



Epidemiological Highlights

Week 9 (26 February- 4 March) 2023



World Health
Organization

EWARS Reporting Updates

Currently, a total of **159 health facilities** are registered in EWARS -

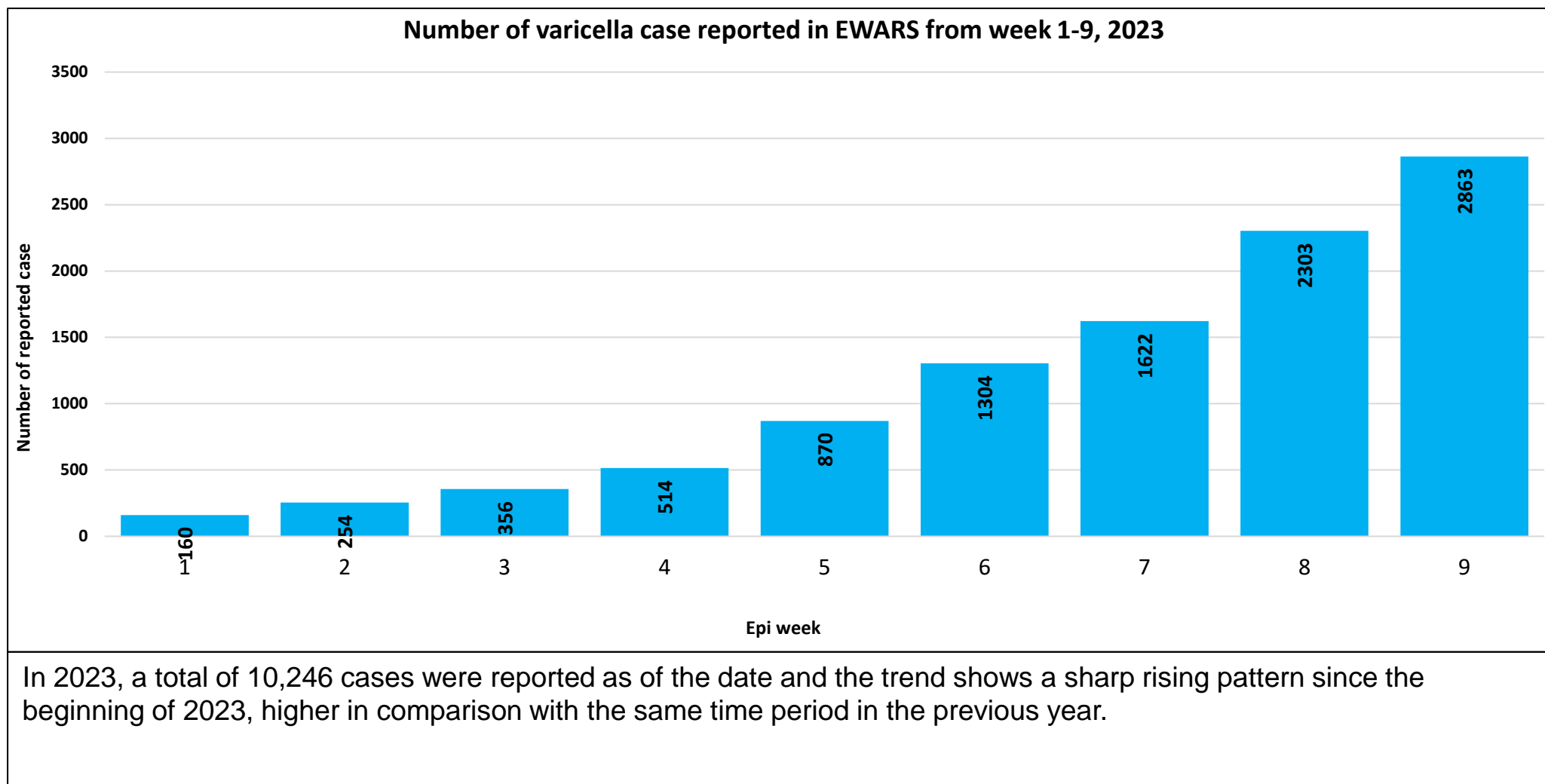
- About 133 of the expected 159 weekly reports were received from registered health facilities on time in week 9 in 2023
- Timeliness and completeness of weekly reporting were 84% which is more than the 80% weekly threshold
- Sixty-two (62) alerts were triggered
- All alerts were reviewed and verified by the WHO EWARS team; this is an 8% decrease from the previous week (65 alerts in week 8, 2023)

Highlights: Morbidities and Mortalities

- Acute Respiratory Infections (21.1%), Acute Watery Diarrheal Diseases (2.2%) & Injuries, and Wounds (2.1%) were the diseases and health conditions with the highest proportional morbidity this week.
- Monitoring of suspected SARI death under enhanced Community-based mortality surveillance has been continued since week 28, 2020. So far, 19 cases, of which none is probable COVID-19 death, have been reported in 2023
- This Epi week, two (2) new SARI deaths, and upon investigation, none was reported as probable COVID-19 death as highlighted below:

Year	Suspected SARI death reported (current week)	Reclassified as death due to probable COVID-19
2023	19 (2)	0
2022	136	8
2021	96	15
2020	49	2

Varicella Update



Highlights: COVID-19 Surveillance Updates

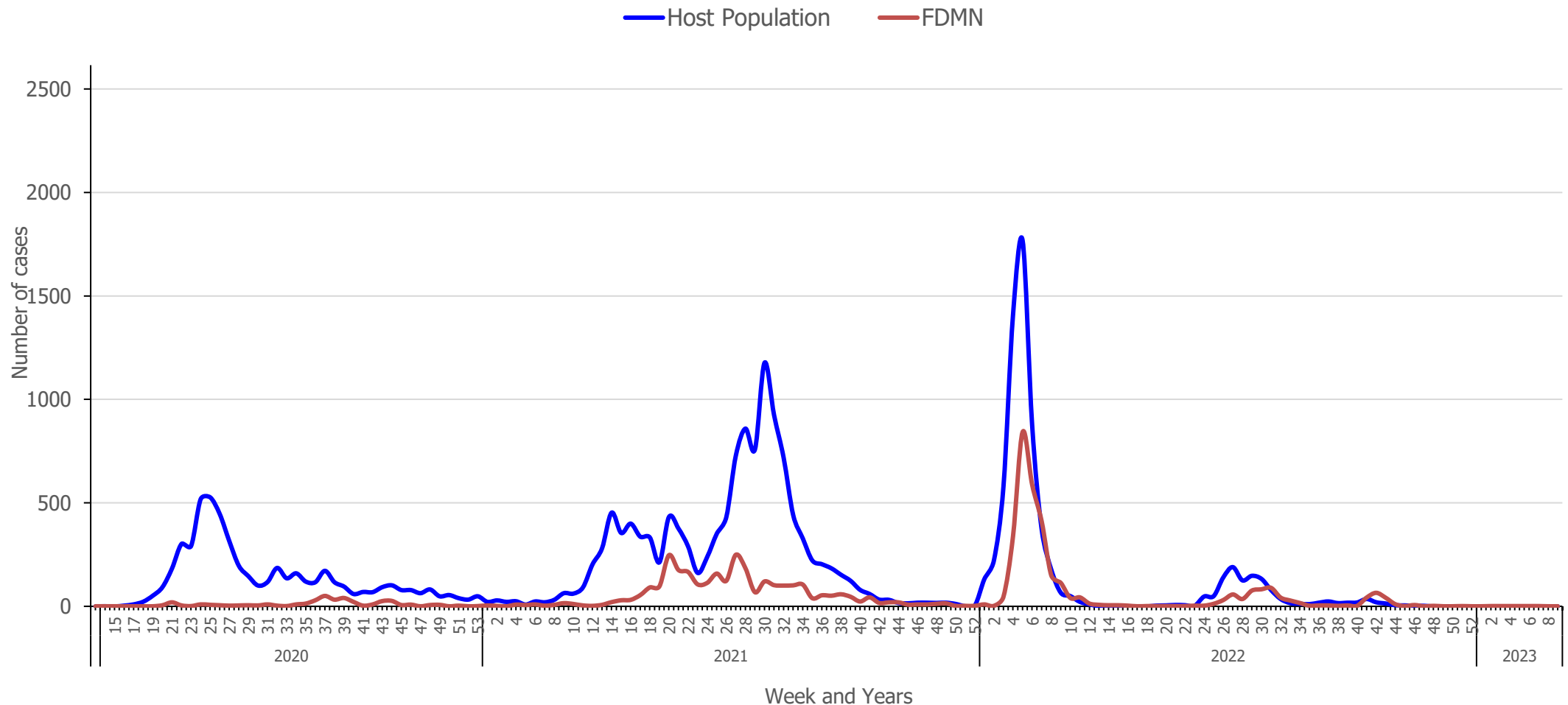
FDMN: Transmission under control

- No (0) new confirmed case reported this week which is now two weeks in a row.
- Weekly TPR and incidence/new infections are zero while cumulative TPR since the outbreak began stands at 5.4%
- No new death reported, and total deaths stabilized at **45** (CFR- 0.7%) while cumulative cases stood at **6,597**
- Level of recovery continues to steady at 99% with one case in isolation this week

Host Population: Transmission under control

- No (0) new confirmed case were reported this week like **last 13 weeks**, the total caseload is **24,643**
- Weekly TPR is steady at zero this week, like the previous week while cumulative TPR since the outbreak began is 10.8%
- Weekly case incidence stabilized at 0.0 cases/1m population/week last week
- Recovery level continues to remain steady at 99%, with no new death, and total deaths stand at **269** (CFR- 1.1%)

Highlights: COVID-19 Surveillance Updates

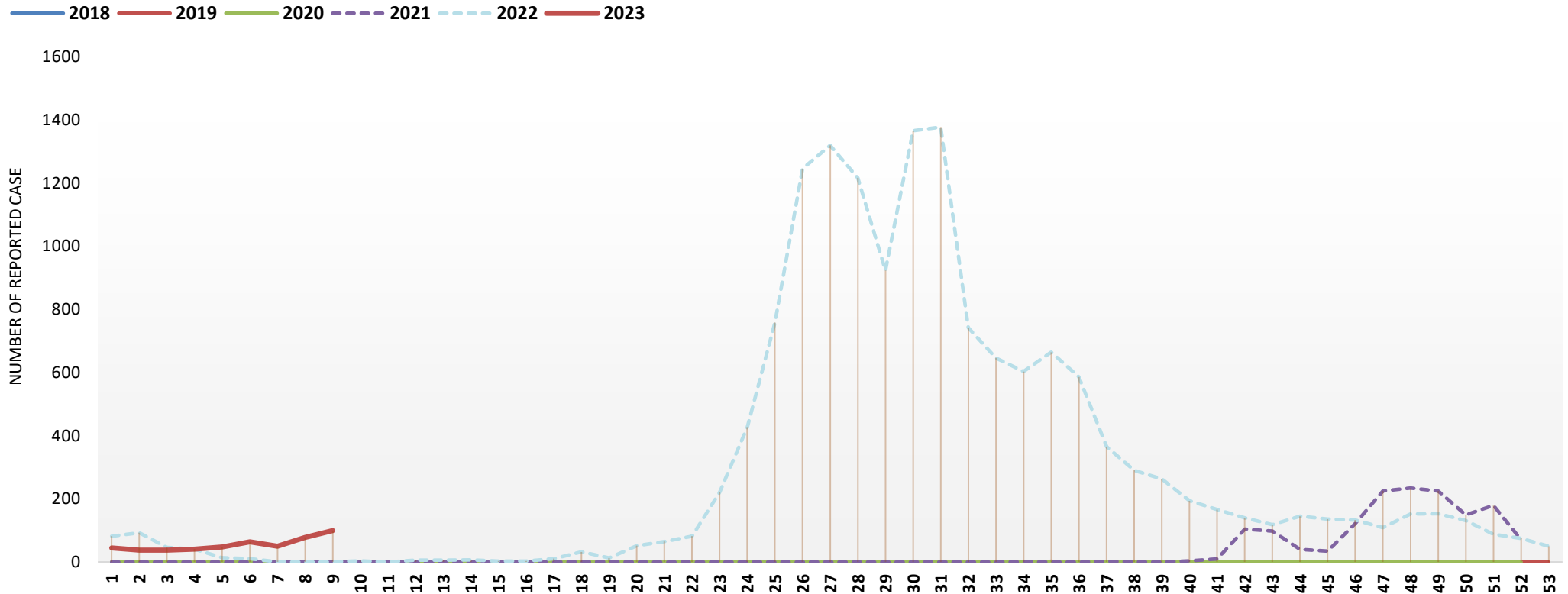


FDMNs: No new confirmed cases were reported this week, and weekly TPR and case incidence are zero for the past three weeks in a row.

Host Population: No new cases were reported in the week as well for the last 3 months in a row, so weekly TPR and case incidence have remained at zero for the period.

Dengue Surveillance Updates

Yearly Trends of Dengue case trend from 2018 – 2023 week 9



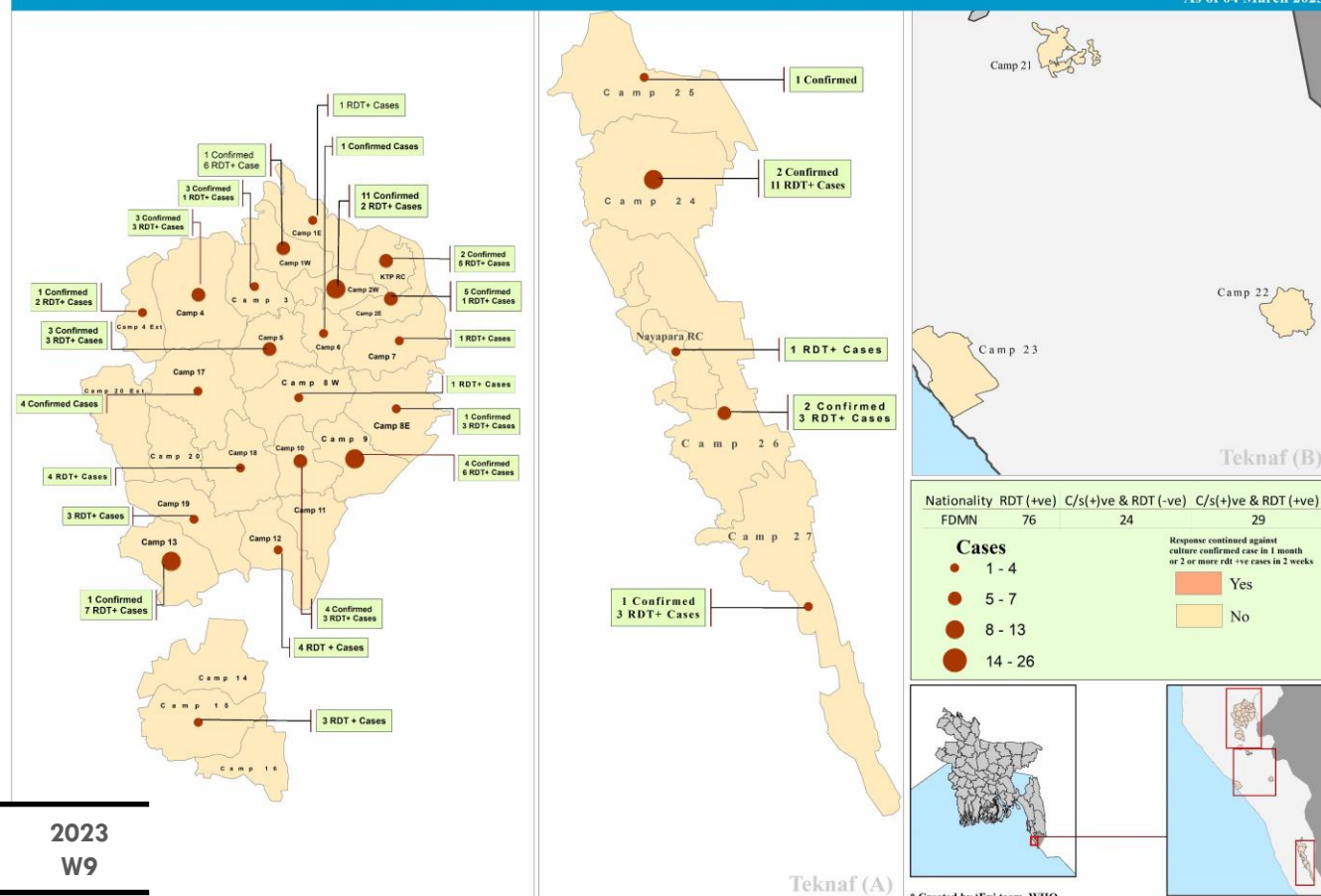
- ❑ There is a slight increase in the number of weekly confirmed dengue fever cases from Epi week 4, 2023
- ❑ The current transmission is a continuation of that for 2021 and 2022 (possible endemic transmission established)
- ❑ Camp 3 and the surrounding camps continue to bear the greatest burden of the cases so far reported in 2023 similar to 2022

Cholera/AWD Surveillance Updates

- In this week, there are one (1) confirmed and 1 suspected Cholera case Positive AWD/ suspected Cholera cases were reported from samples sent for testing.
- A total of 18 cases of which twelve (12) RDT-positive AWD/ cholera suspected cases and six (6) culture-confirmed Cholera cases have so far been reported in (Epi week 1-9) 2023.
- Cumulatively there are 879 RDT AWD cases/Cholera suspects have been reported while 408 cases were culture-confirmed since transmission in 2018.

Distribution of RDT positive and culture confirmed for Cholera cases in FDMN 2022 - 2023

As of 04 March 2023



2018 2019 2020 2021 2022 2023 W9

RDT positive AWD cases & culture confirmed for Cholera cases

49 258 28 357 170 18

Culture confirmed for Cholera

7 184 5 136 70 6

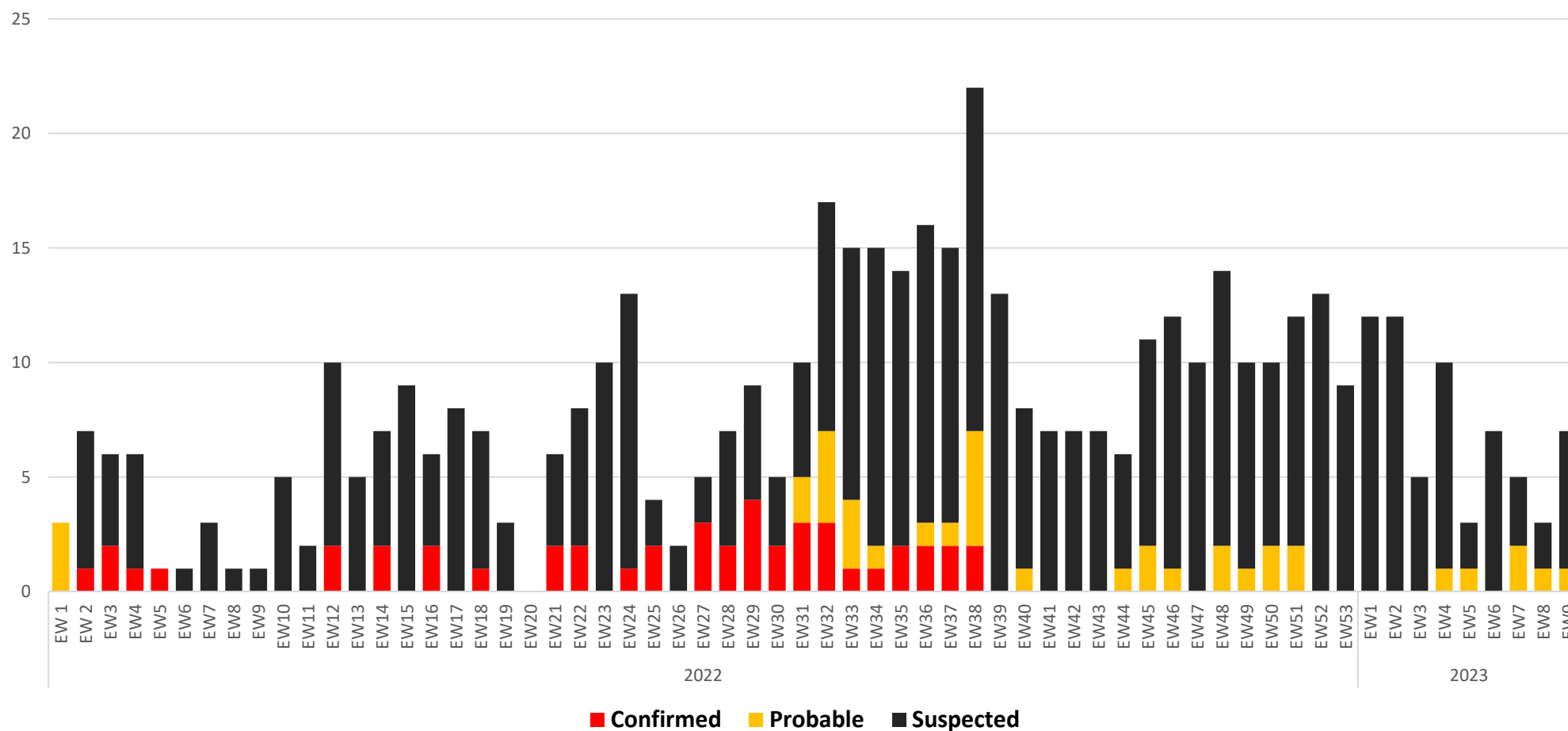
Diphtheria Surveillance Updates

- One (1) probable and 6 suspected diphtheria cases were reported in go.data in this Epi week
- The last confirmed case was reported on 14 September 2022 due to a shortage of PCR Test kits
- 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	2023
Confirmed	66	226	31	19	30	46	0
Probable	1154	1555	60	9	29	32	6
Suspected	1796	3549	523	198	118	355	64
Death	30	14	3	0	5	2	0

Trends of Diphtheria cases

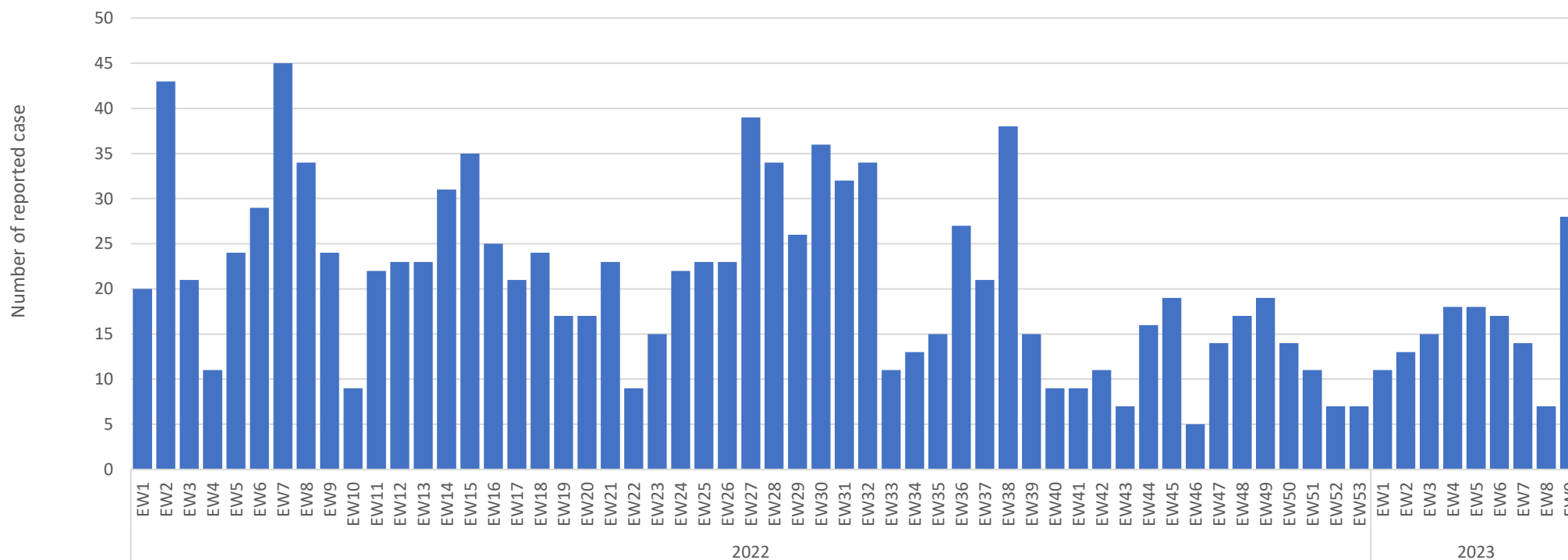
Total number of diphtheria case reported in EWARS from 2022 -week 9, 2023



- Persistent transmission continues to be reported, Diphtheria vaccination campaign concluded in all 33 camps with 92% coverage
- **One (1) probable and 6 suspected cases** were reported this Epi week; **New RT-PCR Rapid Test kits received by IEDCR from US CDC**
- There are 64 diphtheria cases (06 probable and 58 suspected cases) and zero fatalities so far reported in 2023
- In 2022 total of 431 cases (46 confirmed including 2 deaths, 32 probable, and 353 suspected cases) have so far been reported 2022

Epi Curve of Suspected Measles Cases

Total number of Measles case reported in EWARS from 2022- week 9, 2023



- > 28 suspected measles cases were reported through weekly reporting. This brings the total number of suspected measles cases to 141 reported in 2023
- > About 51% (72/141) of the total suspected measles cases were reported through case-based reporting and samples collected for laboratory confirmation

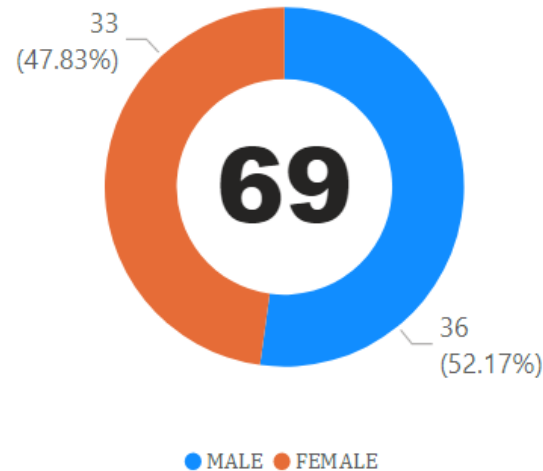
Community-based Mortality surveillance updates Epi week 9 2023

Probable causes of death	Epi week 9	In 2023
Still Birth	11 (16%)	65 (11%)
Neonatal Death (<28 days old)	8 (12%)	46 (7%)
Infectious Disease	1 (1%)	15 (3%)
Severe Acute Respiratory Infection (SARI)	2 (3%)	12 (2%)
Injury	2 (3%)	10 (2%)
Maternal Death	3 (4%)	12 (2%)
Acute Malnutrition	--	2 (0%)
Other	42 (78%)	412 (74%)
Total	69 (100%)	616 (100%)

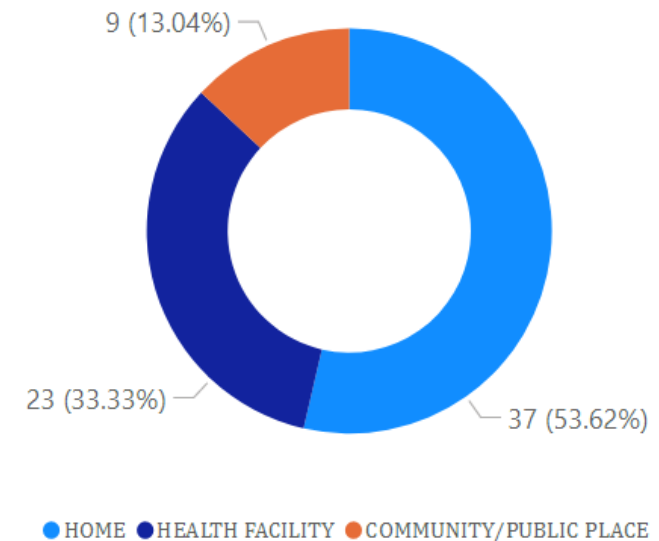
Partners to report all mortalities into the EWARS platform using both case and event-based reporting as applicable

Community-based Mortality surveillance updates Epi week 9 2023

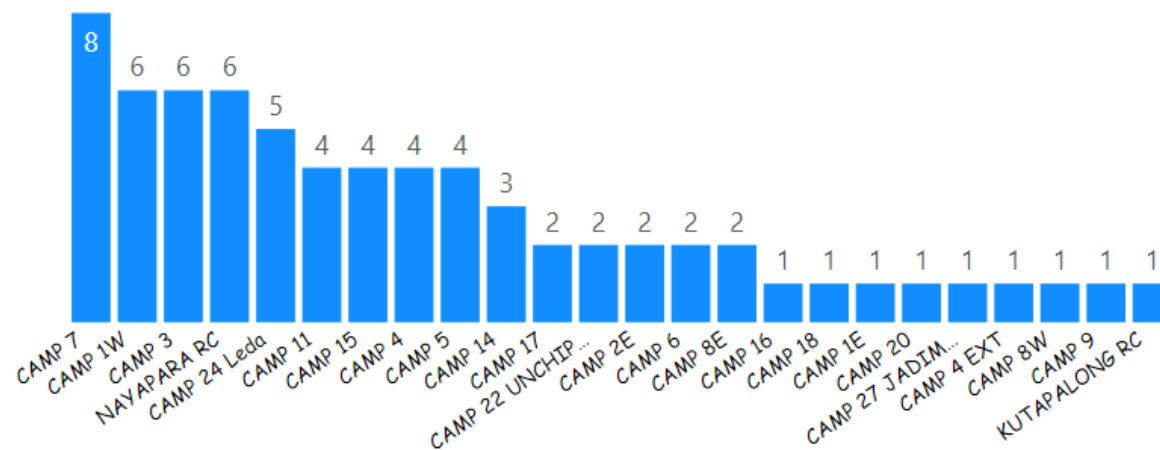
Gender distribution



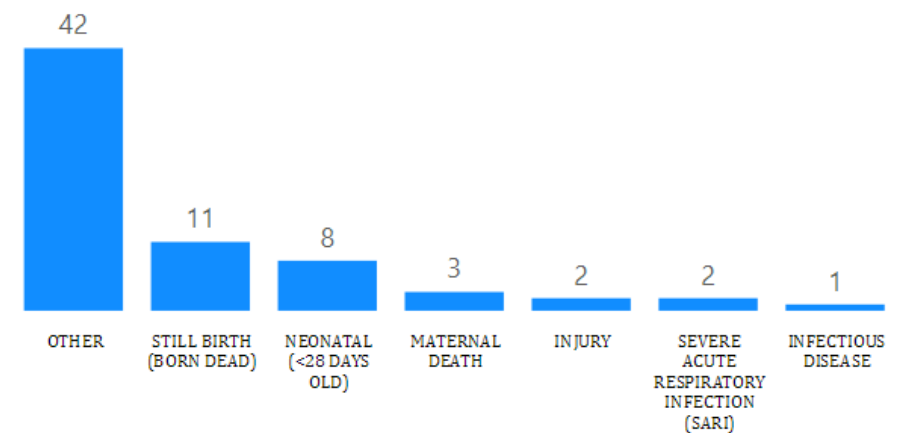
Place of death



Distribution of deceased Camp



Distribution of Probable cause of death



Bangladesh

Rohingya Emergency Response

Early Warning, Alert and Response System (EWARS)

Epidemiological Bulletin W9 2023



Ministry of Health and Family
Welfare Bangladesh



World Health
Organization



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Sources of data

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

Table 1 | Coverage

#	%	
952,309	-	Estimated total Rohingya population ¹
923,358	97%	Total population under surveillance
165	-	Total number of health facilities
159	96%	Number of EWARS reporting sites

Table 2 | Early warning performance indicators

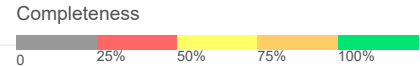
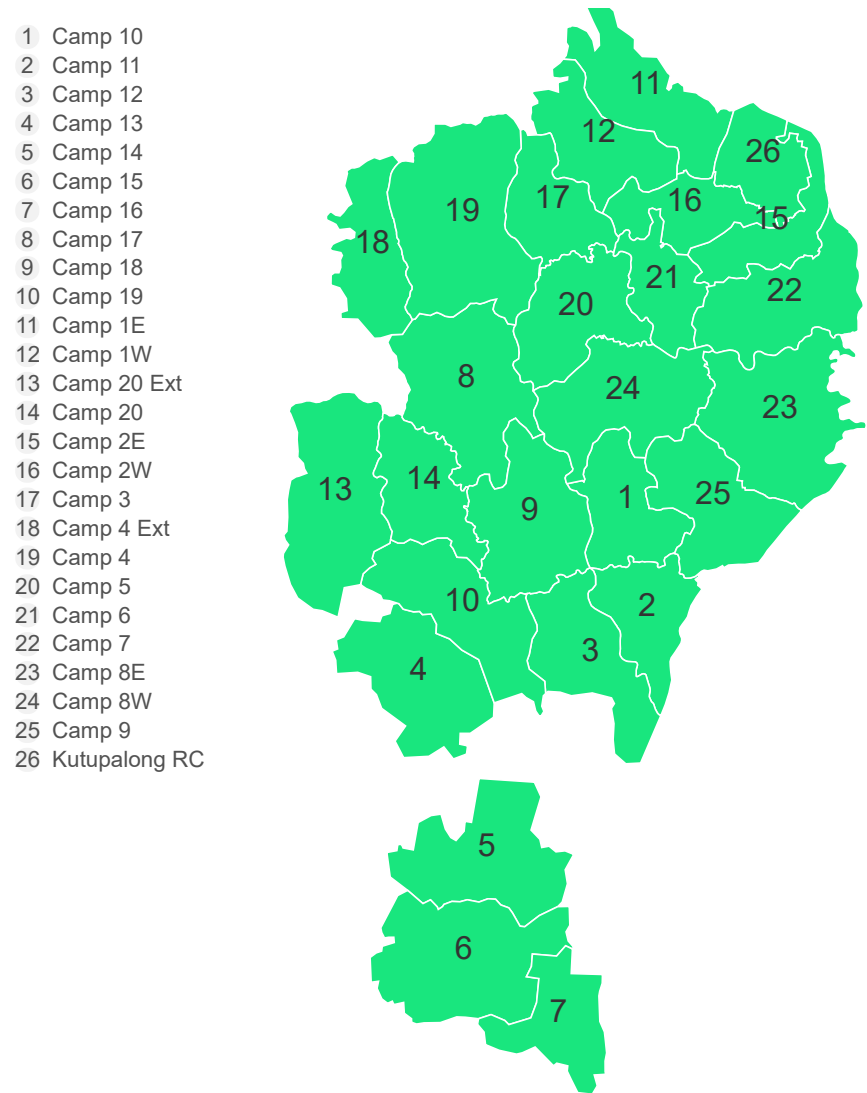
W9	Cumulative (2023)	
133	1454	Number of weekly reports received
84%	90%	Completeness
84%	86%	Timeliness

Table 3 Alert performance indicators

W9	Cumulative (2023)	
62	876	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

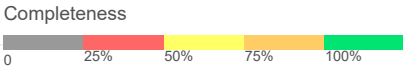
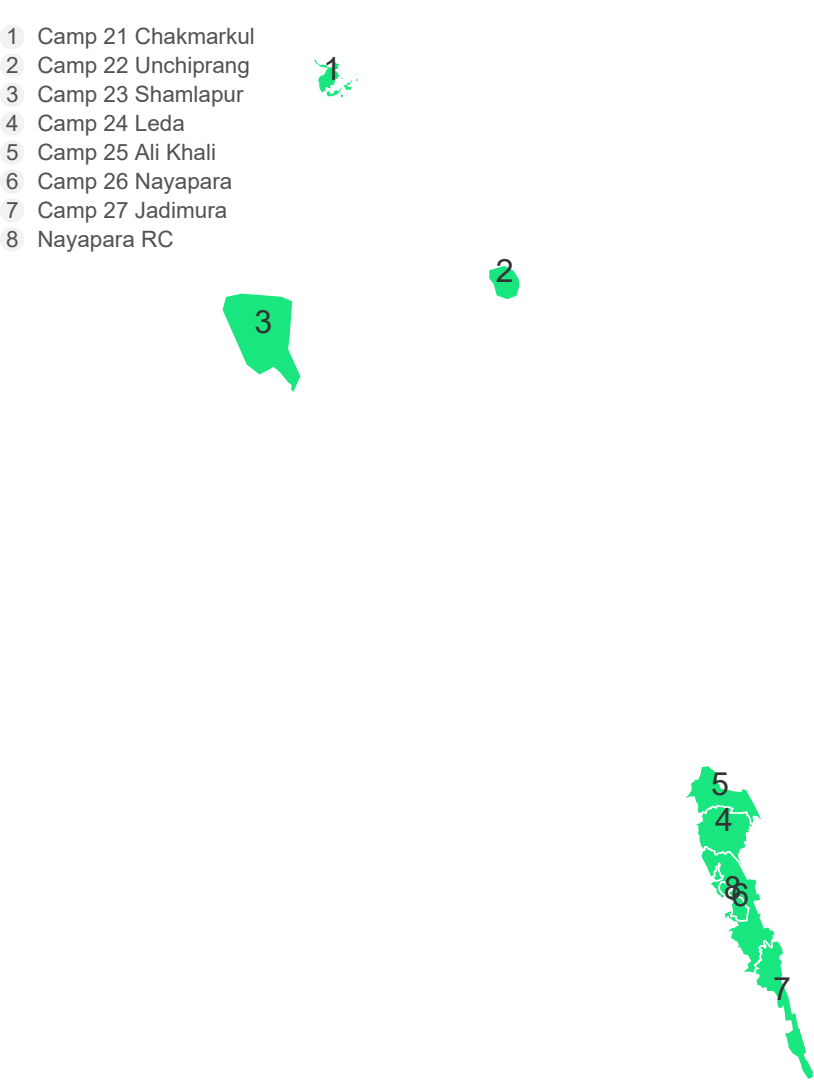


Table 4 | Performance by camp (W9 2023)

Northern group	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
Ukhia Northern Group				
Camp 1E	4	4	100%	0%
Camp 1W	5	3	80%	0%
Camp 2E	3	3	100%	0%
Camp 2W	4	4	100%	0%
Camp 3	5	3	75%	0%
Camp 4	5	4	80%	0%
Camp 4 Ext	1	1	100%	0%
Camp 5	5	4	100%	0%
Camp 6	2	2	100%	0%
Camp 7	5	4	80%	0%
Camp 8E	9	9	100%	0%
Camp 8W	4	3	75%	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

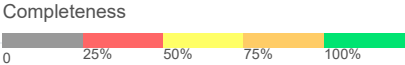
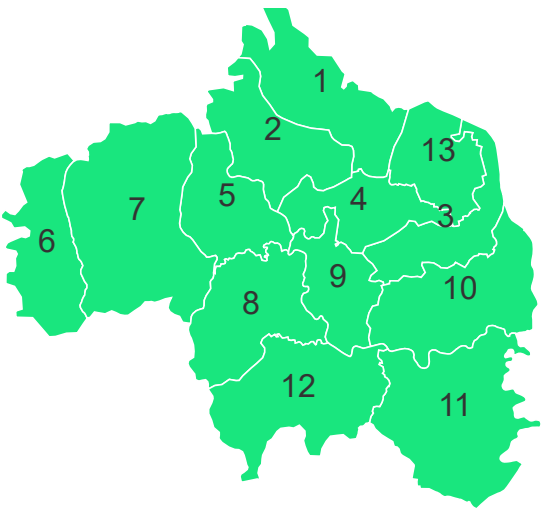
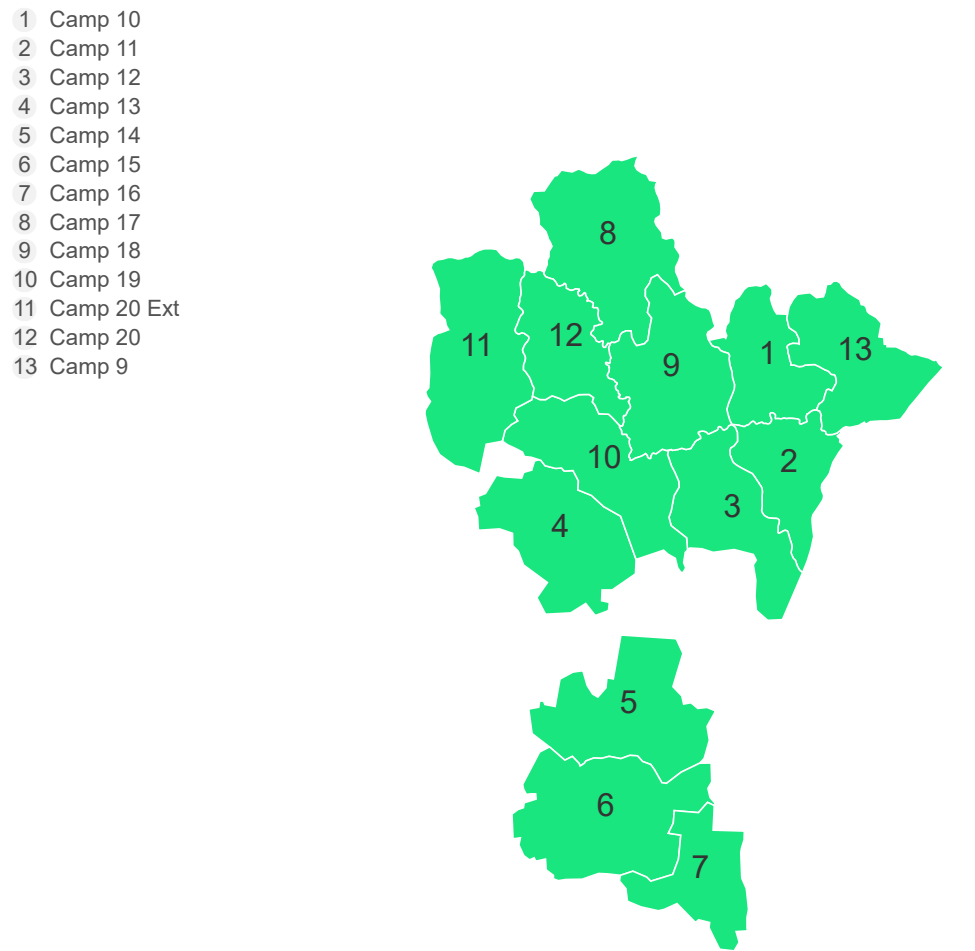


Table 5 | Performance by camp (W9 2023)

Southern group	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
Ukhia Southern Group				
Camp 10	4	4	100%	0%
Camp 11	6	4	83%	0%
Camp 12	6	4	100%	0%
Camp 13	8	7	100%	0%
Camp 14	6	5	100%	0%
Camp 15	8	7	88%	0%
Camp 16	7	6	86%	0%
Camp 17	5	4	60%	0%
Camp 18	4	4	100%	0%
Camp 19	4	4	100%	0%
Camp 20	4	4	100%	0%
Camp 20 Ext	3	3	100%	0%
Camp 9	6	3	83%	0%

Map 3 | Completeness by camp



Completeness

0

25%

50%

75%

100%

Table 6 | Performance by camp (W9 2023)

Teknaf	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
Ukhia Teknaf				
Camp 21 Chakmarkul	3	3	100%	0%
Camp 22 Unchiprang	5	3	75%	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	4	75%	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

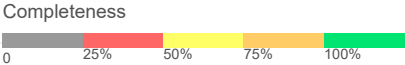
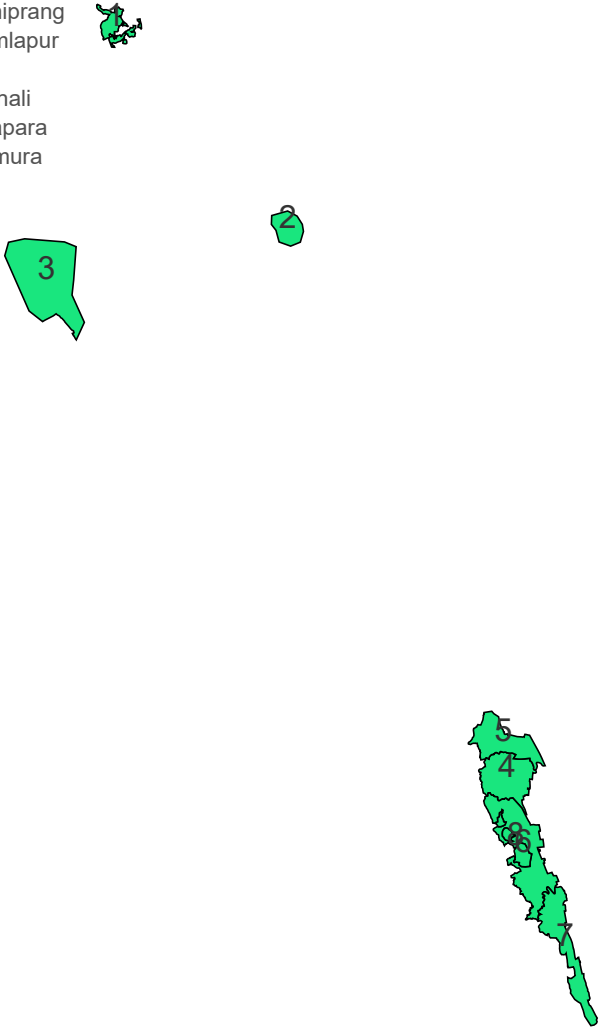


Table 7 | Performance by partner (W9 2023)

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	7	78%	78%
BASHMAH	1	0	0%	0%	MoH	12	10	83%	83%
BDRCS	10	9	90%	90%	MHI	1	2	200%	200%
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	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	100%	100%
FRNDS	5	4	80%	80%	RPN	2	2	100%	100%
GK	10	7	80%	80%	RHU	3	3	100%	100%
Global One	1	0	0%	0%	RI	3	1	33%	33%
GUSS	1	1	100%	100%	RTMI	9	8	89%	89%
HAEFA	2	2	100%	100%	SALT	1	1	100%	100%
HAIB	0	0			SCI	6	6	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	0	0%	0%	TdH	2	2	100%	100%
IOM	23	23	96%	96%					

Table 8 | Performance by camp

Northern group	W9		Cumulative (2023)	
	# alerts	% verif.	# alerts	% verif.
Alerts Northern group				
Camp 1E	1	100%	28	100%
Camp 1W	4	100%	42	100%
Camp 2E	4	100%	58	100%
Camp 2W	1	100%	35	100%
Camp 3	8	100%	58	100%
Camp 4	2	100%	50	100%
Camp 4 Ext	1	100%	6	100%
Camp 5	4	100%	22	100%
Camp 6	1	100%	18	100%
Camp 7	3	100%	23	100%
Camp 8E	2	100%	39	100%
Camp 8W	3	100%	52	100%
Kutupalong RC	3	100%	13	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

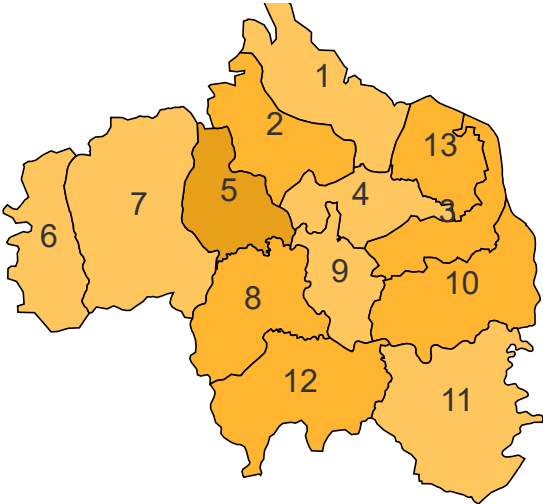


Table 9 | Performance by camp

Southern group	W9		Cumulative (2023)	
	# alerts	% verif.	# alerts	% verif.
Alerts Northern group				
Camp 10	2	100%	13	100%
Camp 11	2	100%	11	100%
Camp 12	0	0%	28	100%
Camp 13	1	100%	37	100%
Camp 14	2	100%	34	100%
Camp 15	1	100%	28	100%
Camp 16	1	100%	32	100%
Camp 17	2	100%	15	100%
Camp 18	2	100%	32	100%
Camp 19	0	0%	4	100%
Camp 20	2	100%	16	100%
Camp 20 Ext	0	0%	8	100%
Camp 9	0	0%	40	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

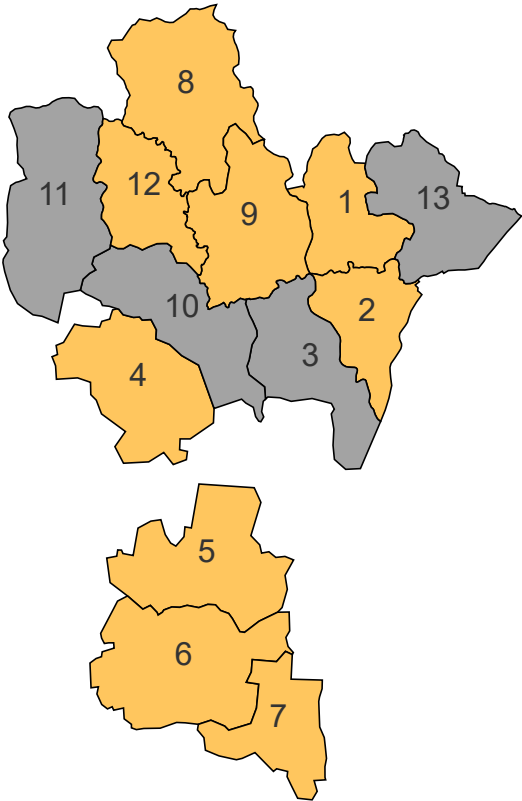


Table 10 | Performance by camp

Teknaf	W9		Cumulative (2023)	
	# alerts	% verif.	# alerts	% verif.
Alerts Northern group				
Camp 21 Chakmarkul	0	0%	11	100%
Camp 22 Unchiprang	2	100%	20	100%
Camp 23 Shamlapur	0	0%	3	100%
Camp 24 Leda	5	100%	49	100%
Camp 25 Ali Khali	0	0%	9	100%
Camp 26 Nayapara	0	0%	15	100%
Camp 27 Jadimura	0	0%	4	100%
Nayapara RC	3	100%	15	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

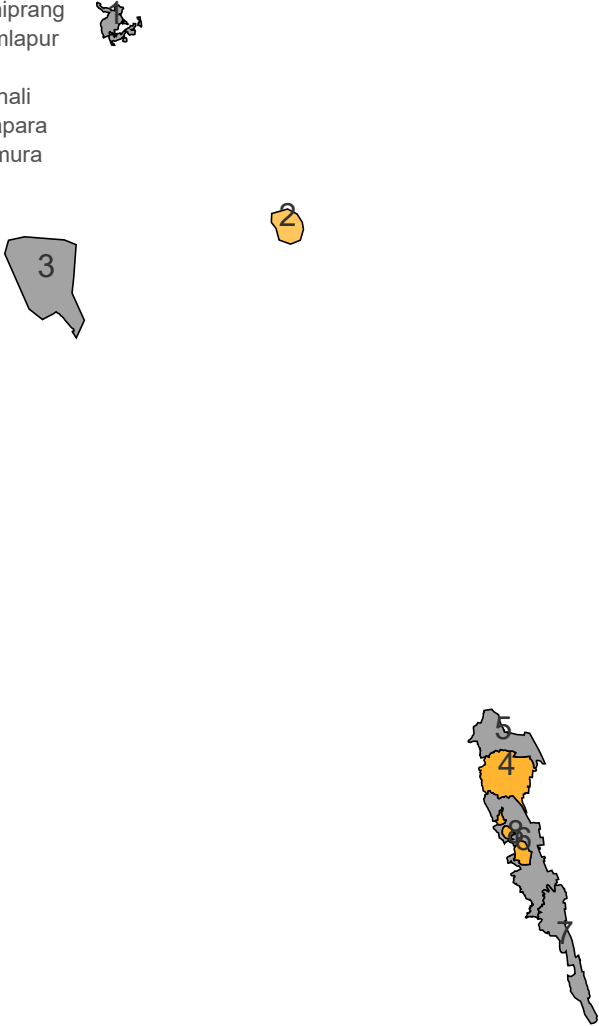


Table 11 | Performance by type of alert

Event	W9		Cumulative (2023)	
	# alerts	% verif.	# alerts	% verif.
Indicator-based surveillance				
Malaria	0	0%	0	0%
Measles	0	0%	47	100%
Bloody Diarr.	0	0%	0	0%
AFP	0	0%	8	100%
Meningitis	0	0%	5	100%
Haem. fever (susp.)	0	0%	5	100%
NNT	0	0%	0	0%
Unexp. fever	0	0%	21	100%
AWD	0	0%	14	100%
ARI	0	0%	13	100%
AJS	0	0%	12	100%
Varicella (Susp.)	1	100%	85	100%
Suspected COVID-19	0	0%	0	0%
Event-based surveillance				
EBS total	3	100%	56	100%

Table 12 | Risk assessment

W9	Cumulative (2023)	
0	0	Low risk
0	0	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 W9 2023



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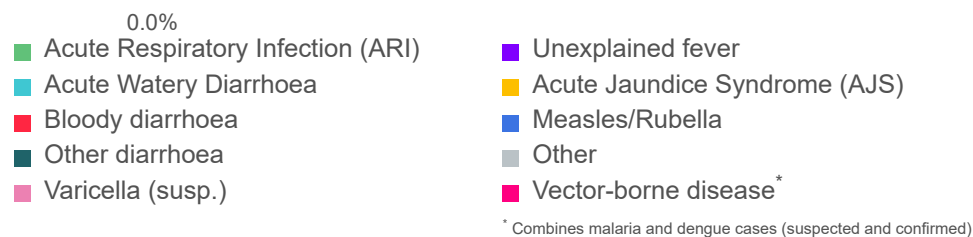
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Proportional morbidity

Figure 1 | Proportional morbidity (W9 2023)



Disease	W9		2023	
	# cases	% morbidity	# cases	% morbidity
AWD	2,309	2.2%	22,971	2.3%
Bloody diarr.	252	0.2%	2,562	0.3%
Other diarr.	1,013	1.0%	11,138	1.1%
Susp. Varicella	2,863	2.7%	10,246	1.0%
ARI	22,347	21.1%	193,362	19.4%
Measles/Rub.	28	0.0%	141	0.0%
AFP	0	0.0%	12	0.0%
Susp. mening.	4	0.0%	34	0.0%
AJS	24	0.0%	184	0.0%
Susp. HF	1	0.0%	48	0.0%
Neo. tetanus	0	0.0%	0	0.0%
Adult tetanus	0	0.0%	2	0.0%
Malaria (conf.)	0	0.0%	14	0.0%
Malaria (susp.)	5	0.0%	379	0.0%
Dengue (conf.)	142	0.1%	738	0.1%
Dengue (susp.)	29	0.0%	233	0.0%
Unexpl. fever	683	0.6%	6,701	0.7%
Sev. Malnut.	34	0.0%	365	0.0%
Inj./Wounds	2,273	2.1%	21,768	2.2%
Other	74,019	69.7%	726,153	72.8%
Total	105,466	100%	997,989	100%

Trend in consultations and key diseases

Figure 2 | Trend in proportional morbidity for key diseases (W9)

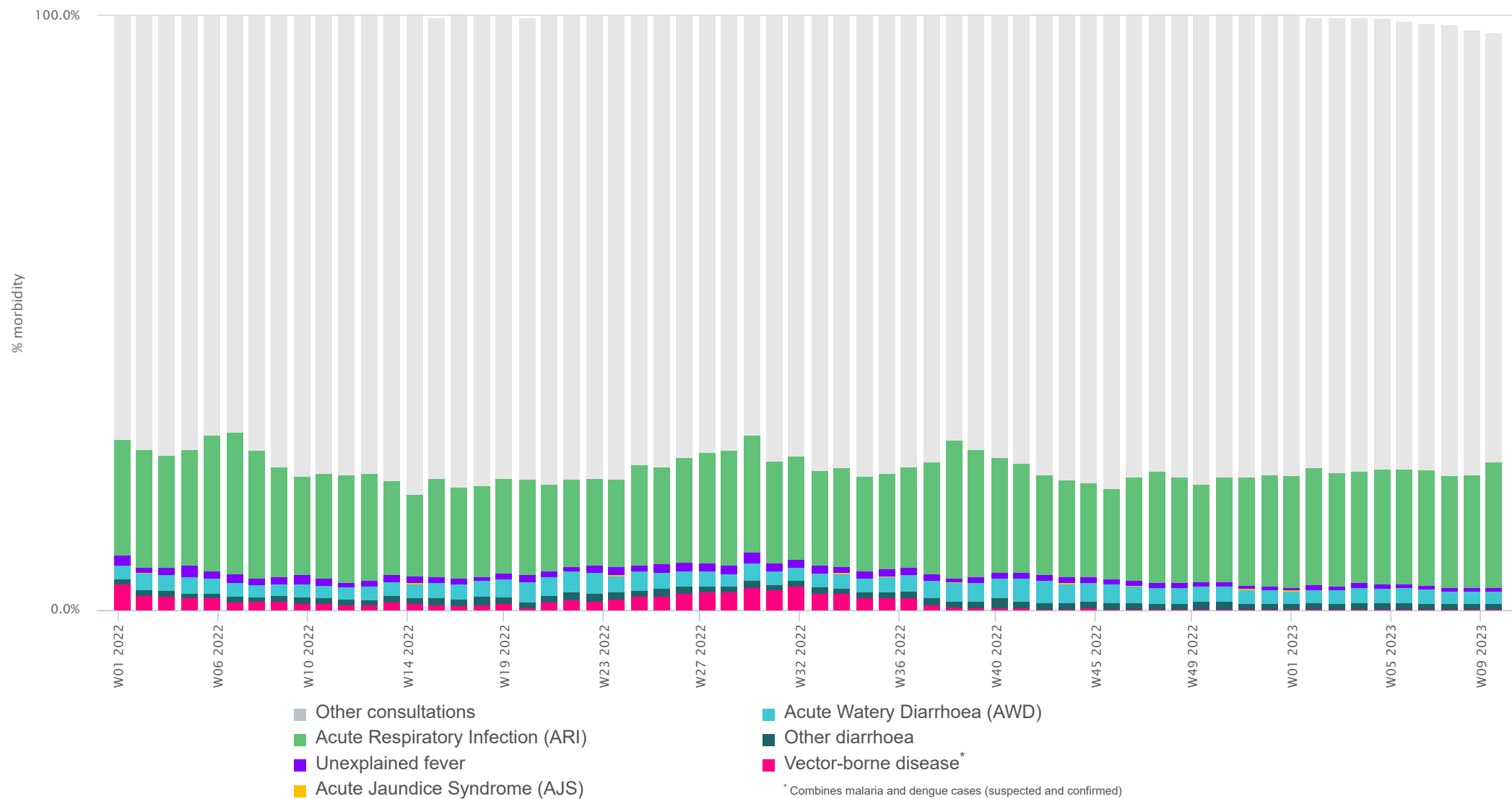
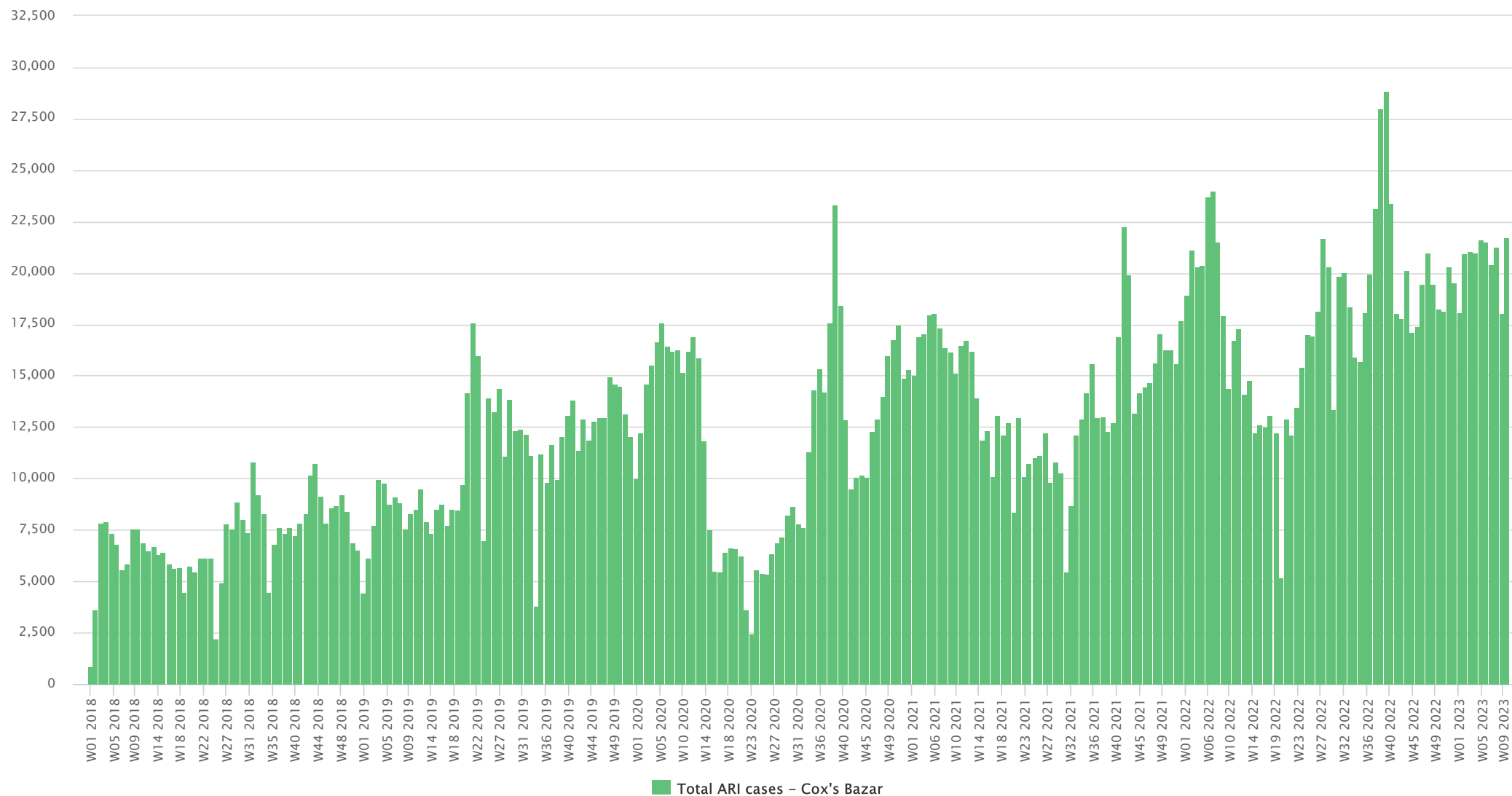
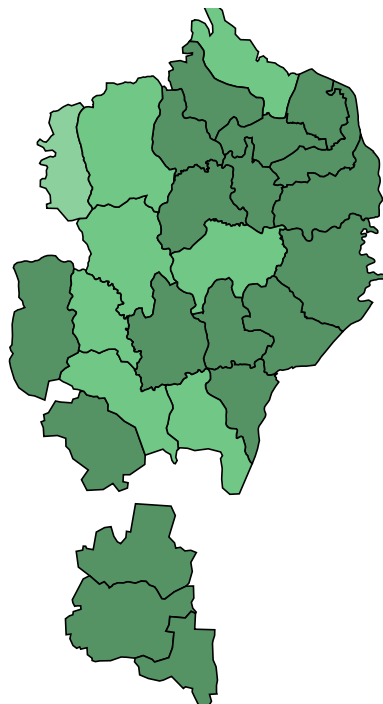


Figure 3 | Trend in number of cases over time (W38 2017 - W9 2023)

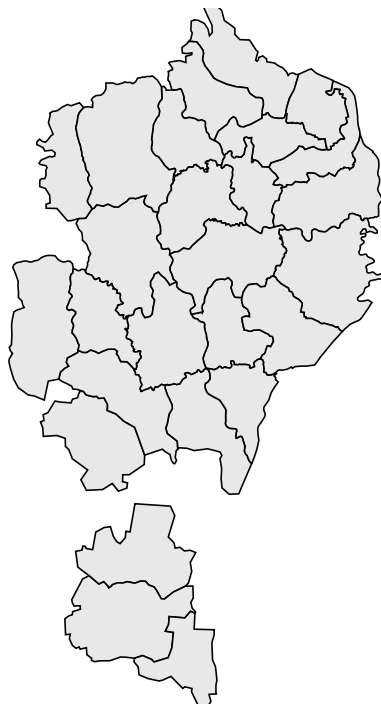


Map 1 | Map of cases by camp (W9 2023)

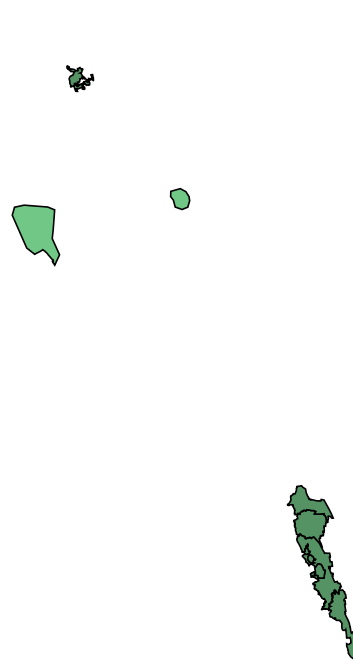
a. Ukhia | Number of cases



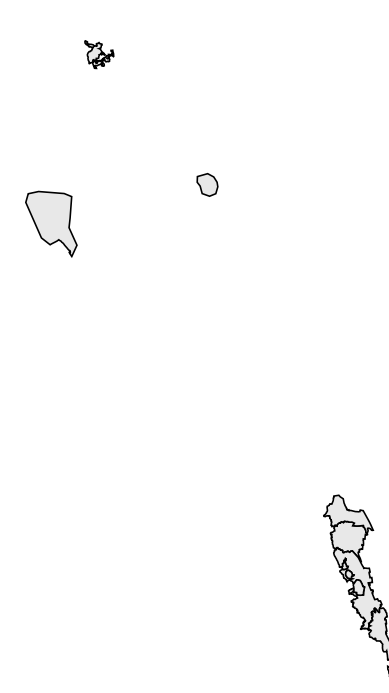
b. Ukhia | Number of alerts



c. Teknaf | Number of cases



d. Teknaf | Number of alerts



Map legend

Number of cases



Number of alerts



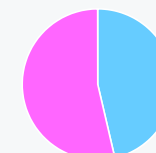
Alert threshold

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

Alert management (W9 2023)

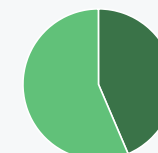


Figure | % sex



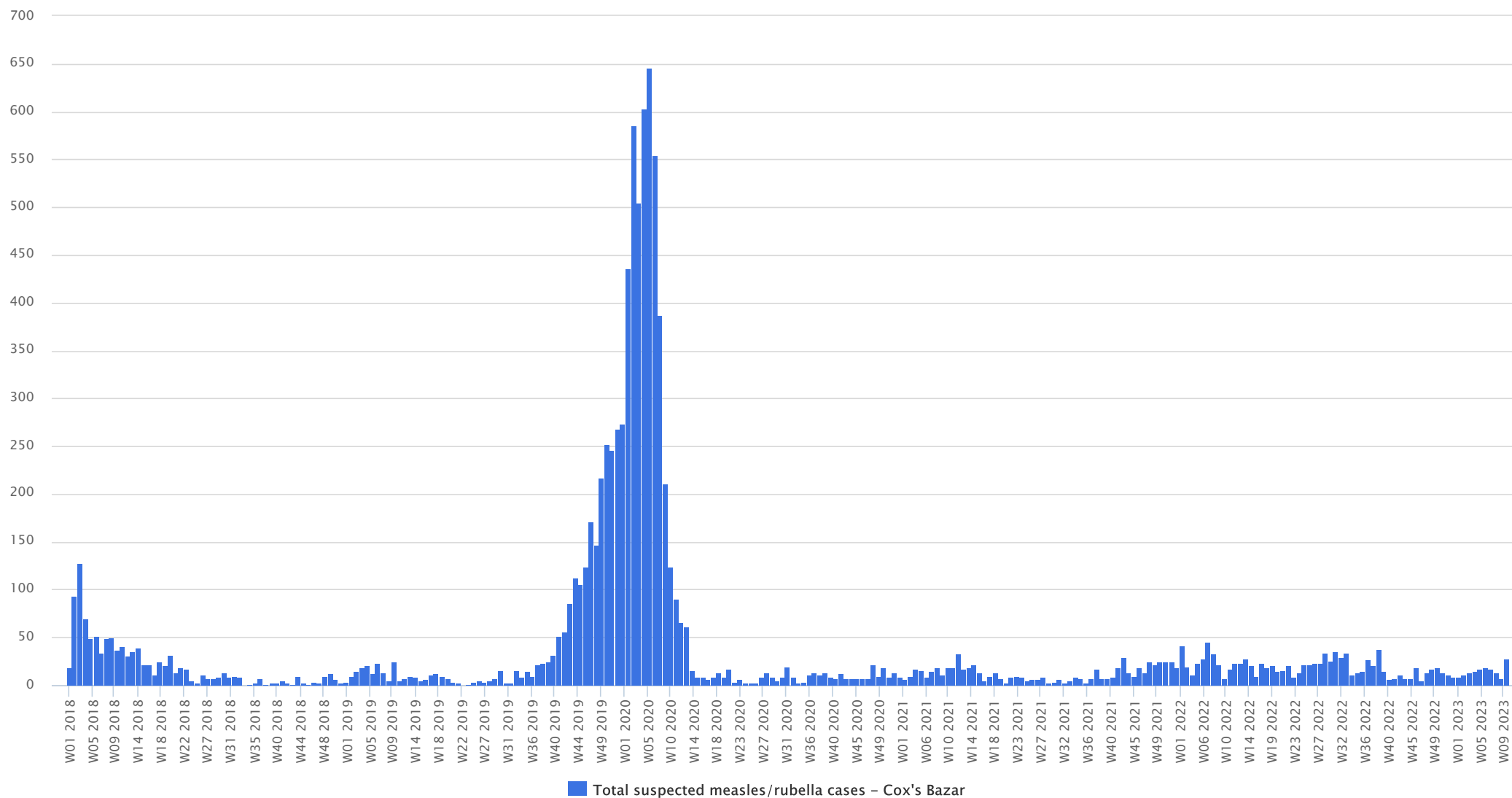
Male Female

Figure | % age



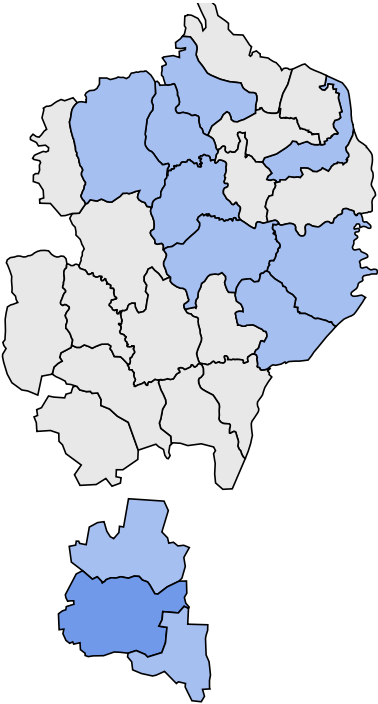
≥ 5 < 5

Figure 4 | Trend in number of suspected cases over time (W38 2017 - W9 2023)



Map 2 | Map of cases by camp (W9 2023)

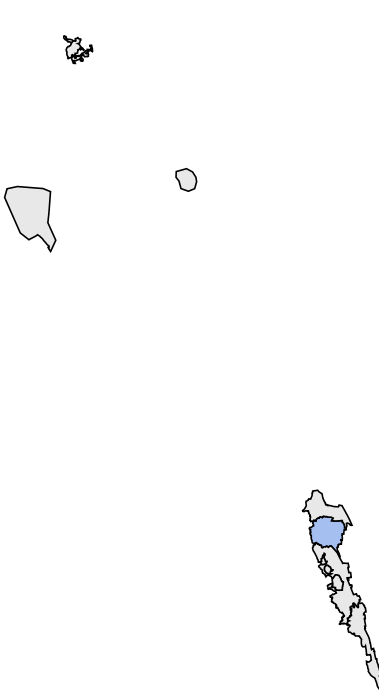
a. Ukhia | Number of cases



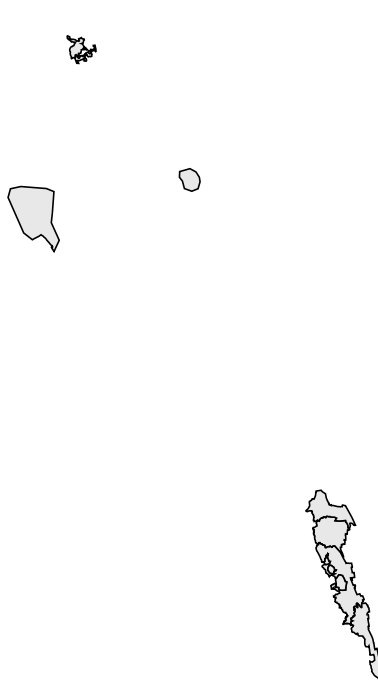
b. Ukhia | Number of alerts



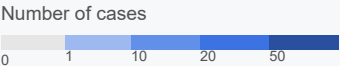
c. Teknaf | Number of cases



d. Teknaf | Number of alerts



Map legend



Alert threshold
1 case. Source: IEDCR

Alert management (W9 2023)

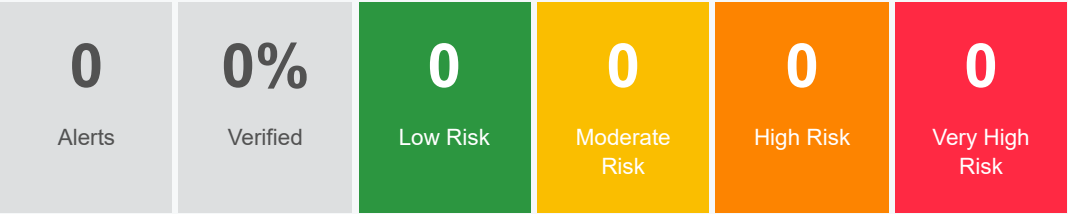


Figure | % sex

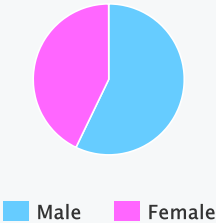


Figure | % age

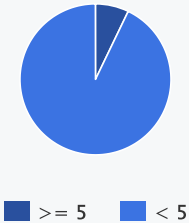
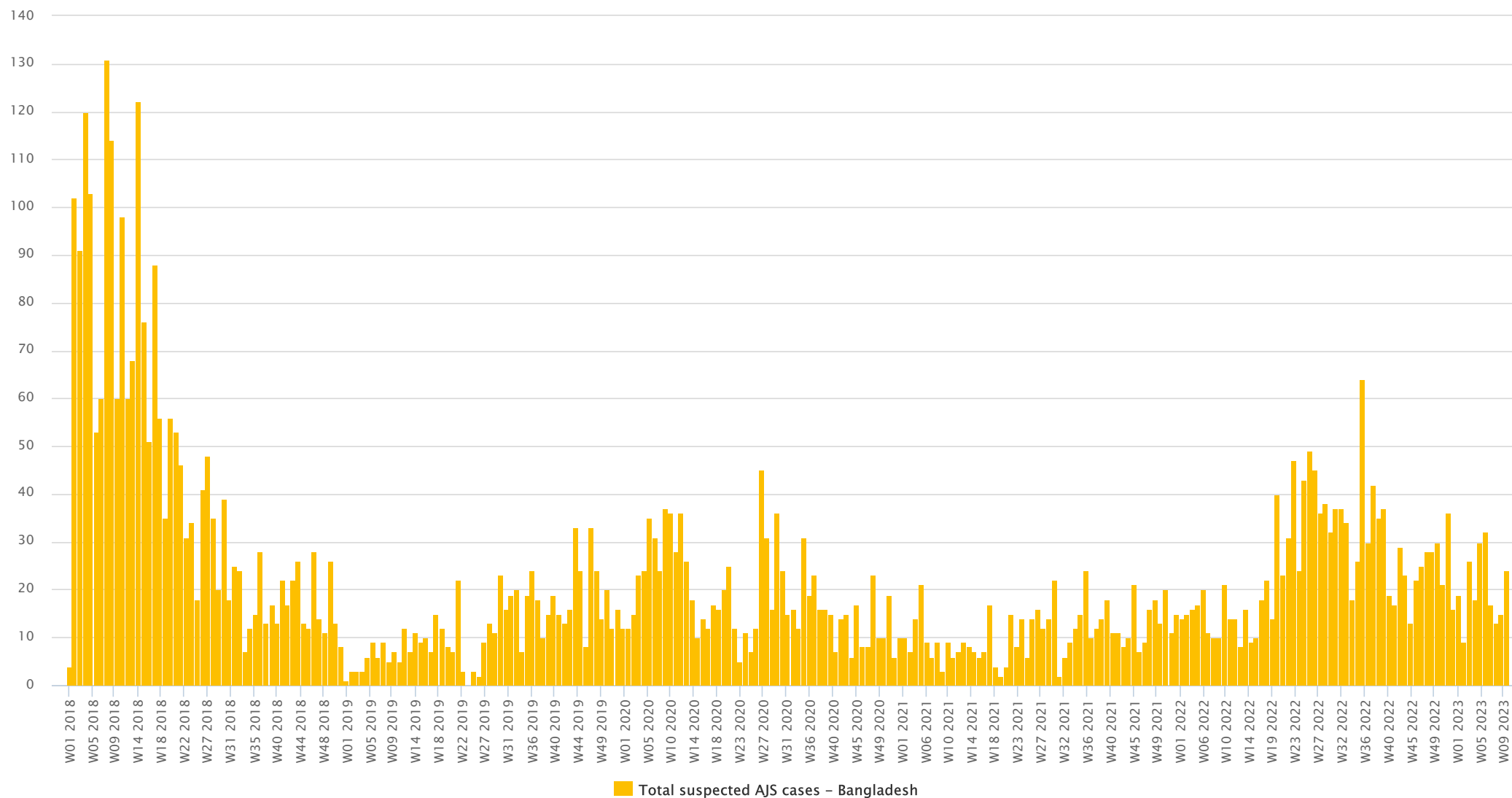
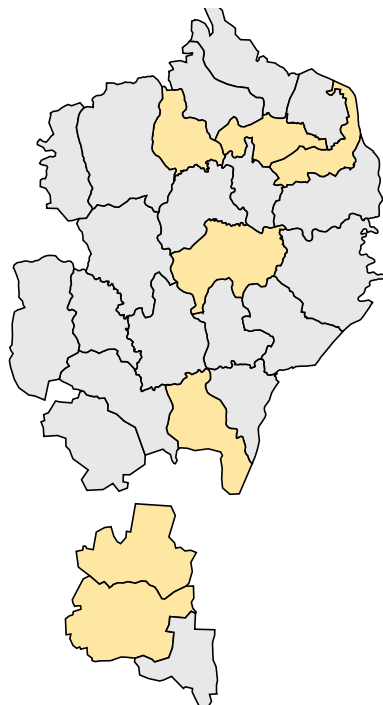


Figure 5 | Trend in number of cases over time (W38 2017 - W9 2023)

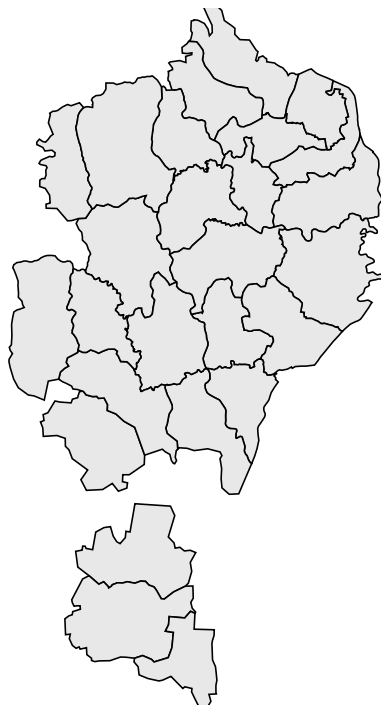


Map 3 | Map of cases by camp (W37 2017 - W9 2023)

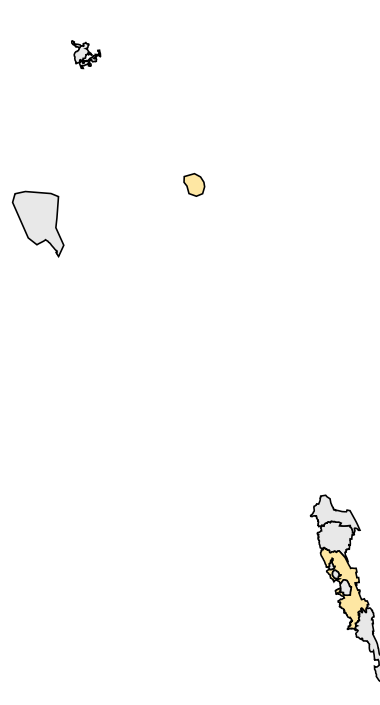
a. Ukhia | Number of cases



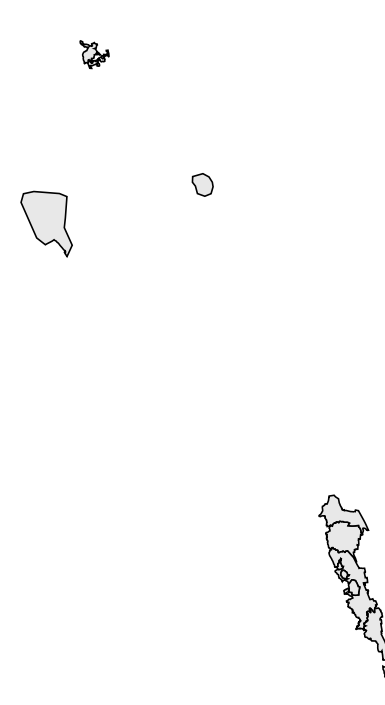
b. Ukhia | Number of alerts



c. Teknaf | Number of cases

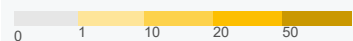


d. Teknaf | Number of alerts



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 (W9 2023)

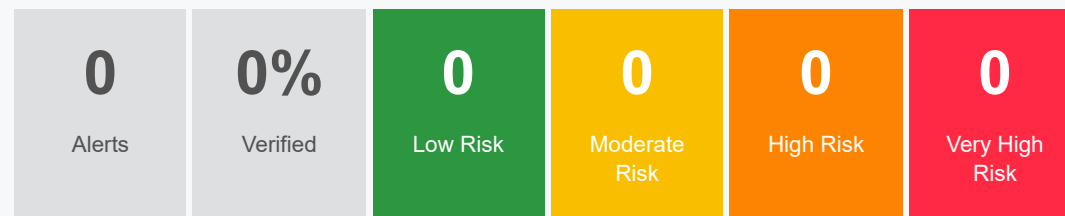
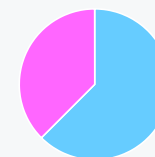
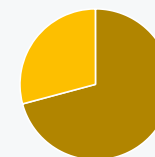


Figure | % sex



Male Female

Figure | % age



>= 5 < 5

Figure 6 | Trend in number of cases over time (W38 2017 - W9 2023)

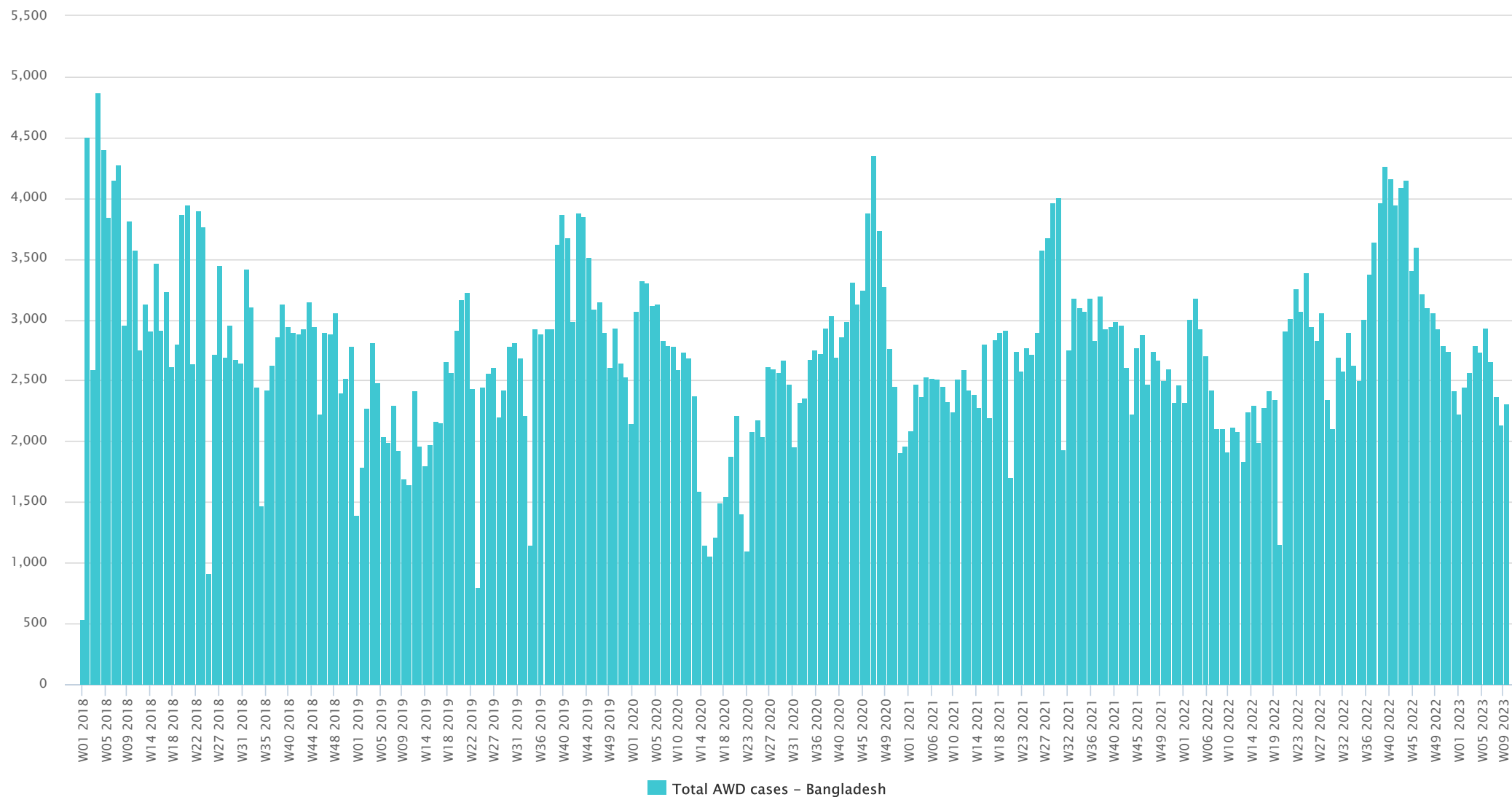
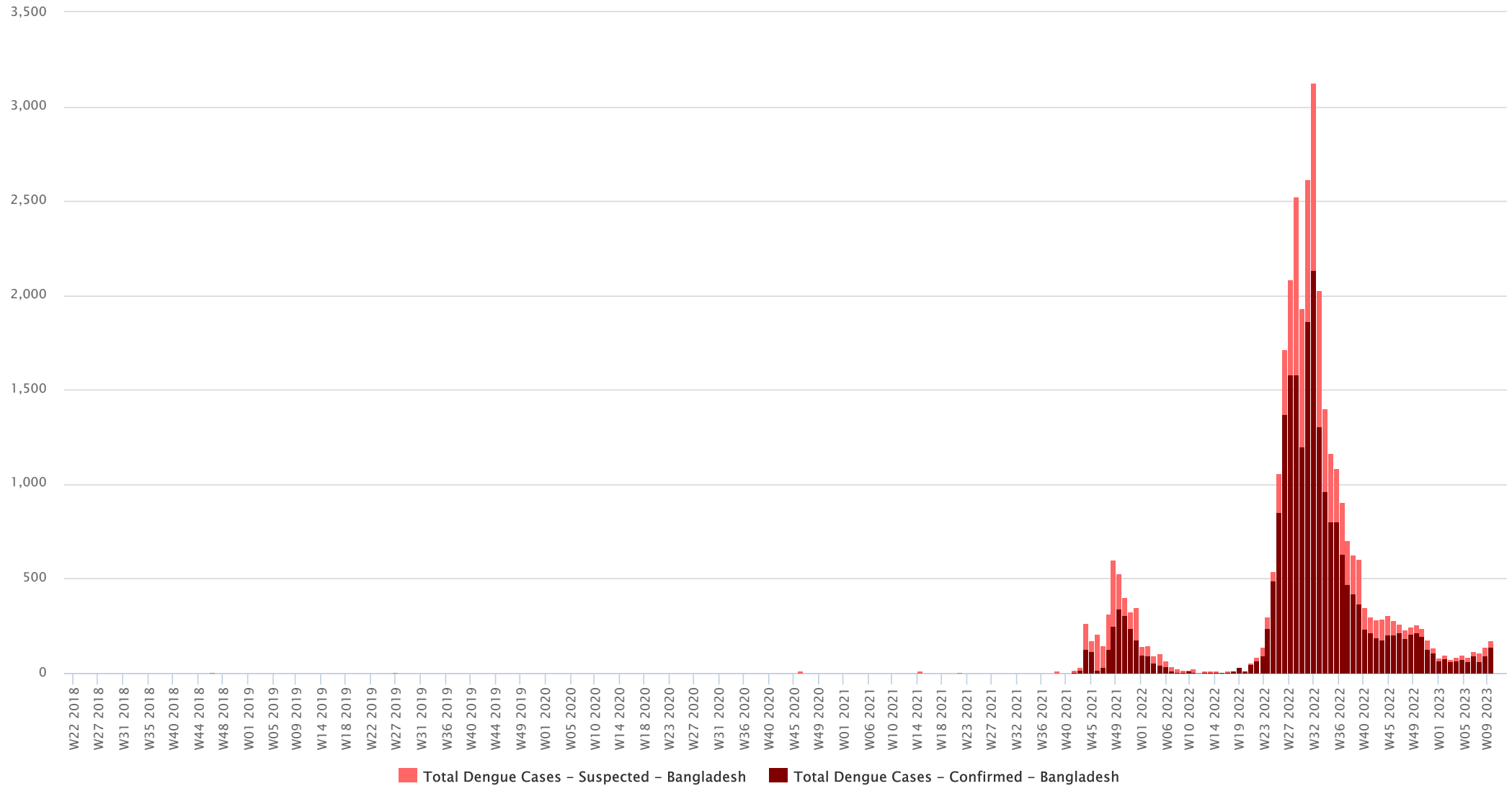
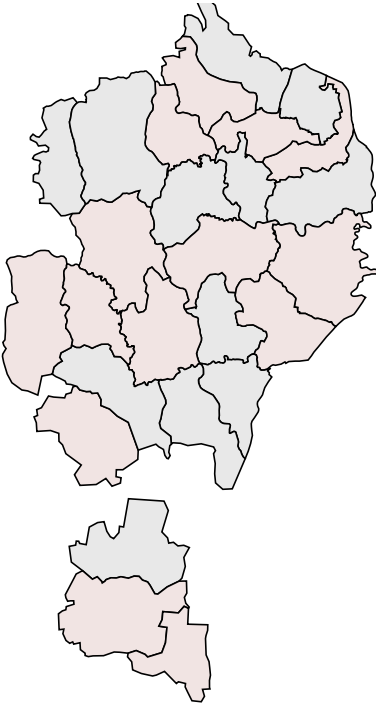


Figure 7 | Trend in number of cases over time (W38 2017 - W9 2023)

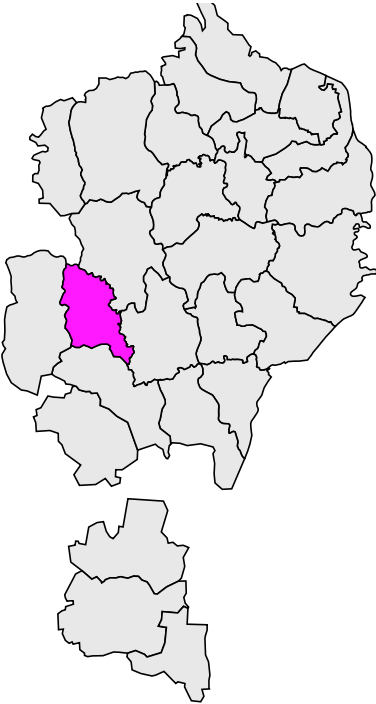


Map 4 | Map of cases by camp (W37 2017 - W9 2023)

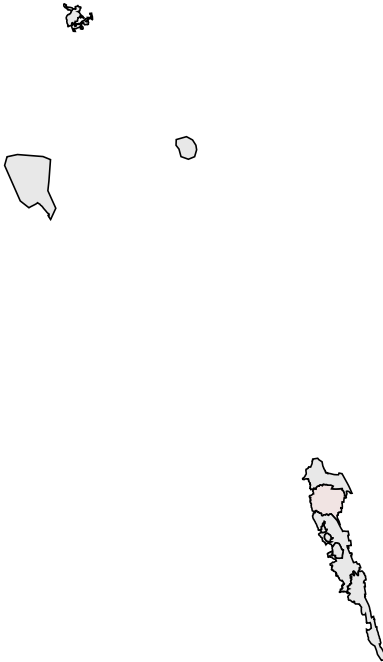
a. Ukhia | Number of cases



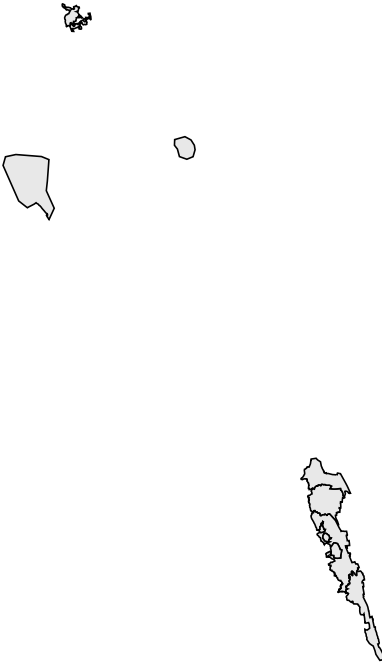
b. Ukhia | Number of alerts



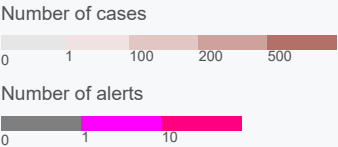
c. Teknaf | Number of cases



d. Teknaf | Number of alerts



Map legend



Alert threshold

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

Alert management (W9 2023)

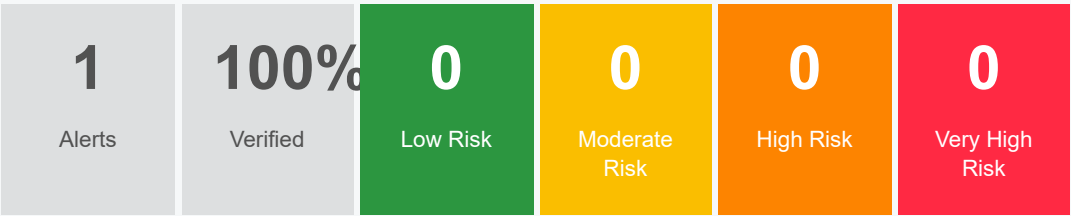


Figure | % sex

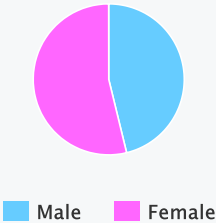


Figure | % age

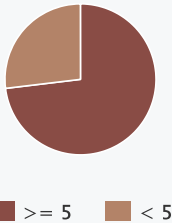
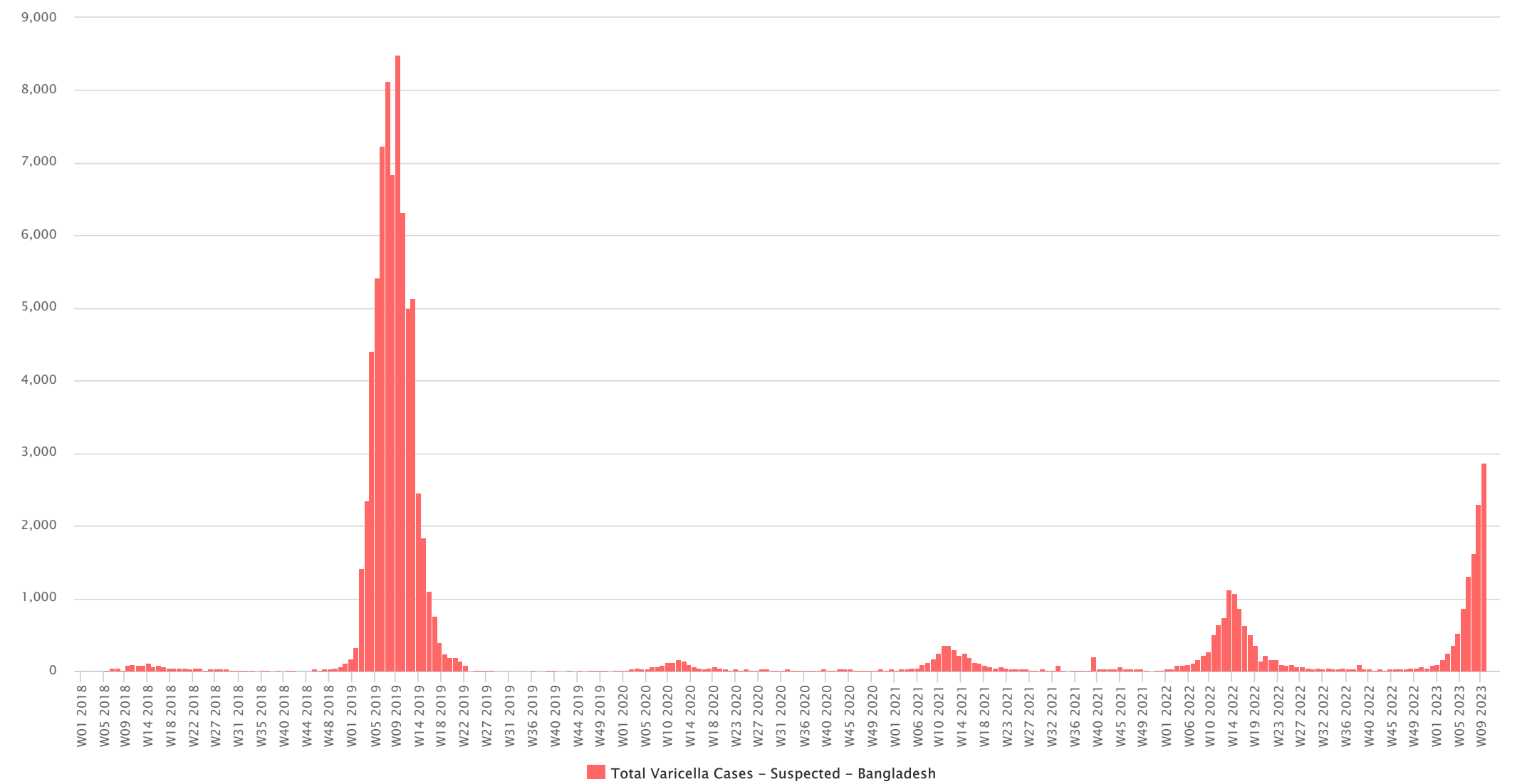
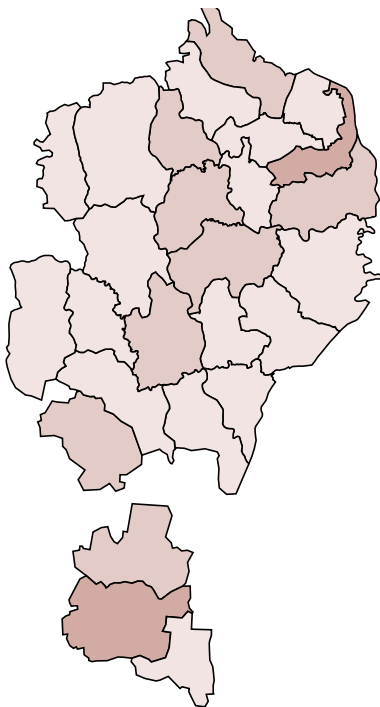


Figure 7 | Trend in number of cases over time (W38 2017 - W9 2023)

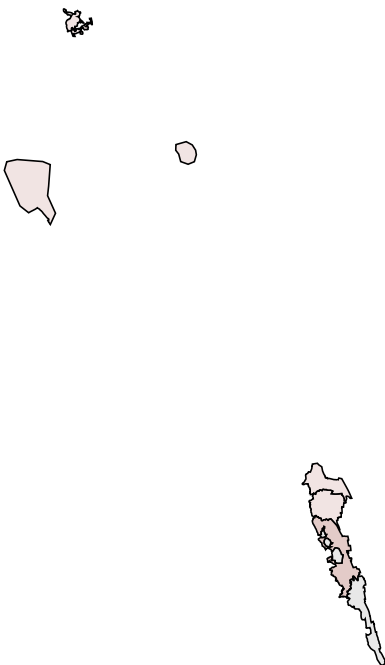


Map 4 | Map of cases by camp (W37 2017 - W9 2023)

a. Ukhia | Number of cases



c. Teknaf | Number of cases



Map legend

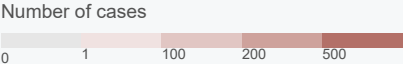


Figure | % sex

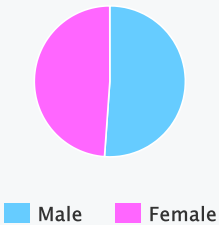
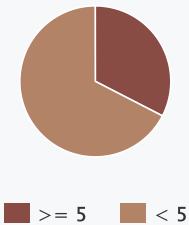


Figure | % age



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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