

# **Bangladesh**



Three training courses were conducted on screening at points of entry, reaching a total of 49 screeners

# **Emergency: Rohingya Crisis**

Situation Report #09
Date of issue: 10 June 2020
Period covered: Week 23
(1 to 7 June 2020)

Location: Cox's Bazar, Bangladesh.

	Host Community	Rohingya refugee/FDMN
Total confirmed cases in Cox's Bazar	966	30
Total person in isolation in Cox's Bazar	686	23
Total number of tests conducted	7,574	371
Total deaths due to COVID-19	20	1

<sup>\*</sup>Updated as of 7 June 2020; FDMN = Forcibly Displaced Myanmar Nationals

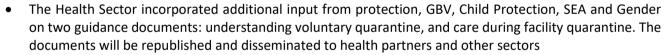
# **HIGHLIGHTS**

- A total of 996 COVID-19 positive cases have been reported in Cox's Bazar district (including Rohingya camps) as of 7 June 2020 as per Civil Surgeon Office, Cox's Bazar
- 30 confirmed cases have been reported in Rohingya camps as of 7 June 2020. A total of 36 individuals are in institutional quarantine in the camps
- The WHO is supporting the expansion of the district laboratory for increased testing for Rohingya refugees and host community. The current daily sampling capacity is around 400 samples

### **COORDINATION, PLANNING AND MONITORING:**

- WHO, together with the Ministry of Health and Family Welfare (MoHFW) and Refugee Relief and Repatriation Commissioner office (RRRC), continues to provide leadership, coordination, supportive supervision, and collaborative support to all health partners and sectors responding to the COVID-19 emergency. Weekly Strategic Advisory Group (SAG) bi-weekly meetings and Health Sector coordination meetings are held and daily updates are shared with partners
- The Health Sector's Camp Health Focal Points (CHFPs) along with camp level stakeholders, health facilities and the Dispatch and Referral Unit (DRU) are ensuring referral pathways are used to identify, detect, refer and test persons with suspected COVID-19 infection
- CHFPs are ensuring safety and security of suspected cases in close collaboration with camp authorities and community leaders. They are actively guiding and assisting the Rapid Investigation Team, CiC office, Site Management and contract tracers at camp level
- The Health Sector Gender action plan on COVID
  was discussed in the Gender In Humanitarian
  Action (GIHA) Working group meeting attended
  by Gender focal points from other sectors, UN,
  NGO and INGO partners. Health Sector SAG

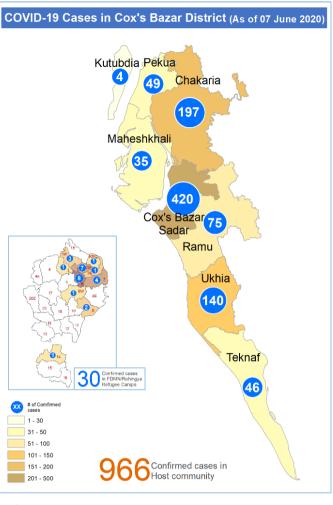
members have also provided input on the plan. The final document will be shared with health partners in the coming week



• The compilation of written feedback based on GBV quality assurance in seven PHCs conducted in March 2020 has been completed. The process of sharing individual feedback with facilities is underway

#### **RISK COMMUNICATION AND COMMUNITY ENGAGEMENT:**

- WHO continues to engage with community staff and responders working with national health authorities, and other partners, to develop, implement and monitor an effective action plan for communicating effectively with the public, engaging with communities, local partners and other stakeholders to help prepare and protect individuals, families and the public's health during the early response to COVID-19
- Messages have been developed on COVID-19 in general, risks and vulnerabilities, safe and dignified burials, home based care, isolation and quarantine, isolation and treatment centers and other issues. WHO has provided technical input to responses to rumors and community feedback through Communication with Community (CWC) mechanisms
- WHO is supporting translation of essential technical materials into local language to improve uptake of messages and support behavioral impact



- In Week 22, through the community health workers (CHW) working group (WG), 40,906 households were visited reaching 68,677 people. In addition, 673 courtyard sessions were held, reaching 3,572 people with COVID-19 prevention messages
- In the camps, 76 information service centers operated to receive feedback and complaints. CwC WG partners also organized announcements on COVID-19 awareness via loudspeakers and megaphones on CNG/Tomtom/auto-rickshaws in 18 camps
- As of 4 June, 156,658 people were reached with COVID-19 messages through 32,617 neighborhood-based sessions; 15,399 people were consulted on COVID-19 key messages through 3,660 community meetings; 337 listener group sessions were organized for 3,193 people; and 213 video/film show sessions on COVID-19 were conducted.
- Within the host community, a total of 520 people (211 males, 309 females) were reached with messages on COVID-19 through 174 IPC sessions in Pekua Upazila

# SURVEILLANCE, RAPID RESPONSE TEAMS, AND CASE INVESTIGATION:



ESIMO Teknaf conducting contact tracer training for COVID-19 in Camp 26 and NYP RC

- WHO continues to provide epidemiological data to continuously inform operational decision making for the COVID-19 response in Cox's Bazar. As of 7 June 2020, a total of 966 persons from the host community in Cox's Bazar district have tested positive for COVID-19: 197 from Chokoria, 46 from Teknaf, 35 from Maheshkhali, 420 from Sadar, 140 from Ukhia, 75 from Ramu, 49 from Pekua and four from Kutubdia
- As of 7 June, 30 cases have been reported from the camps: three from Camp 1W, one from Camp 2E, seven from 2W, one from Camp 3, eight from Camp 6, four from Camp 7, one from Camp 8W, two from Camp 9, one from Camp 14, one from Kutupalong RC and one from Nayapara RC

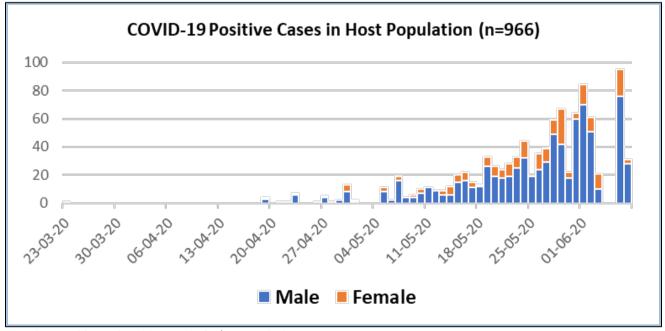


Figure 1: COVID-19 positive case in Cox's Bazar District

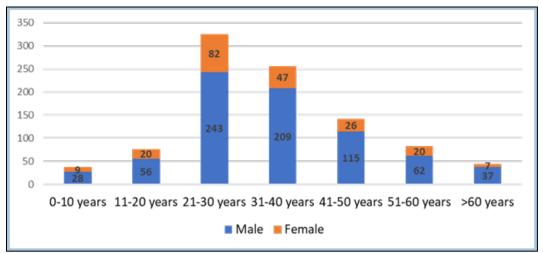


Figure 2: Age and sex distribution of COVID-19 positive cases in Cox's Bazar District

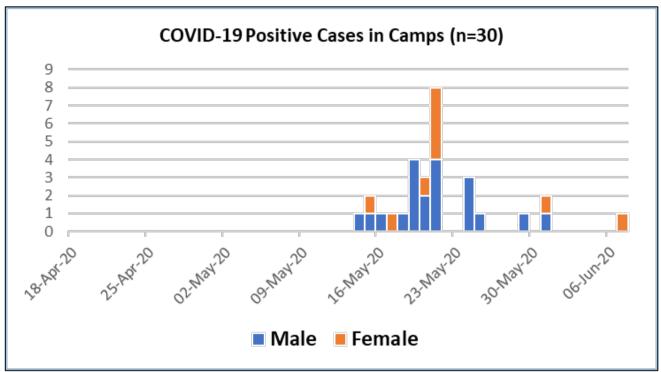


Figure 3: COVID-19 positive case in Cox's Bazar Rohingya refugee/FDMN community

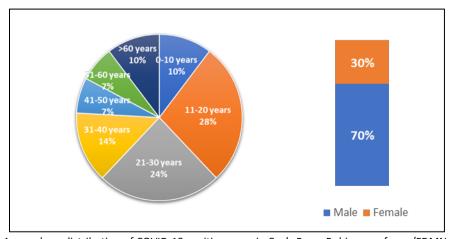


Figure 4: Age and sex distribution of COVID-19 positive cases in Cox's Bazar Rohingya refugee/FDMN community

#### **DISTRICT LABORATORY**

- WHO continues to support the Institute of Epidemiology, Disease Control and Research (IEDCR) Field
  Laboratory in the Cox's Bazar Medical College with human resources, equipment, supplies/consumables
  and technical and operational expertise. From early April until 7 June, 7,574 tests have been conducted,
  mainly for persons from Cox's Bazar district, but also parts of Bandarban and Chittagong district. As of 7
  June, a total of 966 tests were positive for COVID-19 in Cox's Bazar from the host community. So far, 371
  tests have been conducted for Rohingya refugees/Forcibly Displaced Myanmar Nationals (FDMN), with 30
  positive cases to date
- WHO is supporting the expansion of the district laboratory for increased testing for Rohingya refugees and host community. The current daily sampling capacity is around 400 samples

#### INFECTION PREVENTION AND CONTROL

- WHO is providing training, supplies and technical guidance on Infection Prevention and Control (IPC) to keep patients, staff and the general population safe. So far in 2020, 300 healthcare workers have been trained on IPC, including participants from five government facilities and 36 partner facilities. Specifically relating to COVID-19, WHO trained 43 master trainers in May 2020. During the intensive four-day training, the entire journey of a patient from the community through the Severe Acute Respiratory Infection (SARI) Isolation and Treatment Centers (ITC) until discharge is followed, with key emphasis on IPC considerations. An additional 115 health care workers successfully completed training on COVID 19 screening and introduction to isolation which supported Health posts, Primary Health Centers, Field hospitals among other facilities.
- Participants of the IPC Master Trainers training for COVID-19
  have commenced rolling out training for different categories of
  health care workers. Handwashing, screening and triage was
  initiated at entry points of Cox's Bazar Sadar Hospital following
  the training. Modules from the training have been utilized to
  train different cadres of staff within the SARI ITCs and isolation
  units reaching 984 health care workers.



IPC rollout trainings continue after WHO Master Trainers training

- WHO continues to support partners as co-facilitators/observers of internal cascade trainings conducted by the partners both remotely and on-site
- A Health Care Waste Management flowchart was finalized and is being utilized to guide partners on management of all types of waste at SARI ITCs

#### **CASE MANAGEMENT**



Second installment of ToT, providing 19 participants with clinical case management including additional modules on key subjects, with thanks to SEARO support

WHO has continued to engage in discussions with partners surrounding health care waste management options for the SARI ITCs

- As the TOTs trained earlier by WHO roll out training within their organization, WHO continues to support remotely and on-site with updated guidance and training content
- 104 staff have been trained to date in clinical case management. WHO is supporting training with updated presentations, facilitators' guide, and fully updated guidelines

 Field visits were conducted to support establishment of a mild-moderate 200 bed COVID-19 case isolation facility in Cox's Bazar Sadar; set up phases of construction of SARI ITCs have been completed in Shamlapur and Camp 4, for IRC and Hope Foundation respectively

#### MONSOON AND CYCLONE PREPAREDNESS

- Health Sector, with support from its working groups and partners, regularly updates its contingency plan
  for cyclone (April-May) and monsoon (Jun-July) seasons. Information related to health facility functionality,
  contingency supplies and locations, mobile medical teams, ambulance network and systems to respond to
  emergencies and list of camp health focal points is accessible through the health sector Google drive
- Contingency supplies such as IEHK, trauma kits, surgical kits, cholera kits, SRH kits and other supplies have been stored at 20 locations in the districts and camps. Thirty-nine 24/7 priority health facilities across the camps have been identified

#### **ESSENTIAL HEALTH SERVICES**



IVD CXB presented the RI strategy during the Health Sector Coordination meeting

- Immunizations are an essential health service to protect individuals from vaccine-preventable diseases (VPD). WHO continues to provide guidance regarding the operation and sustaining of immunization programs in the context of the COVID-19 pandemic
- A revised Routine Immunization strategy is currently under development and deliberations with government and partners are ongoing. VPD surveillance is being closely monitored by government authorities with support of WHO SIMO network
- The MHPSS working group partners including ACF, BRAC, IOM, RI, SKUS and BRRCS introduced psychosocial helpline numbers for Rohingya and host community in Cox's Bazar District as an alternative intervention modality to provide psychosocial support remotely

#### **OPERATIONAL SUPPORT AND LOGISTICS**

- Expertise and support regarding the formation of the SARI ITC of HOPE Foundation in Camp 4, Ukhiya, is ongoing, as well as follow-up support for the IRC SARI ITC in Shamlapur, Camp 23
- Additional seating space has been provided to support WHO's IPC training
- WHO has provided driver training and has distributed sanitizing items to all vehicles following the publication of guidance, in addition to rental of vehicles and training of drivers for sample collection in the camps
- Installation of a preposition storage container to assist with COVID-19 and other emergencies, such as cyclones and monsoons, is in the administration phase



Support is given to the set-up of SARI ITCs Camp 4

- Food and non-food item kits have been prepared in case of staff members testing positive for COVID-19, and 200 cloth masks have been distributed to staff
- Distribution of COVID-19 related items are continuing to be conducted on a daily basis to both government agencies and implementing partners

Support work for the IEDCR laboratory in the Cox's Bazar Medical College is ongoing

## COVID-19 HIGHLIGHTS: NATIONAL LEVEL, AS OF 9 JUNE 2020 (BANGLADESH)

	Last 24 hours	Total
COVID-19 tests conducted	14,664	425,505
COVID-19 positive cases	3,171	71,675
Number of people released/recovered	777	15,337
COVID-19 deaths	45	975

Hotline at IEDCR for COVID-19 support and information: 01927711784, 01927711785, 01937000011, 01937110011, 01401184551, 01401184554, 01401184555, 01401184556, 01401184559, 01401184560, 01401184563, 01401184568, 01550064901-5

#### **ONLINE COVID-19 Resources:**

- WHO Bangladesh awareness and risk communication materials in Bengali: https://www.who.int/bangladesh/emergencies/coronavirus-disease-(covid-19)-update
- WHO global situation report:
   <a href="https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports">https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports</a>
- WHO interim guideline on Preparedness, prevention and control of coronavirus disease (COVID-19) for refugees and migrants in non-camp settings: <a href="https://www.who.int/publications-detail/preparedness-prevention-and-control-of-coronavirus-disease-(covid-19)-for-refugees-and-migrants-in-non-camp-settings">https://www.who.int/publications-detail/preparedness-prevention-and-control-of-coronavirus-disease-(covid-19)-for-refugees-and-migrants-in-non-camp-settings</a>
- Institute of Epidemiology, Disease Control and Research (IEDCR) website for COVID-19 Bangladesh update: https://www.iedcr.gov.bd/

Write to <u>coord\_cxb@who.int</u> to receive <u>COVID-19 updates</u> and <u>situation reports</u> from Cox's Bazar with the subject "Add me to the situation reports and updates mailing list"

#### **CONTACTS**

Dr Bardan Jung Rana WHO Representative WHO Bangladesh Email: ranab@who.int Dr Kai v. Harbou Head of Sub Office WHO Cox's Bazar

Email: vonharbouk@who.int

<sup>&</sup>lt;sup>1</sup> The Government of Bangladesh refers to Rohingya as "Forcibly Displaced Myanmar Nationals". The UN system refers to this population as Rohingya refugees, in line with the applicable international framework. In this document both term are used, as appropriate, to refer to the same population.