

11	687,340	8,983	5,383,501	92,509
Countries reporting cases	New cases (week 37/2020)	New deaths (week 37/2020)	Total cumulative cases	Total cumulative deaths

Situation update:

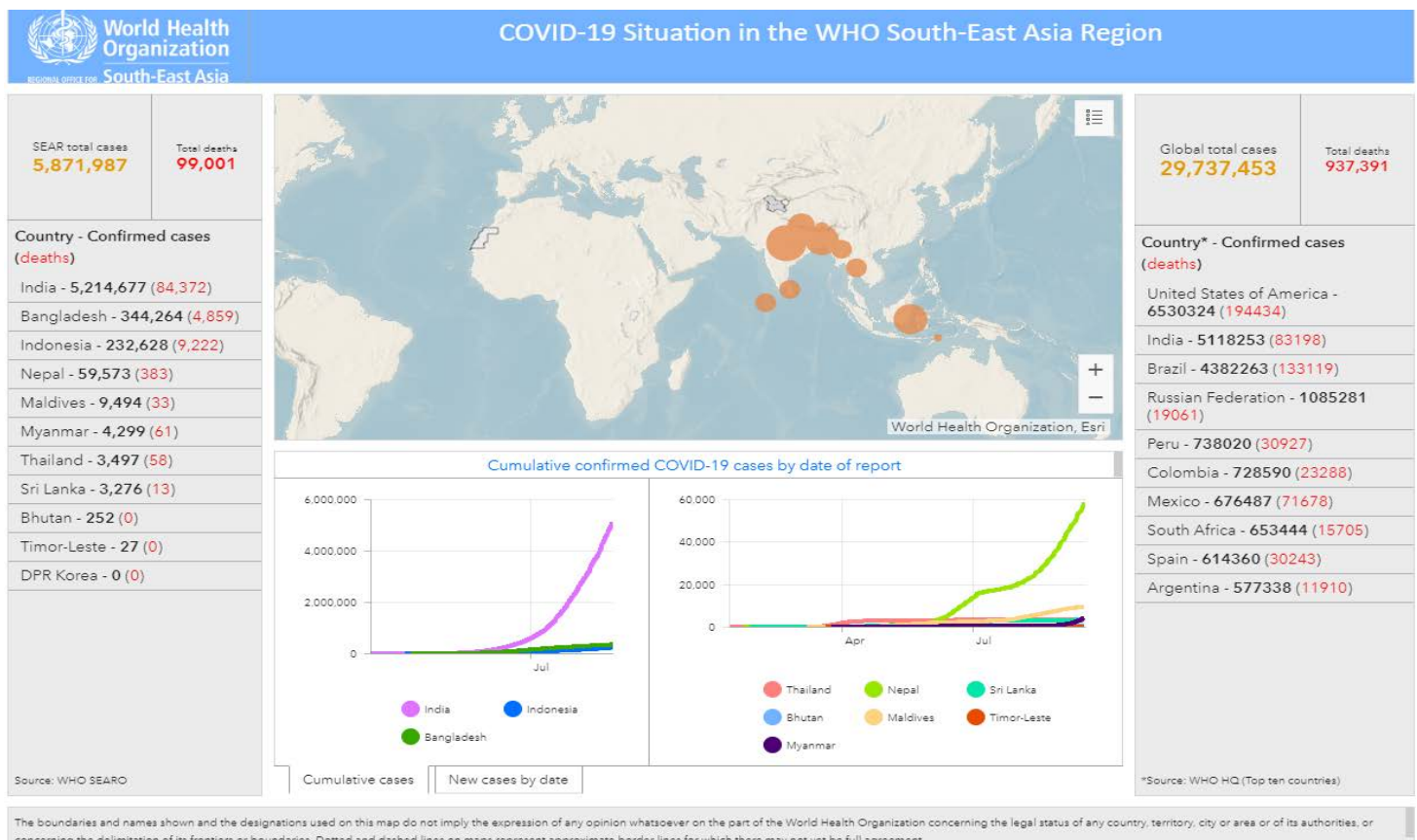
- The weekly percentage increase in cumulative cases in the Region for week #37 was 15% (687 340 cases). The South-East Asia Region (SEAR) recorded the highest weekly increase in cumulative cases among all WHO Regions
- The highest weekly percentage increase in region was reported in Myanmar (107%, 1513 cases), followed by Nepal (17%, 7902 cases) and India (16%, 640,545 cases).
- Two member states in the region, Bangladesh and Indonesia have reported community transmission, while six member states namely India, Nepal, Maldives, Thailand, Sri Lanka and Myanmar have reported clusters of cases and remaining two member states, Bhutan and Timor-Leste have reported sporadic cases
- Last week one local case was reported in Thailand after more than 100 days of reporting only imported cases. In Sri Lanka, during the past few weeks cases have been reported only in returnees
- In Myanmar there is high suspicion of community transmission in Rakhine state and a high risk of nationwide spread
- As of Sep 10, as per reported data in IHR Global reporting platform by the member States in SEA region, males constitute 61% of the confirmed cases and 62% of reported deaths. Majority of the reported cases are reported in the 25-54 age group

Country ¹	Trans. type ²	Total cases	Total cases 1 week ago	% change	Total deaths	Total deaths 1 week ago	% change
India	Clusters	5,020,359	4,370,128	15%	82,066	73,890	11%
Bangladesh	Community	342,671	331,078	4%	4,823	4,593	5%
Indonesia	Community	228,993	203,342	13%	9,100	8,336	9%
Nepal	Clusters	58,327	49,219	19%	379	312	21%
Maldives	Clusters	9427	8,834	7%	33	31	6%
Myanmar	Clusters	3,894	1,807	115%	46	12	283%
Thailand	Clusters	3,490	3,447	1%	58	58	0%
Sri Lanka	Clusters	3,271	3,147	4%	13	12	8%
Bhutan	Sporadic	246	234	5%	0	-	-
Timor-Leste	Sporadic	27	27	0%	0	-	-
DPR Korea	No case	0	-	-	0	-	-
Region		5,670,705	4,971,263	14%	96,518	87,244	11%

¹ Countries are ordered by their total number of cases

² Transmission type (see Global Surveillance Guidance for definitions)

SEAR Dashboard COVID-19



Operational update

Key updates

Country-level coordination, planning, and monitoring:

- Regional webinar on intra action review (IAR) and dissemination of findings conducted on 16 September through the partners platform
- Health leaders call for greater investments in health; continued efforts and solidarity to combat pandemic in the Region
- Regional Director attended a meeting of 'Joint Ministers of Finance and Health Symposium on Universal Health Coverage in Asia and the Pacific: COVID-19 and Beyond'; Ministers pledge to support for UHC

Risk communication and community engagement:

- Weekly public insights through digital monitoring on COVID-19 revealed the following issues:
 - The need for implementing measures for safe celebrations of religious festivals
 - Increase in stigma
 - Questions on COVID-19 immunity, re-infections and vaccines
 - Questions on COVID-19 symptoms, complications beyond respiratory effects, such as impact on the heart
- As part of SEAR Risk Communication and Community Engagement capacity building series, a webinar on 'Communicating to Migrants about COVID-19' conducted by Centre for Excellence in Migration, Health and Development, Disha Foundation on 17 September
- Infographics countering myths regarding Vitamin D, black pepper, honey and ginger, were developed

Surveillance, rapid response teams, and case investigation:

- SEAR countries with high transmission in some or all areas of country include India, Indonesia, Bangladesh, Myanmar, Nepal, Maldives, Bhutan. Weekly trends indicate decline in reported cases in Bhutan and Maldives
- Despite many efforts from South-East Asia Regional Office (SEARO) to advocate and support contact tracing efforts – since 29 January - challenges remain. A regional program to enhance capacity building for contact tracing at the most peripheral levels has been initiated with support from WHO HQ and partners
- Along with building an efficient contact tracing system, the deficit in testing capacity in the region, which mirrors the global shortage, remains an overwhelming challenge in the months ahead. This will further hinder countries' ability to estimate the real trends of COVID-19, which is indispensable to monitor the effectiveness of public health and social measures and implement changes to these measures with confidence.
- WHE monitors national epidemics and the performance of the response using mainly a 3-step analysis process based on trends of test positivity ratio.

Points of entry:

- All countries in the Region, except Maldives, continue to pose international travel restrictions, with points-of-entry closed for international travellers except for a few exempted categories. Maldives lifted international travel restriction since 15 July. Nampo port in DPR Korea opens for limited services for supply of emergency and humanitarian goods with special permission.
- All countries, except Maldives, require quarantine on arrival, mostly 14 days, while Bhutan requires quarantine of 21 days and DPR Korea requires 30 days. Myanmar reduced the quarantine period to 14 days. Negative test results are required for inbound travellers by all the countries, except DPR Korea

Case Management:

- WHO South-East Asia Regional Office (SEARO) represented in the clinical management steering committee that guides the need for updating clinical management guidelines based on evolving evidence
- SEARO has nominated regional experts to the global clinical management guideline development group (GDG) to ensure regional equity in the GDG
- SEARO is engaging with the Integrated Management of Adolescent and Adult Illness (IMAI) Alliance to support regional training on clinical management in Myanmar and Timor-Leste
- SEARO to prioritize research activities for COVID-19, a research prioritization working group is in process of finalizing the methodology for the prioritization exercise. Research Policy and Cooperation (RPC) unit and WHO Health Emergencies Programme (WHE) provide technical support for sero-prevalence studies in the region

Operational support and logistics:

- Diagnostics: South-East Asia Regional Office (SEARO) coordinated delivery of 1,583,800 tests of manual PCR, 1,299,200 swabs, 1,427,688 of RNA extractions
- Infection Prevention and Control: 5,406,400 three-ply face masks, 414,500 gloves, 217,450 gowns, 353,075 respirators, 82,150 goggles and 87,336 face shields have been shipped to the countries. Personal Protective Equipment (PPEs) continue to constitute the bulk of the shipments, standing at almost 90% of the delivered units to countries
- Case management: 671 units of oxygen concentrators and 110 infrared thermometers were shipped and others in pipeline

Key country updates**Bangladesh**

- Number of new weekly cases decreased by 13.8% and deaths by 24.8% compared to the previous week
- Of 339,332 total confirmed cases – 71.7% (243,155) recovered, 1.4% (4,759) died and 26.9 (91,418) are active cases as of 14 September
- Directorate General of Health Services (DGHS) endorsed the final report on health facilities assessment supported by different partners
- WHO has started facilities orientation on infection prevention programme for health managers of DGHS

- Increase in number of international flights (12.5%) compared to the previous week; 843 people underwent institutional quarantine after screening at airport
- DGHS published two standard operating procedures (SOPs) for the screening of COVID-19 at the point of entries (PoEs) and suspected COVID-19 case in the aircraft

Cox's Bazar

- During week 37 (7 to 13 September) 50 new cases were confirmed among Rohingya refugees, highest in a week so far
- WHO in partnership with partners conducted a survey across all Rohingya camps on three major issues: knowledge and understanding of COVID-19, use of masks and attitude towards testing for the virus
- Over 70 field coordinators received training on home-based care, informed decision making and counselling, referral mechanisms to isolation and quarantine, referrals to other sectors and data collection

Bhutan

- Ministry of Health (MoH) drafted protocol for reopening of borders for tourists
- MoH established 1 new RT_PCR center in Samdrupjongkhar district adding up to total 6 RT-PCR laboratories in the country to enhance testing capacity
- MoH continues to conduct active surveillance and contact tracing. No cases reported among the health workers till date
- WHO supporting 121 frontline health care workers, 21 hired vehicles and 23 hotline managers for four months to support contact tracing and active surveillance for COVID-19 response

DPR Korea

- No reported cases so far as of 16 September
- 3,228 total samples were tested by RT-PCR at interval of 10 days, no positive case was found as of 10 September
- 1,751 people (including 1,743 nationals, 52 new cases) manifested fever including SARI cases as of 10 September
- WHO handed over 25,000 RNA extraction kit worth USD 137,000 to Ministry of Health (MoH), 6 RT-PCR machines are being shipped
- 163 people were quarantined between 3-10 September, a total of 31,058 people was released from quarantine as of 10 September

India

- Over 61.5 million total samples were tested; more than 1 million samples were tested in the last 24 hours as of 17 September
- Government reiterated its commitment for prioritizing COVID-19 vaccination to high risk groups
- Ministry of Health and Family Welfare (MoHFW) issued protocol for holistic follow up care and well-being of all people recovering from COVID-19
- MoHFW released scenario-based approach to combat COVID-19 in the country
- MoHFW revised SOP on preventive measures to be followed while conducting the examinations to contain spread of COVID-19
- Government urged States/ UTs to ensure seamless inter-state movement of medical oxygen and availability of oxygen for every hospitalized COVID-19 patient
- Council of Scientific & Industrial Research (CSIR) - Central Drug Research Institute is carrying out a serological study measuring antibodies against SARS-CoV-2 between 9-11 September

Indonesia

- Government reimposed large-scale social restrictions (PSBB) for two weeks effective 14 September in Jakarta
- Province Health Office of Jakarta issued circular to designate 13 hospitals solely for COVID19-related services
- WHO is supporting the Ministry of Health (MoH) in a sero-epidemiological study for 17 selected provinces across country
- WHO continues to facilitate the comprehensive field assessment in 15 provinces to strengthen national COVID-19 response

- WHO and partners in collaboration with MoH and the COVID-19 task force conducted a refresher training on contact tracing for all 514 districts, around 700 participants attended the webinar
- WHO provided MoH 127 kits of reagents that can perform up to 12 192 antibody tests

Maldives

- Vice-President continues to lead emergency operations along with cabinet ministers of relevant ministries
- Ministry of Tourism (MoT) announced reopening of guest houses from 15 October under strict guidelines by health protection agency (HPA)
- Active transmission continues in Hoadehdhoo island, GDh Atoll with 38 total confirmed cases and over 30 contacts; Rapid Response Team (RRT) responded to community outbreaks with island task force
- 72 active cases (50 staffs and 22 tourists) have been reported in 34 resorts
- WHO provided technical support to finalize national action plan on health services recovery
- WHO handed over two portable digital X-Ray machines along with other essential equipment for two ICUs supported by WHO

Myanmar

- Ministry of Health and Sports (MoHS) reduced quarantine period from 21 days to 14 days for COVID-19 positive cases. A total of 21-day isolation is recommended for patients with severe to critical illness. Additional 7-day home quarantine is required for all persons discharged from the hospital.
- Ministry of Health and Sports (MoHS) issued guidelines for patients under investigation (PUI), their close contacts and family members
- 3 Rapid Response Teams (RRTs) visited Yangon for COVID-19 to strengthen public health and social measures and quarantines measures in Yangon Region. MoHS expanded three COVID-19 centres in Yangon region
- WHO continues to facilitate IHR reporting among national focal points (NFPs) of respective countries for cases with international travel history

Rakhine State

- A total of 679 locally transmitted cases of COVID-19 have been reported in Rakhine State between 16 August and 13 September
- The recent surge in local transmission includes 80 COVID-19 positive cases among the personnel of two United Nations agencies and 15 international and national non-governmental organizations
- Total 1,232 hospital beds are available of which 397 are occupied and 835 vacant as of 16 September

Nepal

- Around 28.6% of total 56,787 confirmed cases were reported in last 14 days as of 16 September
- Ministry of Health and Population (MoHP) announced to reduce price of RT-PCR testing from USD 37 (NPR 4,400) to USD 17 (NPR 2,000) at all hospitals across country
- Government of Nepal decided to allow operation of domestic and international flights; long-distance buses; hotel and restaurants from 17 September with strict application of the Public Health standards developed by MoHP
- National Health Training Center, MoHP in collaboration with WHO conducted 3 days critical care training for health care workers in provinces
- Health Emergency Operation Center (HEOC), MoHP organized a regular weekly virtual interaction meeting with the media; 35 journalists and news reporters attended last meeting

Sri Lanka

- Ministry of Health (MoH), WHO and partners convened an expert group meeting on impact of COVID-19 on health financing, the key points were shared as input to the ADB joint ministerial meeting on universal health coverage on 17 September
- Academic Session on COVID-19 control: Sri Lankan Experience -lessons learned, best practices and experiences was organized by College of Community Physicians of Sri Lanka on 16 Sept

- Of total 3,271 confirmed cases, 39.9% (1,304) are repatriated nationals, 29% (950) from the navy cluster, 19.9% (650) from Kandakadu cluster and 9.6% (313) from other clusters and 1.6% (54) international citizens.
- One death reported on 14 September, raising cumulative number of deaths to 13
- 3,545 people were repatriated including seafarers mainly from middle eastern countries
- 6,255 people were quarantined in 54 facilities of which 6,026 are returnees as of 16 September
- MoH in process to identify the need of a tele-medicine system to support primary healthcare facilities and linking them to referral centres

Thailand

- Ministry of Public Health (MoPH) reported 33 new case since last reporting as of 15 September, the new cases were Thai and non-Thai nationals traveled from Japan, Pakistan, Qatar, Bahrain, Saudi Arabia and later tested positive while in quarantine centers
- Of total 3,480 confirmed cases, about 95% (3,315) have recovered, 2% (58) have died and 3% (107) are still receiving treatment or under observation in hospitals
- No deaths were reported since 4 June
- Ministry of Public Health (MoPH) stated that an Uzbekistani football player who has arrived to participate in the Thailand Football League has tested positive in quarantine facility, so far 147 contacts tested for COVID-19 found negative. MOPH is culturing the virus and will compare its genetic structure with the virus in Uzbekistan to find the origin of the infection of this patient

Timor-Leste

- No new case was reported since 27 August
- WHO handed over another RT-PCR machines along with reagents and consumables to national health laboratory (NHL) to further strengthen the COVID-19 response
- WHO handed over Anti-A, B, D monoclonal reagents to the national blood bank to maintain safe and adequate blood supply during the pandemic

Resource mobilization

- Total distributed resources to South-East Asia Region stand at USD 95.5 million which is 55% of total COVID-19 operational budget (USD 175 million) for 2020
- Proportion of funds distributed to countries stands at 92% (USD 87.6/ USD 95.5 million) and remaining 8% (USD 7.9 million) was distributed to WHO Health Emergencies (WHE)/SEARO

Cover story/ news feature/ new information

Countries in WHO South-East Asia Region sign declaration to fight COVID-19 as one

All Member countries of WHO South-East Asia Region today resolved to collectively fight COVID-19 and strengthen the Region's response with better equipped health systems to deliver essential health services during the pandemic.

"The spread of COVID-19 has impacted almost every community, overwhelmed health systems and disrupted economies and livelihoods with effects reaching far beyond the health sector. It has also disproportionately impacted the most vulnerable. WHO recently surveyed countries to understand better the priorities in the South East Asia Region. At the top of the agenda is maintaining essential health services," said WHO Director-General Dr Tedros Adhanom Ghebreyesus.

Signing the Declaration on 'Collective Response to COVID-19' along with Ministers of Health and representatives of Member countries, Regional Director, WHO South-East Asia Region, Dr. Poonam Khetrpal Singh, said, "People's ordinary health needs do not disappear during such extraordinary events. Health security is not only about building capacity to prevent, prepare for and respond to acute events. It must also be about building capacity to maintain essential health services for the duration of response and into the recovery."

For further information: [News release](#)

SEARO's rapid adoption of diagnostic demands of the COVID-19 pandemic in the Region











































All 11 Member States in the WHO's South East Asia region (SEAR) have gained the capacity to detect SARS CoV-2 by rRT-PCR (Realtime Reverse Transcriptase Polymerase Chain reaction) and are actively performing laboratory detection of COVID-19. Till date, the region has performed over 66 million tests (90% of these from India and it is a combination of both RT-PCR and antigen tests) in around 2,280 laboratories (76% from India). Few countries in the region have also started using the Rapid Antigen Tests.

In the back ground of rising number of tests, the first round on External Quality Assurance Programme (EQAP) organized by WHO with a view to ensuring the quality of testing, National laboratories from 7 Member States (MS) achieved 100% concordance results with the global panel. The rest of the 4 Member States are in the process of receiving panels and due results reporting. As a part of ensuring the quality across all laboratories, the second round of EQAP is planned for the laboratories at the sub-national levels in MS. SEARO through the WHO Supply chain task force has so far mobilized (shipment pipeline) to countries 1,583,800 (206,168) tests of Manual PCR, 1,299,200 (963,020) swabs, 1,427,688 (312,420) of extractions addressing 74 requests from all 11 member countries in the region with an estimated total cost of USD 20.8 million.

Against this background, the necessity has arisen for acquiring new knowledge, evidence, practical experience and best practices. Keeping this in mind, SEARO created a platform for knowledge sharing within the framework of the Incident Management Structure of the Health Emergency Department in SEARO. In operationalization of this knowledge sharing platform, the regional webinar series for laboratories established during 2019 played a significant role. This included active information and experience sharing by global and regional experts and centers of excellence including reference laboratories. Over 10 regional and Country specific webinars were organized covering essential areas like Molecular testing, biosafety, serology, Country experience sharing and laboratory supplies. Some of the webinars such as detecting antibodies were aligned with webinars focusing on clinical management and sero-epidemiological surveys for applied benefits.

Knowledge revolving around diagnostics evolves at a rapid pace similar to other areas related to COVID-19. Hence, live guidance that change timely with evolving new evidence has proven to be critical. In this regard, recently published WHO interim guidance on Diagnostic testing for SARS-CoV-2 and Antigen-detection in the diagnosis of SARS-CoV-2 infection using rapid immunoassays have been very useful to MS. Significance of these documents lies in the inclusion of additional background information on SARS CoV-2, clinical diagnostic algorithm, new findings such as simplified and optimized specimen collection, alternative extraction methods, pooling of specimens for NAAT, antigen detection for diagnosis, antibody testing, genomic sequencing and quality assurance. The interim guidance on antigen testing for diagnosis elaborates the selection, implementation and performance of Antigen based RDTs and its potential role for case management and surveillance for COVID-19. The key aspects namely use of antigen based Rapid Diagnostic Tests, their selection and procurement and field implementation considerations have been extremely useful for countries to further shape the response in a region where the pandemic has only begun to unfold.

Despite planning for responding to an Influenza pandemic in the last decade, the current pandemic has unfolded unresolved challenges. The laboratory information management system and its effective operations seems to be a critical challenge unfolded in the region due to the massive and rapid expansions of Sub-national laboratories, which in turn affects the overall turnaround time of testing and reporting. Besides, the need for continuous supply of essential laboratory consumables, availability of adequately competent human resources, infiltration and extensive use of laboratory diagnostic kits with sub-optimal performance, issues related to specimen transport within Country due to Public Health and Social Measures and ensuring equitable access to lab diagnostic services in a geographical representative manner by expanding sub-national laboratories are major challenges faced by the region in ensuring optimal laboratory capacity in the region in this pandemic and beyond, underscoring the need for resilient laboratory systems for future.

Member state	Lockdown	Public transport (Inter province movement)	Education sector	Public gathering	Mask
Bangladesh	Partial 	Resumed 		Ban 	Mandatory in public place
Bhutan	Phased lifting of lockdown 	Resumed 		Ban 	Mandatory in public place
DPR Korea	None 	Restricted 		-	Mandatory in public place
India	Zonal 	Restricted 		Ban  >100 (Religious, political, sports, cultural functions) funeral 20	Mandatory in public place
Indonesia	Partial 	Restricted 		Requirements vary across Provinces	Mandatory in public place
Maldives (Emergency extended until 6 OCT)	Partial 	Resumed 	 (until 17 Sep)	Ban  >5	Mandatory during travel
Myanmar	Partial  lockdowns In various regions	Restricted 		Ban  >30	Mandatory in public places
Nepal	Partial 	Restricted  Inter district >200 cases restricted		Ban  >25	Required
Sri Lanka	None 	Resumed 		None 	Mandatory in public places
Thailand (Emergency extended until 30 Sep)	None 	Resumed * 		No restrictions 	Mandatory in public place
Timor-Leste (Emergency extended until 4 OCT)	None 	Resumed 		No restriction 	Required

1. Yellow highlight indicates the change occurred in the past week.
2. Lock-down: **Zonal** - Containment zones identified and Restrictions on movement and interaction imposed for containment zone in a gradient manner (India, Bangladesh); **Partial** – Varying degree of restrictions imposed in different sub-national areas (Indonesia, Myanmar, Nepal, Maldives)