



## PEOPLE AFFECTED

**1.3 million people**

in need of health assistance

**US\$ 113.1 million**

Health sector requirements under the 2018 Joint Response Plan

**US\$ 16.5 million**

Required by WHO for its health response in Cox's Bazar

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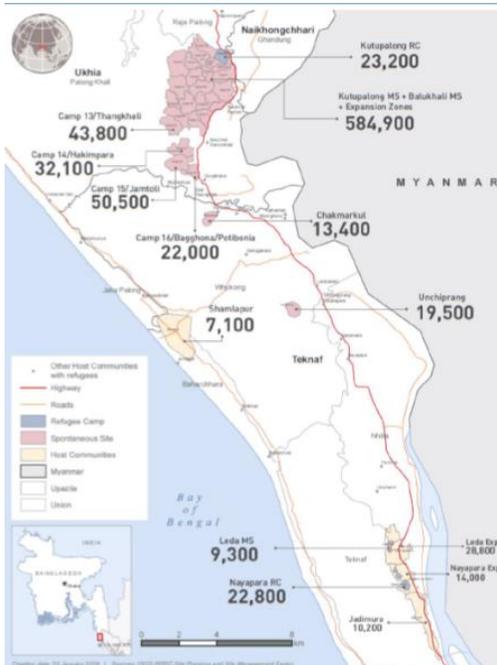
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BANGLADESH: COX'S BAZAR REFUGEE POPULATION AS OF 21 JANUARY 2018



## Without a rapid comprehensive health response, there will be massive loss of life during monsoon

WHO and partners are working around the clock to provide life-saving health services, including vaccinations, to the nearly 1.3 million people living in the camps/settlements in Cox's Bazar, Bangladesh (nearly one million new and old Rohingya arrivals and 300 000 people in the host communities).

During the past six months, WHO and its partners including the Government and humanitarian agencies have averted a major disease outbreak. However, the imminent and unavoidable monsoon season presents significant risks of flooding and landslides which may lead to disease outbreaks, and mass casualties, as well as a sharp increase in the number of maternal and newborn deaths. **There is an urgent need for investment in preparedness measures to avert a future health catastrophe.**

## Key achievements to date

- **Coordination of the Health Sector** with over 100 partners
- **Established Early Warning Alert and Response System (EWARS)** in 155 health facilities: over **98% of total health facilities covered**
- Led the planning and roll-out of **7 mass immunization campaigns**, including one of the **world's largest Oral Cholera Vaccination campaigns**
- Provided **125 tons of essential medicines**, supplies and equipment
- Conducted **infection, prevention and control and WASH surveys** in 194 out-patient and primary health care facilities
- Provided **timely information and mapping** on health service availability
- Supported **4 rounds of water quality surveillance** and sanitary inspection
- **Procurement of essential psychiatric medicines** and **conducted mental health training** for non-specialists working in Cox's Bazar
- Drafted and coordinated the **Emergency Preparedness & Response Plan**



## WHO Presence in Bangladesh

- WHO has been working in Bangladesh since 1972, covering health across the whole country
- For the Rohingya crisis, WHO operates from its offices in Dhaka and Cox's Bazar
- WHO has more than 250 personnel in the country (approximately 25% of whom are currently based in Cox's Bazar); rapidly deploying staff from around the country to help with the immediate response
- In the past 6 months nearly 100 WHO experts and partners have been deployed to support WHO's response to the Rohingya crisis

## Health Sector Objectives

In 2018, the Health Sector is reprioritizing its response, with primary focus on helping the most vulnerable: children under five, pregnant and lactating mothers and refugees suffering from chronic conditions.

- 1) Improve access to lifesaving and comprehensive primary and secondary health services
- 2) Provide essential reproductive, maternal, neonatal and adolescent health care
- 3) Ensure the prevention of and response to disease outbreaks with epidemic potential and other health emergencies
- 4) Lead health sector coordination and information to improve the overall humanitarian health response

## Major health risks and challenges

- **Upcoming monsoon** presents **high risks of water- and vector-borne** and other communicable diseases
- Prevention and treatment of **diphtheria**, 6 460 suspected cases and 40 reported deaths have been reported as of 31 March 2018 (CFR < 1%)
- **Poor and overcrowded living conditions** expose the Rohingya to further health risks, compounded by **insufficient food and dire water/sanitation**
- **Acute jaundice syndrome, acute respiratory infection and acute watery diarrhoea** are most commonly reported diseases through WHO's Early Warning Alert & Response System (EWARS)
- **Acute malnutrition and anaemia** rates above emergency thresholds
- Approximately **60 000 women estimated to be pregnant** and requiring basic or comprehensive emergency obstetric care (only 22% reported to be using health facilities to give birth)
- **Mental health and psychosocial support** services remain a priority
- **Limited laboratory capacity** to detect disease outbreaks

## WHO planned Interventions in 2018

WHO is committed to saving lives and reducing suffering among the Rohingya and host communities. As Co-lead of the Health Sector, WHO works alongside the Ministry of Health and Family Welfare to coordinate the activities of more than 100 active partners across the country and to develop and disseminate health information products, including situation reports, epidemiological/EWARS bulletins, health sector bulletins, evolving health risks, population needs and mapping of access to services.

**In addition to coordinating the broader health response, WHO's specific role under the 2018 Joint Response Plan includes:**

- **Strengthening communicable disease prevention, detection and control by improving disease surveillance and immunization coverage to contain potential outbreaks of life-threatening diseases.**
- **Ensuring timely access to essential life-saving health services including:**
  - ✓ Providing emergency health kits, reagents and medical supplies to adequately equip health facilities and clinics;
  - ✓ Establishing supply chain & cold chain mechanisms as/where needed;
  - ✓ Developing guidelines, building capacity and improving access to mental health and psychosocial support services;
  - ✓ Coordinating with Nutrition Sector and Health Sector partners on integration of in-patient severe acute malnutrition support at the primary health care level;
  - ✓ Setting up and strengthening referral mechanisms;
  - ✓ Training health workers/partners on EWARS and case management;
  - ✓ Providing treatment of communicable and noncommunicable diseases, and more.