



World Health Organization

Bangladesh

Weekly Situation Report # 9

Date of issue: 6 January 2018

Period covered: 31 December – 6 January

Location: Bangladesh

Emergency type: **Rohingya Refugee Crisis**



868 051
total Rohingya
in Bangladesh



655 500
new arrivals since
25 Aug 2017



149 962 children aged under 7
years vaccinated with pentavalent,
pneumococcal, and bivalent oral
polio vaccines.



165 927 children
under 15 years were
vaccinated with Td
vaccine.



1.2 million
people targeted for
humanitarian assistance

KEY HIGHLIGHTS

- As of 6 January 2018, a total of 3 523 cases clinically suspected with diphtheria and 58 laboratory confirmed cases (out of 185 cases tested) have been reported. 104 clinically suspected cases were admitted at diphtheria treatment facilities on 6 January 2018. A total of 30 deaths have been recorded so far. The last reported death was on 2 January.
- Preparations are underway for the second round of Penta/Td vaccination for Forcibly Displaced Myanmar Nationals (FDMN), which will occur in January.
- A vaccination campaign targeting children in the host community was held on 02 January during free book distribution day across 104 schools in Ukhia. A total of 29 377 children were vaccinated - 6 514 children 6 weeks to under 7 were vaccinated with pentavalent vaccine and 22 823 children 7 to 15 years were vaccinated with Td.
- The upgraded EWARS system was launched on 1 January. Training is ongoing for DGHS representatives, agency focal points, health facilities, and diphtheria treatment centres to transition reporting to the revised system.

SITUATION OVERVIEW

Since 25 August 2017, an estimated 655 500 Rohingya have crossed the border into Cox's Bazar, joining approximately 300 000 others who had fled in earlier waves of displacement. Respiratory infection, skin disease, and acute watery diarrhea risks remain high with increasingly crowded living conditions, inadequate water and sanitation (WASH) facilities, and low vaccination coverage.

As of 06 January 2017 over 548 000 arrivals are in Kutupalong Balukhali expansion site, 242 000 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 SITUATION

- As of 6 January 2018, a total of 3 523 cases clinically suspected with diphtheria and 58 laboratory confirmed cases (out of 185 cases tested) have been reported. 104 clinically suspected cases were admitted at diphtheria treatment facilities on 6 January 2018. A total of 30 deaths have been recorded so far. The last reported death was on 2 January.
- A total of 19 cases suspected with diphtheria were host nationals. The DGHS is leading investigations with support from WHO.
- The Civil Surgeon Office is leading investigations for circumcisions occurring in the camp areas following 28 reported infections among boys who were subsequently treated at MSF clinic.
- The Early Warning and Alert System (EWARS), established in August 2017, has been strengthened to provide surveillance for a number of diseases and notify focal points when there is a need to investigate an alert. The upgraded EWARS system was launched on 1 January and training is ongoing for DGHS representatives, agency focal points, health facilities, and diphtheria treatment centres to transition to the new online weekly reporting system.
- From epidemiological week 45 to 52 of 2017, there were 2092 suspect cases of measles/rubella, 22 cases of suspected meningitis, 434 cases of suspected jaundice, and 316 cases of confirmed malaria.

WATER, SANITATION, AND HYGIENE

- A joint assessment has been developed to review WASH and Infection Prevention and Control (IPC) in health facilities inside the camps. The assessment will support development of training materials for hospital staff to ensure practical WASH and IPC standards as well as implementation of priority interventions.

VACCINATION CAMPAIGNS AND ROUTINE IMMUNIZATION

- The first round of vaccination campaigns for diphtheria targeting children under 15 years in Rohingya camps took place in Ukhia and Teknaf Upazilas from 12 to 31 December and Naikhongchhari Upazila of Bandarban district from 26 to 27 December.
- 81% coverage was achieved for children between 6 weeks to 7 years (149 962 children) and 96.4% coverage for children 7 to under 15 years (165 927 children). Preparations are underway for the second round of Penta/Td vaccination for Forcibly Displaced Myanmar Nationals (FDMN), which will occur in January.
- A vaccination campaign targeting children in the host community was held on 02 January during free book distribution day across 104 schools in Ukhia. A total of 29 377 children were vaccinated - 6 514 children 6 weeks to under 7 were vaccinated with pentavalent vaccine and 22 823 children 7 to 15 years were vaccinated with Td.
- School vaccination for host community children was postponed in Ukhia and Teknaf due to a nationwide strike of health assistants in the country. The Penta/Td vaccination campaign in schools is scheduled to resume for remaining educational institutions from 13-17 January 2018.
- An operational plan has been developed for vaccination of close contacts of diphtheria cases to begin in early January. Training is underway for vaccinators.

REFERRALS

- Operational guidance for prevention of diphtheria and other epidemic prone diseases in learning centres, madrasas, and child friendly spaces has been developed and shared with partners. Guidance will be implemented to strengthen existing referral mechanisms and ensure prompt care for sick children from these centres.
- A revised strategy to optimize patient referrals to new diphtheria treatment centres has been disseminated for implementation in order to reduce the volume of diphtheria admissions at MSF diphtheria treatment centres and support these facilities to resume normal operations.

REVIEW OF HOSPITAL SERVICES

- WHO is supporting an assessment of hospital services for three referral hospitals located outside the camps in order to strengthen services in light of the influx of FDMN since August.
- Rapid operational IPC guidance is in development for health facilities for resource limited camp settings. IPC training modules have been disseminated to partners to ensure adequate IPC measures are in place in order to curtail the spread of infection among health workers, patients, and patients' caregivers.

RISK COMMUNICATIONS AND COMMUNITY ENGAGEMENT

- The Risk Communications and Community Engagement (RCCE) pillar of the District Core Committee Task Force revised the Joint UNICEF and WHO RCCE operational plan for the diphtheria outbreak response.
- The Communication with Communities (CwC) working group conducted a review of communication strategies implemented during the first round of vaccination for Rohingya children and vaccination for the host community among school children.
- The strategy for the second round of vaccinations has been revised in collaboration with WHO, CDC, UNICEF and other partners based on recommendations from the communications strategy review and observations from field vaccination teams.
- WHO and BBC Media Action are developing new audio message recordings and a dissemination plan for the second round of vaccinations.
- Infection prevention guidance for teachers and community volunteers at learning centres, madrasas, child friendly spaces, and child care centres has been revised in collaboration with education and protection sector focal points.

LOGISTICS

- WHO continues to support the provision of medical supplies, equipment, and medication for partners opening new diphtheria treatment facilities through the coordination of national and international shipments.
- Provisions of Diphtheria Antitoxin (DAT) to diphtheria treatment centres is ongoing in close collaboration with WHO case management teams to ensure medical staff have received adequate training on DAT administration.

COORDINATION

- Partners are working to establish a new operational plan for 2018. On 19 December an expert consultation workshop has been held among partners of the Strategic Advisory Group to address guidelines for Joint Response Plan Strategy. The draft Joint Response Plan has been shared with partners and reviewed by the Strategic Advisory Group for further development.
- The District Diphtheria Core Committee continues to meet regularly to prioritize actions and implement harmonized interventions. The Core Committee highlighted host community concerns about diphtheria and encouraged vaccination campaigns for the host population.
- Photo essays have been published on the WHO website to highlight vaccination campaigns in host community schools.

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