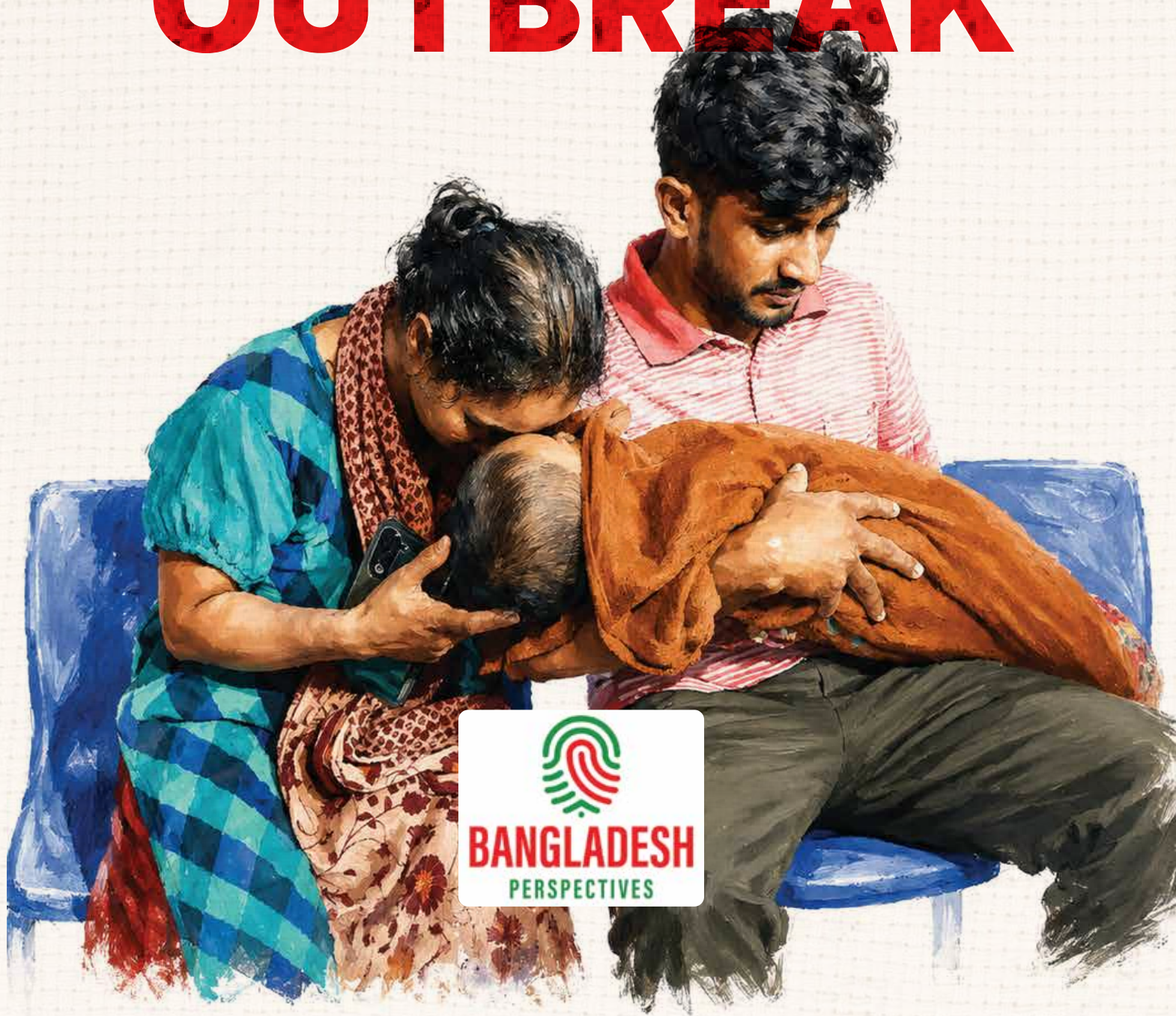


# A MAN-MADE MASSACRE

How Administrative Negligence Ignited Bangladesh's

# MEASLES OUTBREAK



**BANGLADESH**  
PERSPECTIVES

## THE TOLL OF FAILURE (MAY 2026)

CONFIRMED CASES

**101,354+**



ABSOLUTE CASE SURGE

DEATHS

**400+**



CHILDREN LOST TO MEASLES

DISTRICTS AFFECTED

**58-61/64**



ALMOST THE ENTIRE NATION

VACCINATION COVERAGE (2025)

**~59%**



DANGEROUS GAP. HERD IMMUNITY COLLAPSED.

VACCINE STOCKS (EARLY 2026)

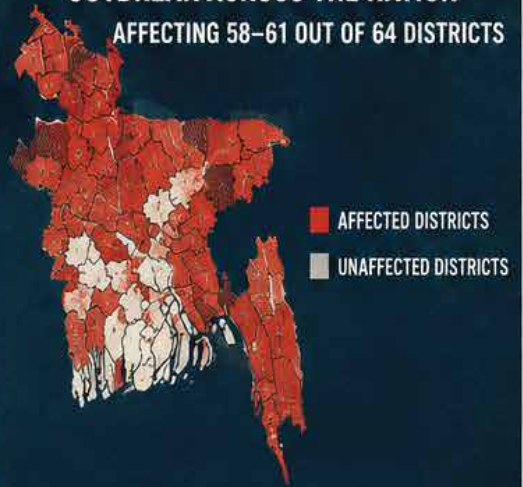
**ZERO**



NATIONWIDE STOCKOUTS

## OUTBREAK ACROSS THE NATION

AFFECTING 58-61 OUT OF 64 DISTRICTS



## FROM POLICY FAILURE TO EPIDEMIC

JULY 2024  
POLITICAL  
TRANSITION

takes charge



SEPT 2025  
SHIFT IN  
PROCUREMENT

From UNICEF/Gavi  
to open tender  
system



SEPT-NOV 2025  
WARNINGS  
IGNORED

UNICEF cautions  
dismissed



DEC 2025-  
JAN 2026  
DELAY &  
STOCKOUTS

Vaccines stuck.  
Shelves empty.



FEB-MAY 2026  
OUTBREAK  
EXPLODES

Cases soar.  
Hundreds die.



## HOW POLICY FAILURES KILLED CHILDREN



**MEASLES SPREADS  
CHILDREN DIE**

## THE HIDDEN KILLER: VITAMIN A DEFICIENCY

VITAMIN A  
PRESENT



VITAMIN A  
DEFICIENCY



Higher risk of:

- PNEUMONIA
- BRAIN SWELLING
- SEVERE COMPLICATIONS
- DEATH

**THIS VITAMIN A SUPPLEMENTATION IN 2025.  
CHILDREN WERE LEFT DEFENSELESS.**

## WHAT MUST BE DONE NOW

- ✓ DECLARE A FULL PUBLIC HEALTH EMERGENCY
- ✓ SCALE UP MEASLES VACCINATION CAMPAIGNS (MR)
- ✓ REINSTATE UNICEF PROCUREMENT & SUPPLY CHAIN INTEGRITY
- ✓ RESUME VITAMIN A SUPPLEMENTATION ROUNDS
- ✓ STRENGTHEN SURVEILLANCE & RAPID RESPONSE
- ✓ ENSURE ACCOUNTABILITY: INVESTIGATE & PROSECUTE

**ACCOUNTABILITY TODAY. CHILD SURVIVAL TOMORROW.  
NEVER AGAIN.**



**For decades, Bangladesh was the gold standard for immunization in the developing world. Today, that legacy is being buried in the small graves of children who died from a disease that should have been a memory.**

For thirty years, Bangladesh served as the textbook example of how a developing nation could conquer infectious diseases. Its Expanded Programme on Immunization (EPI) was the crown jewel of its healthcare system. But in early 2026, that jewel didn't just crack; it shattered. What we are witnessing today is not merely a "surge" in cases; it is a full-scale health collapse that has left hundreds of children dead and millions at risk.









*Measles explodes in Bangladesh after vaccination breakdown, killing hundreds of children*

# THE TOLL OF FAILURE: OUTBREAK SUMMARY

(MAY 2026)



	TOTAL SUSPECTED CASES	47,000+
	LABORATORY CONFIRMED CASES	6,989
	RECORDED CHILD FATALITIES	400+
	DISTRICTS AFFECTED	58 out of 64
	PRIMARY DEMOGRAPHIC AT RISK	CHILDREN AGED 6 MONTHS TO 5 YEARS
	VACCINATION COVERAGE GAP	~4 MILLION CHILDREN MISSED DOSES (2024-25)



**PREVENTABLE. PREDICTABLE. UNACCEPTABLE.**

**ACCOUNTABILITY NOW.  
NO MORE CHILDREN LOST.**

The geographic spread is almost universal, affecting 58 - 61 out of 64 districts. The sheer speed of the transmission suggests a total breakdown of the "herd immunity" barrier that once protected the most vulnerable.



*BGD:  
Epidemic -  
05-2026 -  
Measles in  
Bangladesh*



*Over 400 Dead from  
Measles and Related  
Complications Amid  
Record Case Surge*



*Deaths from  
Measles and Related  
Symptoms Higher  
Than Official Figures*

## From Elimination to Epidemic: The Shocking Reversal

The outbreak's explosion can be traced back to the July 2024 political transition that ousted Sheikh Hasina and installed Yunus's interim administration. What followed was a self-inflicted wound on the country's most vulnerable.



*Measles Outbreak:  
'Interim govt ignored  
UNICEF warning.'*



*Measles outbreak  
tied to procurement  
shift ignoring Unicef  
warnings*

In September 2025, the Yunus government abruptly halted vaccine procurement through the reliable UNICEF channel, used successfully for years with Gavi support, and shifted to an open tender system. UNICEF representatives, including Rana Flowers, explicitly warned senior officials, including health adviser Nurjahan Begum, that this change risked severe disruptions and outbreaks. "For God's sake ... don't do this," Flowers reportedly pleaded. Those warnings were ignored.

"The vaccines were sitting in international warehouses, but the paperwork in Dhaka was stuck in a cycle of ego and incompetence. We told them in November 2025 that the shelves were empty. They told us to wait for the 'new system'." Anonymous Health Official.

The predictable result: bureaucratic delays, nationwide stockouts, and plummeting coverage. A planned supplementary MR campaign was canceled. By 2025, only around 59% of eligible children received their measles vaccine according to government figures (later scrubbed from official sites). Stocks of critical vaccines, including measles, ran dry by early 2026. Herd immunity collapsed in a densely populated nation of over 175 million.



*ACC Petition Seeks Probe  
into Yunus Government  
Over Alleged Vaccine  
Procurement Corruption*



*Experts for Legal  
Proceedings Against  
Interim Rulers Over  
Measles Epidemic*



## The Vitamin A Blind Spot

Measles is rarely lethal in a well-nourished population. However, the former interim administration failed to conduct the essential semi-annual Vitamin A supplementation rounds throughout 2025. Vitamin A is the critical shield against measles complications like pneumonia and brain swelling. By failing to distribute these supplements, the authorities at the time didn't just let children get sick; they ensured they were too weak to survive the infection.

## Who Is Responsible? Pointing Fingers at the Guilty

Health experts, officials, and even legal complaints lay the blame squarely at the feet of the Yunus interim government (August 2024–February 2026). Key failures include:

### Procurement Debacle

Shifting from streamlined UNICEF direct procurement to open tenders without transition planning. Delays stretched months; funds sat unused while children went unprotected.

### Ignored Warnings

UNICEF's explicit cautions were dismissed. Critics highlight health sector advisers, particularly Prof. Dr. Md Sayedur Rahman (Special Assistant to the Chief Adviser), and former health adviser Nurjahan Begum for policy decisions that prioritized experimental "transparency" over proven systems and child survival.



*No change in vaccine procurement process during interim govt, claims Sayedur Rahman*



*Dr Yunus, Nurjahan blamed for child deaths linked to measles*

### Broader Health System Neglect

Abrupt scrapping of the Health, Population, and Nutrition Sector Programme (HPNSP) without smooth bridging mechanisms led to wider disruptions in supplies, staffing, and services. No supplementary campaigns. Health worker strikes compounded chaos.

### Institutional Indifference

Despite alerts from epidemiologists about declining coverage, action was glacial. A Supreme Court lawyer has filed complaints with the Anti-Corruption Commission, citing alleged irregularities in vaccine procurement under the interim regime.

Prof. Be-Nazir Ahmed and others have stated clearly: responsibility falls on the interim government for failing to maintain vaccination and herd immunity.



*Preventable measles deaths: Who is to blame?*

The Yunus administration inherited challenges, including post-revolution recovery. Yet excuses ring hollow when children pay with their lives for avoidable policy experiments. Defenders speak of building local capacity and reducing donor dependence, laudable in theory, criminal in execution when rushed without safeguards.

## A Call for Accountability and Urgent Action

This tragedy demands answers. Who will take responsibility for these hundreds of preventable deaths? Who will hold the decision-makers, advisers, ministers, and the chief adviser himself accountable? Investigations by the Anti-Corruption Commission, parliamentary probes, and independent inquiries are essential. Families deserve justice, not condolences.

The new government has rightly reinstated UNICEF procurement and launched emergency vaccination drives targeting millions of children. Yet transmission continues. A full public health emergency declaration, accelerated campaigns, strengthened surveillance, and nutrition support are non-negotiable. International partners must scale up aid while Bangladesh rebuilds domestic resilience.

Bangladesh's children were failed by those entrusted with their protection. Measles does not negotiate with bureaucratic inertia or political transitions; it exploits immunity gaps created by human failure. What happened here is a stark warning to the world: hard-won public health gains can evaporate overnight through negligence.

The dead children of 2026 cannot speak. Their parents' grief must fuel national reckoning. Never again should political experimentation come at the cost of infant lives. The world is watching. Bangladesh must demand accountability, now, before more graves are dug for the innocent.





# BANGLADESH

PERSPECTIVES

