



COVID-19 Weekly Situation Report

# of Countries Reporting	New Cases Reported in the Week	New Deaths Reported in the Week	Total Cases Reported	Total Deaths Reported
10 out of 11	278 657	4 318	43 121 902	678 035

as of 03 October 2021

# of Countries introduced COVID-19 vaccine	Total number of doses administered	# of person received at least one dose	# of persons fully vaccinated	At least one dose of COVID-19 vaccine per 100 population (of countries vaccinating)
10 out of 11	1 226 364 804	859 089 684	367 275 120	41.61

as of 04 October 2021

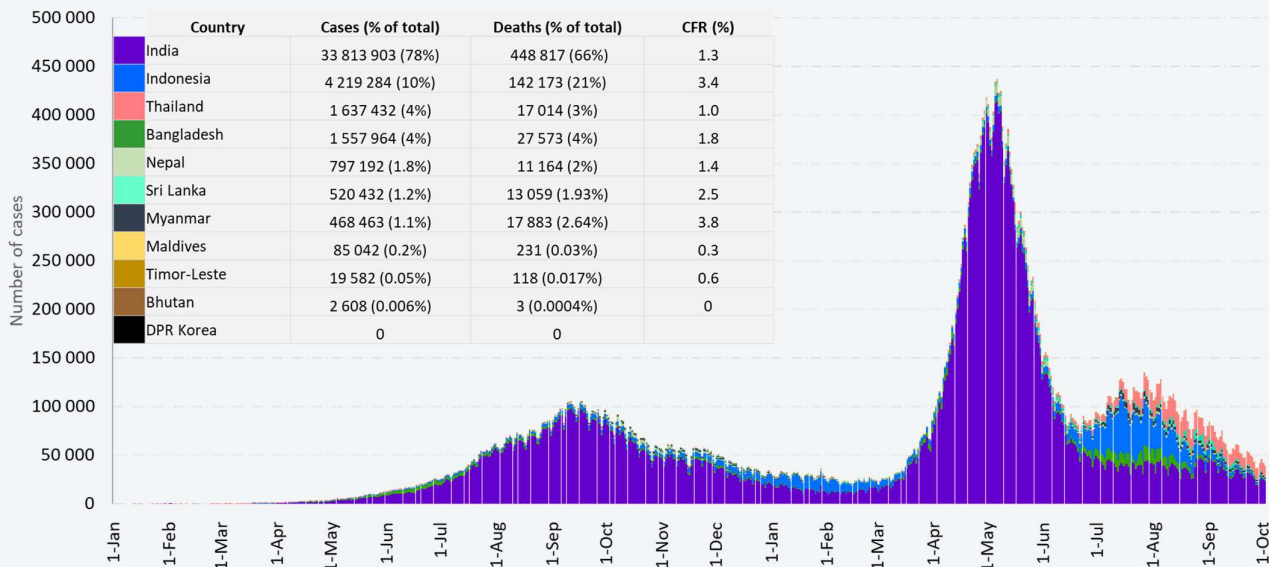
Highlights

- The WHO South-East Asia Region (SEAR) remains the third most affected WHO Region with 43.12 million cases, after the Americas (90.35 million cases) and European Region (70.59 million cases). Globally, an 8.6% decrease in new cases (n=3 116 852) was reported in week 39 as compared to the previous week. During this period, all regions reported a decline in the number of new cases, except the European Region (4.7% increase in new cases compared to the previous week).
- In the South East Asia Region, during week 39, a 19.1% decrease in new cases (n=278 657) was reported compared to the previous week. This declining trend is due to the continuing decline in new cases in India, Indonesia, Thailand, Bangladesh, Nepal, and Sri Lanka.
- India reported a 21.2% decrease in new cases (n=161 158) in week 39, compared to the previous week. While the case incidence at the national level is 3 per 100 000 population, it remains high (>150 per 100 000 population per week) in Kerala (248), and Mizoram (805). The test positivity rate (TPR) is maintained at 2% at the national level, but higher TPR (>10%) is reported in Kerala, Manipur, Mizoram, and Sikkim.
- Thailand reported a decline in new cases for the sixth consecutive week; in week 39 there was a 11% decline in new cases (n=75 794) as compared to the previous week. Higher case numbers are being reported in southern provinces including Narathiwat, Songkla, Yala and Nakhon Si Thammarat. The numbers of severe and ventilated cases remain high but continue to show a downward trend (severe cases decreasing by 9% and ventilated cases by 4%). The top five provinces reporting COVID-19 cases are Bangkok, Yala, Chonburi, Songkla, and Pattani. The TPR is at 14.4% at the national level - similar compared to the previous week.
- Indonesia continues to report a decline in new cases; in week 39, there was a 34.7% decline in new cases (n=11 271) compared to the previous week. The weekly case incidence is 6.2 per 100 000 population at the national level and is on a declining trend. Only North Kalimantan reported a higher weekly case incidence of 56.8 per 100 000 population. The TPR has declined and is at 1.4% at the national level.
- Myanmar reported a 11% decrease in new cases (n=10 309) in week 39 compared to the previous week. All states and region have reported a decline in new cases except Shan, Shan East, Shan South, Chin, Kayin, and Kachin. The top 5 states/regions reporting the highest number of new cases in the last week are Shan South, Shan North, Mandalay, Shan East and Kachin. The TPR is 8.7% at the national level - similar compared to the previous week.
- Sri Lanka reported a 25.2% decline in new cases (n=6 823) in week 39; all provinces reported decline in new cases, with Uva and eastern provinces reporting more than 50% decline in new cases. The TPR has declined from the previous week and is 16.2%, at the national level.
- Bangladesh continues to report a declining trend in new cases. In week 39, there was a 23.7% decrease in new cases (n=6 613) compared to the previous week. All divisions in the country reported a decrease in new cases. Dhaka division contributed to 71% of new cases and 44% new death in the past week. TPR has further declined to 4.8% at the national level.
- Nepal reported a 15% decline in the number of new cases (n=5 800) in week 39 compared to the previous week. In the last week, 50% of the new cases were reported in Bagmati province. The TPR continues to gradually decline and is at 8.8% at the national level.

- Maldives reported a 13.5% decrease in new cases (n=680) in week 39 compared to the previous week. Outside of the Greater Male region (GMR) in the atolls, there are 866 active cases across 40 inhabited islands. The highest number outside of GMR continues to be from the Southernmost atoll of Addu City, with over 265 active cases reported from 4 districts. The TPR is 2.7% at the national level - similar compared to the previous week.
- Timor-Leste reported a 42.7% decline in new cases (n=200) in week 39 compared to the previous week. In the last week, 47% of new cases were reported in Baucau followed by 34% in Dili. The TPR is 8.7% at the national level - similar compared to the previous week.
- Bhutan reported three new imported cases in week 39. For the seventh consecutive week, no locally acquired cases were reported in Bhutan.

Overview of situation (epidemiological week #39 for the period between 26 September – 04 October 2021)

Figure 1: The COVID-19 epidemiological curve for WHO’s SEAR. The inserted table shows the reported number of cumulative COVID-19 cases, deaths, and the case fatality rate (CFR) in the 11 countries in SEAR from 1 January 2020 to 03 October 2021



More than 1.226 billion doses of COVID-19 vaccine have been given by ten countries in the SEA Region with more than 915 million doses in India alone.

Table 1: Regional COVID-19 situation, as of 03 October 2021

Country	Total cases	Total cases per 1 million pop	Total deaths	CFR	New cases (last 7 days)	% change in new cases* (last 7 days)	TPR (last 7 DMA)	Average test per 1000 population per week
India	33 813 903	24 503	448 817	1.3	161 158	-21.2	2.0	6.9
Indonesia	4 219 284	15 426	142 173	3.4	11 271	-34.7	1.4	4.5
Thailand	1 637 432	23 459	17 014	1.0	75 794	-11.0	14.4	4.5
Bangladesh	1 557 964	9 460	27 573	1.8	6 613	-23.7	4.8	1.1
Nepal	797 192	27 360	11 164	1.4	5 800	-15.0	8.8	2.3
Sri Lanka	520 432	24 304	13 059	2.5	6 823	-25.2	16.2	2.4
Myanmar	468 463	8 610	17 883	3.8	10 309	-11.0	8.7	2.4
Maldives	85 042	157 327	231	0.3	680	-13.5	2.7	53.0
Timor-Leste	19 582	14 852	118	0.6	200	-42.7	8.7	1.9
Bhutan	2 608	3 380	3	0.1	9		0.0	12.8
DPR Korea	0							
SEAR total	43 121 902	21 333	678 035	-	278 657	-19.1	-	

*Percent change in the number of newly confirmed cases/deaths in past seven days, compared to seven days prior.
 CFR=Case Fatality Rate; DMA= Day Moving Average; TPR=Test Positivity Rate

WHO SEARO, in collaboration with WHO Country offices, continues to monitor the detection and reporting of SARS-CoV-2 variants of concern (VOCs) in the region (Table 2).

Table 2: SARS-CoV-2 variants of concern (VOC) in SEAR, as of 05 October 2021

Country	Alpha	Beta	Gamma	Delta
Bangladesh	●	●	-	●
Bhutan	●	●		●
India	●	●	●**	●
Indonesia	●	●	-	●
Maldives	●	-	-	●
Nepal	●	-	-	●
Sri Lanka	●	●	-	●
Thailand	●	●	●**	●
Timor-Leste	●**	-	-	●
Myanmar	●	-	-	●

** detection of VOCs only in incoming travelers under quarantine

Summary of published Seroprevalence Studies in SEAR:

The compiled SARS CoV-2 related seroprevalence data in SEAR can be accessed at “[published seroprevalence studies](#)”. Please note that this is an ongoing work, and the list is non exhaustive.

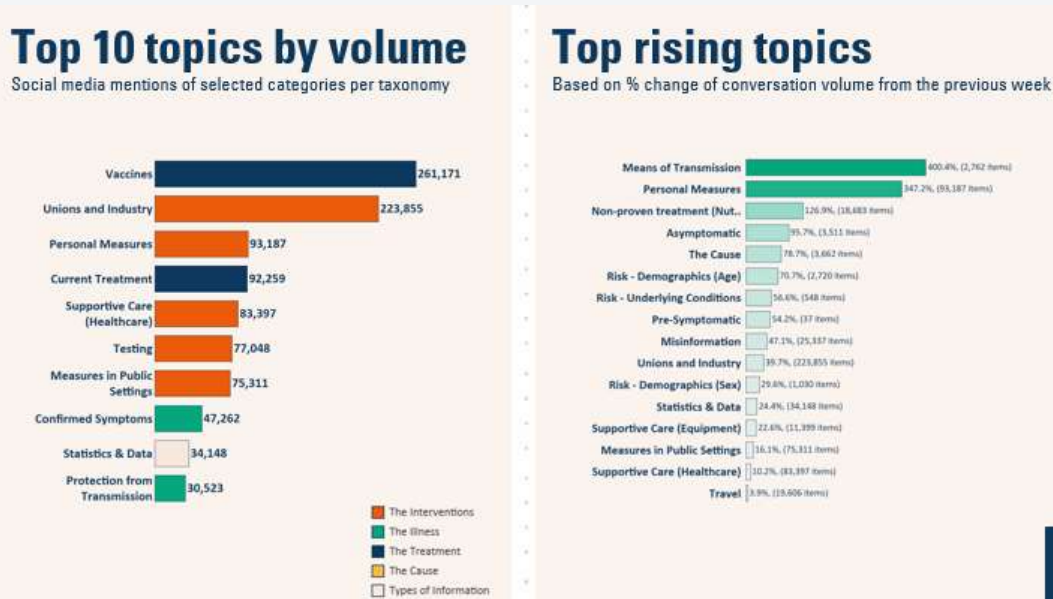
Key Operational / Country Updates

Key operational updates

Risk Communication and Community Engagement (RCCE):

1. The SEARO COVID-19 Infodemic report reveals that as the number of cases are declining, there is also a decline in the number of digital conversations around COVID-19. Vaccines remain the main topic of conversation, with most conversations around vaccine rollout and travel requirements for fully vaccinated travelers being some of the key topics.
2. The number of rumours and misinformation are also showing a decline.
3. SEARO launched its RCCE Experience Sharing Platform with a presentation on the Indonesian experience of managing hoax and misinformation during COVID-19, on 4 October 2021.
4. The SEARO experience of managing rumours and misinformation, “Listening to the public for the COVID-19 response: Lessons learnt in managing the infodemic in the WHO South-East Asia Region”, has been published in a special issue of the Weekly Epidemiological Report (<http://apps.who.int/iris/bitstream/handle/10665/345623/WER27september2021-xi-xvi-eng-fre.pdf>)

Figure 2: SEAR COVID-19 infodemic intelligence from -27 September -03 October 2021



Laboratory:

- SEARO continues supporting genomic sequencing and bioinformatics analysis to monitor variants especially for countries with limited or no sequencing capacities, through specimen referrals to regionally identified centers of excellence.
- Interim Guidance on Antigen-detection in the diagnosis of SARS-CoV-2 Infection has been updated: Antigen-detection in the diagnosis of SARS-CoV-2 infection (<https://www.who.int/publications/i/item/antigen-detection-in-the-diagnosis-of-sars-cov-2infection-using-rapid-immunoassays>)

Operations Support and Logistics:

- Ongoing coordination with SEAR Member States and WHO headquarters to facilitate expedition of the supply requests including personal protective equipment/biomedical/laboratory diagnostics items through COVID-19 supply chain system (CSCS) to the end users and to resolve some of the supply challenges faced by Member States.
- In coordination with Healthier Population and Non-communicable diseases (HPN) working on distribution of NCD kits to Nepal, Myanmar and Timor-Leste (from the regional stockpile at WHO Dubai warehouse). An NCD kit is a pre-packed set of essential medicines and medical devices to meet priority NCD health needs
- Supporting the procurement and shipment of laboratory test kits and consumables to Bangladesh.

Key country updates

Bangladesh:

- Dhaka registered the most daily deaths and new cases among the eight divisions in the recent week.
- The government is preparing for providing the Pfizer vaccine in city corporations, divisional and district towns, and municipality areas outside the capital. Health workers in these areas are being trained to administer the vaccine, as the capacity to preserve the Pfizer vaccine is built in these areas.

Bhutan:

- Prime Minister's Office has notified the public that COVID-19 vaccination for walk-in individuals of 12 years and above will be discontinued starting 1 November 2021
- The government is also planning to vaccinate children below 12 years once international and national regulatory authorities approve COVID-19 vaccines for children below 12 years of age
- Ministry of Health along with the WHO Country Office are actively advocating through different media for people to strictly follow COVID-19 prevention protocol.

DPR Korea:

- No case of COVID-19 has been reported as of 07 October 2021.
- Cumulatively 41,393 persons were tested with reverse transcription polymerase chain reaction (RT-PCR) at an interval of 10 days (total samples:82 512) and all were found negative for COVID-19. These include 693 persons who were tested during the period of 23-30 September 2021, of which 105 were people with influenza-like illness and/or severe acute respiratory infections and rest 588 were health care workers.

India:

- Union Minister for Health and Family Welfare launched ICMR's Drone Response and Outreach in the North East ("i-Drone"). This is a drone-based vaccine delivery model to ensure that life-saving vaccines reach everyone.
- The National Telemedicine Service's initiative called "eSanjeevani OPD", under which over 90 000 patients consult over 1600 doctors and specialists daily has crossed a milestone by completing 13 million consultations through more than 430 online OPDs as on 4 October 2021.
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Indonesia:

- During the commemoration of the International Day of Older Persons on 1 October 2021, authorities called upon all citizens to support the acceleration of COVID-19 vaccination for older people.
- Authorities continue to ease restrictions on public activities and have urged the public to remain vigilant and continue to adhere to health protocols.
- Government of Indonesia continues to optimize efforts to accelerate COVID-19 vaccination across the country and encourages subnational governments to continue to promote the safety and benefits of vaccination to scale up vaccine uptake.

Maldives:

- The Minister of Health has announced further extension of State of Public Health Emergency in the Maldives, till 31 October 2021.
- Maldives has started the third dose (booster dose) of COVID-19 vaccination from 3 October 2021, for specific high-risk groups that have completed 6 months since their second dose. Irrespective of vaccine administered for primary doses, the Pfizer vaccine will be given for the third dose vaccination.

Myanmar:

- International air travel temporary restrictions have been extended till 31 October 2021 to prevent importation of COVID-19. Both international and local travelers, with evidence of past COVID-19 infection (record of onset of disease or date of laboratory tests within 90 days), from internationally recognized hospitals and the health departments will be exempted from quarantine upon travelling.
- Myanmar plans to start vaccination of 12 to 18-year-old people (school base) during 1st week of October 2021, before schools are reopened.

Nepal:

- The National RT-PCR Test Positivity Rate (TPR) averaged 8.8% in the past week (Week 39) while province-wise positivity rate ranged from 6.5% (Bagmati Province) to 37.0% (Karnali Province),
- A total of 42 28 163 RT-PCR tests were performed nationwide by 96 designated COVID-19 laboratories functional across the nation (as of 3 October 2021).

Sri Lanka:

- Guidance on controlled relaxation of public and work activities from 1 October 2021 was released by the Ministry of Health (MOH) on 30 September 2021.
- School reopening is planned in four phases, the initial phase for schools with under 200 students in all provinces will commence on 21 October while adhering to PHSM.
- A virtual discussion was held on 30 Sep 2021 with SEARO laboratory focal points on the options for testing strategies to suit the changing scenario of COVID-19 transmission.
- The quarantine measures were further relaxed during the week. On-arrival RT-PCR for fully vaccinated passengers is no longer required children under 12 years accompanying their parents are allowed without RT-PCR and partly vaccinated Sri Lankans are allowed home quarantine.

Thailand:

- The Centre for COVID-19 Situation Administration (CCSA) has approved a four-phase timeline for the country's reopening plan to revitalize the nationwide tourism industry with the Pilot Phase (1-31 October 2021)
- Thailand has started vaccinating adolescents (12-17 year) with the Pfizer-BioNTech COVID-19 vaccine.
- The Thai Red Cross Society kicked off a vaccination campaign for migrant workers, one of the country's most vulnerable groups, on 5 October 2021.

Timor-Leste

- To further enhance the capacity of public health workers at the front lines for case investigation, contact tracing, quarantine, and sample collections, Ministry of Health, is conducting another round of refresher training for the surveillance and rapid response teams (RRTs) at the municipality level.
- The Ministry of Health together with European Union (EU) and WHO, inaugurated the newly built accommodation facility for families at Lahane Hospital, which underwent a major makeover recently and continues to strengthen the critical case management capacity across five regional referral hospitals in the country.
- The National Parliament authorized the President of the Republic to renew the State of Emergency for another 30 days (up to 29 October 2021).
- The Government has decided to lift the sanitary fence in the capital Dili, starting at 23:59 on 29 September 2021. The movement of the citizens between Dili and Municipalities as well as between the municipalities across the territory will no longer be prohibited. However, the Government called on communities to follow the COVID-19 guidelines and safety regulations recommended by the MoH and WHO to keep fighting the spread of coronavirus.
- Health workers working at isolation centres will no longer be required to quarantine after completing their shift. A swab for the COVID-19 test will be collected on the last day, and if tested negative, the health workers will return to their families.

Key challenges in the Region

- Keeping up implementation of public health and social measures (PHSM) throughout the Region, as pandemic fatigue continues and there are upcoming mass gathering events like festivals, and wedding season.
- National vaccination coverage is suboptimal. COVID-19 vaccination campaign does not reach certain pockets of population (due to logistical challenges and vaccine hesitancy).
- Limited availability of testing data for Rapid Antigen Test (RAT) poses a challenge in systematic laboratory surveillance.
- Sample referral for genome sequencing to regional reference laboratories delayed by flight availability.
- Large number of health workers continue to get infected and some are quarantined due to exposure, resulting in fewer health workers available for health service delivery in few SEAR countries.

Feature Story

SEA Regional informal network of public health laboratories: challenges, opportunities and needs for developing sustainable laboratory networks for high threat pathogens

The COVID-19 pandemic has clearly demonstrated that timely and safe diagnosis of high threat disease causing agents (such as SARS CoV-2) is vital to activate immediate and effective response for controlling and mitigating their health impacts. The Public Health Laboratories in the WHO South-East Asia Region (SEAR) have made significant efforts to quickly scale up the testing capacity as a response to the COVID-19 pandemic. Particularly, effective laboratory networking within country and internationally has been a crucial component of the overall laboratory response, especially for timely resource mobilization, knowledge sharing, and technical support.

With a view of envisioning an effective Regional Laboratory Network to better handle any public health emergency in WHO-SEAR, the Infectious Hazards Management (IHM) unit of the WHO's Health Emergency Programme (WHE) at SEARO organized an informal consultation of laboratory focal points of National Public Health Laboratories in SEAR countries on 19-20, August 2019 at Ulaanbaatar, Mongolia. The Informal consultation was titled "The development of a Regional Laboratory Network to augment national laboratory capacity for Public Health Emergencies". The meeting paved the way for identifying [key strategic interventions](#) to address existing challenges and gaps for the functionality of an effective regional network for laboratory preparedness for any public health emergencies and fulfilling the expectations from the Regional Public Health Laboratory Network.

Since the emergence of COVID-19, the informal regional laboratory network has been an effective platform for timely knowledge sharing, referral testing, mobilizing technical support and resources. To review the implementation of strategic interventions from the previous meeting (in 2019), its contributions to the COVID-19 pandemic response and discuss opportunities, gaps, challenges encountered during COVID -19 pandemic response, an annual follow up virtual meeting was organized on 16 August 2021. It included (1) an overview of how implementation of strategic interventions recommended during the 2019 meeting contributed to the pandemic response, (2) experience sharing from SEAR Member States (MS) on national laboratory networking during COVID-19, (3) challenges in maintaining national network and utility of inter/intra-regional networking.

Key interventions towards achieving Regional networking, such as the regional webinar platform, email and MS Teams group established during 2019 have greatly contributed to COVID-19 pandemic response. This was especially helpful during the early phases of the pandemic, for active knowledge sharing, delivering virtual trainings, troubleshooting etc., when countries were in the process of establishing SARS CoV-2 diagnostic capacity. It still continues to be effective for experience and information sharing. Also, the identification and mapping of laboratories to support SEAR MS for specimen referrals for PCR, genomic sequencing and bioinformatics analysis, further engagements on expert deployment, were key to the overall capacity building for SARS-CoV-2 laboratory diagnostics. Other activities that were discussed in Ulaanbaatar and which are under progress include the development of regional biosafety quick reference manual, technique/disease specific bio-risk assessment manual, and pilot trainings for the development of regional bio-risk management trainers.

Despite evolving progress in laboratory diagnosis for SARS-CoV-2 in the SEAR, the pandemic unveiled several persistent challenges and gaps which were flagged during the annual meeting held during August 2021 of the SEAR informal laboratory network for High Threat Pathogens. These included having a unified national laboratory data management system, maintenance of essential equipment, frameworks for strengthening national laboratory networks including specimen referrals, genomic sequencing capacities, local validation/regulation of test kits and national quality management systems. The strategic interventions as an outcome of the meeting were framed to address these gaps and challenges. These interventions specifically included , technical support towards strengthening national networks through regional guidance/frameworks, list of global experts for MS to have direct technical consultations (for any

troubleshooting/advice), support to develop national quality management systems to widely govern the national quality assurance program, equipment maintenance etc., It also included technical guidance to support local regulation of diagnostic test kits so as to increase the access to variety of testing options, capacity programs for genomic sequencing and bioinformatics analysis. Meeting participants deliberated on the need-based refresher trainings on diagnostic techniques and support for strengthening overall diagnostics for high threat pathogens with outbreak potential. Thus, effective networking of the public health laboratories in SEAR has demonstrated its potential to set an equilibrium in diagnostic capacity across the MS in the region through optimizing diverse efforts and resources. Formalizing and sustaining such networking activities are deemed essential in SEAR for coordinated response to the current pandemic and being prepared for future outbreaks.



Table 3: Summary of International Travel Measures Implemented by Countries in SEAR (as of 05 October 2021)

Country	Entry and Visa Restrictions	Quarantine upon Arrival	COVID-19 Testing Requirement	Proof of Full vaccination
Bangladesh	Some restriction on entry and/or visa	14 day facility/ home quarantine (depending on countries of departure and vaccination status)	RT-PCR based COVID-19 negative test result within 72 hours prior to departure	Facility quarantine requirement exempted with proof of full vaccination (home quarantine required)
Bhutan	Some restriction on entry and/or visa	21 day facility quarantine (14 day facility quarantine for those fully vaccinated)	RT-PCR based COVID-19 negative test result within 72 hours prior to departure	Mandatory 14 day facility quarantine for fully vaccinated travellers (reduced from 21 days)
DPR Korea	Entry ban	30 day facility quarantine	Not applicable	Not applicable
India	Some restriction on entry and/or visa	14 day self-monitoring (except travellers from Brazil, South Africa, United Kingdom, Bangladesh, Botswana, China, Mauritius, New Zealand, and Zimbabwe who need to undergo 7 day home quarantine and 7 day self-monitoring)	RT-PCR based COVID-19 negative test result within 72 hours prior to departure Additional on-arrival self-paid PCR test for travellers from Brazil, South Africa, United Kingdom, Bangladesh, Botswana, China, Mauritius, New Zealand, and Zimbabwe	Not applicable
Indonesia	Some restriction on entry and/or visa	8 or 14 day facility quarantine (depending on countries of departure)	RT-PCR based COVID-19 negative test result within 72 hours prior to departure	Certificate for full vaccination required for entry of foreign nationals, except those with diplomatic or official visa or those using travel corridor arrangement.
Maldives	No restriction on entry and visa	No quarantine (tourist) 14 day facility quarantine (non-tourist)	RT-PCR based COVID-19 negative test result within 72 hours prior to departure and PCR test within 5 -7 days of arrival	Quarantine requirement (non-tourist) exempted with proof of full vaccination or history of past infection within 60 days
Myanmar	Some restriction on entry and/or visa	10 day facility quarantine	RT-PCR based COVID-19 negative test result within 72 hours prior to departure	Quarantine requirement exempted with proof history of past infection within 90 days
Nepal	Some restriction on entry and/or visa	No quarantine for travellers those are fully vaccinated not fully vaccinated, 10-day facility quarantine and PCR test on day 11	RT-PCR based COVID-19 negative test result within 72 hours prior to departure; RT-PCR based COVID-19 on 11 th day after arrival for not fully vaccinated	Facility quarantine requirement exempted with proof of full vaccination
Sri Lanka	Some restriction on entry and/or visa	14 day facility quarantine. Diplomatic/ UN staffs and family from unrestricted countries can opt for home quarantine.	RT-PCR based COVID-19 negative test result within 72 hours prior to departure; Unvaccinated children of 12-18 years released with those parents who are exempted for quarantine should undergo PCR test on day 1;	Quarantine requirement exempted with proof of full vaccination or history of past infection within 90 days and received at least one dose of vaccine
Thailand	Some restriction on entry and/or visa	7 day facility quarantine for fully vaccinated and 10-14 day for not fully vaccinated	RT-PCR based COVID-19 negative test result within 72 hours prior to departure	Quarantine requirement adjusted upon vaccination status & route (air, sea, land)
Timor Leste	Entry ban	14 day facility quarantine (7 day facility quarantine for those fully vaccinated)	RT-PCR based COVID-19 negative test result within 72 hours prior to departure	Mandatory 7 day facility quarantine for fully vaccinated travellers

- Organization of meeting of the Regional workshop on COVID-19 vaccination Intra-Action Review (IAR), also known as mini post-evaluation (mini-cPIE), on 30 September 2021. This meeting brought together participants from National immunization programmes, WHO and UNICEF country offices from member states. Partners from WHO, UNICEF, MMGH, CDC and USAID supported its organization. The main objectives were:
 - To provide understanding of how to plan and implement a COVID-19 vaccination IAR following the key steps outlined in the WHO guideline and templates;
 - Share experience from other countries and regions in the conduct of COVID-19 vaccination IAR;
 - Potential support available from partners to conduct COVID-19 vaccination IAR.
- Ongoing support for COVID-19 vaccine delivery, strengthening vaccine safety surveillance and reporting, conducting vaccine effectiveness studies and planning for COVID-19 vaccine post-introduction evaluations (cPIE)
- Real time information on COVID-19 vaccination in SEA Region is available at <https://www.who.int/southeastasia/health-topics/immunization/covid-19-vaccination>. The table below is a summary of COVID-19 vaccination status and vaccine utilization rates in the countries of the Region, as of 05 October 2021:

Country	Vaccine name	Start date	Total doses administered	Persons vaccinated with one dose	Persons fully vaccinated	At least one dose per 100 total population	Fully vaccinated per 100 total population	Utilization rate	Last update
Bangladesh	AstraZeneca	27 Jan 21	13,151,958	7,739,562	5,412,396	20.24	10.11	91%	06-Oct-21
	Sinopharm	25 May 21	33,918,541	24,398,522	9,520,019			84%	
	Pfizer	21 Jun 21	237,527	184,153	53,374			7%	
	Moderna	13 Jul 21	5,135,546	2,653,770	2,481,776			93%	
Bhutan	AstraZeneca	27 Mar 21	1,083,271	584,977	498,294	77.37	65.90	64%	03-Oct-21
	Pfizer	22-Jul-21							
	Moderna	20 Jul 21							
	Sinopharm	20-Jul-21							
India	AstraZeneca*	16 Jan 21	915,465,826	663,807,388	251,658,438	46.71	17.71	100%	05-Oct-21
	Covaxin*	16 Jan 21							
	Sputnik V	14 May 21							
Indonesia	AstraZeneca	13 Jan 21	18,479,064	12,637,492	5,841,572	35.01	19.83	81%	04-Oct-21
	Sinopharm	23 Mar 21	2,335,926	1,328,665	1,007,261			28%	
	Sinovac	18 May 21	120,493,503	76,095,976	44,397,527			75%	
	Moderna	25 Jul 21	3,526,148	2,402,801	1,123,347			44%	
	Pfizer	23 Aug 21	3,037,917	2,108,394	929,523			42%	
Maldives	AstraZeneca	01 Feb 21	471,242	255,931	215,311	71.87	62.65	97%	02-Oct-21
	Sinopharm	22 Mar 21	187,892	97,144	90,748			82%	
	Pfizer	13 Apr 21	74,096	39,423	34,673			53%	
Myanmar	AstraZeneca	27Jan21	3,337,710	1,810,426	1,527,284	15.25	7.04	95%	02-Oct-21
	Sinopharm	June 21	8,925,992	6,580,320	2,345,672			62%	
Nepal	AstraZeneca	27 Jan21	4,320,794	2,778,135	1,542,659	26.20	21.22	98%	04-Oct-21
	Sinopharm	07 Apr 21	8,340,276	5,027,548	3,312,728			71%	
	Janssen	19 July 21	1,528,785	1,528,785	1,528,785			100%	
Sri Lanka	AstraZeneca	29 Jan 21	2,742,821	1,473,403	1,269,418	66.32	54.31	101%	03-Oct-21
	Sinopharm	05 Apr 21	21,063,636	11,680,227	9,383,409			79%	
	Sputnik V	06 May 21	314,647	159,095	155,552			95%	
	Pfizer	7 Jul 21	758,437	466,485	291,952			45%	
Thailand	Moderna	18 Jul 21	1,561,694	800,996	760,698	50.62	32.63	104%	05-Oct-21
	AstraZeneca	16 Mar 21	24,519,775	10,423,072	14,096,703			130%	
	Sinovac	28 Feb 21	20,414,796	16,903,130	3,511,666			110%	
	Sinopharm	25 Jun 21	9,142,636	5,681,187	3,461,449			61%	
Timor-Leste	Pfizer	6 Aug 21	1,024,596	498,498	526,098	35.54	22.26	68%	05-Oct-21
	AstraZeneca	07 Apr21	680,131	425,792	254,339			67%	
	Sinovac	8 Jun 21	89,621	47,172	42,449			90%	
TOTAL			1 226 364 804	859 089 684	367 275 120	41.61	17.81	93%	

Source: Bangladesh: MIS unit, DGHS; Bhutan: MoH; India: <https://pib.gov.in/PressRelease>; Indonesia: <https://www.kemkes.go.id/>; Maldives: HPA COVID19 update group; Myanmar: MoHS; Nepal: FWD. MoHP Nepal; Sri Lanka: Epidemiology unit, MoH; Thailand: DDC, MOPH; Timor-Leste: MoH.

*doses received is considered equivalent to total doses administered; ** AZ/Moderna given as second dose

Key persistent challenges	Emerging/new challenges
<ul style="list-style-type: none"> • Insufficient supply of COVID-19 vaccines to meet the needs of some countries • Monitoring multiple vaccine types and delivery to different target groups 	<ul style="list-style-type: none"> • Deciding on necessity and indication for booster /additional doses • Defining optimum and realistic COVID-19 vaccination policies to accompany schools reopening in many countries