

Situation Report: Dec 2022

WHO Cox's Bazar: Rohingya emergency crisis

Coordination and Leadership

In December 2022, the health sector completed its annual Health Cluster Coordination Performance Monitoring in collaboration with the Global Health Cluster. The CCPM is a self-assessment of the sector performance against the six core-cluster functions and the principle of Accountability to Affected Populations. It reviews cluster functions to see if they are being implemented adequately in support of the delivery of the strategic response plan. The exercise was conducted as a cross-section survey in Dec 2023 and drew responses from 28 out of 35 purposively sampled respondents. An initial report is under review, due to be discussed by the health sector SAG and health sector partners before a final report is produced by end of January 2023.

Information management and epidemiology

The **COVID-19** pandemic seems under control in Cox's Bazar as we have sustained zero weekly caseloads for the past two weeks among the FDMN population and three weeks for the host population. Test positivity rates dropped from 0.9% in November to 0.1% in December. **Cholera** and **dengue** cases also continue to decline. Cholera has dropped to only two cases and dengue saw a dramatic reduction from 540 in November to 356 in December.

The health sector has reported a rise in skin infections, particularly scabies, in camps 14, 15, 22 and 26. WHO epidemiology convened a special scabies session in its biweekly technical working group to outline response action.

Epidemiology has also been working with WHO IVD teams to finalise a draft of diphtheria surveillance protocols which have been circulated to stakeholders before dissemination to the health sector. In addition, the team has facilitated EWARS training for 138 healthcare workers, including clinicians, nurses and reporting officers.

Immunization

Children under the age of two have received over 500,000 different antigens in 2022. In December, WHO IVD teams delivered 16,508 vaccinations against polio (OPV and fIPV) and 6,034 against measles (MR). A second round of the Penta and Td vaccination campaigns is scheduled to run from Jan 10 to Jan 30 in response to a diphtheria outbreak in the FDMN population.

Health operations & technical (response)

Non-communicable disease

Throughout December, WHO launched a series of residential training-of-trainers sessions on the WHO Bangladesh Package of Essential Non-communicable diseases (NCDs). The team organised four batches of four-day training that covered behavioural and metabolic risk factors, as well as motivational counselling for NCDs and implementation in primary healthcare settings. A further four batches of two-day training focussed on NCD screening and behavioural interventions.

Clinical case management

Bed occupancy rates for SARI ITC facilities in December averaged 22% (Ukhiya 18% and Teknaf 30%), with 51% registered as severe cases. Capacities to manage COVID-19 patients are still being maintained.

Essential lab services

By the end of the year, over 90% of selected health facilities have been assessed on Laboratory quality management. The results will inform essential lab services planning for 2023.

The COVID-19 testing laboratory successfully conducted 1994 tests in preparation for the Prime Minister's visit to Cox's Bazar. The Lab continues to offer RT PCR testing for the population in the Rohingya camps and entire the Cox's Bazar district.

Health operations & technical (services)

Tuberculosis

TB technologists conducted 210 microscopic tests in Ramu and Pekua for TB diagnosis. A total of 145 x-rays were completed for TB suspects and other chest diseases at Pekua UHC. During the month, TB field assistants reached over 580 people and conducted 12 field sessions for a community awareness program in the FDMN camps and host community. They distributed sputum collection pots to suspected TB patients and referred them to the BRAC health facility for further testing. TB coordinators also conducted a meeting with partners of the National TB Control Program (NTP).

Emergency preparedness and response

In collaboration with IOM, WHO organized five batches of two-day training on Basic First Aid for healthcare workers. A total of 97 participants (Medical Doctors, Medical assistants, and nurses) participated in the training programmes.

Healthcare waste management

WHO continues to support the Government of Bangladesh in the management of Health Care Waste by providing technical guidance, capacity building and distribution of Personal Protective Equipment for hazardous waste handlers. In December, WHO distributed biohazard bags, safety shoes, coveralls, gloves, weighing scales and fire extinguishers to health facilities. The team also provided technical support to establish waste zones at the Turkish Hospital in Camp 9 and TDH Hospital in camps 26 and 27.

WASH

A technical evaluation of RFP bids to conduct WASH FIT activities has been completed by the Technical Evaluation Committee (TEC). The financial bidding process will be opened soon. After a final evaluation, the assignment will be awarded.

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Administration, finance and logistics

The WHO fleet has collected COVID-19, diphtheria and dengue samples from all 33 camps and brought them to the Institute of Epidemiology Disease Control and Research (IEDCR). The fleet also provided support for research study activities, as well as the IVD team and OSL units.

WHO has provided 2100 packs of flock swabs, as well as vacutainers and zip-lock bags in support of COVID-19 sample collection. We have also donated 2400 COVID-19 RDTs to the IEDCR, Civil Surgeon's Office and three partners. We delivered a further 1989 kilos of consumables, including RDTs, IEHK kits, TESK kits, medicines and devices to ten more partners. Finally, under the Health, Gender and Support project, WHO dispatched 887 kilos of laboratory consumables, NCD medicines and RDTs to both camp and community health centres.

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