

Weekly Situation Report # 13 Date of issue: 15 February 2018

Period covered: 04 February –11 February

Location: Bangladesh

Emergency type: Rohingya Refugee Crisis



900 377 total Rohingya in Bangladesh



688 000 new arrivals since 25 Aug 2017



391 678 Rohingya children were vaccinated in the 2nd round of diphtheria vaccination



728 786 people are being monitored for diseases



1.3 million people targeted for health assistance

KEY HIGHLIGHTS

- As of 10 February 2018, a total of 5 659 clinically suspected diphtheria cases have been reported.
- The second diphtheria vaccination campaign ended on 10 February, with 391 678 children up to 15 years immunized.

SITUATION OVERVIEW

Since 25 August 2017, an estimated 688 000 Rohingya have crossed over from Myanmar into Cox's Bazar, Bangladesh, joining approximately 212 000 others who had fled in earlier waves of displacement. There were 801 new arrivals from 1-9 February. As of 9 February 2018 over 585 000 arrivals are in Kutupalong expansion site, 237 000 in other camps and settlements, and 79 000 arrivals in host communities, impacting the already congested health response. Pre-existing camps and settlements as well as new spontaneous settlements have expanded with the new influx.

RESPONSE

EPIDEMIOLOGICAL UPDATE

- To date, 149 health facilities out of 158 (94%) have been registered in EWARS. This provides surveillance for an estimated 728 786 people (84% of the estimated population).
- In week six, 2018 a total of 89 alerts were triggered, of which 90% were verified and acted upon, 1% are undergoing risk assessment by the joint MOHFW- IEDCR-WHO response cell, and another 9% are being monitored.
- As of 10 February, 2018, 5659 diphtheria case-patients were reported in EWARS, including 245 new casepatients in week six. The number of new suspected cases are almost the same as that reported in the previous week.
- The number of reported cases of measles/rubella continues to decline, with 79 suspected cases reported in week six, compared to 93 cases in week five.

- A total of 89 cases of (AJS) were reported through EWARS during week six. A more in-depth investigation is
 ongoing, surveillance is being enhanced and laboratory capacity scaled up. WHO is supporting setting up of
 laboratory testing capacity for AJS in Dhaka. So far 27 samples of AJS have been collected and sent to
 IEDCR laboratory in Dhaka on 6 and 11 February.
- Alerts of unexplained fever and acute watery diarrhea are being triaged for investigation, on an ongoing basis
- Improved guidance for reporting through EWARS is being prepared for partners in reporting health facilities.
- WHO is currently evaluating possibilities to implement community based surveillance in the camps, for mortality and the detection of unusual severe events.
- EWARS bulletin for week six was disseminated to all health sector partners.

DIPHTHERIA UPDATE

- As of 10 February 2018, a total of 5659 diphtheria case-patients were reported in EWARS since 8 November 8 2018. 245 new case-patients were reported during week six, steady on previous week.
- Four host community cases were reported in week six, and all were from Teknaf upazila. A total of 48 suspected cases have been reported from the host community since the start of the outbreak. Of these, six cases are laboratory-confirmed, 31 are probable and 11 are suspected. The Institute of Epidemiology, Disease Control and Research (IEDCR) is leading the investigations with support from WHO and the risk for further spread in the host population has been assessed to be moderate as the routine vaccination coverage for DTP is high in the Bangladeshi community.
- A total of 38 deaths (case-fatality proportion <1%) were recorded as of 10 February. The last diphtheria related death occurred on 2 February.
- Contact tracing is ongoing, and includes post-exposure prophylaxis of close contacts with antibiotics and vaccination, regardless of age.
- WHO continues to work with IEDCR to strengthen laboratory capacity.

VACCINATION CAMPAIGNS AND ROUTINE IMMUNIZATION

- The second round of vaccination campaign against diphtheria concluded on 10 February with a coverage of 391 678 children (109% of estimated target). Of them, 169,241 children aged 6 weeks to 7 years were administered Pentavalent and bOPV vaccines and 222,437 children aged 7 years to 15 years were administered Td vaccine.
- Rapid Convenience Monitoring was conducted to identify areas with low coverage. Based on this information, additional sweep teams were deployed in all such areas to vaccinate the missed children.
- Vaccination of close contacts of clinically suspected diphtheria cases is ongoing.
- Vaccination at entry point (Sabrang, Taknaf) is congoing with 151 children vaccinated between 1 Jan to 31
 Jan 2018. All children passing through entry point are being vaccinated with Penta/Td, bOPV, PCV and MR
 vaccines.
- Routine Immunization is being planned from fixed sites.

HEALTH OPERATIONS

- A joint water sanitation and hygiene (WASH) and infection prevention and control (IPC) survey was conducted. A total of 189 facilities were surveyed. The report has been drafted and the initial findings and recommendations have been presented in the WASH sector meeting.
- The first vector borne disease (VBD) working group meeting was held on 6 February 2018. Relevant partners in the health sector were engaged in discussing the scope of preparedness and response plan, which will be further discussed in the next meeting.
- WHO had a preliminary discussion with the Department of Public Health Engineering (DPHE) on water quality monitoring.

• WHO has been in discussion with Principal of Medical College Hospital on transfer of key laboratory technology from IEDCR.

LOGISTICS

- WHO and partners have assessed Diarrhea Treatment Centers (DTC) that are functional or under construction using a checklist developed by the Acute Watery Diarrhea working group. The plan is to compare the results, snapshot of the facilities, with the Sphere-WHO standards and invite partners to reach those standards while supporting them with supplies, guidelines or technical assistance.
- WHO has made available three cholera kits as part of AWD preparedness.
- For preparedness measures for the upcoming rainy season, WHO organized the first interagency logistic meeting on 11 February.
- As part of preparedness for the monsoons, Ukhiya logistic hub has moved four mobile storage units to the new hub in Lombasia.
- WHO has facilitated 20 extraction kits with each kit capable of testing 250 diphtheria samples.

COORDINATION

- Health sector Joint Response Plan proposals were reviewed on 12 February 2018
- Health Sector partners' are preparing for the rainy season.
- Gender Based Violence (GBV) subsector briefed partners on where they can refer patients who have suffered gender based violence for treatment
- A newly formed Community Health Programmes Working Group, to improve coordination of community based health activities, met for the first time on 11 February 2018.

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