

COVID-19 pandemic response

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4 November, 2020





COVID-19 in Bangladesh

- March 8, first COVID-19 confirm case
- March 9, government confirms first death
- Government declared general holidays from March 26, further extended up to May 30, 2020
- More than four hundred thousand confirmed cases of COVID-19 identified till October 2020 with above five thousand deaths



Bangladesh Response to COVID-19

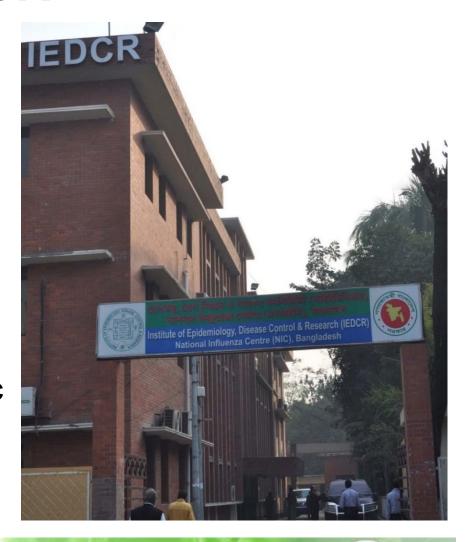
- IHR focal institute IEDCR, under MoH&FW responded at the early stage of world wide spread COVID-19
- COVID-19 control room at IEDCR
- Regular press briefing, health bulletin, guideline developed by IEDCR with the support from DGHS
- IEDCR initiated routine laboratory testing from January 2020
- 24/7 sample collection strategy from hospitals and home initiated from suspected cases
- Ensure quarantine of the passengers from abroad
- Case investigation, isolation and contact tracing by IEDCR team including FETP,B graduates and fellows





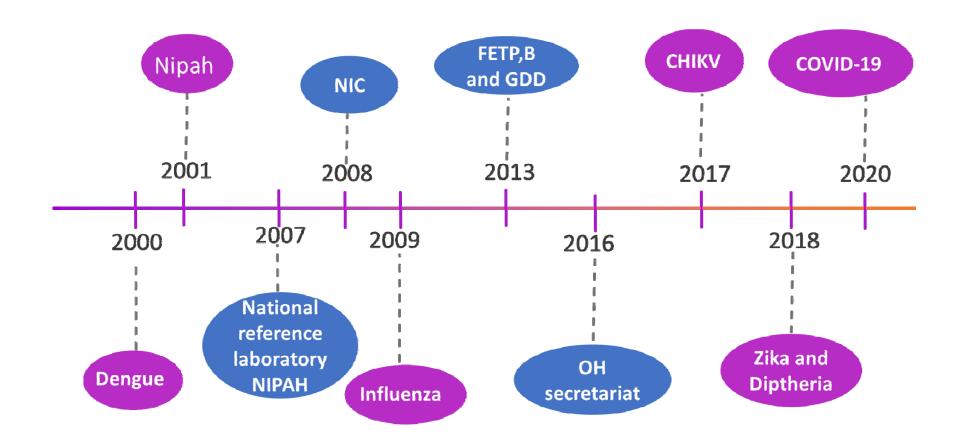
IEDCR

- Epidemiological institute
- Established in 1976
- Transformation from the Malaria Institute to a comprehensive multi-centric research institute





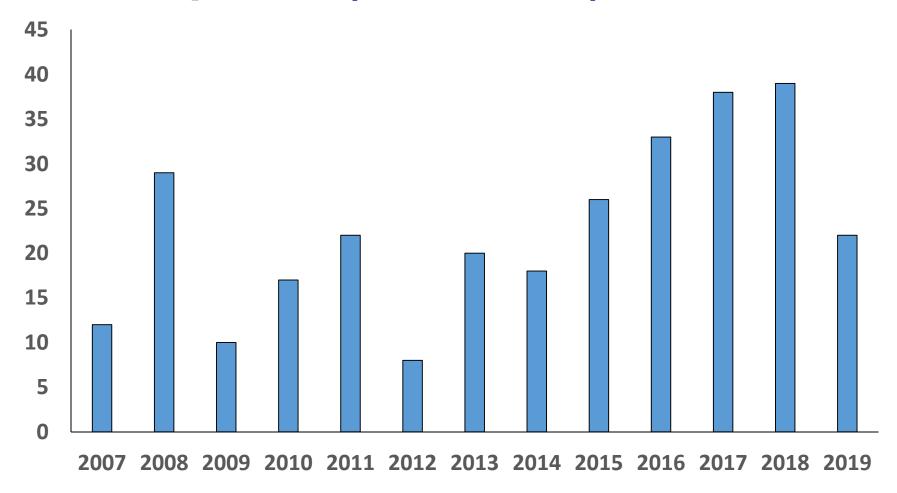
IEDCR's Milestone







Outbreak investigation and response (2007-2019), IEDCR





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COVID-19 response: Workforce at IEDCR in action

- Team formed- IEDCR's trained workforce including field epidemiologist (FETP,B graduates and fellows)
- Activities prior COVID-19 case identification
 - Development of guidelines, IEC material
 - Event based surveillance (Hotlines)
 - Screening and follow up of passengers
 - Quarantine activities





Glimpse of activities









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COVID-19 response: Workforce at IEDCR in action

- Activities after COVID-19 case confirmation
 - National COVID-19 database
 - Case investigation and contact tracing
 - Cluster investigation and active case search
 - Implement containment strategy
 - Epidemiological support to districts
 - Nationwide training on contact tracing
 - Research activities



Glimpse of activities











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Implement Containment Strategy, March 2020

- Cluster of COVID-19 cases leads to rapid containment at Shibchar, Madaripur
- Summary activities
 - Restricted movement (Entry and exit)
 - Community mobilization
 - Active case search
 - Isolation and quarantine
 - Ensure emergency services



Implement Containment Strategy

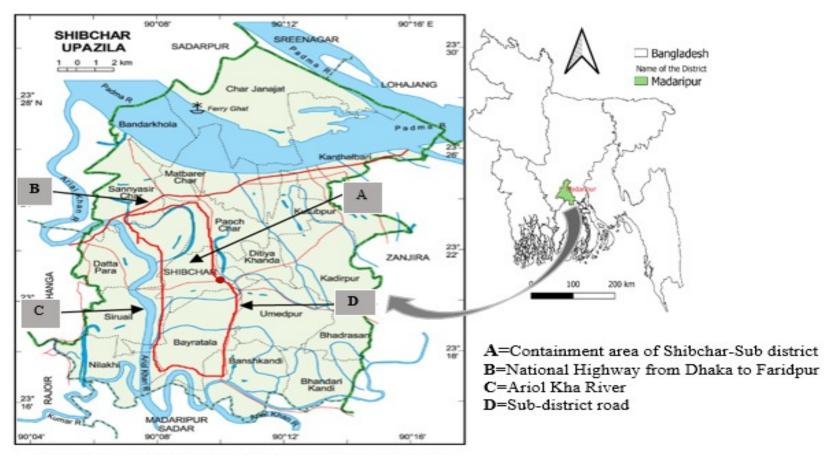
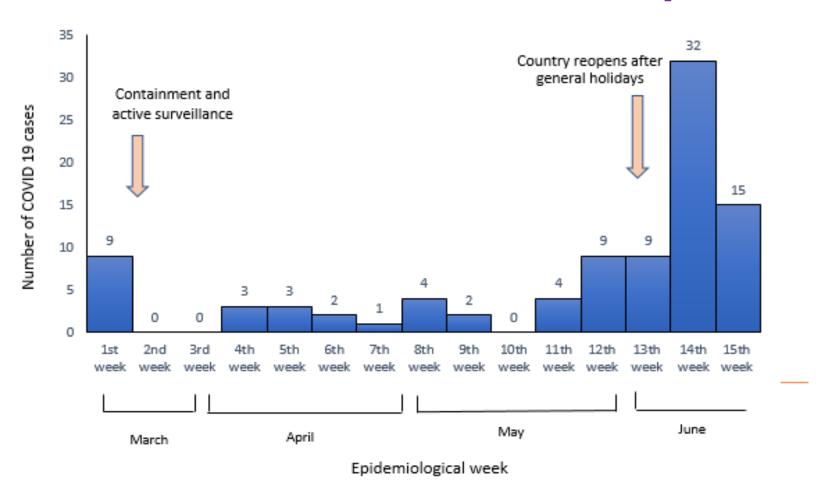


Figure-2: Map showing the containment area of Shibchar Upazila of Madaripur District, Bangladesh





Epi curve of COVID-19 confirmed cases at Shibchar, Madaripur

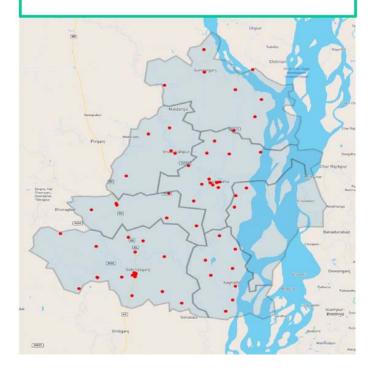






Weekly mapping of COVID-19 cases







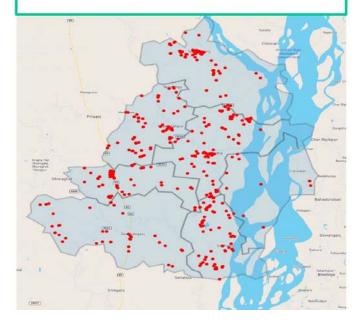








Symptomatic cases in Gaibandha district





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Trained workforce and public health impact

- Emerging and reemerging diseases are now a big concern in public health
- COVID-19 put forward again the necessity of trained public health workforce
- Country specific capacity building will enhance the global coordination in combating the diseases



Bangladesh public health institutes

- National Institute of Preventive and Social Medicine (NIPSOM)
- Institute of Public Health (IPH)
- Institute of Public Health & Nutrition (IPHN)
- Institute of Epidemiology, Disease Control and Research (IEDCR)



IEDCR leading public health from the front

- Only institute has the capacity for outbreak investigation and response
- Each year a number of training programs organized to strengthen the capacity
- Every year trained field epidemiologist added to public health workforce through FETP,B advance
- Workforce developed through short courses facilitate outbreak response at local level



Challenges

- Community false perception
 - Fear of isolation
 - Kidnapping
 - False traditional and religious believe
 - Burial
- Scarcity of public health workforce
 - Public health institutes other than IEDCR mostly involved in academic activities
 - Turn over of the trained personnel from the workplace
 - Lack of public health career path for the medical graduates





Challenges

- Lack of coordination between stakeholders
- Community mobilization
- Sudden surge of severely ill patients at the hospitals
- Resource Mobilization



Conclusion

- Appropriate and timely response prerequisite to combat any pandemic
- Ensure coordination by bringing all relevant stakeholders on board at the early stage
- Strengthen global collaboration to enhance country's capacity in preventing future pandemics



Acknowledgement

- Director, IEDCR
- Coordinator GHSA, Bangladesh
- CSO, Epidemiology, IEDCR
- IEDCR team (core staff, medical technologists)
- FETP,B
- Developmental partners



Thank You



