

Did you know?

More than **1 million dengue cases and 371 deaths** were reported globally between January and April 2026. In the WHO South-East Asia Region alone, over **54,000 dengue cases** and **2,100 severe cases** were recorded during the same period.

Meanwhile, malaria continues to impose a major global health burden. WHO estimated **282 million malaria cases and 610,000 deaths globally in 2024** — an increase compared with the previous year.

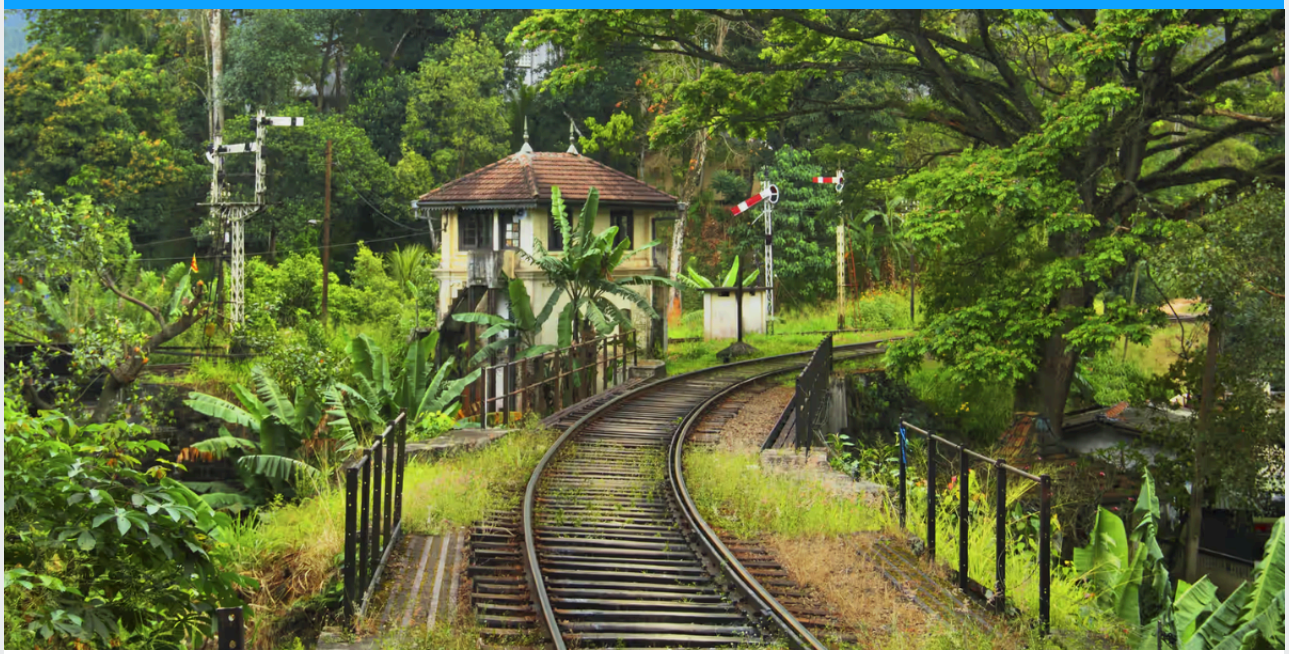
Although dengue and malaria are different diseases, they share striking similarities. Both are spread by mosquitoes and attack the blood directly: dengue can trigger a dangerous drop in platelets leading to internal bleeding, while malaria destroys red blood cells and may cause life-threatening anaemia. In severe cases, both diseases can require urgent blood transfusions to save lives.

This makes the back-to-back dates of **World Blood Donor Day (14 June)** and **ASEAN Dengue Day (15 June)** more than a coincidence. They are a joint call to action — for cities to invest in prevention, and for the public to support voluntary blood donation as part of epidemic readiness.

They also share the same root causes:*Aedes aegypti* mosquitoes breed in stagnant water in clogged drains and unmanaged waste, and *Anopheles* mosquitoes thrive wherever standing water accumulates unmanaged. Where cities maintain sanitation effectively, the incidence of diseases reduces. In this issue, we look at two cities from

the WHO South-East Asia Region Healthy Cities Network — **Badulla in Sri Lanka and Khulna in Bangladesh** — whose experiences bring this into focus.

Case Study: Badulla, Sri Lanka



Source: Daytrip.com

Badulla is a compact hill city of roughly 46,000 residents in Sri Lanka's Uva Province — the provincial capital, set at 680 metres above sea level and shrouded in cloud and fog for much of the year. The persistent wetness shapes its challenge with dengue : in Badulla's cool climate, waste decomposes slowly, blocked drains stay waterlogged longer, and standing water in cracked or ageing tanks persists far beyond what a hotter city would experience. Every unmaintained surface creates a mosquito breeding site that lingers. Dengue is thus listed as one of the city's five top public health priorities.

Badulla’s initiatives to combat dengue ride on the back of nation-wide efforts against malaria. In September 2016, Sri Lanka was certified malaria-free by WHO — a historic milestone after more than a century of endemic disease. The last indigenous malaria case was recorded in 2012, achieved through decades of intensified vector surveillance, community health worker networks, and sustained political commitment even through periods of civil conflict. Building upon past experiences, Badulla now applies similar strategies in integrated, long-term governance for dengue: treating vector control not as a one-off campaign, but as an ongoing function of city management.



World Health Organization presented Sri Lanka the Certificate of Malaria as the eliminated country. Source: Ministry of Mass Media - Sri Lanka

The municipality's Healthy Cities approach merges waste governance and disease control as an intersectoral effort instead of managing them as separate departmental concerns. Six community health assistants conduct year-round dengue inspections across all city divisions, with regular reports to the District Health Officer to enable early response. Legal enforcement against illegal dumping has been strengthened, reinforcing norms of sanitation as a civic obligation. The city has committed 3 million LKR (approx. USD 10,000) to replace deteriorating water tanks which become hidden breeding sites, 1.3 million LKR (approx. USD 4,300) to drain repair, and 1 million LKR (approx. USD 3,300) to community cleaning programmes — each investment justified through its direct connection to vector control, not merely infrastructure upkeep.

What Badulla Is Doing

- Year-round dengue inspections by 6 community health assistants across all city divisions
- Legal enforcement against illegal waste disposal — linking sanitation law to disease prevention
- Dedicated funds to replace deteriorating water tanks and fordrain repair
- Community cleaning programmes
- Awareness outreach to schools, businesses, and community groups
- Fumigation during confirmed high-prevalence periods
- Long-term commitment under the WHO Healthy Cities Initiative through 2030



Cattle-baited trap used for malaria vector surveillance, attracting host-seeking mosquitoes using livestock as bait for species collection and monitoring. Source: WHO Sri Lanka

Badulla demonstrates that Sri Lanka's malaria-free governance legacy — built on sustained vigilance and integrated public health — is not confined to national programmes. It lives on in how cities like Badulla approach the next vector-borne threat.

Sri Lanka's Malaria Elimination in Context

Achieving WHO malaria-free certification in 2016 required Sri Lanka to sustain community health surveillance, political commitment, and multi-sector coordination even through decades of civil conflict. Today, the country maintains an active prevention-of-re-establishment programme — monitoring imported cases, conducting entomological surveys, and engaging local councils — because elimination is a status that must be continuously defended, not a finish line.



Cattle-baited trap used for malaria vector surveillance, attracting host-seeking mosquitoes using livestock as bait for species collection and monitoring. Source: WHO Sri Lanka

Case Study: Khulna City, Bangladesh



Health promotion campaign through pond cleanliness driven under “Healthy City Initiative” at Madrasa Pond. Source: WHO Bangladesh

Fighting Dengue Together: How Community Action Is Transforming Health in Khulna

Khulna, Bangladesh’s third-largest city, is facing growing health risks linked to rapid urbanization, climate change, poor waste management, and increasing dengue outbreaks. Unmanaged waste, including discarded tyres, plastic containers, buckets, flower pots, and water accumulation at construction sites, creates ideal breeding habitats for Aedes mosquitoes. These environmental challenges also reduce the quality of public spaces and contribute to broader urban health risks.

Recognizing that dengue prevention requires more than routine municipal services, Khulna City Corporation adopted a multisectoral Healthy Cities approach under the WHO Initiative on Urban Governance for Health and Well-being (UGHW). The city brought together government agencies, public health experts, civil society organizations, academia, youth groups, volunteers, and local communities through a shared governance platform focused on creating healthier urban environments.



Ward 16 before and after cleaning. Source: WHO Bangladesh

At the centre of this effort is a community engagement model implemented by Khulna City Corporation with technical support from WHO, using ward-level co-creation processes. Residents, local leaders, technical experts, and city officials jointly identify urban health challenges and design practical local solutions. Through these consultations, environmental management challenges—including unmanaged waste, stagnant water accumulation, and neglected public spaces—were identified as priorities affecting both dengue prevention efforts and community well-being.

In April 2025, the model was first implemented in Wards 16 and 30, where more than 200 volunteers, residents, youth organizations, NGOs, ward commissioners, and city officials worked together to restore polluted ponds, clear roadside waste, remove discarded tyres, plastic containers and other waste materials that can collect water and serve as mosquito breeding sites, and improve surrounding public spaces. Large quantities of waste, including discarded tyres, plastic containers, and water hyacinth, were removed from ponds and surrounding areas. These actions improved environmental conditions, restored public spaces, and helped eliminate potential mosquito breeding habitats.



Pond cleaning at Ward 18. Source: WHO Bangladesh

Following strong community response, the initiative expanded to Wards 6, 18, and 25. Nearly 1,000 residents, volunteers, youth groups, and community organizations participated in environmental clean-up campaigns, roadside waste removal, pond restoration activities, and community actions aimed at eliminating discarded waste and other potential mosquito breeding sites, transforming a local intervention into a broader city-wide movement.

These efforts are supported through Khulna's Healthy City Platform, a multisectoral governance mechanism where a 36-member Advisory Committee—comprising representatives from health and non-health government sectors, academia, civil society organizations, and local communities—guides joint planning, coordination, monitoring, and resource mobilization across sectors.

To sustain local action, ward-level community committees were also established to monitor progress, identify emerging issues, and coordinate follow-up activities. The initiative has additionally reached more than 15,000 residents through health literacy campaigns, social media outreach, school engagement, youth activities, and

community awareness programmes promoting dengue prevention, environmental management, and healthier lifestyles.

Alongside community mobilization and environmental management efforts, the Government of Bangladesh, with technical support from WHO, has strengthened dengue case management in Khulna and across the country. This has included cascade training programmes for physicians and nurses to enhance the clinical management of dengue patients, provision of essential diagnostic and patient-monitoring equipment such as hematocrit analyzers and ultrasonography equipment, and technical support to national efforts aimed at reducing dengue-related mortality. Together, these complementary interventions strengthen both dengue prevention and treatment, contributing to a more comprehensive response to the disease.



Lion School at Ward 25. Source: WHO Bangladesh

What Khulna Is Doing

- Mobilizing communities to improve environmental conditions through pond restoration, roadside waste removal, elimination of discarded tyres, plastic containers, and other potential mosquito breeding sites, and community-led clean-up campaigns

- Strengthening multisectoral governance through the Healthy City Platform and a Mayor-led multisectoral Advisory Committee involving health and non-health sectors, academia, civil society organizations, and community representatives
- Supporting ward-level community committees for sustained local action
- Promoting dengue prevention alongside environmental improvement and healthier urban living
- Engaging schools, youth groups, civil society organizations, and local leaders in community action
- Expanding health literacy and community awareness campaigns across the city
- Advancing participatory urban governance under the WHO Initiative on Urban Governance for Health and Well-being (2020–2028)

Khulna's experience demonstrates that dengue prevention is not only a public health issue, but also a governance and community participation challenge. By empowering communities to co-design and implement solutions alongside local authorities, the city is building healthier, safer, and more resilient urban environments.

At a time when many cities across the region are facing increasing climate-sensitive health risks, Khulna offers an important lesson: sustainable urban health solutions are strongest when communities become active partners in shaping the future of their city.



Khulna's Cleanliness Day Every Saturday Initiative. Source: AA News Desk

What These Cities Tell Us

1. **Dengue and malaria are governance challenges as much as health challenges.** Disease outbreaks are often rooted in urban conditions such as poor waste management, stagnant water, and inadequate sanitation.

2. **Prevention starts with the urban environment.** Cleaner drains, safer water storage, well-managed public spaces, and effective waste collection help eliminate mosquito breeding sites before disease spreads.
3. **Community participation is essential.** Both Badulla and Khulna show that residents, schools, youth groups, and local organizations play a critical role in sustaining prevention efforts.
4. **Success requires long-term commitment, not seasonal campaigns.** Continuous surveillance, regular inspections, dedicated budgets, and sustained public awareness are more effective than short-term emergency responses.
5. **Healthy Cities approaches build resilience.** By bringing together health authorities, municipal departments, civil society, and communities, cities can create stronger systems that protect public health and respond to future climate-sensitive disease risks.

Healthier cities are safer cities. When urban governance, environmental management, and community action work together, the risks of mosquito-borne diseases can be significantly reduced.

Editor's Pick



Sri Lanka's Journey to Becoming Malaria-free

Severe dengue and malaria can both end in the same place: an urgent need for blood transfusion. Explore Sri Lanka's remarkable malaria elimination journey and how Badulla City is applying those same lessons to prevent dengue today.

Read more

Stay tuned for more inspiring stories from our healthy cities network in our next update!

Share with us your city's best practices!

Email Us

WHO South-East Asia office and Regional Laboratory on Urban Governance for Health and Well-being are pleased to invite you to join South-East Asia Region Healthy Cities Network.

More information and details here

Recommended Resources

Selected resources supporting this issue's theme

WHO Global Strategic Preparedness and Response Plan for Dengue

WHO Global framework for the response to malaria in urban areas

Further Reading & References

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