Global EWARS

Epidemiological Highlights

Week 53 (28 Dec 2020- 3 Jan 2021)

World Health Organization

Highlights: COVID-19

As of week 53 (28 Dec 2020 – 03 Jan 2021) there are 367 confirmed cases of COVID-19 (SARS-CoV-2), 23 398 samples were tested.
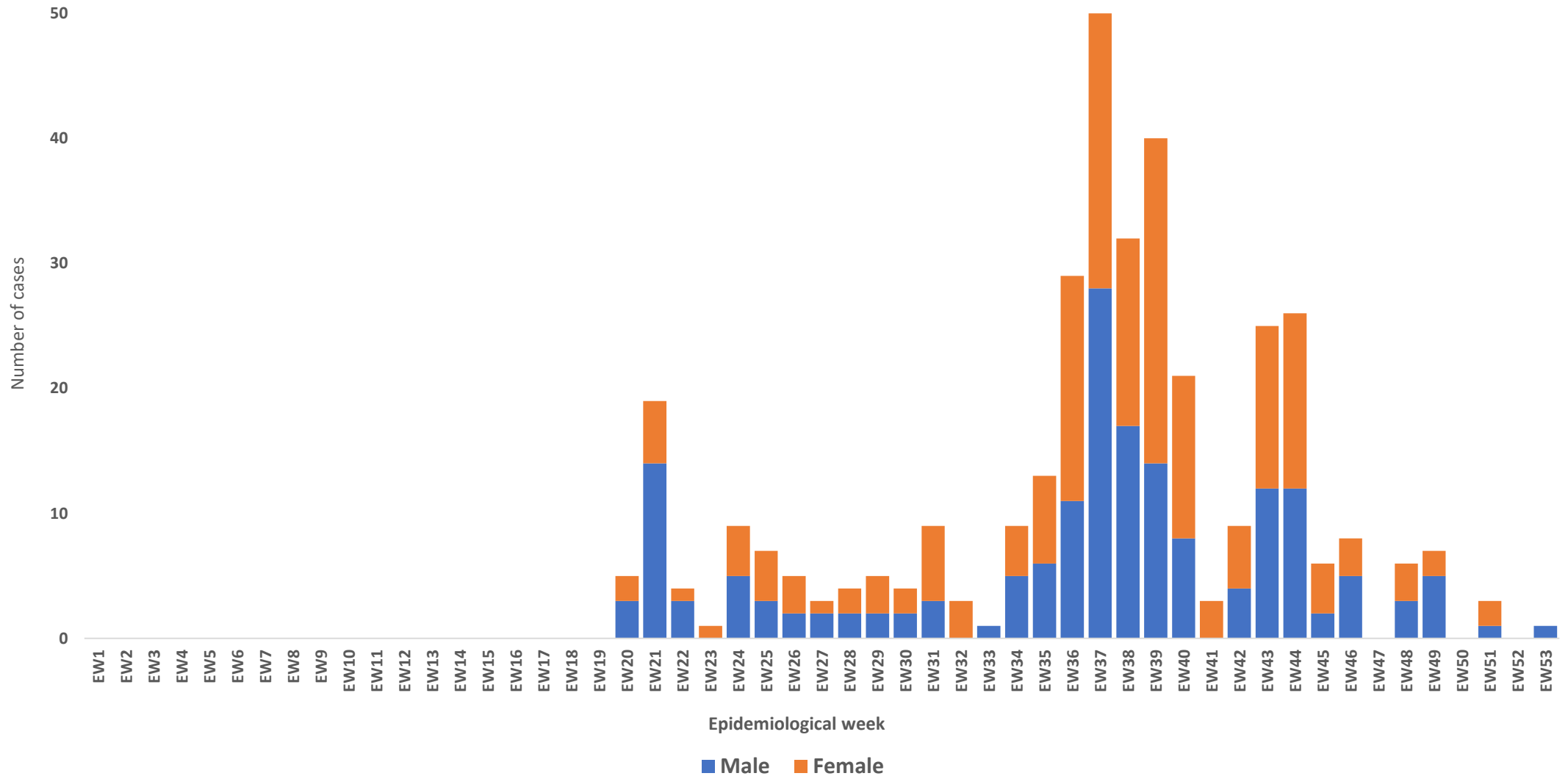
This week (week 53), 1 new confirmed case detected, 706 samples were tested, test positivity was 0.1%.

As of this week (week 53)
- median age of tested and confirmed cases is 10 (0-120) & 18.5 (0-90) years
- female among tested and confirmed cases is 54% and 53%
- all 34/34 camps have confirmed cases (C24-54, C2W-37, C3-27, C15-25, C6-22)
- a total of 10 deaths from COVID-19 with the case fatality rate 2.7%
- the incidence is 42.7 per 100,000 people with the growth rate 0.0%
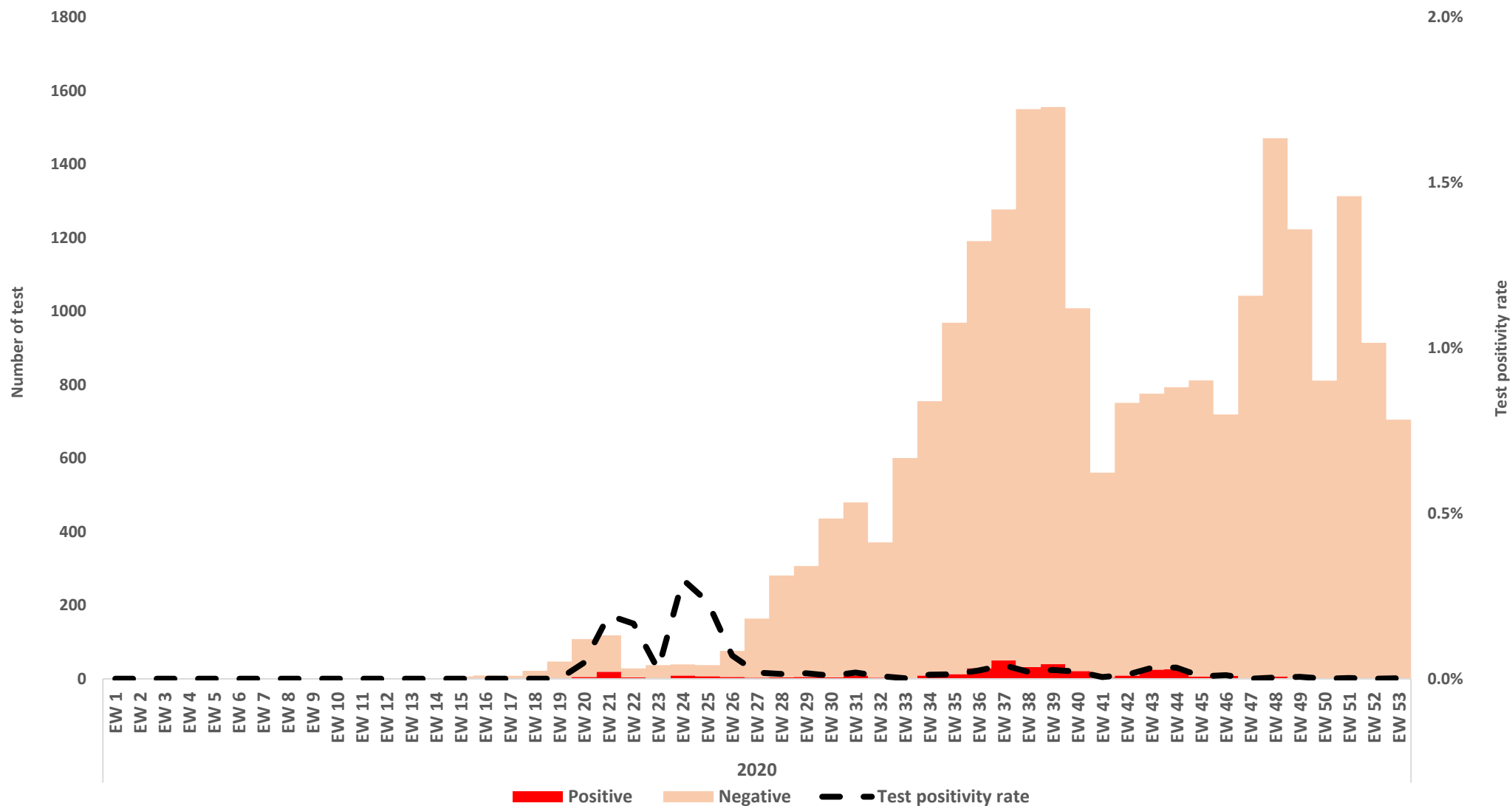- the overall positivity of all samples tested was 1.6%

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Highlights: COVID-19

COVID-19 positive cases (n=367) by week of test

Epidemiological Highlights
Week 53, **2020**

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Highlights: COVID-19

Number of positive case (n=367)

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Organization

Highlights: COVID-19

COVID-19 Cases in Rohingya Camps (As of 03 January 2021)

Number of Cases
- 0 - 5
- 6 - 10
- 11 - 20
- 21 - 30
- 31 - 40
- 41 - 60

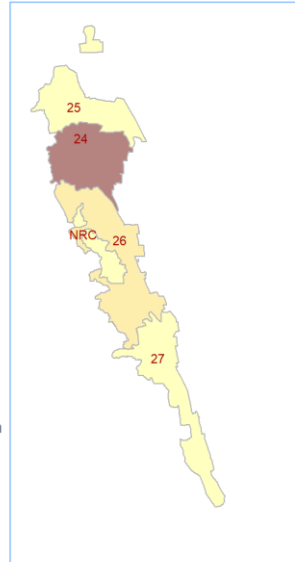**Number of deaths**
- 1
- 2 - 3
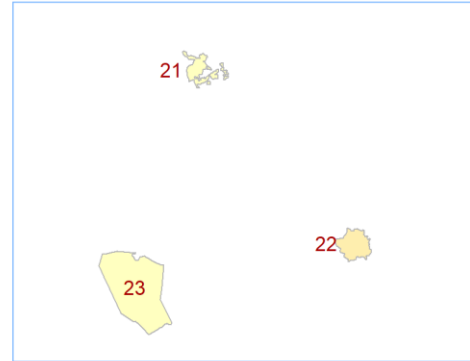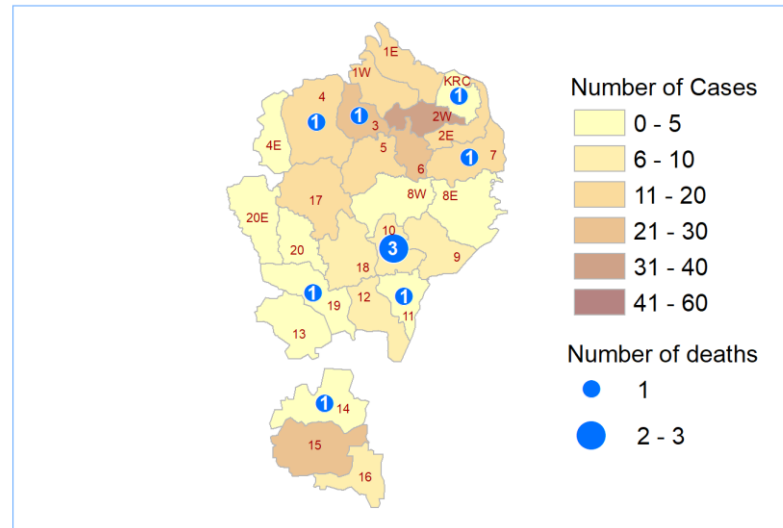
367 Confirmed cases in FDMN/Rohingya Refugee Camps

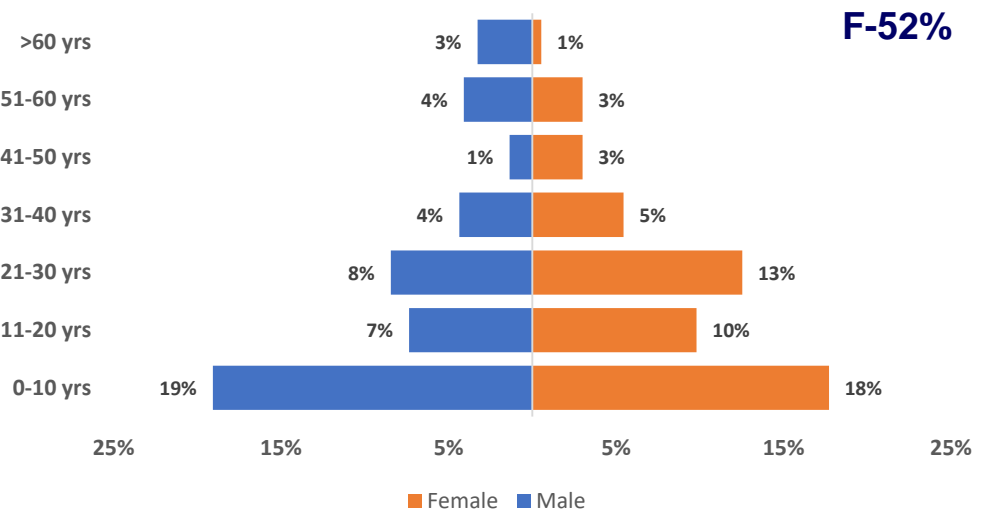**427** Confirmed cases/1 MIllion

10 Deaths in FDMN/Rohingya Refugee Camps

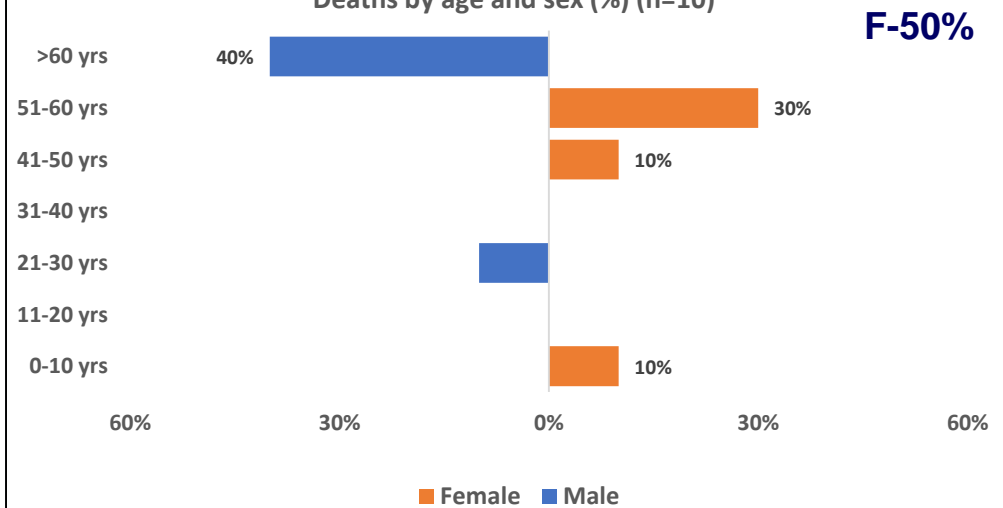**12** Deaths/1 Million
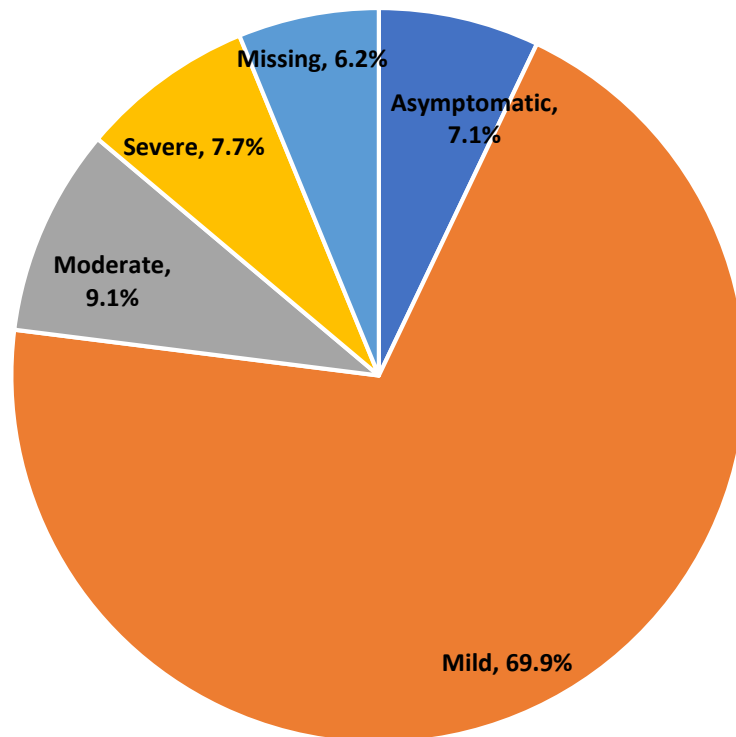
Age and sex distribution (%) (n=367)

F-52%

Age	Male	Female
>60 yrs	3%	1%
51-60 yrs	4%	3%
41-50 yrs	1%	3%
31-40 yrs	4%	5%
21-30 yrs	8%	13%
11-20 yrs	7%	10%
0-10 yrs	19%	18%

Female ■ Male ■

Deaths by age and sex (%) (n=10)

F-50%

Age	Male	Female
>60 yrs	40%	
51-60 yrs		30%
41-50 yrs		10%
31-40 yrs		
21-30 yrs	(male)	
11-20 yrs		
0-10 yrs		10%

Female ■ Male ■

Epidemiological Highlights
Week 53, **2020**

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Highlights: COVID-19

Severity of reported cases at presentation (n=339)

- Asymptomatic, 7.1%
- Missing, 6.2%
- Severe, 7.7%
- Moderate, 9.1%
- Mild, 69.9%

Did the case report at least 1 co-morbidity (n=339)

- Yes 7.7%
- No 92.3%

Source: Go.Data

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World Health Organization
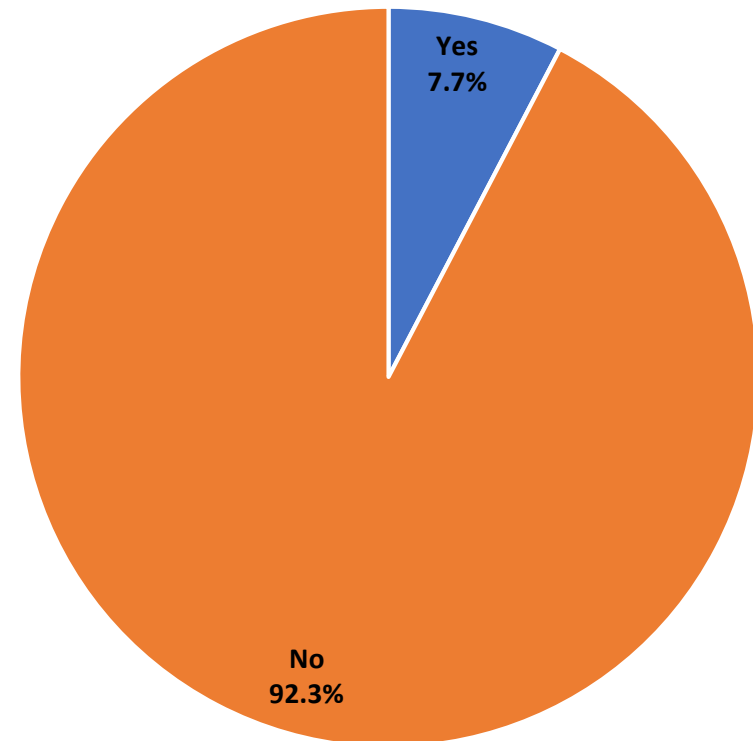
EWARS Reporting Updates

- Total 146/166 (88%) health facilities registered in EWARS

- Only 111/146 weekly reports received in week 53.

- Completeness and Timeliness for this week is 72%

- Total 37 alerts were triggered in week 53.

- All alerts were reviewed and verified by WHO EWARS team which is less than as of previous week (57 in week 52).

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Highlights:

- Acute Respiratory Infection (20.2%), Diarrheal Diseases (4.6%) & Unexplained Fever (1.2%) are the diseases with highest proportional morbidity in week 53.

- Community-based mortality surveillance included SARI death in weekly reporting since week 28 and the reporting frequency changed since then from bi-weekly. Nineteen (19) SARI death has been reported so far.

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Diphtheria

One probable diphtheria case reported in go.data in week 53

A total of 9 186 case-patients were reported since 2017 to till date
- Confirmed = 339
- Probable = 2777
- Suspected = 6070

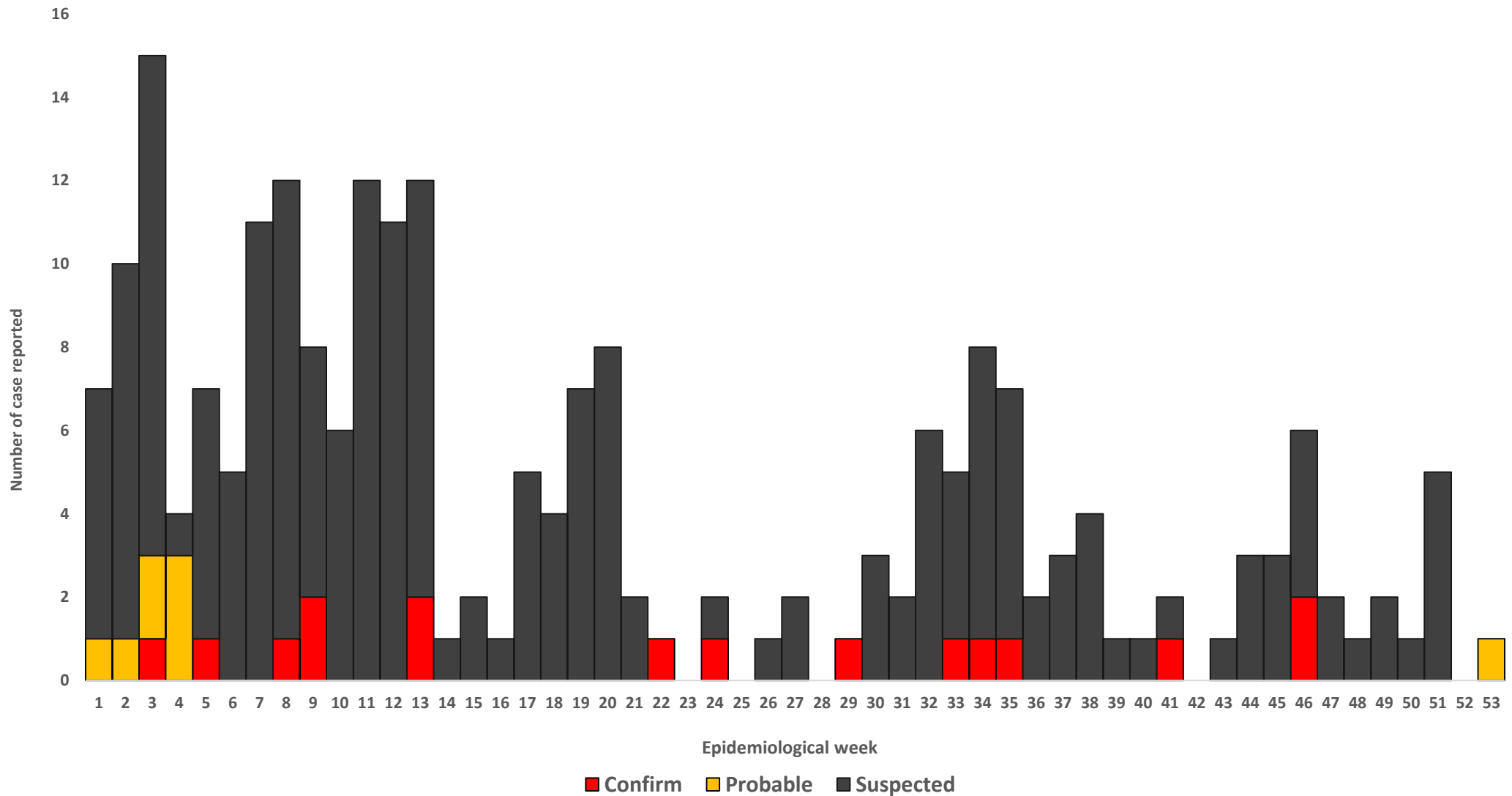Total Case reported in 2020 = 226
- Confirmed = 16
- Probable = 8
- Suspected = 202

Last confirmed case was reported in Week 46 (9 November 2020)

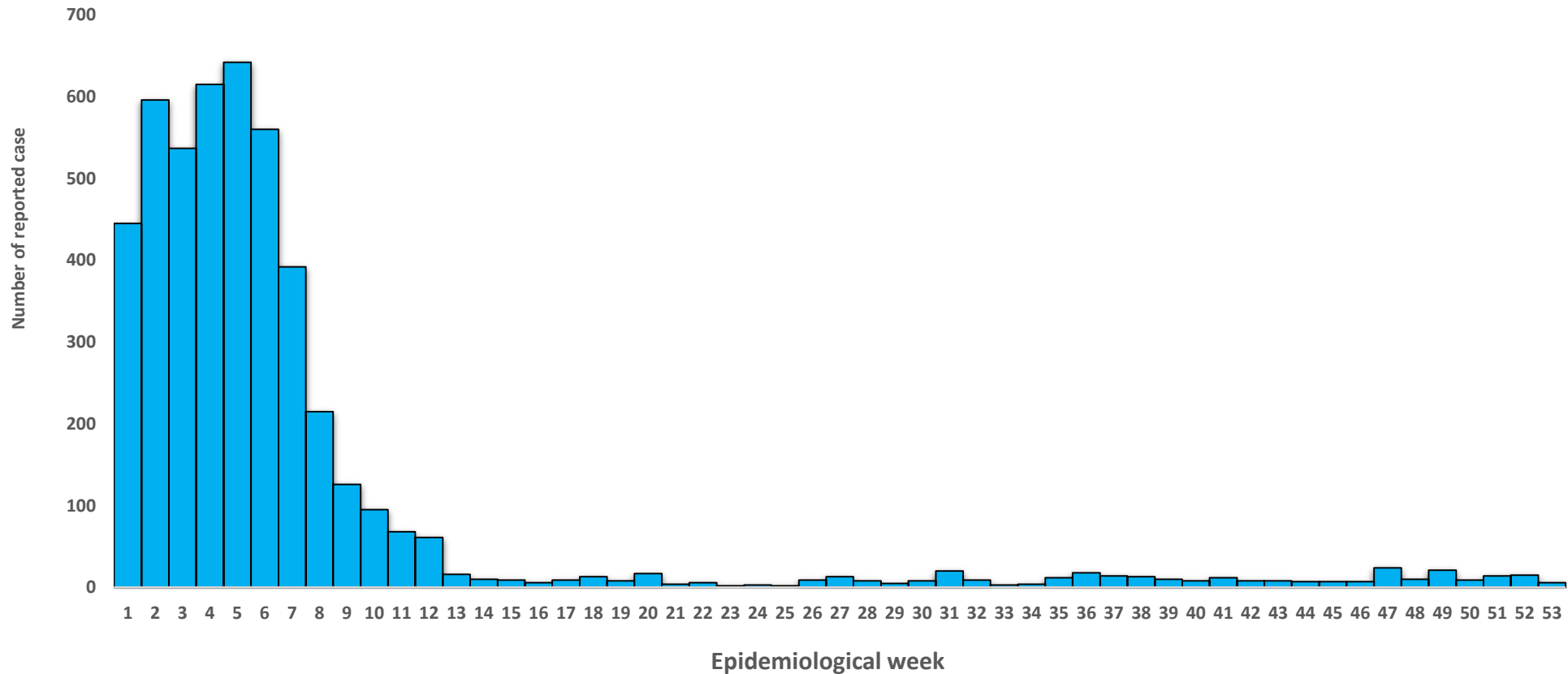Total deaths reported is 47. Last death was reported on 25 October 2019

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Diphtheria

Total number of diphtheria case reported in EWARS from week 1-53, 2020

EWARS
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Measles

Total number of Measles case reported in EWARS from week 1-53, 2020

Total 6 suspected measles cases were reported through aggregated weekly reporting in EWARS in week 53. Aggregated weekly report showed 4,759 and individual case report (CRF) found 2,641(56%) in 2020.

Epidemiological Highlights
Week 53, **2020**

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Diarrhoeal Disease

- A total of 2,700 cases of diarrhoeal diseases reported in EWARS in week 53.

- Among which 1,783 cases (3.0%) reported as acute watery diarrhoea (AWD), 641 (1.1%) and 276 (0.5%) cases as other diarrhea and bloody diarrhea respectively.

- Diarrhoeal diseases are the second highest contributor of proportional morbidity after acute respiratory infection (ARI).

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Cholera Surveillance

Distribution of RDT positive and culture confirmed for Cholera cases in 2020

As of 27-Dec-2020

| Nationality	RDT (+ve)	C/s(+)ve	C/s(+)ve & RDT (+ve)
FDMN	8	0	1
Host	15	1	1
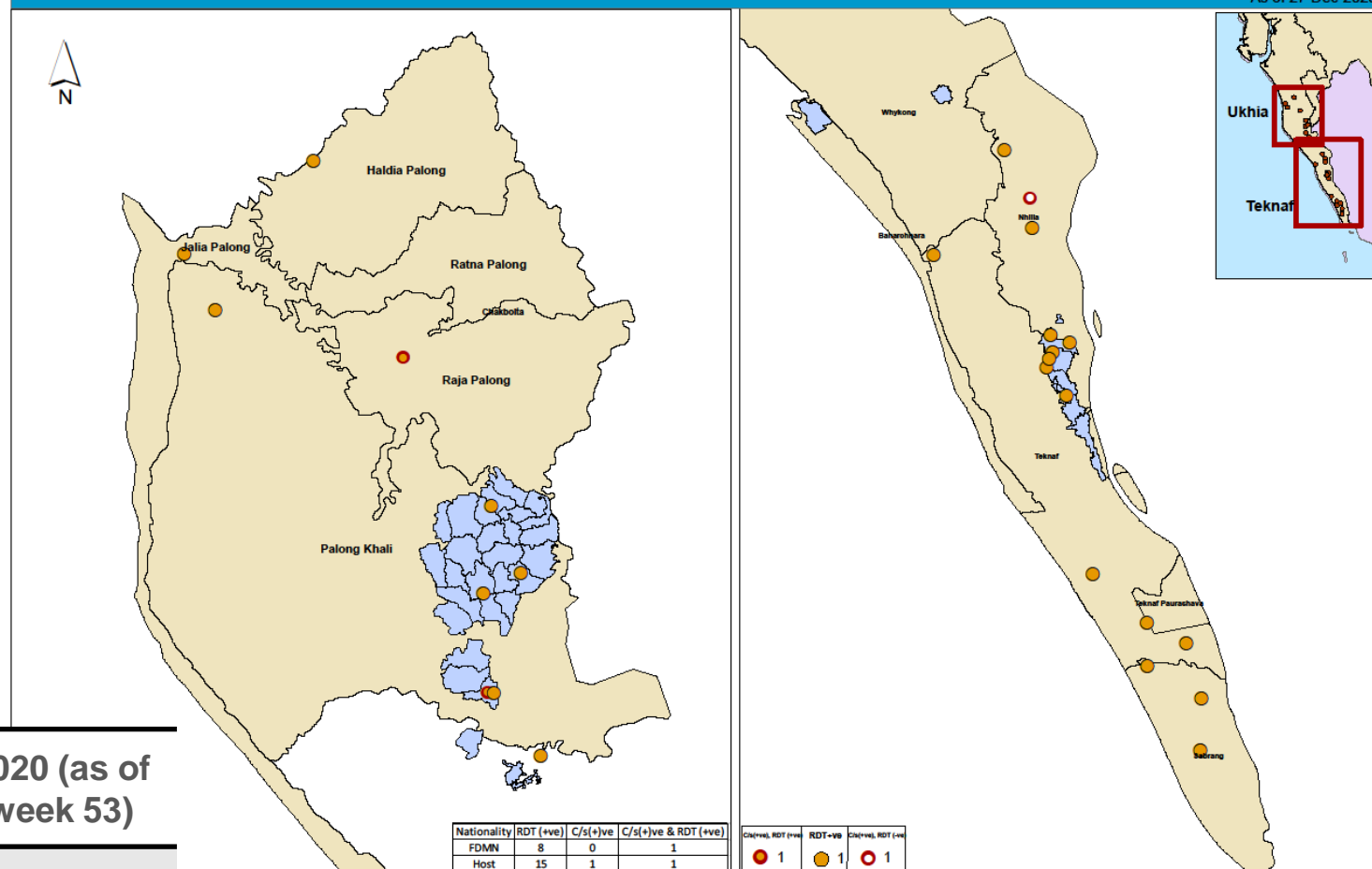
Year	2018	2019	2020 (as of week 53)
RDT + (ve) for Cholera	49	258	26
Culture Confirmed for Cholera	7	184	3

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Community-based Mortality Surveillance

- In week 53 total of 41 deaths were recorded, 66% (n=27) were due to causes classified as "Others", 15% (n=6) as Still birth (Born Dead), 12% (n=5) as Neonatal (<28 days old) and 2% (n=1) as Severe acute Respiratory illness.

- Two mortality alert raised for women of reproductive age (12-49 years).

- 36.6% of deaths reported in the health facility, 56.1% of deaths reported in homes and 7.3% deaths reported from Community/ Public place.

- Partners to report **all mortalities** into EWARS using the "Community-based mortality surveillance" form.

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Community-based Mortality Surveillance

Camp wise Deceased Case Distribution
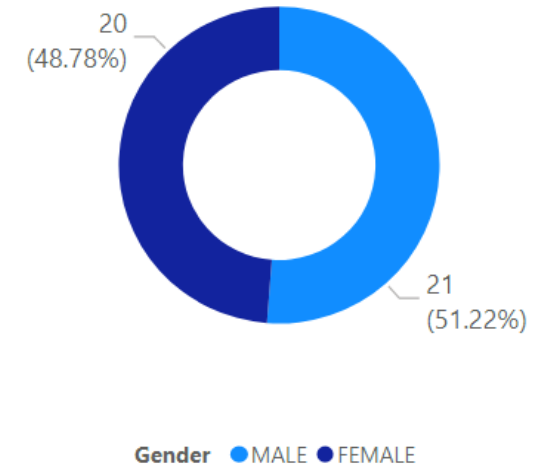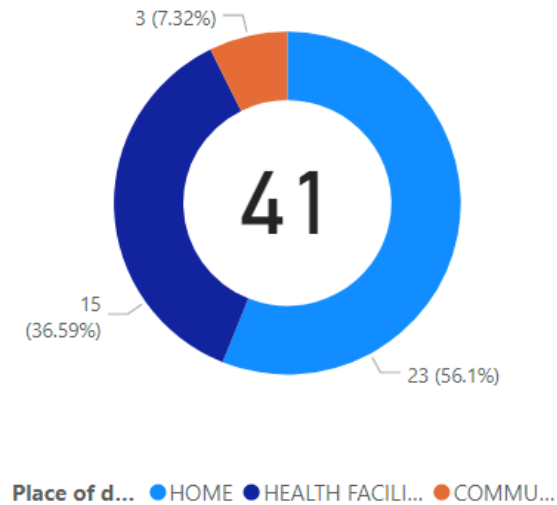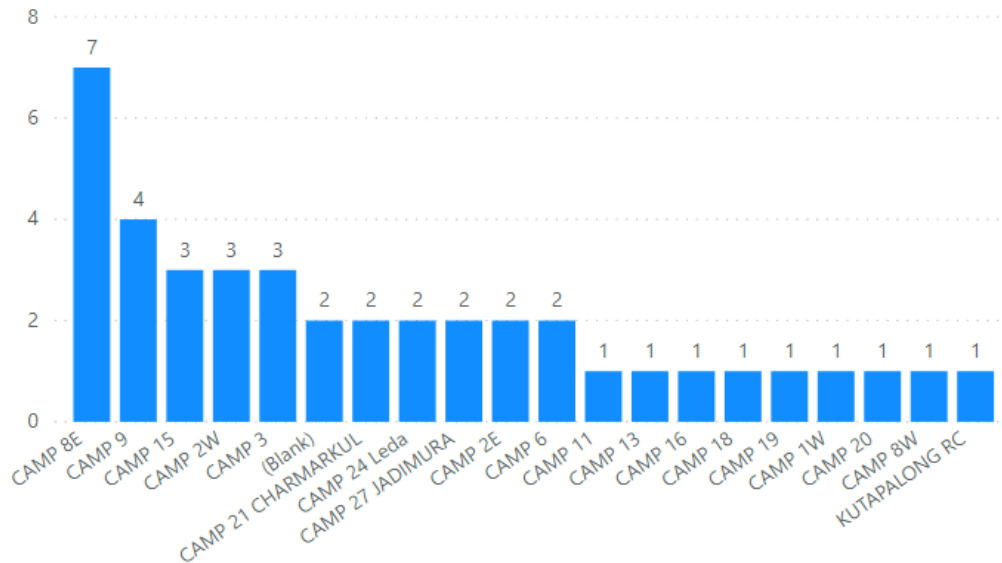
Probable Cause of Death
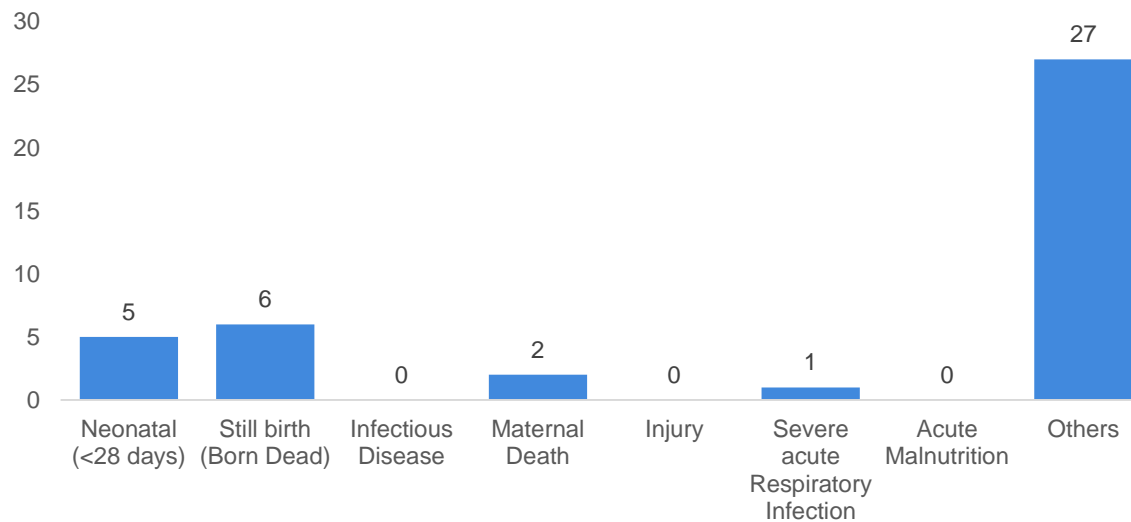
Bangladesh

Rohingya Emergency Response

Early Warning, Alert and
Response System (EWARS)

Epidemiological Bulletin W53 2021

Ministry of Health and Family Welfare Bangladesh

World Health Organization

HEALTH SECTOR
COX'S BAZAR

Printed: 09:57 Wednesday, 06 January 2021 UTC

Contents

Sources of data

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

W53 2021

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HEALTH SECTOR COX'S BAZAR

Table 1 | Coverage

#	%	
854,704	-	Estimated total Rohingya population[1]
854,704	100%	Total population under surveillance
166	-	Total number of health facilities
146	88%	Number of EWARS reporting sites

Table 2 | Early warning performance indicators

W53	Cumulative (2021)	
111	111	Number of weekly reports received
72%	72%	Completeness
72%	72%	Timeliness

Table 3 Alert performance indicators

W53	Cumulative (2021)	
52	37	Total alerts raised
100%	92%	% verified
0%	0%	% auto-discarded
0%	0%	% undergoing risk assessment
0%	0%	% completed risk assessment

[1] Source: UNHCR. Bangladesh: Joint Goverment of Bangladesh- UNHCR Population Factsheet. 31 December 2019.

World Health Organization   HEALTH SECTOR COX'S BAZAR

Map 1a | Ukhia completeness by camp

1 Camp 12
2 Camp 1E
3 Camp 1W
4 Camp 4
5 Camp 7
6 Camp 5
7 Camp 2E
8 Camp 8E
9 Kutupalong RC
10 Camp 11
11 Camp 6
12 Camp 2W
13 Camp 10
14 Camp 8W
15 Camp 17
16 Camp 20
17 Camp 19
18 Camp 15
19 Camp 4 Ext
20 Camp 18
21 Camp 20 Ext
22 Camp 9
23 Camp 3
24 Camp 16
25 Camp 14
26 Camp 13
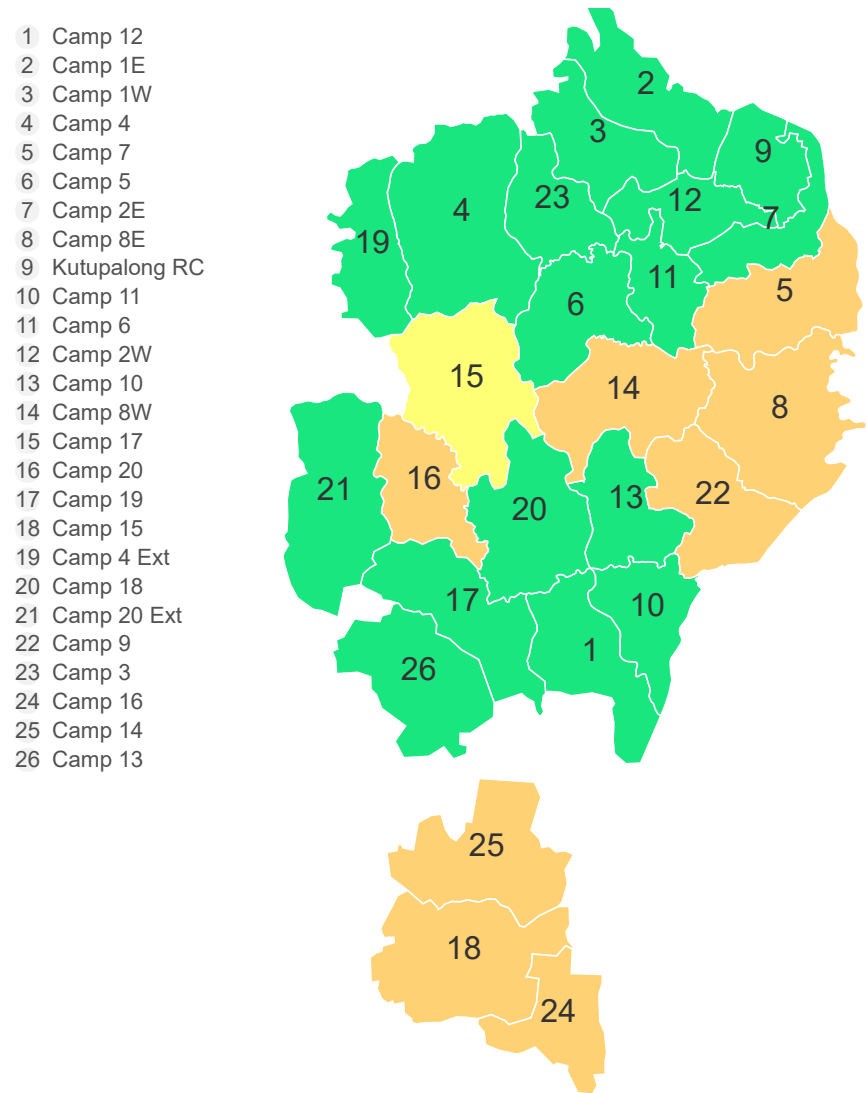
Map 1b | Teknaf completeness by camp

1 Nayapara RC
2 Camp 27 Jadimura
3 Camp 24 Leda
4 Camp 21 Chakmarkul
5 Camp 25 Ali Khali
6 Camp 23 Shamlapur
7 Camp 26 Nayapara
8 Camp 22 Unchiprang

Completeness
0   25%   50%   75%   100%

Completeness
0   25%   50%   75%   100%

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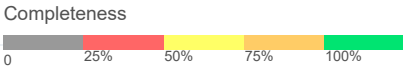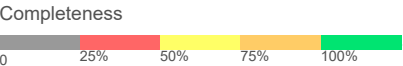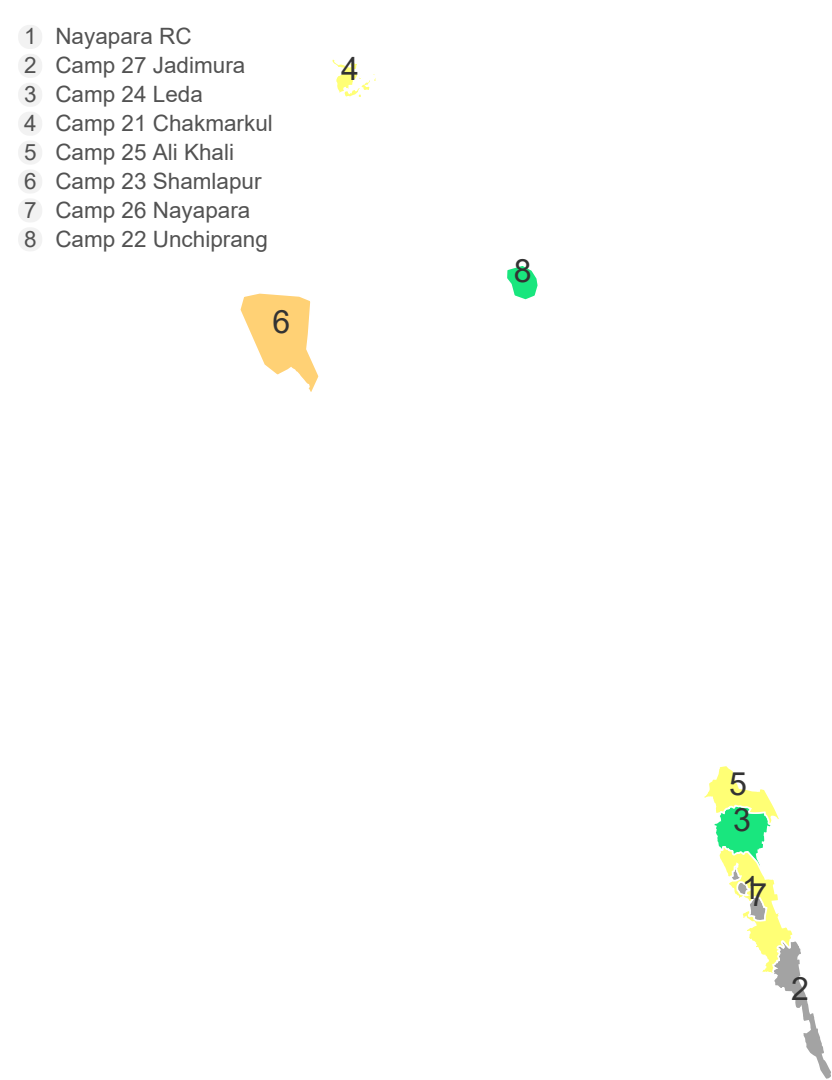
Table 4 | Performance by camp (W53 2021)

Map 2 | Completeness by camp

Northern group	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
Ukhia Northern Group				
Camp 1E	4	4	100%	100%
Camp 1W	4	3	75%	75%
Camp 2E	1	1	100%	100%
Camp 2W	2	2	100%	100%
Camp 3	6	5	83%	83%
Camp 4	6	5	80%	80%
Camp 4 Ext	1	1	100%	100%
Camp 5	5	5	100%	100%
Camp 6	2	2	100%	100%
Camp 7	6	4	67%	67%
Camp 8E	7	5	71%	71%
Camp 8W	6	4	67%	67%
Kutupalong RC	1	2	100%	100%

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

Completeness

0   25%   50%   75%   100%

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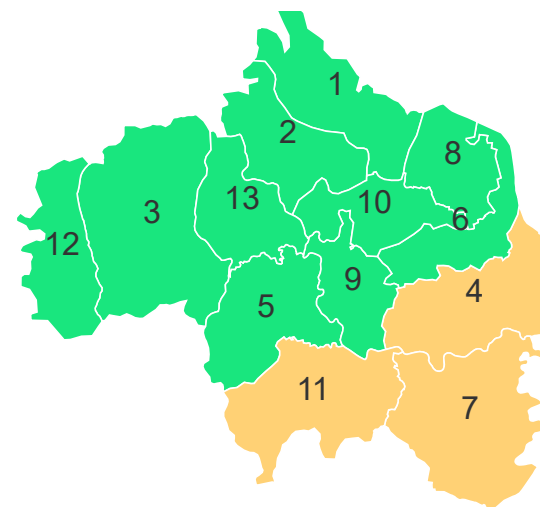
Table 5 | Performance by camp (W53 2021)

Southern group	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
		Ukhia Southern Group		
Camp 10	4	4	100%	100%
Camp 11	9	9	100%	100%
Camp 12	6	6	100%	100%
Camp 13	9	7	78%	78%
Camp 14	6	3	50%	50%
Camp 15	10	5	56%	56%
Camp 16	5	3	60%	60%
Camp 17	5	2	40%	40%
Camp 18	5	4	80%	80%
Camp 19	5	4	80%	80%
Camp 20	3	2	67%	67%
Camp 20 Ext	2	2	100%	100%
Camp 9	7	3	50%	50%

Map 3 | Completeness by camp

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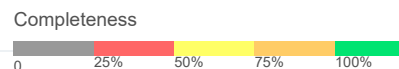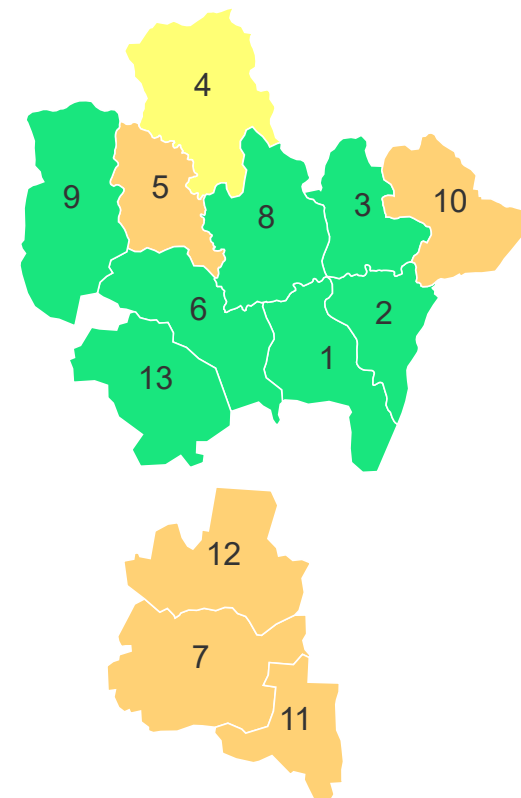9 Camp 20 Ext
10 Camp 9
11 Camp 16
12 Camp 14
13 Camp 13

Completeness

0   25%   50%   75%   100%

World Health Organization

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Table 6 | Performance by camp (W53 2021)

Teknaf	Reporting		Performance	
	# health facilities	# reports received	Completeness	Timeliness
	Ukhia Teknaf			
Camp 21 Chakmarkul	4	1	25%	25%
Camp 22 Unchiprang	5	3	75%	75%
Camp 23 Shamlapur	4	2	67%	67%
Camp 24 Leda	1	1	100%	100%
Camp 25 Ali Khali	3	1	33%	33%
Camp 26 Nayapara	3	2	33%	33%
Camp 27 Jadimura	1	0	0%	0%
Nayapara RC	0	2	0%	100%

Map 4 | Completeness by camp

1 Nayapara RC
2 Camp 27 Jadimura
3 Camp 24 Leda
4 Camp 21 Chakmarkul
5 Camp 25 Ali Khali
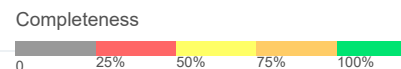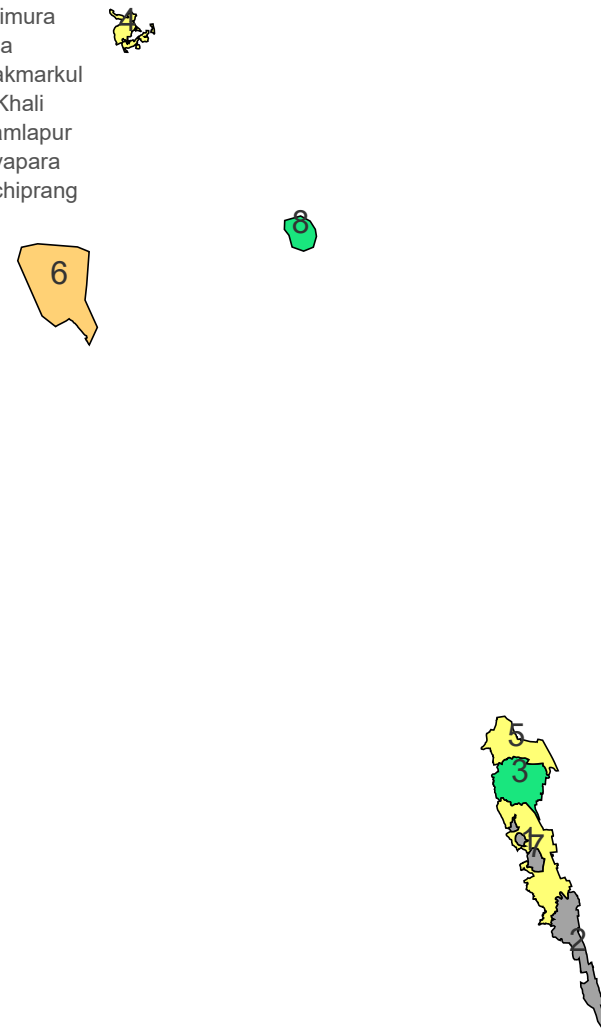6 Camp 23 Shamlapur
7 Camp 26 Nayapara
8 Camp 22 Unchiprang

Completeness

0 25% 50% 75% 100%

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Table 7 | Performance by partner (W53 2021)

Partner	Performance		Reporting		Partner	Performance		Reporting	
	# sites	# reports received	Completeness	Timeliness		# sites	# reports received	Completeness	Timeliness
BDRCS	9	6	67%	67%	FH/MTI	3	3	100%	100%
BRAC	11	10	91%	91%	PHD	8	8	100%	100%
CARE	4	4	100%	100%	PWJ	1	1	100%	100%
FHM	0	0			RHU	1	1	100%	100%
FRNDS	12	10	83%	83%	RI	3	3	100%	100%
GK	9	9	100%	100%	RTMI	9	8	89%	89%
HMBDF	1	1	100%	100%	SCI	9	0	0%	0%
IOM	21	15	71%	71%	TdH	1	0	0%	0%
IRC	2	2	100%	100%					
MSF	9	5	56%	56%					
MoH	1	0	0%	0%					
Hope	1	1	100%	100%					
Medair	2	2	100%	100%					

Table 8 | Performance by camp

Northern group	W53		Cumulative (2021)	
	# alerts	% verif.	# alerts	% verif.
	Alerts Northern group			
Camp 1E	1	100%	1	100%
Camp 1W	3	100%	4	100%
Camp 2E	4	100%	4	100%
Camp 2W	2	100%	0	0%
Camp 3	4	100%	1	100%
Camp 4	1	100%	1	100%
Camp 4 Ext	0	0%	0	0%
Camp 5	1	100%	1	100%
Camp 6	2	100%	2	100%
Camp 7	0	0%	0	0%
Camp 8E	1	100%	1	100%
Camp 8W	5	100%	1	0%
Kutupalong RC	1	100%	0	0%

Map 5 | Number of alerts by camp

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

\# of alerts

0   2   5   10

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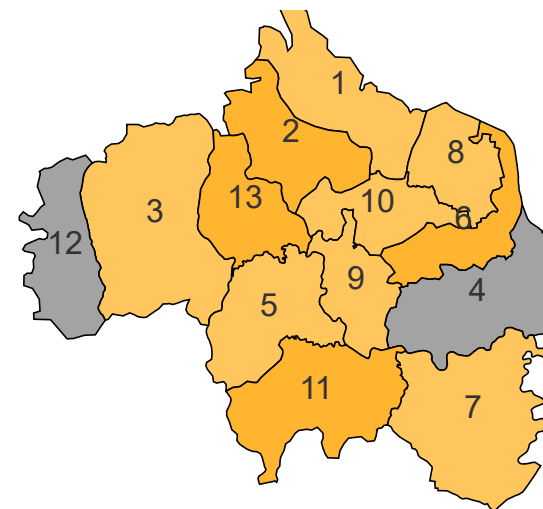
Table 9 | Performance by camp

Southern group	W53		Cumulative (2021)	
	# alerts	% verif.	# alerts	% verif.
	Alerts Northern group			
Camp 10	2	100%	1	100%
Camp 11	2	100%	2	100%
Camp 12	0	0%	0	0%
Camp 13	2	100%	2	100%
Camp 14	0	0%	0	0%
Camp 15	3	100%	2	100%
Camp 16	0	0%	0	0%
Camp 17	1	100%	0	0%
Camp 18	4	100%	2	50%
Camp 19	1	100%	2	100%
Camp 20	1	100%	1	100%
Camp 20 Ext	0	0%	1	100%
Camp 9	5	100%	5	80%

Map 6 | Number of alerts by camp

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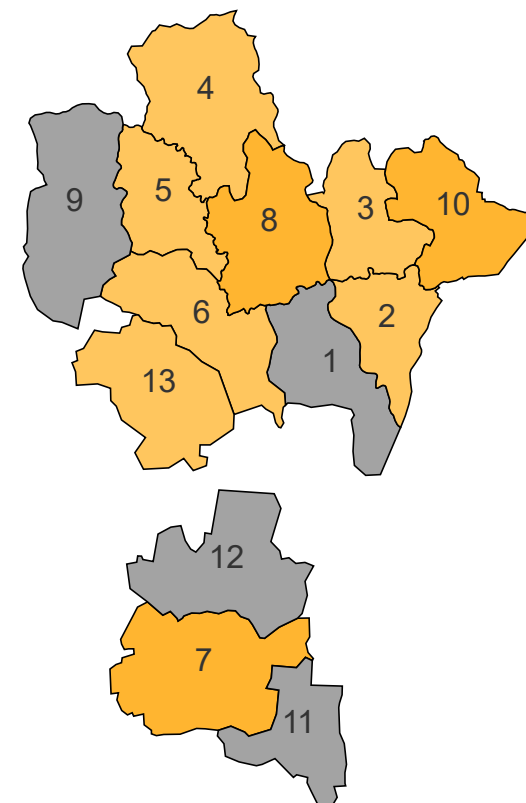9 Camp 20 Ext
10 Camp 9
11 Camp 16
12 Camp 14
13 Camp 13

# of alerts

0   2   5   10

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Table 10 | Performance by camp

Teknaf	W53		Cumulative (2021)	
	# alerts	% verif.	# alerts	% verif.
Alerts Northern group				
Camp 21 Chakmarkul	2	100%	0	0%
Camp 22 Unchiprang	1	100%	1	100%
Camp 23 Shamlapur	0	0%	0	0%
Camp 24 Leda	2	100%	1	100%
Camp 25 Ali Khali	0	0%	0	0%
Camp 26 Nayapara	0	0%	0	0%
Camp 27 Jadimura	1	100%	0	0%
Nayapara RC	0	0%	1	100%

Map 7 | Number of alerts by camp

1 Nayapara RC
2 Camp 27 Jadimura
3 Camp 24 Leda
4 Camp 21 Chakmarkul
5 Camp 25 Ali Khali
6 Camp 23 Shamlapur
7 Camp 26 Nayapara
8 Camp 22 Unchiprang

# of alerts

0   2   5   10

World Health Organization

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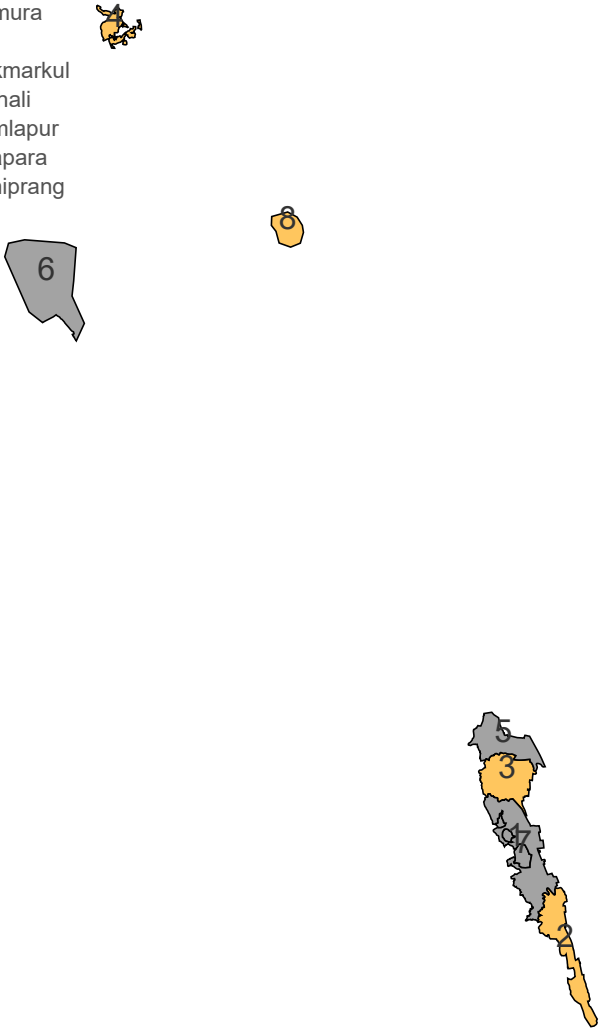
Table 11 | Performance by type of alert

Event	W53		Cumulative (2021)	
	# alerts	% verif.	# alerts	% verif.
Indicator-based surveillance				
Malaria	0	0%	0	0%
Measles	5	100%	5	100%
Bloody Diarr.	0	0%	0	0%
AFP	0	0%	0	0%
Meningitis	0	0%	0	0%
Haem. fever (susp.)	0	0%	0	0%
NNT	0	0%	0	0%
Unexp. fever	4	100%	4	100%
AWD	5	100%	5	100%
ARI	2	100%	2	100%
AJS	0	0%	0	0%
Varicella (Susp.)	0	0%	0	0%
Suspected COVID-19	0	0%	0	0%
Event-based surveillance				
EBS total	2	100%	0	0%

Table 12 | Risk assessment

W53	Cumulative (2021)	
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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Email: bshownam49@gmail.com

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World Health Organization
Cox's Bazar, Bangladesh

Telephone: +88 017 0120 2994

Email: khan@who.int

Notes

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

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

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

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

Ministry of Health and Family Welfare Bangladesh

World Health Organization

HEALTH SECTOR COX'S BAZAR

Global EWARS

Bangladesh

Rohingya Emergency Response

Early Warning, Alert and
Response System (EWARS)

Annex W53 2021

**Ministry of Health and Family
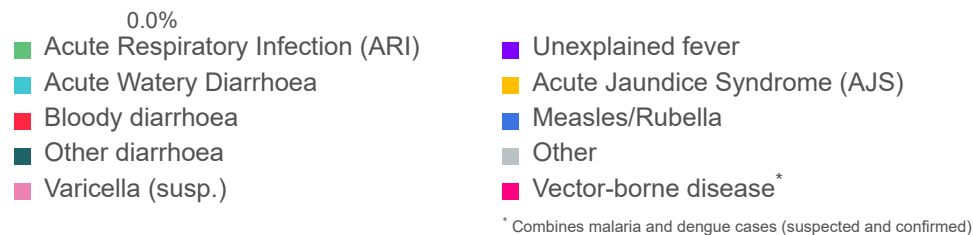Welfare Bangladesh**

**World Health
Organization**

HEALTH SECTOR
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Printed: 10:02 Wednesday, 06 January 2021 UTC

Proportional morbidity

Figure 1 | Proportional morbidity (W53 2021)

0.0%
- 🟩 Acute Respiratory Infection (ARI)
- 🟦 Acute Watery Diarrhoea
- 🟥 Bloody diarrhoea
- 🟩 Other diarrhoea
- 🟪 Varicella (susp.)

- 🟪 Unexplained fever
- 🟨 Acute Jaundice Syndrome (AJS)
- 🟦 Measles/Rubella
- ⬜ Other
- 🟥 Vector-borne disease[*]

[*] Combines malaria and dengue cases (suspected and confirmed)

Disease	W53		2021	
	# cases	% morbidity	# cases	% morbidity
AWD	1,783	3.0%	1,783	3.0%
Bloody diarr.	276	0.5%	276	0.5%
Other diarr.	641	1.1%	641	1.1%
Susp. Varicella	15	0.0%	15	0.0%
ARI	11,950	20.2%	11,950	20.2%
Measles/Rub.	6	0.0%	6	0.0%
AFP	0	0.0%	0	0.0%
Susp. menin.	0	0.0%	0	0.0%
AJS	8	0.0%	8	0.0%
Susp. HF	0	0.0%	0	0.0%
Neo. tetanus	0	0.0%	0	0.0%
Adult tetanus	0	0.0%	0	0.0%
Malaria (conf.)	0	0.0%	0	0.0%
Malaria (susp.)	0	0.0%	0	0.0%
Dengue (conf.)	0	0.0%	0	0.0%
Dengue (susp.)	0	0.0%	0	0.0%
Unexpl. fever	731	1.2%	731	1.2%
Sev. Malnut.	24	0.0%	24	0.0%
Inj./Wounds	1,434	2.4%	1,434	2.4%
Other	42,247	71.4%	42,247	71.4%
Total	**58,409**	**100%**	**59,140**	**100%**

World Health Organization — COX'S BAZAR HEALTH SECTOR

Trend in consultations and key diseases

Figure 2 | Trend in proportional morbidity for key diseases (W53)

Legend:
- Other consultations
- Acute Respiratory Infection (ARI)
- Unexplained fever
- Acute Jaundice Syndrome (AJS)
- Acute Watery Diarrhoea (AWD)
- Other diarrhoea
- Vector-borne disease*

* Combines malaria and dengue cases (suspected and confirmed)

World Health Organization — COX'S BAZAR — HEALTH SECTOR
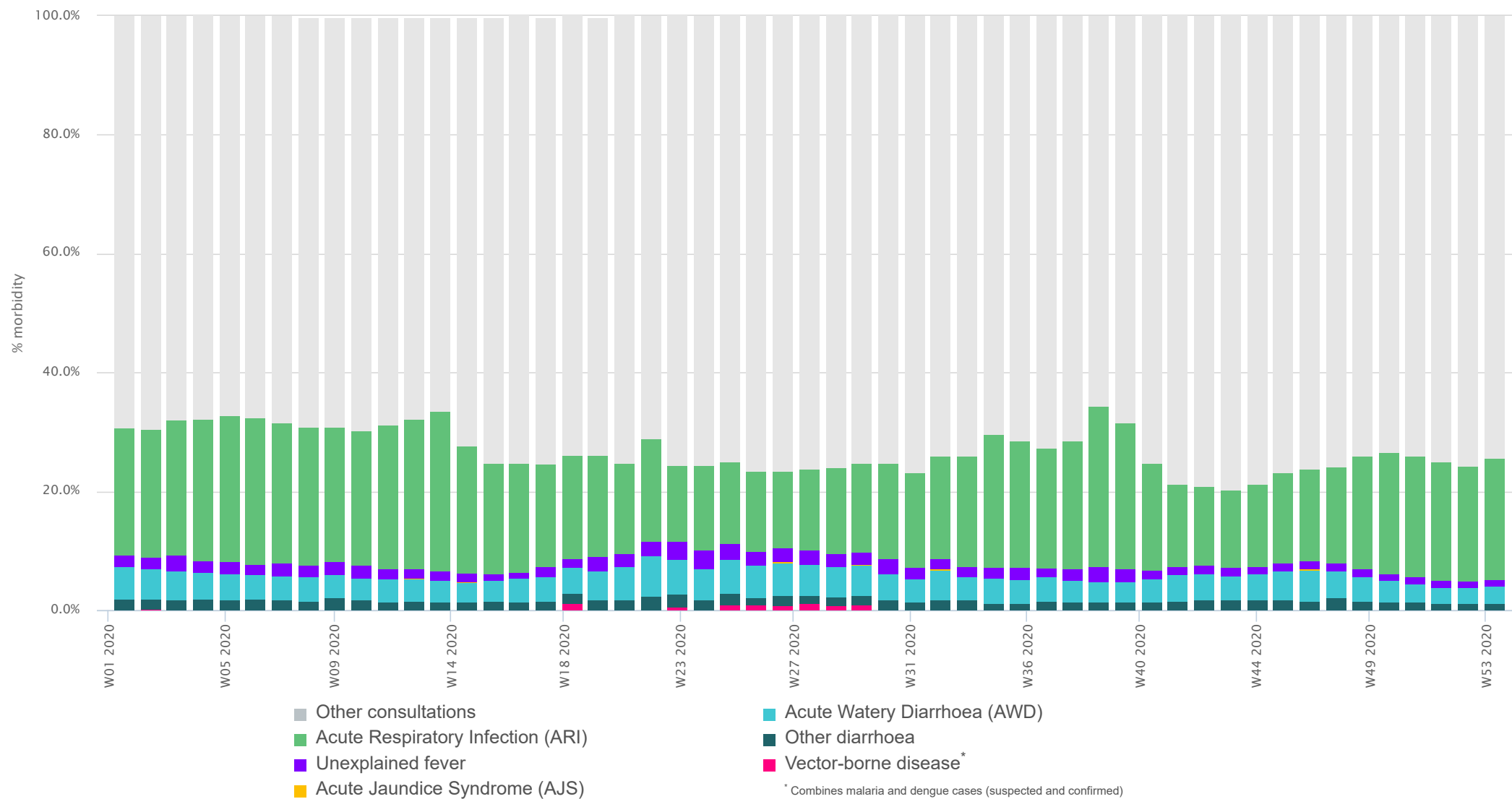
Figure 3 | Trend in number of cases over time (W38 2017 - W53 2021)
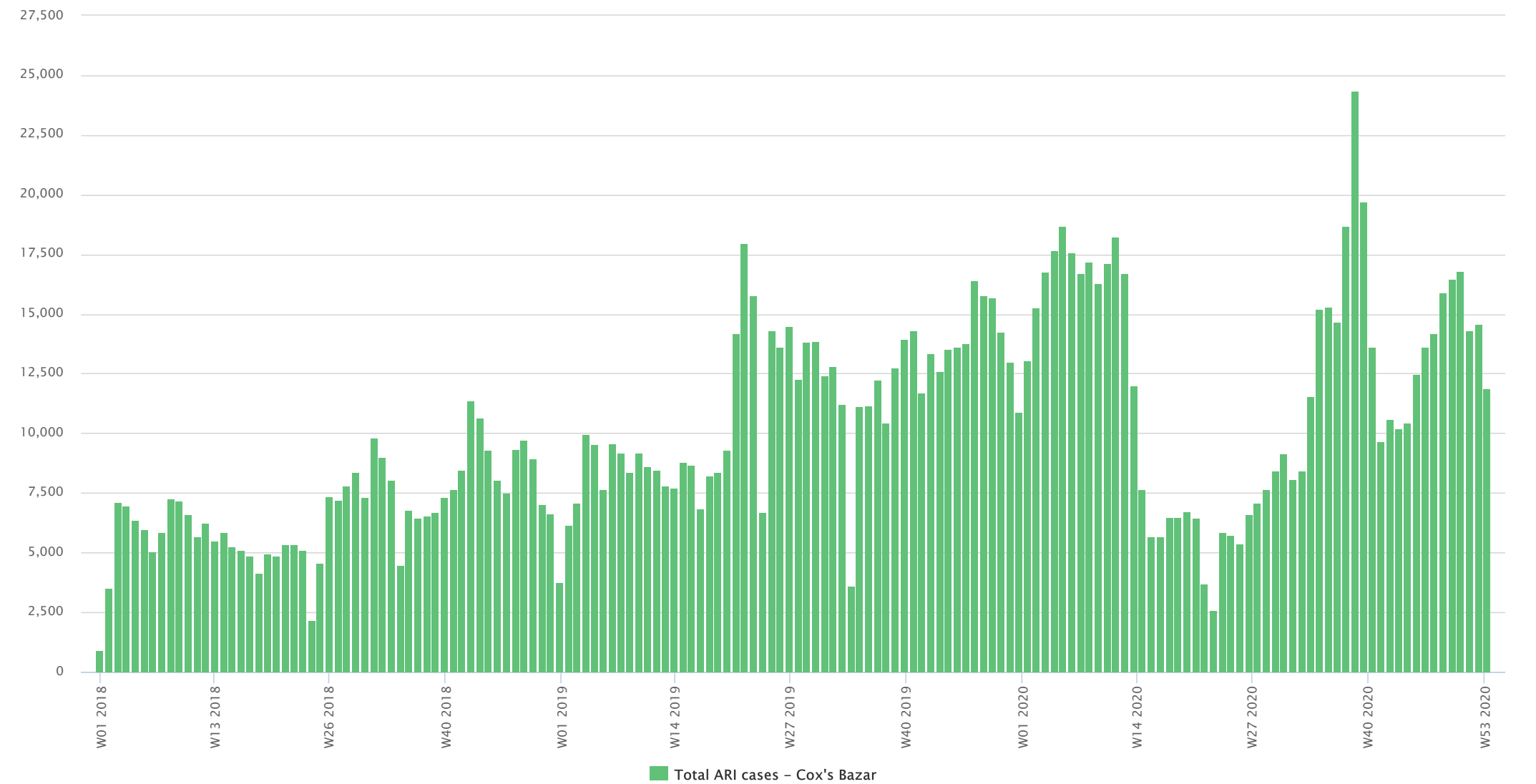
Total ARI cases – Cox's Bazar

World Health Organization

HEALTH SECTOR COX'S BAZAR

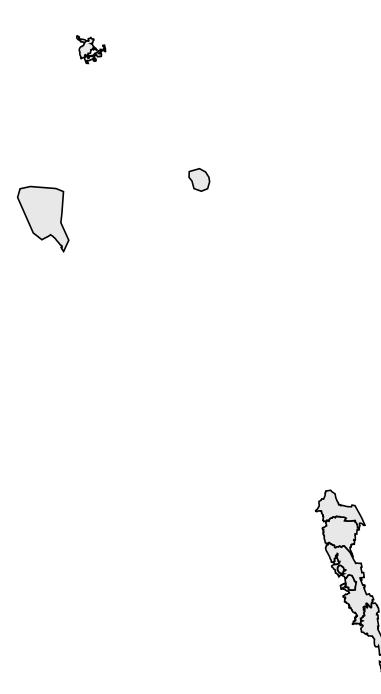## Map 1 | Map of cases by camp (W53 2021)

a. Ukhia | Number of cases

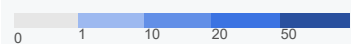**b. Ukhia** | Number of alerts

c. Teknaf | Number of cases

d. Teknaf | Number of alerts

Map legend

Number of cases

| 0 | 1 | 100 | 200 | 500 |

Number of alerts

| 0 | 1 | 10 |

Alert threshold

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

Alert management (W53 2021)

0	**0%**	**0**	**0**	**0**	**0**
Alerts	Verified	Low Risk	Moderate Risk	High Risk	Very High Risk

Figure | % sex

Figure | % age

Male   Female   >=5   < 5

World Health Organization   HEALTH SECTOR COX'S BAZAR

Measles | Trend
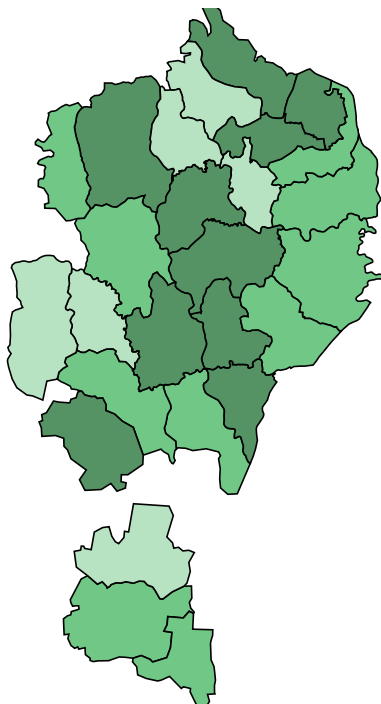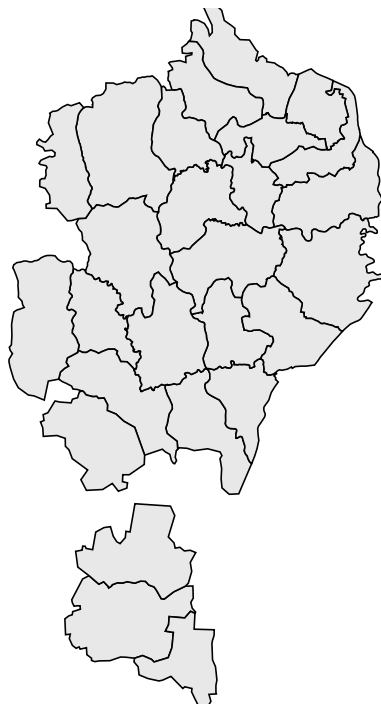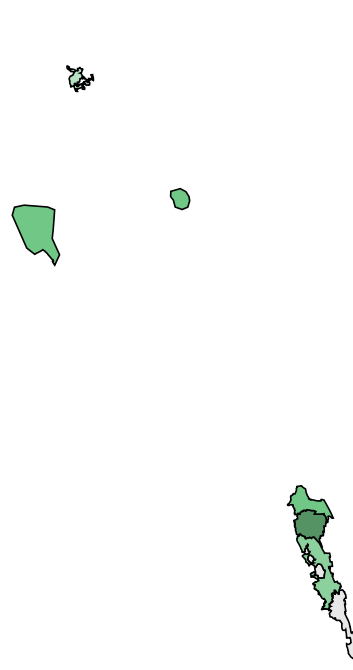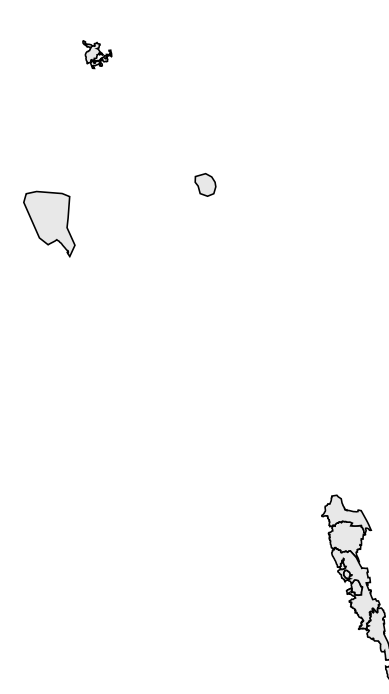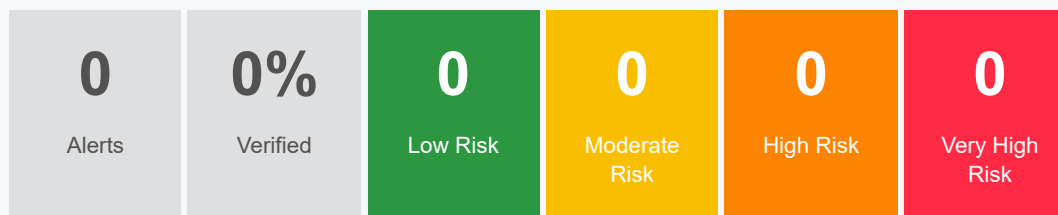
Figure 4 | Trend in number of suspected cases over time (W38 2017 - W53 2021)
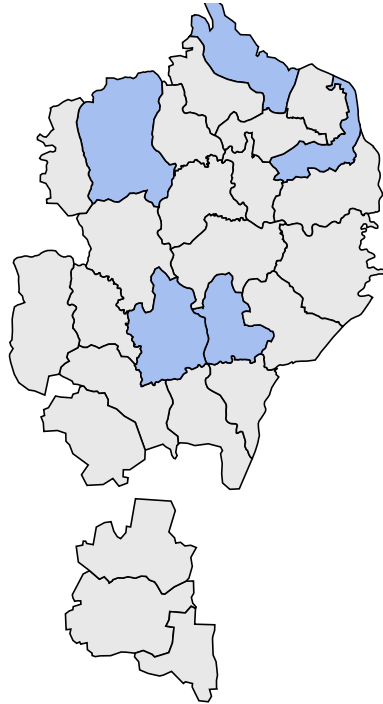
Total suspected measles/rubella cases – Cox's Bazar

World Health Organization

HEALTH SECTOR COX'S BAZAR

Map 2 | Map of cases by camp (W53 2021)

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

0   1   10   20   50

Number of alerts

0   1   10
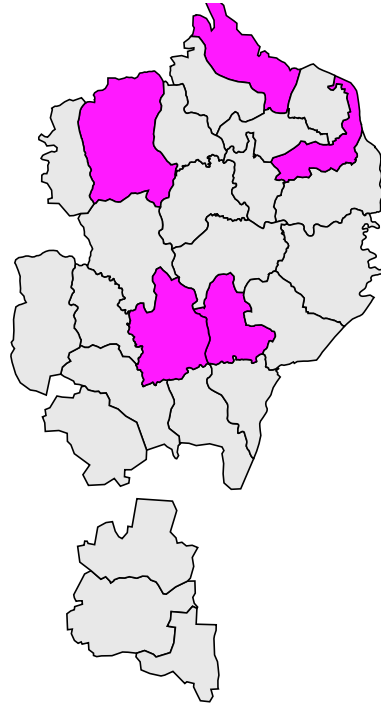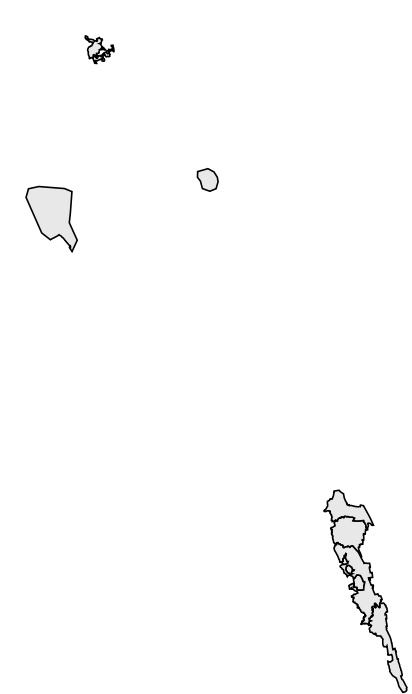
Alert threshold

1 case. *Source: IEDCR*

Alert management (W53 2021)

| 5	100%	0	0	0	0
Alerts	Verified	Low Risk	Moderate Risk	High Risk	Very High Risk

Figure | % sex

Figure | % age

Male   Female   >= 5   < 5

World Health Organization

HEALTH SECTOR COX'S BAZAR
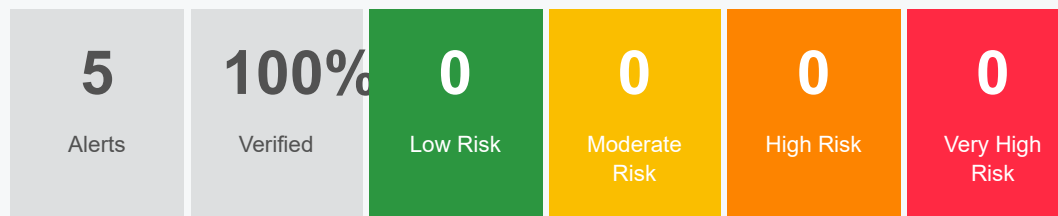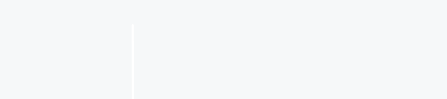
Figure 5 | Trend in number of cases over time (W38 2017 - W53 2021)
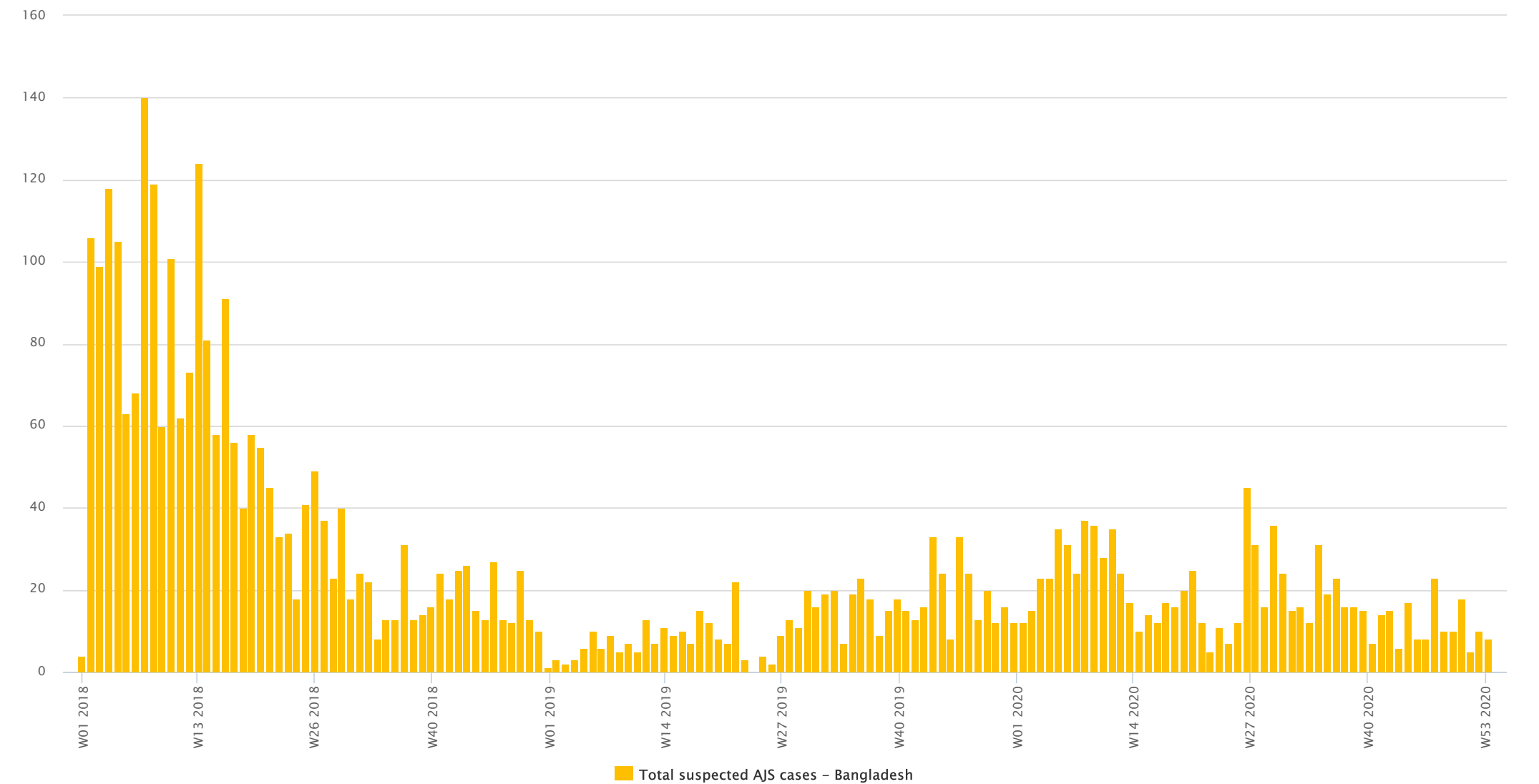
Total suspected AJS cases – Bangladesh

Map 3 | Map of cases by camp (W37 2017 - W53 2021)

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

0 1 10 20 50

Number of alerts

0 1 10
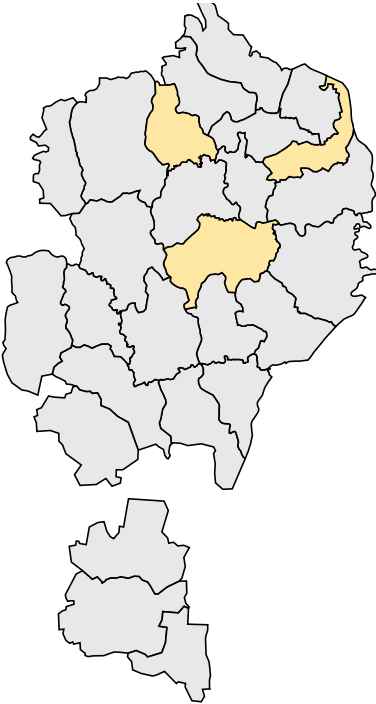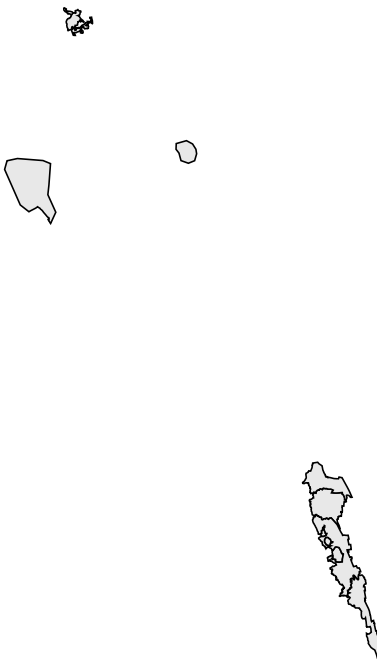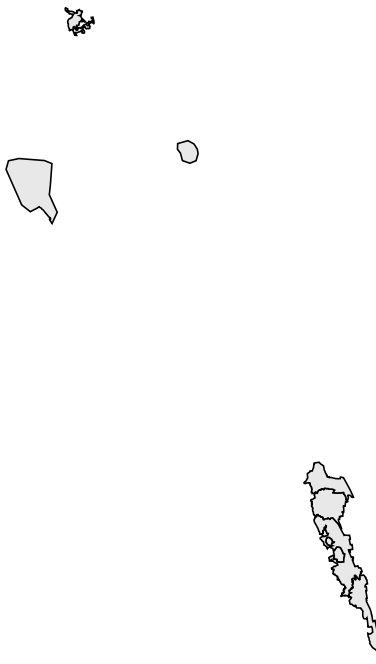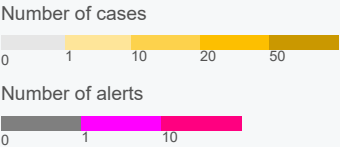
Alert threshold

A cluster of 3 or more cases seen in a health facility. *Source: IEDCR*
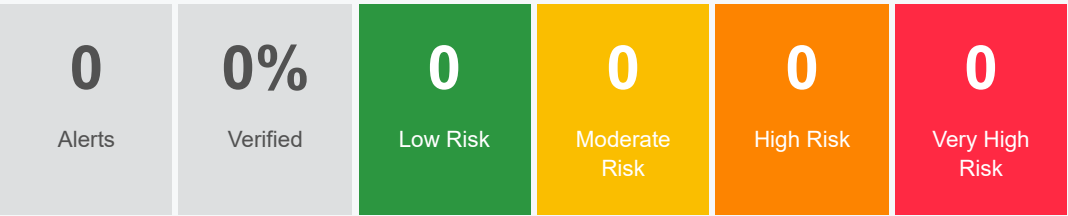
Alert management (W53 2021)

0	0%	0	0	0	0
Alerts	Verified	Low Risk	Moderate Risk	High Risk	Very High Risk

Figure | % sex

Figure | % age

■ Male   ■ Female   ■ >= 5   ■ < 5

World Health Organization   HEALTH SECTOR COX'S BAZAR

Figure 6 | Trend in number of cases over time (W38 2017 - W53 2021)
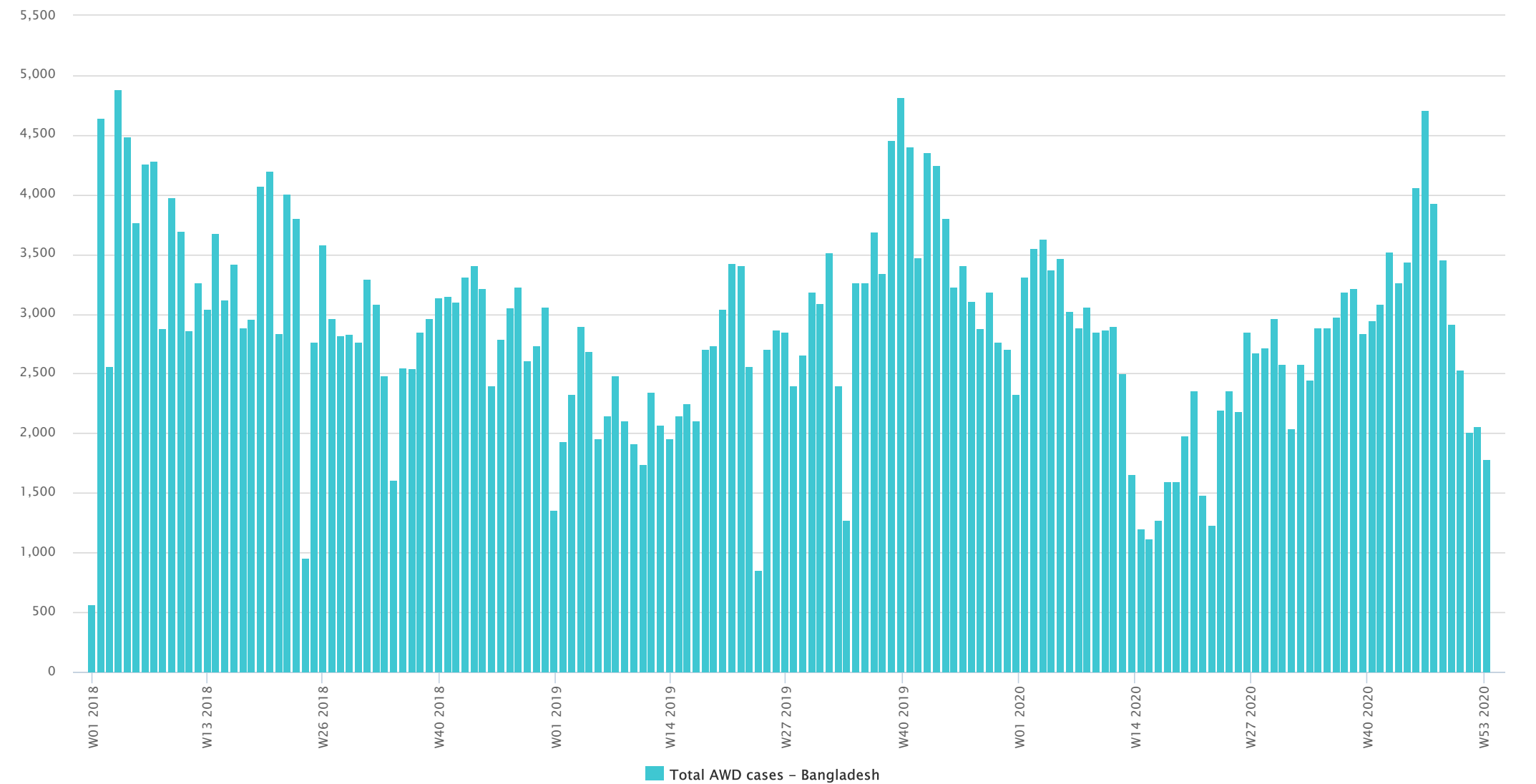
Total AWD cases – Bangladesh

World Health Organization

HEALTH SECTOR COX'S BAZAR

Figure 7 | Trend in number of cases over time (W38 2017 - W53 2021)

Total Dengue Cases – Suspected – Bangladesh   Total Dengue Cases – Confirmed – Bangladesh

World Health Organization   HEALTH SECTOR COX'S BAZAR

Map 4 | Map of cases by camp (W37 2017 - W53 2021)

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

0 1 100 200 500

Number of alerts

0 1 10

Alert threshold

Twice the average number of cases over the past 3 weeks. *Source: IEDCR*
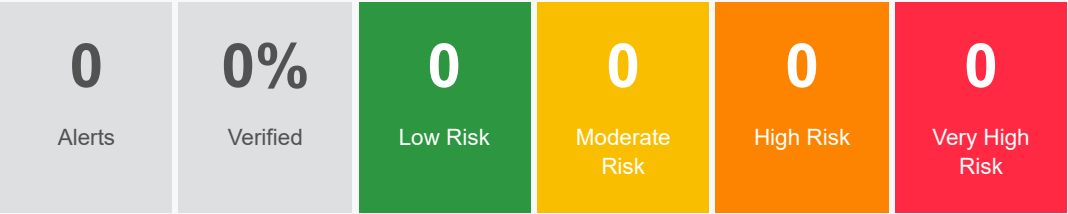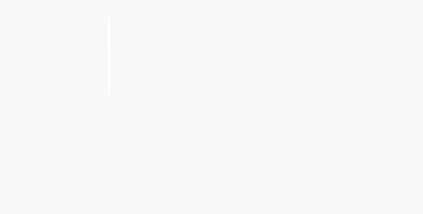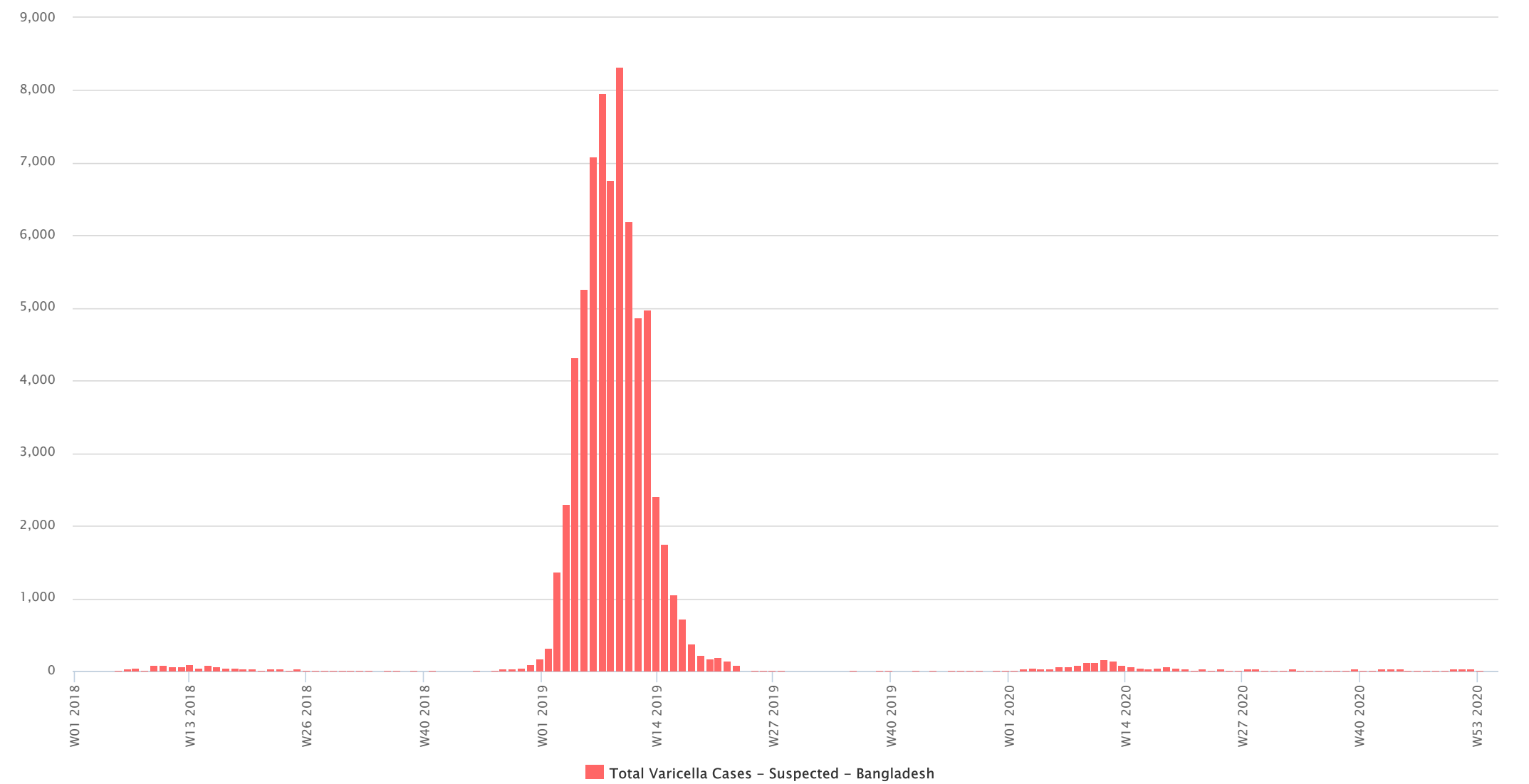
Alert management (W53 2021)

0 Alerts	**0%** Verified	**0** Low Risk	**0** Moderate Risk	**0** High Risk	**0** Very High Risk

Figure | % sex

Figure | % age

■ Male   ■ Female

■ >= 5   ■ < 5

World Health Organization   HEALTH SECTOR COX'S BAZAR

Figure 7 | Trend in number of cases over time (W38 2017 - W53 2021)

Total Varicella Cases – Suspected – Bangladesh

World Health Organization
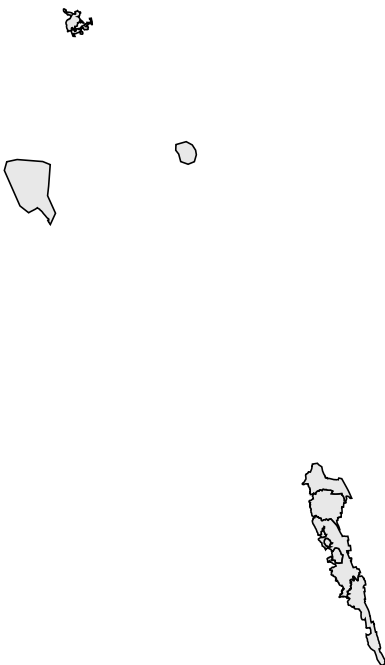
HEALTH SECTOR COX'S BAZAR
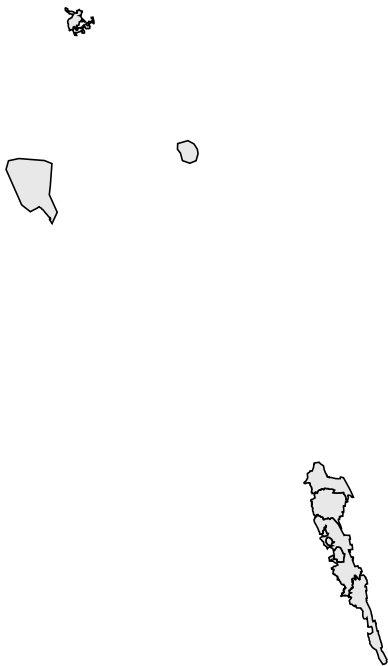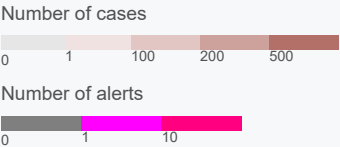
Map 4 | Map of cases by camp (W37 2017 - W53 2021)

a. Ukhia | Number of cases
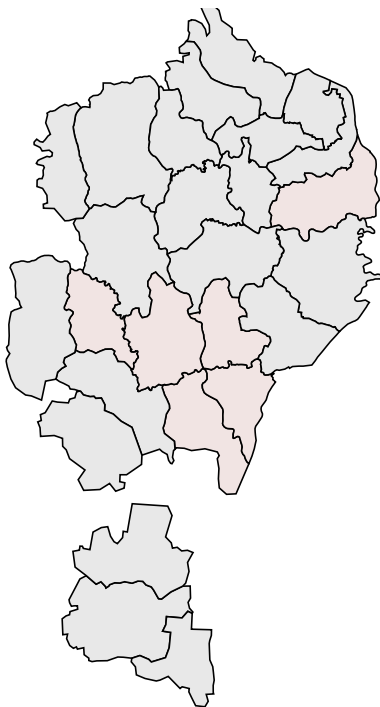
c. Teknaf | Number of cases

Map legend

Number of cases

0   1   100   200   500

Figure | % sex

■ Male   ■ Female

Figure | % age

■ >= 5   ■ < 5

World Health Organization

HEALTH SECTOR COX'S BAZAR

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

Ministry of Health and Family Welfare Bangladesh

World Health Organization

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Global EWARS