### Tested vs Confirmed vs Recovered vs Dead

<table>
<thead>
<tr>
<th></th>
<th>Tested</th>
<th>Confirmed</th>
<th>Recovered</th>
<th>Dead</th>
<th>Hotline</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1,456,038</td>
<td>297,083</td>
<td>182,876</td>
<td>3,983</td>
<td>19.4 million</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Test/1 million</th>
<th>New Cases</th>
<th>Recovery Rate</th>
<th>IFR%</th>
<th>AR/1 million</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>8,550</td>
<td>2,485</td>
<td>61.6%</td>
<td>1.34%</td>
<td>1,744</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Laboratories</th>
<th>PPE Stock</th>
<th>PoE Screening</th>
</tr>
</thead>
<tbody>
<tr>
<td>91 COVID-19 Labs</td>
<td>948,176</td>
<td>446,353</td>
</tr>
<tr>
<td>91,849 Samples</td>
<td>3,043,039</td>
<td>33,788</td>
</tr>
<tr>
<td>59.8% Inside Dhaka Tests</td>
<td>120,283</td>
<td>7,029</td>
</tr>
<tr>
<td>20.4% Positive Tests</td>
<td>1,248,360</td>
<td>364,187</td>
</tr>
</tbody>
</table>

Photo: A mother with her child at Korail slum in Dhaka — WFP photo from The Financial Express
1. Coordination

On 21 August 2020, WHO published annex to the *Advice on the use of masks in the context of COVID-19* titled *Advice on the use of masks for children in the community in the context of COVID-19*. According to the limited available evidence, young children may have lower susceptibility to infection compared to adults, however available data suggests that this may vary by age among children. Data from sero-epidemiology studies and transmission studies suggest that older children (e.g. teenagers) may play a more active role in transmission than younger children. The benefits of wearing masks in children for COVID-19 control should be weighed against potential harm associated with wearing masks, including feasibility and discomfort, as well as social and communication concerns. Factors to consider also include age groups, sociocultural and contextual considerations and availability of adult supervision and other resources to prevent transmission. WHO and UNICEF advise decision makers to apply some criteria for use of masks in children when developing national policies, in countries or areas where there is known or suspected community transmission of SARS-CoV-2 and in settings where physical distancing cannot be achieved. Full document: https://www.who.int/publications/i/item/WHO-2019-nCoV-IPC_Masks-Children-2020.1

On 19 August 2020, WHO published an interim guidance, *Considerations for quarantine of contacts of COVID-19 cases* which is an update of interim guidance entitled Considerations for quarantine of individuals in the context of containment for coronavirus disease (COVID-19), published on 19 March 2020. It includes, Policy considerations for the quarantine of contacts of COVID-19 cases; Who should be quarantined; Recommendations for implementing quarantine; Ensuring an appropriate setting and adequate provisions; How to estimate airflow and air change per hour (ACH); Infection prevention and control measures; and Requirements for monitoring the health of quarantined persons. Full document: https://www.who.int/publications/i/item/considerations-for-quarantine-of-individuals-in-the-context-of-containment-for-coronavirus-disease-(covid-19)

2. Surveillance and Laboratories

Between 9 March and 24 August 2020, according to the Institute of Epidemiology, Disease Control and Research (IEDCR) there were two-hundred-ninety-seven-thousand-eighty-three (297,083) COVID-19 confirmed by rt-PCR, including three thousand-nine-hundred-eighty-three (3,983) related deaths (IFR 1.34%)

1 IFR refers to ‘Infection Fatality Ratio’ which can describe the true severity of a disease

![Graph showing daily distribution of reported confirmed COVID-19 cases and deaths, 08 March – 24 August 2020, Bangladesh.](image-url)
In the reported week (epidemiological week 34), in comparison to the previous epidemiological week, the number of new weekly COVID-19 cases decreased by 4.8% (18,049 in week 34 and 18,949 in the previous week) and the number of COVID-19 new weekly deaths increased by 10.1% (284 and 258 respectively), leading the IFR to go up from 1.32% in epidemiological week 34 to 1.34% in the current week.

The figure below is showing the weekly distribution of reported confirmed COVID-19 cases and deaths, 08 March – 24 August 2020, Bangladesh.

Out of the total 297,083 COVID-19 cases registered as of 24 August 2020, 61.6% (182,875) - recovered, 1.34% (3,694) - died and 37.1% (110,225) are active cases.

The figure below is showing active vs recovered confirmed COVID-19 cases outcomes per epidemiological week, 08 March – 24 August 2020, Bangladesh.
In the epidemiological week 34, the number of COVID-19 active cases increased by 3.3%, in comparison to the previous week (114,280 and 110,593) and at the same time, the number of recovered COVID-19 cases increased by 90.4% (20,141 and 10,580 respectively).

**The figure below is showing the weekly recovery of the reported confirmed COVID-19 cases, 09 March – 24 August 2020, Bangladesh.**

As of 24 August 2020, 26.9% cases were confirmed in people between 31 and 40 years old, 20.5% - in the age group of 21 to 30, 18.8% - 41 to 50 years and 15.0% - in the age group between 51 and 60 years old. The highest death rate (31%) was reported in the age group of 61 to 70 years old, 26.7% in the older age group of 71 and above and 23.7% - in the age group between 51 and 60 years. Male represented 72% and 79% of the of total reported confirmed COVID-19 cases and deaths respectively.

**The figure below is showing geographical and age-sex distribution of the reported confirmed COVID-19 deaths, 24 August 2020, Bangladesh.**
As of 24 August 2020, 63.9% of reported cases were from Dhaka division, 13.8% from Chattogram, 5.8% from Khulna, 5.7% - from Rajshahi, 3.3% - from Sylhet, 3.2% - from Rangpur, 2.4% from Barishal and the lowest 1.9% from Mymensingh division.

The figure below is showing the daily distribution of reported confirmed COVID-19 cases per division, 04 May – 24 August 2020.

On 24 August 2020, Bangladesh overall attack rate (AR) is 1,744 per 1 million and 100% (64/64) of districts with the total population of 170,306,468 people have reported confirmed COVID-19 cases. In the reported week (epidemiological week 34), COVID-19 weekly AR increased by 6.5% in comparison to the previous week (1,729 and 1,624 respectively).

The figure below is showing the daily increase in COVID-19 overall attack rate (AR) per 1,000,000, 08 March – 24 August 2020, Bangladesh.
According to the available data as on 24 August 2020, the highest AR continues to be observed in the Dhaka division (4,408/1,000,000). Within the Dhaka division, Dhaka city has the highest AR (18,039/1,000,000) followed by Dhaka City (18,039), Faridpur (2,736), Rajbari (1,901.4), Narayanganj (1,796), Munshiganj (1,792), Gopalganj (1,630), Gazipur (1,169), Shariatpur (1,086), Madaripur (955), Narsingdi (747), Dhaka (District) (743), Kishoreganj (706), Manikganj (656) and the lowest AR 552 was reported from Tangail district.

The 2nd highest COVID-19 AR is reported from Chattogram division (1,222/1,000,000). Within the division, Chattogram district reported the highest AR (1,835/1,000,000) followed Cox’s Bazar (1,436), Bandarban (1,433), Noakhali (1,164), Rangamati (1,128), Cumilla (1,028), Feni (956), Lakshmipur (896), Khagrachhari (849), Chandpur (731), and the lowest AR 659 was reported from Brahmanbaria district.

The 3rd highest AR in the country was reported from Khulna division (927/1,000,000) while the highest AR district is Jhenaidah (1644/1,000,000) followed by Magura (1,627), Meherpur (1,071), Khulna (1,044), Narail (967), Satkhira (949.3), Chuadanga (883), Jashore (585), Bagerhat (574) and the lowest 498 in Kushtia district.

Sylhet division has taken the fourth highest in the overall AR with (836/1,000,000) with the highest AR in Sylhet district (1,368/100,000) followed by Sunamganj (647), Maulvibazar (593) and 549 in Habiganj district. Rajshahi division has overall AR 774/1,000,000 with the highest AR in Bogura district (1,569/1000000), followed by Rajshahi (1417), Joypurhat (831), Sirajganj (505), Natore (404), Naogaon (361), Chapainawabganj (329) and Pabna district is the lowest at 322/1,000,000. In Barishal division the overall AR is 732/1,000,000 with the highest AR in Barishal district (1,100/1,000,000), while, Barguna (762), Jhalokathi (736), Pirojpur (692), Patuakhali (690), and the lowest 295 in Bhol district.

The lowest AR is reported from Mymensingh division (430/1,000,000). Mymensingh district having the highest AR of 538/1,000,000 followed by Jamalpur (467), Netrakona (257) and the lowest 245 in Sherpur district.

As of 24 August 2020, according to the IEDCR, 1,456,038 COVID-19 tests with the overall positivity rate of 20.4% were conducted in Bangladesh by 91 laboratories: 54 laboratories (59.3%) in Dhaka city and 37 laboratories (40.7%) outside Dhaka. The latest 4 laboratories, which have started the testing this week are National Tuberculosis Reference Laboratory, Dhaka; 250 Bedded TB Hospital, Shyamoli, Dhaka; Border Guard Hospital, Pilkhana, Dhaka; and Al Jami Diagnostic Center, Dhaka. 59.8% (870,258/ 1,456,038) of all samples were tested by laboratories in the Dhaka city.

The graph below is showing the comparison between the average number of samples tested and average number of confirmed COVID-19 cases, 08 March – 24 August 2020, Bangladesh.
According to DGHS, as of 24 August 2020, the current institutional quarantine capacity in the country is represented by 629 centres across the 64 districts, which can receive 31,991 persons. A total of 29,493 individuals were placed in quarantine facilities and of them 24,115 (81.8%) have been already released. Over the same period, total of 67,227 individuals were isolated in designated health facilitates and of them 46,940 (69.8%) have been released.

The figure below is showing the number of individuals in hospital isolation and released, 04 May – 24 August 2020, Bangladesh.

In the reported week (epidemiological week 34), the number of international flights has increased by 19.7%, in comparison to the previous week (85 and 71 respectively) leading to increase in the number of passengers by 36.9% (18,958 and 13,851 respectively).

The figure below is showing the weekly incoming international flights and number arrived of passengers, 27 April – 24 August 2020, Bangladesh.
3. Case Management and Infection Control

On 22 August 2020, WHO published the updated Emergency Global Supply Chain System (COVID-19) Catalogue. The items in this catalogue represent an initial prioritized selection of items and are subject to constant review. Nothing in this catalogue should be construed as offer or guarantee for allocation of supplies. Item costs are estimates only. Full document: https://www.who.int/publications/i/item/emergency-global-supply-chain-system-(covid-19)-catalogue.

4. Risk Communication and Public Awareness

RCCE partners continue the dissemination of messages regarding COVID-19 protection measures and are constantly scaling up direct communication with communities through a variety of channels, including a network of 160 Non-Governmental Organizations (NGOs) activating across the country. The increased focus on offline communication aim to cover remote communities and individuals with limited or no internet access that are more susceptible to adhere to promoted protection measures through direct two-way communication, rather than one-way messages distributed through online channels and traditional media.

Furthermore, the need of direct interpersonal communication has been emphasized through Community Support Teams (CST), an initiative of humanitarian and development partners rolled out at field. CST aim to slow COVID-19 spread reduce burden on the healthcare system by supporting home-based treatment and management of mild to moderate cases through telemedicine and medication support of low-income households. To respond to adequate needs of interpersonal communication skills, CST volunteers are trained on this area to better engage with individuals and communities and to advocate for behavioral change that leads to appropriate following of public recommendations in terms of quarantine/isolation of confirmed and suspected persons as well as regarding the other protection measures.

For amplifying messages at field level, RCCE partners also work closely with Islamic Foundation and other religious associations that are actively distributing in information among communities through speakers from mosques as well as through direct communication with worshippers.

5. Useful links doe more information

- COVID-19 Situation in the WHO South-East Asia Region: https://experience.arcgis.com/experience/56d2642cb379485ebf78371e744b8c6a
- WHO Bangladesh awareness and risk communication materials in Bengali: https://www.who.int/bangladesh/emergencies/coronavirus-disease-(covid-19)-update
- COVID-19 WHO Online Training modules: https://openwho.org/channels/covid-19
- Institute of Epidemiology, Disease Control and Research (IEDCR): https://iedcr.gov.bd/covid-19/covid-19-situation-updates