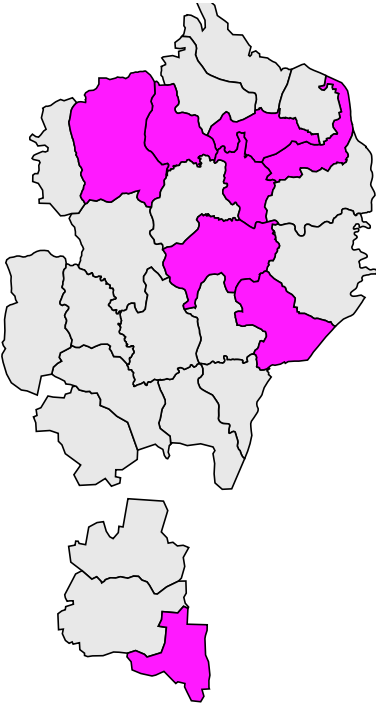


Map 4 | Map of cases by camp (W37 2017 - W52 2022)

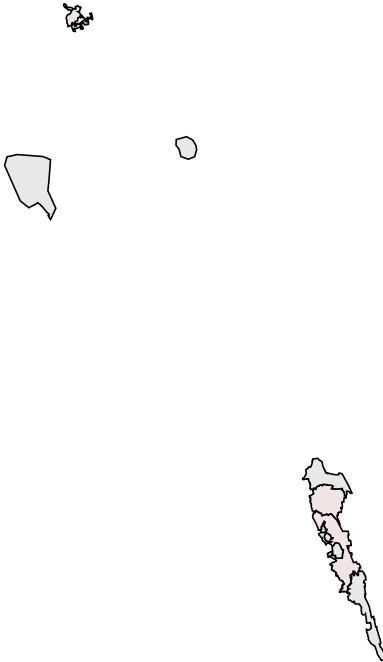
a. Ukhia | Number of cases



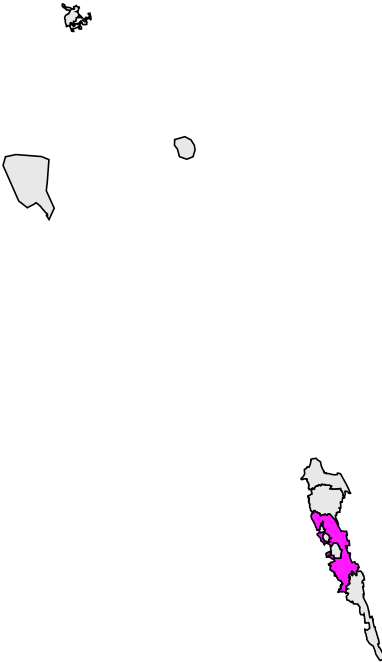
b. Ukhia | Number of alerts



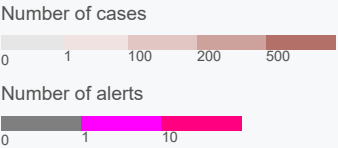
c. Teknaf | Number of cases



d. Teknaf | Number of alerts



Map legend



Alert threshold

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

Alert management (W52 2022)

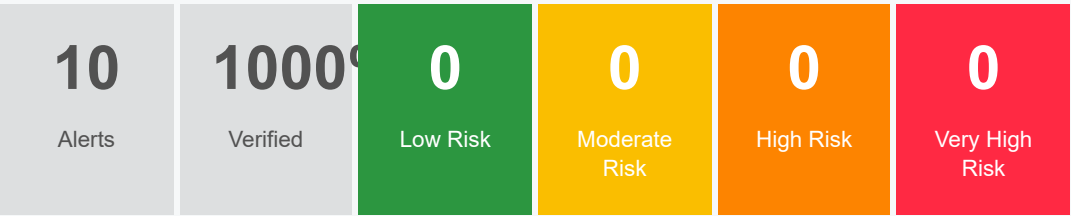


Figure | % sex

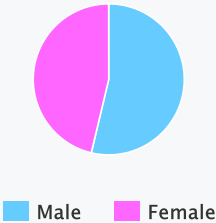


Figure | % age

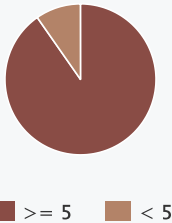
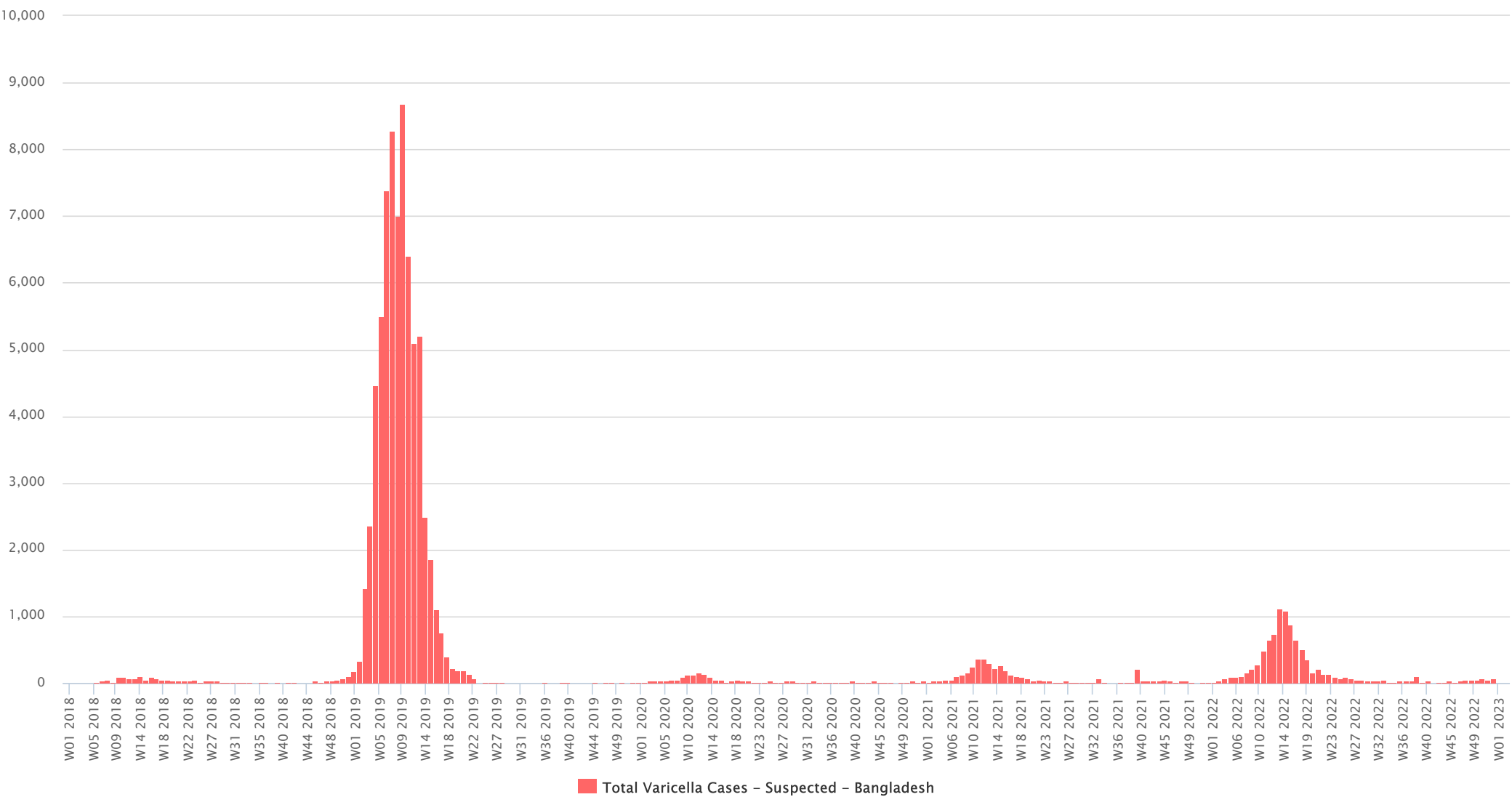
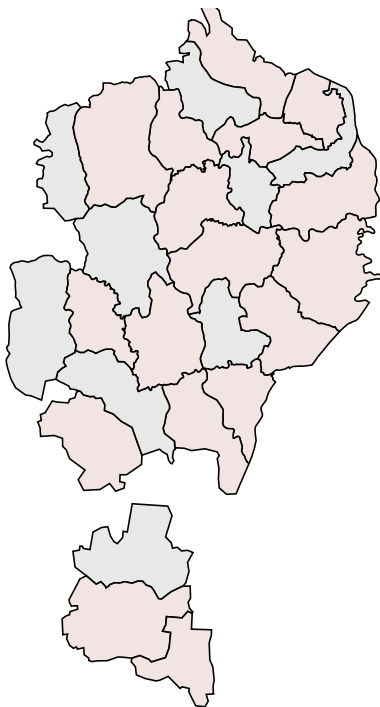


Figure 7 | Trend in number of cases over time (W38 2017 - W52 2022)

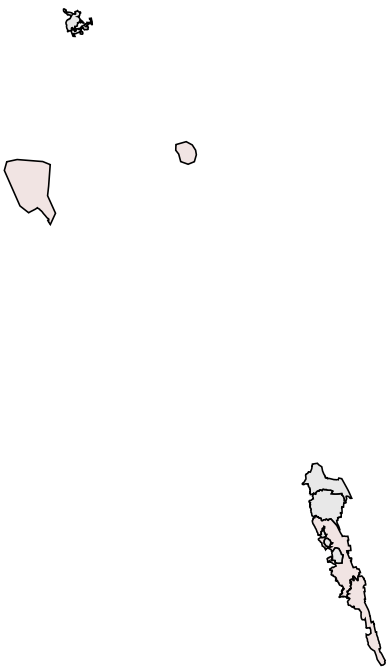


Map 4 | Map of cases by camp (W37 2017 - W52 2022)

a. Ukhia | Number of cases



c. Teknaf | Number of cases



Map legend

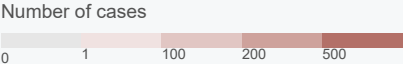


Figure | % sex

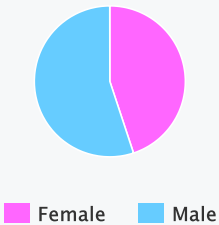
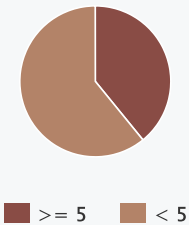


Figure | % age



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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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