



World Health Organization

Bangladesh

Weekly Situation Report # 32

Date of issue: 28 June 2018

Period covered: 20 – 26 June 2018

Location: Bangladesh

Emergency type: Rohingya Refugee Crisis



919 000
total Rohingya
in Bangladesh



706 364
new arrivals since
25 Aug 2017



879 273
Rohingya people and the
host community were
vaccinated during OCV
campaign



728 786
people are being
monitored for diseases



1.3 million
people targeted for health
assistance

KEY HIGHLIGHTS

- Cumulatively 28 464 people have been affected by the Monsoon rains since 11 May 2018.
- Health sector continued to monitor the temporary health facility closures as well as road inaccessibility resulting from the monsoon rains.
- Following the recent heavy rains, the Health Sector stakeholders have been alerted to increased risks of water and vector-borne disease outbreaks.

SITUATION OVERVIEW

- According to the Needs and Population Monitoring (NPM) exercise, there are an estimated 919 000 Rohingya refugees in Cox's Bazar as of 21 June 2018. Of these, 706 364 are new arrivals since 25 August 2017.
- The health sector has received 12.3% of the US\$113.1 million requested through Rohingya Refugee Crisis Joint Response Plan 2018 (<https://fts.unocha.org/appeals/656/summary> as of 27 June 2018). Additional funding is required to cater for the health needs of the Rohingya community as well as strengthening the health system in Cox's Bazar.

MONSOON UPDATES

- The 22 June 2018 report by Inter Sector Coordination Group (ISCG) indicates that since 11 May 2018, 28,415 people have been affected by the Monsoon rains. A total of 2 785 individuals have been displaced while 33 people have been injured and one person reported dead in the camps.

- In addition, several incidents including 134 landslides, 97 wind-storms, flood, water-logging and fire have been reported since 11 May 2018.
- Further, several infrastructures were reported damaged. These include 3 311 shelters, 22 waterpoints, 300 latrines and 1 health facility.

RESPONSE

EPIDEMIOLOGICAL UPDATE

- To date, 171 health facilities are currently registered as active Early Warning Alert and Response System (EWARS) reporting sites that brings approximately 85% of total FDMN population under surveillance. In week 25, 111 weekly reports (64%) were received by Tuesday 26 June 2018, resulting in a cumulative completeness of 68% in 2018. This week one new facility has been registered in EWARS.
- 28 alerts were triggered this week. All alerts went through initial verification within 72 hours of being triggered by WHO Epidemiology team.
- In week 25, 16 suspected measles case-patients were reported, bringing the total number of cases reported in 2018 to 1 410. WHO has started collecting samples from the suspected measles case-patients as a part of routine measles surveillance.
- 44 new case-patients with Acute Jaundice Syndrome (AJIS) were reported in week 25 which is higher than previous week (12 case-patients in week 24), bringing the total number of cases reported in 2018 to 2 355.

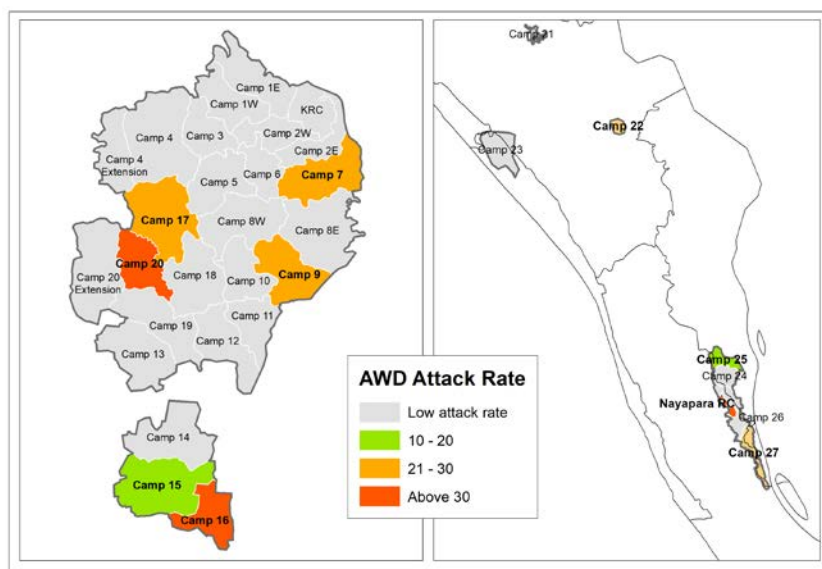


Figure 1: Camps with high AWD attack rate

- A total of 4 053 Acute Watery Diarrhea (AWD) case-patients including 9 admitted case-patients in Diarrhoea Treatment Centre) were reported in week 25, bringing the total number of reported AWD case-patients to 120 754 in 2018. An in-depth analysis on Acute Watery Diarrhoea (AWD) was done by WHO showcasing the areas with highest incidence of AWD in the camps.

- Acute respiratory infections (ARI), acute watery diarrhoea (AWD) and unexplained fever are the three leading syndromes with the highest proportional morbidity of 12.7%, 12.3% and 7.1% respectively this week. WHO team is closely monitoring these conditions as we already experienced heavy rainfall in previous weeks and also possibility of heavy rainfall in coming of weeks.
- Mobile Medical Teams (MMTs) have started reporting in EWARS from this week. Two MMTs provided their services in the camp in week 25.

DIPHTHERIA UPDATE

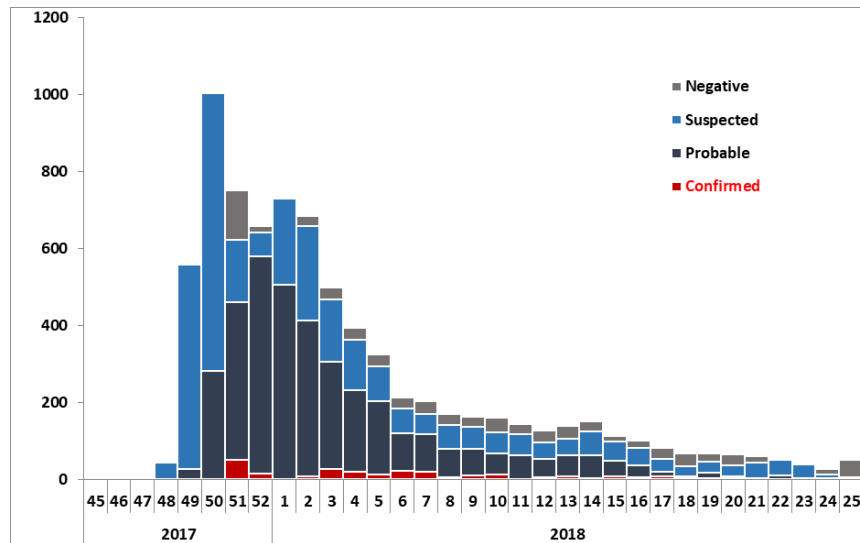


Figure 2: Epidemic curve of diphtheria cases by age groups, W49 2017 to W25 2018, Cox's Bazar

- As of 24 June 2018, there have been 7 823 diphtheria case-patients were reported through EWARS including 754 case-patients who were tested negative on PCR. This week 49 new case-patients were reported, which is higher compared to previous weeks (26 case-patients in week 24, 38 case-patients in week 23 and 52 case-patients in week 22). Among the case-patients reported this week, two of 49 who were tested were lab-

confirmed, three were suspected and 44 tested negative.

- A total of 43 diphtheria deaths have been reported in EWARS including one new death from this week (case-fatality proportion <1.0%).
- Of all diphtheria cases, 243 case-patients were laboratory confirmed, 3 604 were probable and 3225 were suspected. The last laboratory confirmed case-patient was reported on 18 June 2018.
- From host community 3 new diphtheria case-patients were reported this weeks. A total 69 diphtheria case-patients were reported from the host community so far. Among them 20 were laboratory-confirmed, 30 were probable and 19 were suspected. An additional 91 case-patients were excluded from the counts following negative laboratory testing. No diphtheria deaths have been reported from the host community.

HEALTH OPERATIONS

- The non-communicable disease (NCD) exploratory meeting was held with partners to discuss challenges and improve coordination among agencies providing care for NCDs on the ground. Lack of insulin was identified as major barrier for care of diabetic patients. Inadequate funding was highlighted as a hindrance to provision of NCD related health services.
- WHO and ICDDR,B held a meeting on 20 June 2018 and agreed to conduct a training session on AWD sample collection and transportation. The training is targeting Diarrheal Treatment Centers (DTCs) and will be held in Ukhia Complex hospital between 8-12 July 2018. Each facility will be required to send 4 members of staff.
- The house to house monitoring has revealed that 55% of the 839 children monitored did not retain their vaccination cards while 14% new-born babies were not vaccinated at birth. About 20% of the children were found not to have received any vaccination. The reasons for not being vaccinated ranged from lack of awareness, not been contacted to not knowing where to go for vaccination. To improve the number of vaccination beneficiaries, mobilization campaigns need to be strengthened and behavioral change communication (BCC) emphasized.

- An official agreement was signed this week by IRC and WHO for prepositioning of cholera kits at IRC's warehouse. All WHO prepositioning has now been completed in the North and South of Ukhia and Teknaf.
- A total of 100 vials of anti-snake venom have arrived at the Civil Surgeon's Office in Cox Bazar. It is anticipated this will be dispatched to WHO next week.
- A total of 980 doses of oseltamivir have been received in WHO Cox Bazar office. An SOP for the provision and use of the drugs to health partners is currently being developed.

COORDINATION

- Health sector continued monitoring the temporary health facility closures as well as road inaccessibility resulting from the monsoon rains. The sector continued providing daily updates to partners on incidents reported, access to roads and services.
- In efforts to maximize the use of available meagre resources and increase inter-sectoral coordination; WHO met with WASH Sector and discussed how effectively resources can be utilized to perform water quality testing during the monsoon season. The meeting also agreed on collaboration at field level between the Health and WASH focal points to ensure targeted response to the needs of the community.
- As Sector lead agency, WHO will be covering and supporting the cost of training 30 Mobile Medical Teams (MMTs) health staff on mass casualty from 2 to 5 July 2018.
- The Field Coordination team continues the routine work of coordinating at field level the sector activities with the partners, Health Focal Points, and attending the different coordination mechanisms meetings at Upazila and camp levels.

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