

10	391 335	5 131	9 650 650	149 441
Countries reporting cases	New cases (week 45/2020)	New deaths (week 45/2020)	Total cumulative cases (at end of week 45)	Total cumulative deaths (at end of week 45)

Situation update:

- The weekly percentage increase in cumulative cases in the Region for week #45 was 3.95% (391 335) less than the previous weekly increase of 4.29% reported and percentage increase in deaths was 3.28% (5 131 deaths) which is slightly higher than reported percentage increase last week. The South-East Asia Region (SEAR) is now ranked fourth in the tally of highest weekly increase (4%) in cumulative cases among all WHO Regions followed by European Region (17%), Eastern Mediterranean Region (7%) and Region of Americas (5%)
- The highest weekly percentage increase in cases in the Region was reported from Sri Lanka (26%, 2 869 cases), followed by Myanmar (14.5%, 7 642 cases), Nepal (12%, 20 886 cases), Indonesia (6%, 24 932 cases) and India (4%, 323 672 cases)
- Two member states in the region, Bangladesh and Indonesia continue to report community transmission, while five namely India, Nepal, Maldives, Sri Lanka and Myanmar reported clusters of cases and remaining three, Bhutan, Thailand and Timor-Leste have reported sporadic cases
- In Sri Lanka, the sub-cluster Peliyagoda fish market has led to several sub clusters at the district level. It also led to massive widespread contact tracing efforts with overwhelming effects on those involved in contact tracing. More number of cases are expected in the fishing harbor locations and Colombo district as many people visited the fish market without adhering to public health and social distancing measures
- In Nepal, there was an improvement in testing numbers but has not reached the pre-festival levels
- In Maldives, cases continue to show a declining trend with concentration in Greater Malé region, while outside Malé there is a significant decline of cases. During the past week there was a new emerging cluster of cases in a group of expat workers working on airport upgradation. Contact tracing and sample collection efforts are ongoing
- There is likely community transmission in Myanmar and evidence of spread across the country. Yangon region contributes to 78% of total cases and 95% of deaths in the country. Maximum testing capacity levels have likely been reached and they are revising testing strategy to enhance the capacity by reducing testing for asymptomatic cases

Country	Transmission Status (Reported by Member State)	Cases	Deaths	CFR	Cases Per Million population	Deaths per Million population	Test Positivity Rate (Last 7 DMA)
Bangladesh	Community transmission	423 620	6 108	1.4	2 572.2	37.1	11.7%
Bhutan	Sporadic cases	364	0	0.0	471.7	0.0	0.5%
DPR Korea	No cases	0	0	0.0	0.0	0.0	
India	Clusters of cases	8 636 011	127 571	1.5	6 258.0	92.4	4.2%
Indonesia	Community transmission	444 348	14 761	3.3	1 624.5	54.0	13.9%
Maldives	Clusters of cases	12 030	41	0.3	22 255.4	75.8	2.9%
Myanmar	Clusters of cases	61 975	1 437	2.3	1 139.0	26.4	7.7%
Nepal	Clusters of cases	199 760	1 148	0.6	6 855.9	39.4	25.2%
Sri Lanka	Clusters of cases	14 715	41	0.3	687.2	1.9	3.6%
Thailand	Sporadic cases	3 847	60	1.6	55.1	0.9	0.4%
Timor-Leste	Sporadic cases	30	0	0.0	22.8	0.0	0.2%

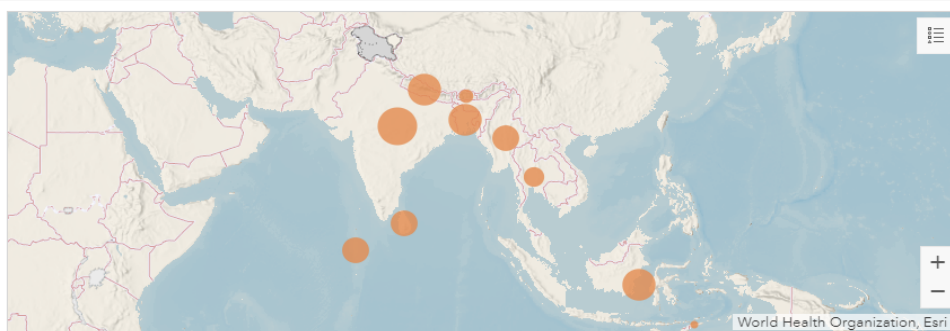
Table data as of 11 November 2020; 02 PM IST

SEAR Dashboard COVID-19

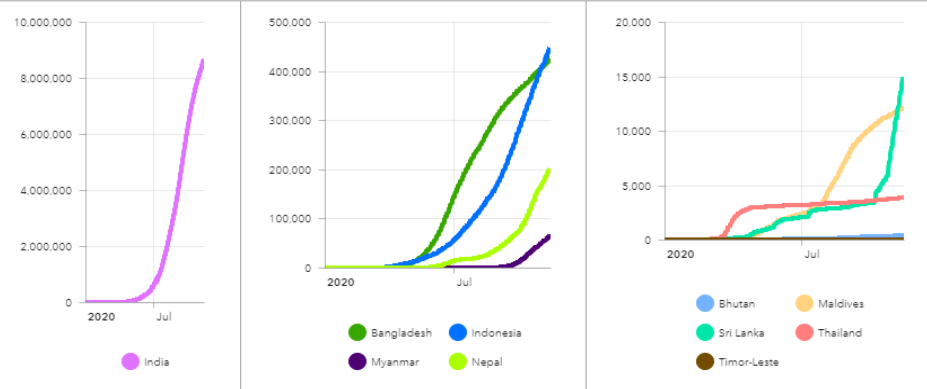


COVID-19 Situation in the WHO South-East Asia Region

SEAR total cases 9,908,674	Total deaths 152,557
Country - Confirmed cases (deaths)	
India - 8,728,795 (128,668)	
Indonesia - 452,291 (14,933)	
Bangladesh - 427,198 (6,140)	
Nepal - 204,242 (1,189)	
Myanmar - 64,453 (1,480)	
Sri Lanka - 15,350 (46)	
Maldives - 12,085 (41)	
Thailand - 3,861 (60)	
Bhutan - 369 (0)	
Timor-Leste - 30 (0)	
DPR Korea - 0 (0)	



Cumulative confirmed COVID-19 cases by date of report



Source: WHO SEARO

The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

Global total cases
51,848,261

Total deaths
1,280,868

Country* - Confirmed cases (deaths)

United States of America - 10,124,555 (238,573)

India - 8,683,916 (128,121)

Brazil - 5,700,044 (162,829)

Russian Federation - 1,858,568 (32,032)

France - 1,829,688 (42,203)

Spain - 1,417,709 (40,105)

Argentina - 1,262,476 (34,183)

The United Kingdom - 1,256,729 (50,365)

Colombia - 1,156,675 (33,148)

Italy - 1,028,424 (42,953)

*Source: WHO HQ (Top ten countries)

as of 11:00 AM (IST); 13 November 2020

Operational update

Key updates

Risk Communication and Community Engagement:

- The weekly public insights through digital monitoring reveal that key public concerns are:
 - The effect of pollution on COVID-19
 - Whether COVID-19 causes increase in incidence of blood clotting and strokes
 - Treatments for COVID-19
 - Symptoms
 - Whether air travel is safe
- WHO has developed, social media products on COVID-19 symptoms to address public concerns

Surveillance, rapid response teams, and case investigation:

- WHO SEARO is planning to update the testing strategy across the Region and review adequacy of testing in line with WHO recommendations. Support to review tests and cases in India at sub-national level is ongoing
- Focused technical support to WHO Country Office (WCO) in DPR Korea, Myanmar, Bangladesh and Nepal for epidemiology and surveillance
- WHO SEARO collaborates with Sri Lanka to highlight lessons learnt on effective contact tracing experience

Points of entry:

- Ten out of 11 countries in the Region require negative COVID-19 test results for entry. Seven countries (Bangladesh, Bhutan, Indonesia, Maldives, Myanmar, Nepal and Sri Lanka) require that test is conducted 72 hours prior to travel for incoming passengers; Indonesia and Timor Leste require testing 7 days and 5 days prior to travel respectively, while India requires testing within 96 hours prior to travel for exemption from facility quarantine.
- The quarantine requirements in the Region vary from no quarantine in Maldives to 30 days in DPR Korea, 21 days in Bhutan, 14 days in Bangladesh, Indonesia, Timor-Leste, and Sri Lanka; 7 days facility quarantine followed by 7-day quarantine at home in India, Myanmar, and Nepal; and 14-day facility quarantine in Thailand

Clinical Management:

- Experts from WHO South-East Asia Region participated in a consultation meeting with WHO headquarters (HQ) on scaling up oxygen supply
- Planning to establish a core group of clinical management trainers for all Member States of South-East Asia Region (SEAR) and to conduct a training of trainers (ToT) programme. Ongoing coordination with clinical management experts to technically support Bangladesh in clinical management
- Discussions ongoing with tier one countries selected by the Global Influenza Programme for the supply of international reagent resource (IRR) lab supplies. SEARO is initiating lab procurement for Bhutan, Sri Lanka and Maldives. Scheduled a call with United States (US) Centers for Disease Control and Prevention (CDC) to plan influenza preparedness and response activities in SEAR supported through US CDC cooperative funds with the onset of Northern Hemisphere influenza season

Operational Support and Logistics:

- President of Sri Lanka appreciated WHO's support for timely delivery of 100 000 antigen (Ag) based rapid diagnostic test (RDTs) to strengthen the testing capacity. WHO is processing another batch of 100 000 Ag RDTs
- Diagnostics: South-East Asia Regional Office (SEARO) coordinated shipment and delivery of 1 934 700 tests of Manual PCR, 1 260 550 swabs, 1 884 416 of extractions
- Infection Prevention and Control: 5 406 400 three-ply face masks, 1 895 500 gloves, 218 050 gowns, 353 075 respirators, 81 550 goggles and 87 336 face shields have been shipped to the countries

- Case management: 50 units of Patient monitors, 671 units of oxygen concentrators, 200 units of pulse oximeter, and 110 infrared thermometers were shipped and others in pipeline

Key country updates

Bangladesh

- Number of new weekly (week 45) cases increased by 5.3% and deaths decreased by 8.7% compared to the previous week
- Of 421 921 total confirmed cases – 67.0% of reported cases were from Dhaka division, followed by Chattogram (12.3%), Khulna (5.5%) division. The highest death rate was reported in age group of 61 to 70 years old (31.5%). Male represented 72% and 77% of the total reported confirmed cases and deaths respectively as of 9 November
- A total of 2 456 644 laboratory tests with 17.2% overall positivity rate conducted by 115 laboratories (2 new laboratories during the reporting period) as of 9 November
- In week 45, the number of international flights has increased by 16% compared to previous week (143 and 137 respectively) while the number of incoming passengers decreased by 8.7% (21 683 and 23 750 respectively). 965 incoming passengers sent to institutional quarantine after screening at the airport
- Bed occupancy rate for general beds and Intensive Care Unit (ICU) was 21.9% (total 11 608) and 52.9% (total 564) respectively as reported by the Director General of Health Services (DGHS) as of 9 November

Cox's Bazar

- During week 45 (1 to 8 November) 6 new cases were confirmed among Rohingya refugee camps.
- WHO continues to foster peer to peer support and knowledge exchange on the full spectrum of the COVID-19 illness, from screening to rehabilitation, to optimize clinical health care in Cox's Bazar
- The first of four batches on basic first aid trainings has started with 16 nurse-driver teams from SARI ITCs, to strengthen the referral capacity, to transport critically ill patients from severe acute respiratory infections treatment centers (SARI ITCs) to the Intensive Care Unit at 250 Bed District Sadar Hospital
- A total of 10 982 Kg and 24.81 CBM of lab, medicines, flip charts, VTM, GBV stationary and medical equipment were distributed to implementing partners in the camps

Bhutan

- In total, all 19 active cases in isolation ward are in stable condition. No deaths reported due to COVID-19 as of 12 November
- Prime Minister's Office has taken over logistic management of quarantine facilities, while Ministry of Health (MoH) continues to provide technical support
- All incoming travelers were screened at point of entries (PoE) and quarantined for 21 days in a facility
- MoH continues to monitor high-risk areas including hotspots in collaboration of partners

DPR Korea

- No reported cases so far as of 12 November
- 13 675 total samples were tested by RT-PCR at interval of 10 days, no positive case was found as of 11 November
- 6 980 total people (including 6 972 nationals and 8 foreigners) were detected as suspected cases; 807 nationals were suspected between 29 October to 5 November as a result of intensified surveillance
- 220 people were quarantined between 29 October to 5 November, a total of 32 369 people were released from quarantine as of 5 November

India

- Active cases comprise of 5.73% (494 657) total positive cases (8 013 783) as of 11 November; sustained trend of steady decline in active cases but a spurt of cases is seen in Delhi, West Bengal, Karnataka, Andhra Pradesh and Tamil Nadu
- Union Minister of Health and Family Welfare reviewed COVID and public health measures with health ministers of 9 States - Andhra Pradesh, Assam, Haryana, Himachal Pradesh, Kerala, Punjab, Telangana, Rajasthan, and

West Bengal. Health Minister exhorts Delhi to implement Prime Minister's Jan Andolan to reduce the momentum of COVID-19 by the end of the year

- Union Minister for Minority Affairs issued Haj 2021 guidelines in light of the COVID-19 pandemic
- National Institution for Transforming India (NITI) Aayog calls for "Mask-wali Diwali, Mask-wali Christmas and Mask-wali Eid" to avoid surge during festive season
- Ministry of Health and Family Welfare (MoHFW) to ensure that vaccines will be available to all priority population groups, irrespective of the region
- Ministry of Culture issues SOPs for re-opening museums, art galleries, and exhibitions delineating preventive measures to contain spread of COVID-19.
- University Grants Commission (UGC) issues guidelines for re-opening universities and colleges post lockdown

Indonesia

- In week 45 (2 to 8 November), there were 24 932 new cases reported with an average of 3 562 new cases per day. Of 448 118 cumulative cases, 59.2% cases were in Java
- The National COVID-19 Task Force (Satgas) expressed the need for an evaluation of laboratory capacity for COVID-19 testing
- MoH has designated eight additional hospital-based severe acute respiratory infection (SARI) sentinel sites and five primary health care influenza like illness (ILI) sentinel sites for COVID-19 and influenza testing
- Gavi, the Vaccine Alliance, held a briefing for all Indonesian development partners on the COVAX Advance Market Commitment (AMC). WHO updated partners on national preparedness for COVID-19 vaccine introduction, with focus on the use of Vaccine Introduction Readiness Assessment Tool (VIRAT) to assess gaps and identify challenges
- WHO is supporting National Institute of Health Research and Development with laboratory preparations to conduct a sero-epidemiological study as part of the WHO Unity Study
- WHO, Satgas and the MoH Directorate of Surveillance and Health Quarantine conducted a webinar called 'Learning from the ground – effective, friendly and safe contact tracing' for subnational contact tracers

Maldives

- Health Minister announced extension of the State of Public Health Emergency until 5 December. The emergency was first declared in March, and has been extended 7 times since then
- 272 new confirmed cases reported since last week; 99.83% of cases are from known and existing clusters as of 11 November
- Over 210 000 samples tested to date, around 1 800 tests per day were maintained during last week with overall positivity rate of 2% as of 11 November
- A new cluster emerged in a group of expat workers at a camp of over 200 people working for airport upgradation. One death reported during the week. Over 72 contacts identified, and samples taken for testing
- Cases continue to concentrate mostly in Greater Malé region. 673 active cases reported from Malé, with 99% of all cases in the atolls having link to history of travel from greater Malé area and quarantine
- Health Emergency Operations Centre (HEOC) has announced easing of the restriction measures in the Greater Malé region due to the steady decline of cases and test positivity rates. This includes cutting down of curfew hours from 12 am – 4 am and allowing of contact sports events as well as gatherings of not more than 15 persons at a time

Myanmar

- The UN Secretary-General appealed for a ceasefire across Myanmar ahead of 8 November elections to tackle surging COVID-19 cases
- The Government is planning to adopt a new community-based containment strategy in an attempt to reduce high transmission rate in the coming months

- The Government procured RT PCR test kits worth USD 650 000 from the Japan International Cooperation Agency (JICA). JICA delivered test kits in two batches, first at the end of October and the second on 6 November. National Health Laboratory (NHL) provided GeneXpert training to two new GeneXpert expansion sites
- Department of Medical Research, MoHS has planned to conduct seroprevalence survey in Yangon Region
- A total of 2 120 Myanmar nationals returned home between 4 and 9 November with the government-assisted relief flights. More than 3 300 people from other regions and states who returned to Ayeyarwady Region for voting, underwent COVID-19 tests at checkpoints and close to 80 of them tested positive as of 11 November

Nepal

- Government of Nepal has reversed its recent decision and decided to provide free treatment and testing for COVID-19 through public hospitals and laboratories. People who can pay are open to avail paid services from private hospitals and laboratories
- MoHP has adopted policy to use antigen based rapid diagnostic test (Ag-RDT) for community or public health interventions and RT-PCR testing for symptomatic cases
- MoHP has revitalized Case Investigation and Contact Tracing (CICT) to start from the Kathmandu valley which will be further expanded to high-burden areas gradually
- Of 199 759 total cumulative cases, 76.5% (152 884) cases were reported from three provinces (Province 1, Bagmati and Lumbini) and 66.5% (132 837) were males and as of 12 November
- A total of 1 564 214 RT-PCR tests performed nationwide by 74 designated COVID-19 labs functional across the country as of 11 November. WHO is supporting seroprevalence activities at National Public Health Laboratory (NPHL)
- Health sector partners handed over 131 Oxygen Concentrators, 50 pulse oximeters, 515 000 face-shield, 28 ventilators, 10 000 antigen based RDTs, 9 457 personal protective equipment (PPE), 45 ELISA kits, 15 000 goggles, 700 000 medical masks, 15 000 KN95 masks, 62 venturi masks, 50 000 examination gloves, 15 000 gowns and 62 nasal oxygen cannula to MoHP

Sri Lanka

- Total cumulative cases are 14 715 of which 2 971 new cases reported during the week as of 11 November
- The total cluster size of Minuwangoda factory including sub-clusters is 11 232 (76.3% of total cases). The current clusters have spread to almost all 25 districts in the country. The most affected province is the Western Province, which accounts for about 25% of the population as of 11 November
- Curfew has been imposed in high risk areas – whole of Gampaha district and part of Kurunegala, Kalutara and Colombo. The curfew imposed in Colombo district from 29 October was lifted on the 9 November
- All active cases have been admitted to dedicated COVID 19 treatment hospitals; 4 356 patients are admitted in 52 hospitals as of 11 November
- Repatriation has been temporarily stopped, only 234 people were repatriated during the week. Cumulative number is more than 50 836 people
- 2 362 people were quarantined in facilities and over 71 000 people in home quarantine as of 11 November
- WHO convened a brainstorming session on strategic media engagement for COVID-19

Thailand

- Ministry of Public Health (MoPH) reported 37 new cases since last reporting on 5 November, majority of new cases were Thai and non-Thai nationals who traveled from abroad and later tested positive while in quarantine centers. A few domestic cases were reported
- Of total 3,847 confirmed cases, about 95% (3,685) have recovered, 2% (60) have died and 3% (102) are still receiving treatment or under observation in hospitals as of 11 November
- After number of deaths stayed at 59 for 5 months, Thailand reported one new death from COVID-19

Timor-Leste

- WHO coordinated and supported the Ministry of Health (MoH) and Hospital Nacional Guido Valadares (HNGV) to carry out a two-day orientation on Mental Health and COVID-19. More than 20 health workers and mental health focal points participated, including nurses from the acute care unit at HNGV, MoH staff, and mental health case managers from all 13 municipalities
- WHO technical team visited the Oecusse District Health Office and referral hospital to assess and support the ongoing sentinel surveillance

Resource mobilization

- Total distributed resources to South-East Asia Region stand at USD 96.5 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 88.9/ USD 96.5 million) and remaining 8% (USD 7.6 million) distributed to WHE/SEARO
- Implementation rate against distributed resources increased from 47% to 48% (with increase of USD 0.8 million during the week) reaching a total of USD 46.5 million. Utilization rate increased from 66% to 67% (with increase of USD 0.8 million) reaching a total of USD 64.9 million

Cover story

Building SARI clinical management capacity in South-East Asia

The WHO Regional Office for South-East Asia (SEARO) has developed a training programme to strengthen clinical management of severe acute respiratory infections (SARI) in the region and reduce preventable mortality from influenza and COVID-19.











































































In highly populated regions like South-East Asia, robust clinical management of severe acute respiratory infections (SARI) is critical to reduce preventable mortality, especially among high-risk groups. The role of strong SARI clinical management in protecting vulnerable populations is recognized in the [Global Influenza Strategy \(2019–2030\)](#), which explicitly calls for action to strengthen countries' capacities for triage, clinical management and treatment of patients with severe influenza. Several post-outbreak evaluations and after-action reviews in WHO's South-East Asia region (SEAR) have similarly recommended improving clinical management.

One way of strengthening clinical management, as recommended in [WHO's guide on Pandemic Influenza Risk Management \(PIRM\)](#), is to develop and disseminate guidance on the topic. SEARO has gone one step further and developed a regional training resource for SARI clinical management. The new resource is intended to train clinicians, especially in non-ICU settings, with a view to reducing preventable mortality during influenza epidemics and pandemics. Working with the [IMCI-IMAI Alliance](#), SEARO has established five training modules on the following topics:

1. Management of patients in severe respiratory distress
2. Development of a two-volume manual, for district clinicians, on the management of SARI patients
3. The role of the clinician in surveillance and control of influenza and other nationally important communicable diseases
4. Guidance for course directors on conducting SARI management on-site training to district clinicians
5. Mentoring and monitoring & evaluation for the hospital clinical team

Each module is designed to be tailored to different country contexts. This flexibility in approach has already proved valuable as the modules were quickly and easily customized to managing COVID-19. So far, the regional resource has been used to create country-specific training packages for Myanmar, Cox's Bazar in Bangladesh and Timor Leste. The training was already delivered in Myanmar (conducted partially online and partially in-person), Timor Leste and Cox's Bazar with involvement of national and overseas trainers. Funded through the cooperative agreement between SEARO and the [US Centers for Disease Control and Prevention](#), the training resource is expected to serve as a region-wide tool for managing SARI patients efficiently and effectively during outbreaks and pandemics of influenza or other respiratory pathogens.

Public Health and Social Measure (5 – 12 November 2020)

Member State	Lockdown	Public transport (Inter province movement)	Education sector	Public gathering	Mask
Bangladesh	None 	Resumed    		Ban 	Mandatory (Religious places specifically)
Bhutan	None  (Travel from high risk areas- 7 days quarantine & test on day 8)	Resumed    	 (students moved to schools in low risk districts)	Ban 	Mandatory
DPR Korea	None 	Restricted    			Mandatory
India	Partial  (only in containment zones)	Resumed*    	 (Flexibility for online classes)	 (Outdoor allowed; Indoor gathering <200)	Mandatory
Indonesia	Partial 	Restricted*    		Requirements vary across Provinces	Mandatory
Maldives (Emergency until 5 Dec)	Partial  (Greater male region curfews 12pm -4 am)	Resumed    	 (schools for grade 8 & lower to remain closed)	Ban  > 15	Mandatory
Myanmar	Partial 	Restricted*    		Ban  >30	Mandatory
Nepal	Partial  (district- and sub-district-level)	Restricted*     (Inter district >200 cases restricted)		Ban  >25	Mandatory
Sri Lanka	Partial  (Isolation areas identified- Risk level 3 declared)	Restricted*    		Ban 	Mandatory
Thailand (Emergency extended until 30 Nov)	None 	Restricted*     (at Myanmar border)		No restriction 	Mandatory
Timor-Leste (Emergency extended until 3 Dec)	None 	Resumed   		No restriction 	Mandatory

* Public transport resumed with limited capacity and in limited routes – variations at Sub National level

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WHO South-East Asia Regional Office

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