

<b>10</b>	<b>350 623</b>	<b>4 761</b>	<b>10 376 072</b>	<b>158 735</b>
<b>Countries reporting cases</b>	<b>New cases (week 47/2020)</b>	<b>New deaths (week 47/2020)</b>	<b>Total cumulative cases (at end of week 47)</b>	<b>Total cumulative deaths (at end of week 47)</b>

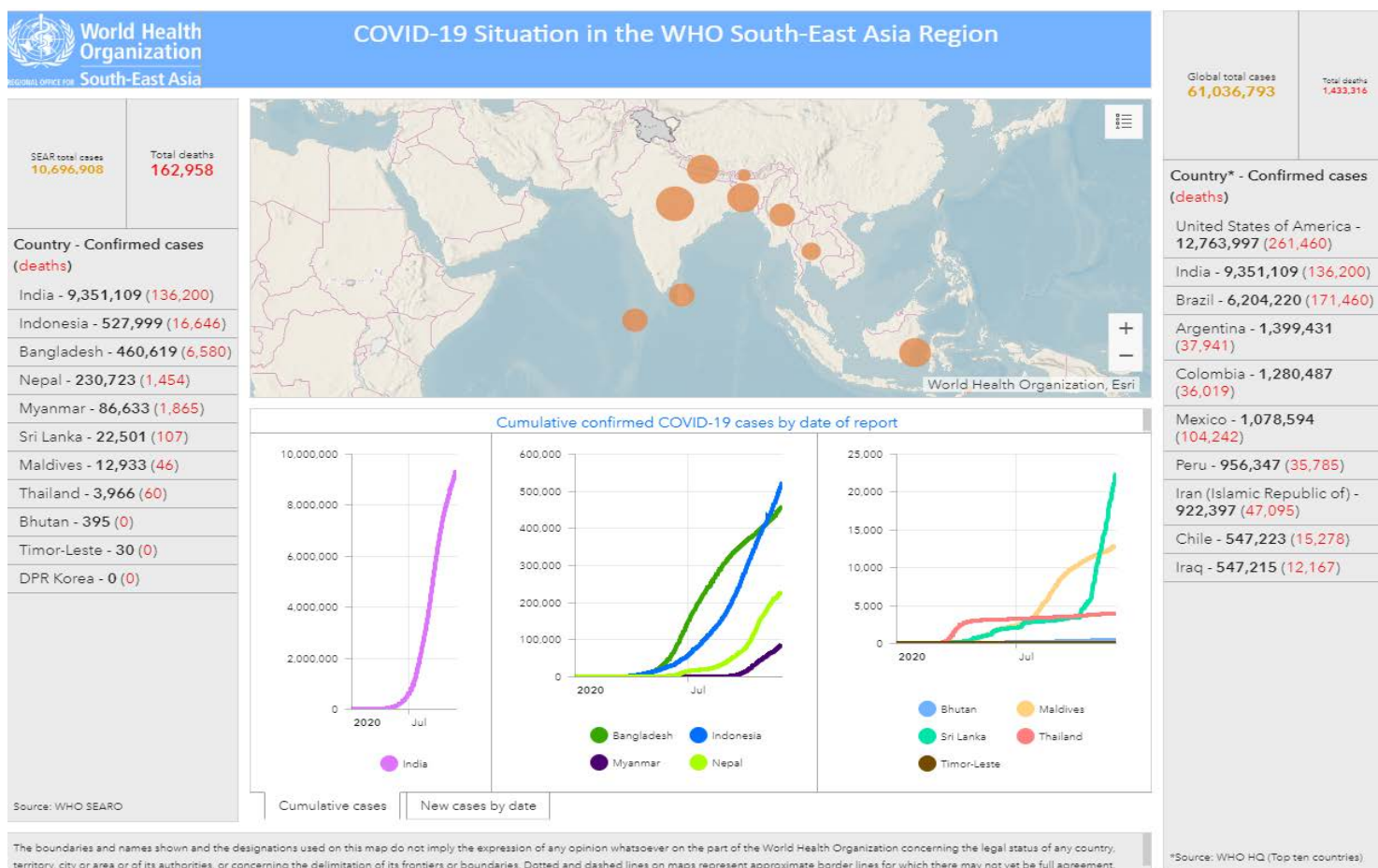
#### Situation update:

- The weekly percentage increase in cumulative cases in the Region for week #47 was 3.5% (350 623) less than previous weekly increase of 3.8% and percentage increase in deaths was 3.09% (4 761 deaths) as compared to last week. The South-East Asia Region (SEAR) is now ranked fifth highest in weekly increase (3.9%) in cumulative cases among all WHO Regions followed by European Region (11%), Eastern Mediterranean Region (7%) Region of Americas (7%) and Western Pacific Region (5%)
- The highest weekly percentage increase in cumulative cases in the Region was reported from Sri Lanka (17%, 2 884 cases), followed by Myanmar (15%, 9 970 cases), Indonesia (7%, 30 555 cases), Nepal (5%, 10 532 cases), and India (3.2%, 281 227 cases)
- Two Member States in the Region, Bangladesh and Indonesia continue to report community transmission, while five India, Nepal, Maldives, Sri Lanka and Myanmar reported clusters of cases and remaining three, Bhutan, Thailand and Timor-Leste have reported sporadic cases
- In Bangladesh, the number of reported cases has increased over the past month along with increase in testing numbers as well as test positivity rate. The increased cases are reportedly attributed to festival and wedding season and poor adherence to public health and social measures (PHSM)
- In Sri Lanka, Minuwangoda- Peliyagoda cluster is active and total cluster is at 17 435 cases, 83.2% of total cases reported in the country. The current clusters have spread to all 25 districts in the country. Additional 28 deaths were reported in the past week which is nearly 30% of total deaths reported
- In Maldives, cases continue to show a declining trend in Greater Malé region. Two recently developed clusters over last week - one among Valena International Airport Cargo division and the other among construction workers in non-operational under construction resort of Kuda Huraa are being contained by aggressive contact tracing and lab testing
- In Myanmar, community transmission is likely in many States with evidence of spread across the country. 75% of the cases and 95% of the deaths are reported in Yangon. Although there is a consistent increase in testing numbers for the past few weeks, the test positivity rate shows a consistent decline
- In Thailand, sporadic cases are reported in quarantine centers and refugee camps, including in border areas

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	456 438	6 524	1.4	2 771.5	39.6	14.3%
Bhutan	Sporadic cases	389	0	0.0	504.1	0.0	0.5%
DPR Korea	No cases	0	0	0.0	0.0	0.0	
India	Clusters of cases	9 309 787	135 715	1.5	6 746.2	98.3	4.3%
Indonesia	Community transmission	516 753	16 352	3.2	1 889.2	59.8	14.2%
Maldives	Clusters of cases	12 889	46	0.4	23 844.6	85.1	3.8%
Myanmar	Clusters of cases	85 205	1 846	2.2	1 566.0	33.9	8.2%
Nepal	Clusters of cases	227 640	1 412	0.6	7 812.8	48.5	19.8%
Sri Lanka	Clusters of cases	22 028	99	0.4	1 028.7	4.6	4.0%
Thailand	Sporadic cases	3 961	60	1.5	56.7	0.9	0.5%
Timor-Leste	Sporadic cases	30	0	0.0	22.8	0.0	0.0%

Table data as of 27 November 2020; 11 AM IST

## SEAR Dashboard COVID-19



as of 11:00 PM (IST); 27 November 2020

## Operational update

### Key updates

#### Country-level coordination, planning and monitoring:

- WHO SEARO in discussion with WHO Country Offices (WCO) in Maldives and Sri Lanka, submitted proposal on 'Health sector emergency response support in Sri Lanka and Maldives' focusing on mitigating the health impact of the COVID-19 crisis in the two countries to European Union (EU). The project will be implemented over a period of 36 months and some of the key areas of work will include building the capacity for clinical management of patients, risk communication and community engagement (RCCE) as well as strengthening partnerships for an effective and efficient response

#### Risk Communication and Community Engagement:

- Regular digital monitoring for public insights reveal key concerns for COVID-19 symptoms, vaccines, and misinformation in South-East Asia Region

#### Surveillance, rapid response teams, and case investigation:

- WHO solidarity fund of USD 400 000 distributed to Nepal and Myanmar for enhancing contact tracing. The analysis and findings on challenges and successes of contact tracing in the Region has completed
- WHO SEARO is reviewing testing strategies across the Region

#### Points of entry, international travel, and transport:

- All Points of Entry (PoE) are closed or with some restrictions in all Member States except Maldives
- Nepal extends shutdown of all entry/exit points at international border till 15 December. All travellers to present COVID-19 negative report within 72 hours prior to first port of call bound to Nepal. Visa submission requires pre-approval letter from concerned Ministries except Diplomatic, UN, INGOs & Nepali origin of non-resident Nepalese

#### National laboratories:

- WHO SEARO achieved 100% concordance in the external quality assessment project (EQAP) for national laboratories testing for COVID-19 by real time polymerase chain reaction (RT-PCR) in 10 countries
- The external quality assessment project (EQAP) panels for sub-national laboratories were shipped to 3 countries and in transit to other countries of the Region. These panels will enable to verify quality assurance at the sub-national laboratories
- Regional webinars are planned to roll out the training packages for antigen-detecting rapid diagnostic test (Ag RDTs) in the Region

#### Infection prevention and control:

- WHO Health Emergencies (WHE) team along with the Health Systems Development (HSD) team provided regional comments for finalizing the infection prevention and control (IPC) key performance indicators (KPIs) with WHO headquarters
- On request, facilitation of key information sharing on bio safety level 4 (BSL-4) laboratories and national IPC programmes to WHO country office in India
- Preliminary discussion held with WCO Nepal on their plans for conducting a project to prevent occupational related exposure to COVID-19 and other occupational health hazards and WHO's support for coordinating technical support from relevant other departments

#### Clinical Management:

- Experts from WHO South-East Asia Region and WHO focal point for clinical management represented in the guideline development group session for developing the living document on 'Lopinavir' and 'Ritonavir'

- Preliminary discussion was held to conduct a training of trainers (ToT) for a core group of clinical management trainers for all Member States of South-East Asia Region (SEAR) on management of severe acute respiratory infections (SARI) cases in intensive care units (ICU) and non-ICU settings
- Ongoing coordination with different clinical management expert networks including GOARN to find clinical management experts to technically support Bangladesh, Nepal and Timor Leste in clinical management

#### **Operational Support and Logistics:**

- Diagnostics: South-East Asia Regional Office (SEARO) coordinated shipment and delivery (shipment pipeline) of 1 934 700 (539,780) tests of manual PCR, 100 000 (2 500 000) tests of Ag RDTs, 2 262 150 (1 927 814) swabs, 1 884 416 (733 134) of extraction kits
- Infection Prevention and Control: 6 838 000 three-ply face masks, 2 030 500 (766 905) gloves, 553 500 (800) gowns, 591 295 (3 200) respirators, 84 070 goggles and 369 236 face shields have been shipped to the countries
- Case management: 81 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**

- In the reported week (16-27 November), the number of new weekly cases increased by 24.1% compared to previous week (15 008 and 12 095 respectively) while the number of new weekly deaths increased by 52.8% (194 and 127 respectively)
- Case Fatality Ratio (CFR) is static at 1.43 since last week
- Of 449 760 total confirmed cases – 81.1% (364 611) recovered, 1.43% (6 416) died and 17.51% (78 733) are active cases. Male represented 72% and 77% of the total reported confirmed cases and deaths respectively as of 23 November
- A total of 2 665 131 laboratory tests with 16.88% overall positivity rate conducted by 117 laboratories (1 new laboratory during the reporting period) as of 23 November
- In week 47, the number of international flights has increased by 2.8% compared to previous week (148 and 144 respectively) leading to increase in number of incoming passengers by 6.8% (24 455 and 22 896 respectively). 1 361 incoming passengers sent to institutional quarantine after screening at the airport
- Bed occupancy rate for general beds and Intensive Care Unit (ICU) was 25.5% (total 11 428) and 53.9% (total 555) respectively as reported by the Director General of Health Services (DGHS) as of 23 November

#### **Cox's Bazar**

- During the reporting period (16-22 November), WHO epidemiology team has achieved an important milestone by identifying 85% of the contact persons (1109/1307) through the camp wise dedicated Contact Tracing network (34 supervisors and 311 volunteers)
- During the reporting period, 2 093 kilograms and 10.67 cubic meters (CBM) of medicines, flip charts, viral transmission media (VTM), stationery and medical equipment were distributed to implementing partners in the camps

#### **Bhutan**

- 9 new cases were reported last week, the number of weekly cases decreased by 31% compared to previous week. In total, all 19 active cases in isolation ward are in stable condition. No deaths reported due to COVID-19 as of 25 November
- Health Minister convened a virtual meeting with Chief Medical Officers (CMO) and District Health Officers (DHO) to discuss COVID-19 preparedness and response in the districts

### **DPR Korea**

- No reported cases so far as of 25 November
- 16 914 total samples (16 903 from locals and 11 samples from Foreigner's) were tested by RT-PCR at an interval of 10 days, but none came positive for COVID-19 as of 25 November
- 8 594 total people (including 8 586 nationals and 8 foreigners) were detected as suspected cases; 804 among nationals were suspected between 12-19 November as a result of intensified surveillance
- WHO handed over three (PCR) machines and accessories to the Dandong Consular Office in China for transporting through land-route

### **India**

- Active cases comprise 4.88% (452 344) of total positive cases (9 266 705) as of 26 November
- New cases continue their downward slope indicating adoption of COVID Appropriate Behaviour among the population, and effective containment measures by the State/UT governments. 61% of daily new cases are contributed by Delhi, Kerala, Maharashtra, West Bengal, Rajasthan and Uttar Pradesh
- India's capital, Delhi, has seen an alarming spike in recent weeks, leading to an overwhelming number of deaths in the last several days, so authorities have allowed all coronavirus facilities of the city to engage with MBBS (medical) students in final years, interns and others to assist doctors on duty at a fixed honorarium
- Prime Minister chairs high level meeting with all Chief Ministers to review status and preparedness of COVID-19 response and management with emphasis and focus on eight States reporting high cases
- Prime Minister reviewed preparedness of COVID-19 vaccine delivery, distribution, and administration
- Minister of Health addressed the National Council of Confederation of Indian Industries (CII) on COVIN portal and network to ensure last mile vaccine Delivery
- Ministry of Health and Family Welfare (MoHFW) deputed high-level Central teams to Himachal Pradesh, Punjab, Uttar Pradesh, Haryana, Rajasthan, Gujarat and Manipur to assist in strengthening COVID containment, surveillance, testing and infection prevention in these states.
- Union Home Minister inaugurated mobile COVID-19 RT-PCR lab jointly developed by SpiceHealth and the Indian Council of Medical Research. The test report would be available within 6-8 hours and able to test up to 3000 samples per day
- Centre advises States/UTs to increase testing levels to track the undetected and missed out patients

### **Cyclone Nivar**

- Tropical cyclone 'Nivar' with estimated wind speed of 120-130 kilometers per hour (KMPH) made landfall over Tamil Nadu. 3 died and 3 injured, hundreds of damaged houses and about 227 317 people evacuated in 3 085 relief camps as of 26 November
- To establish COVID-19 surveillance in all relief camps. Screening continues and any person with symptoms is directed to shift to nearest health facility

### **Indonesia**

- In week 46 (9 to 15 November), there were 33 116 new cases reported with an average of 4 731 new cases per day and the mortality rate was 0.25 per 100 000 population
- Of 511 836 cumulative cases, 60.1% cases were in Java. Jakarta had the highest number of confirmed cases per one million population, followed by West Papua, East Kalimantan, West Sumatra and Bali
- WHO is supporting the Ministry of Health (MoH) to establish an active reporting system for data on Adverse Events of Special Interest (AESI) in preparation for COVID-19 vaccination
- WHO, in collaboration with the Ministry of Health (MoH) and the National COVID-19 Task Force (Satgas), conducted meetings with contact tracers, supervisors and data managers from 10 priority provinces. The purpose of the meetings was to evaluate contact tracing in the provinces for the previous seven days



- WHO is supporting the MoH in monitoring and evaluating adherence to health protocols in offices, public places and health care facilities

#### **Maldives**

- 554 new confirmed cases reported since last week; 99.84% of cases are from known and existing clusters as of 24 November
- Over 230 000 samples tested to date, around 1 500 tests per day was maintained during last week, with overall positivity rate of 2-3% as of 24 November
- Around 100 additional cases were reported during the week from the two new clusters in airport cargo handlers (60 positive so far from 317 staff) and second cluster in a non-operational resort under construction (107 positive of 2000 staff). The clusters are being continuously monitored and measures are being implemented as per guidance from Health Emergency Coordination Committee (HECC)
- The Ministry of Tourism has announced 118% increase in arrival of tourists in the fourth month. In total 56 541 tourists have arrived since 15 July after reopening of borders

#### **Myanmar**

- The State Counsellor stated the plans for relaxing restrictions for businesses to resume, while noting the increase in the COVID-19 transmission rate after the election
- Mandalay health authorities confirmed the implementation of home quarantine strategy for people contacted with COVID-19 patients due to the shortage of volunteers in facility quarantine centres
- Department of Medical Research, MoHS has finalized the survey protocol to conduct seroprevalence survey in Yangon Region
- A total of 1 335 Myanmar nationals returned home between 17 to 23 November with the government-assisted relief flights as of 25 November
- The Government credited USD 17 341 000 to nearly 700 businesses under the second COVID-19 loan programme

#### **Nepal**

- Of 227 640 total cumulative cases, 14 723 cases were reported last week as of 26 November
- A total of 1 700 000 RT-PCR tests performed nationwide by 77 designated COVID-19 labs functional across the country as of 26 November. WHO is supporting National Public Health Laboratory (NPHL) in forecasting laboratory tests/supplies
- Ministry of Health and Population (MoHP) planned to conduct vulnerability surveys at the district level

#### **Sri Lanka**

- Total cumulative cases are 20 967 of which 2 892 new cases reported during the week as of 25 November
- The total cluster size of Minuwangoda factory including sub-clusters is 17 435 (83.2% of total cases). The current clusters have spread to almost all 25 districts in the country. The most affected is Colombo Municipal Council (CMC) area in the Western Province, which accounts for about 25% of the population as of 25 November
- Curfew has been imposed in high risk areas
- Ministry of Health (MoH) reported 28 deaths during the week, total cumulative deaths now rise to 94. The committee appointed to analyze all COVID-19 deaths by MoH has handed over its report to Directorate General of Health Services (DGHS)
- Repatriation flights commenced on 11 November which was temporarily stopped, 1 920 people were repatriated during the week. Cumulative number is 53 931 people as of 25 November
- 4 849 people were quarantined in facilities and over 63 000 people in home quarantine as of 25 November

## Thailand

- Ministry of Public Health reported 54 new cases since the last reporting, the majority of new cases were Thai and non-Thai nationals who traveled from abroad and later tested positive while in quarantine centers. A few cases were detected at the Points of Entry and border province
- Of the total 3 942 confirmed cases, about 96% (3 788) have recovered, 1.6% (60) have died and 2.4% (94) are still receiving treatment or under observation in hospitals as of 26 November
- Ban Um Piam refugee camp in Tak province reported a case. Fifty-five low and high-risk contacts were identified and tested by RT PCR, few samples are pending results
- The cabinet approved the budget to procure 26 million doses of the COVID-19 vaccine from AstraZeneca. The amount will be sufficient for about 13 million nationals categorized as priority groups

## Timor-Leste

- Minister of Health met with WHO, UNICEF and World Bank to discuss the financial and technical commitment of respective agency to the introduction and roll out of the COVID-19 vaccine. The Director-General of the Ministry of Health (MoH) together with UNICEF and WHO participated in the first meeting of the Advance Market Commitment (AMC) Engagement Group
- WHO handed over additional IT equipment to strengthen the disease surveillance and response system to the surveillance & quarantine team of the Ministry of Health (MOH)

## Resource mobilization

- Total distributed resources to South-East Asia Region stand at USD 96.1 million which is 55% of total COVID-19 operational budget (USD 175 million) for 2020. Additional fund amounting to USD 111 000 received last week and distributed to WHO Country Office in Sri Lanka
- Proportion of funds distributed to countries stands at 93% (USD 89.1/ USD 96.1 million) and remaining 7% (USD 7.04million) distributed to WHE SEARO
- Implementation rate against distributed resources increased from 49% to 52% and utilization from 70% to 72%
- WHO Country Offices to accelerate and ensure full implementation of the funds expiring by December 2020

## Cover story

### Revitalizing influenza surveillance in South East Asia during COVID-19

In South East Asia, the initial response to COVID-19 severely affected influenza surveillance, as key personnel and infrastructure were diverted to cope with the crisis. But now a multi-pronged strategy, jointly developed and deployed by WHO and countries, has reinstated much needed influenza surveillance activities to ensure continued pandemic preparedness.

By the end of April 2020, 10 out of 11 countries in WHO's South East Asia region (SEAR) had begun reporting COVID-19 cases in different phases of transmission and were already responding to the pandemic. A decade of pandemic influenza preparedness in the region meant countries were able to quickly scale up their COVID-19 responses: by repurposing the national influenza workforce, infrastructure and preparedness platforms, they managed to rapidly increase their COVID-19 detection and surveillance capacities. But this success came at a cost to influenza surveillance, which suffered significantly reduced levels of laboratory diagnosis, virus sharing and data reporting.

WHO's regional office for SEAR (SEARO) soon recognized the need to re-prioritize influenza surveillance, even in the face of the COVID-19 crisis. Supported by WHO global and regional senior management and guided by the Global Influenza




















































































Programme (GIP), SEARO developed country-specific plans to get the job done. Working with WHO country offices and Ministry of Health officials, it did SWOT (strengths, weaknesses, opportunities and threats) analyses of national surveillance frameworks, searched for possible solutions to key problems and gaps, identified potential WHO support, provided recommendations for action and carried out joint performance monitoring, in parallel to the ongoing COVID-19 responses. The GIP's webinars on the interface between influenza and COVID-19, held in June and July 2020, were particularly useful in helping countries understand the need to maintain a high level of commitment to sustaining influenza preparedness in the region.

The result of this multi-pronged strategy is that all SEAR countries have now resumed influenza surveillance. In addition, three countries have started reporting both COVID-19 and influenza through Flu Mart, in line with the WHO operational considerations for COVID-19 surveillance using GISRS; and six more are working to do so too. The strategy also helped re-start the sharing of influenza viruses, which will provide vital information for the next vaccine composition meeting. The success of SEARO's revitalization strategy is due to a combination of strong leadership and advocacy from senior management, clear policy guidance from GIP, high levels of country engagement, joint action plans and specific support. All of this looks set to continue. Most recently, at the 73rd Regional Committee meeting, Ministers of Health agreed to strengthen regional pandemic responses by focusing on the committee's sixth flagship priority, to scale up capacities in emergency risk management. To that end, support from the Pandemic Influenza Preparedness (PIP) Framework Partnership Contribution in conjunction with technical guidance from GIP will continue to be invaluable for Member States.

Link: [https://us8.campaign-archive.com/?e= test\\_email &u=c35eb4938c7246655f6384192&id=ea84b2fe8a](https://us8.campaign-archive.com/?e=test_email&u=c35eb4938c7246655f6384192&id=ea84b2fe8a)



# Public Health and Social Measure (21 - 26 November 2020)

Member State	Movement restriction	Public transport (Inter province movement)	Education sector	Public gathering	Mask
<b>Bangladesh</b>	None 	Resumed    	 	Ban 	Mandatory (Govt strategy on no mask no entry/service)
<b>Bhutan</b>	None  (Travel from high risk areas- 7 days quarantine & test on day 8 )	Resumed    	 (students moved to schools in low risk districts)	Ban 	Mandatory
<b>DPR Korea</b>	National level  (within cities 	Restricted    	 	Ban  >5	Mandatory
<b>India</b>	Partial  (only in containment zones)	Resumed*    	 (Flexibility for online classes)	 (Outdoor allowed; Indoor gathering <200)	Mandatory
<b>Indonesia</b>	Partial 	Restricted*    	 	Requirements vary across Provinces	Mandatory
<b>Maldives</b> (Emergency until 5 Dec)	Partial  (Greater Male region curfews 12pm -4 am)	Resumed   	 (schools for grade 8 & lower to remain closed)	Ban  > 15	Mandatory
<b>Myanmar</b>	Partial 	Restricted*    	 	Ban  >30	Mandatory
<b>Nepal</b>	Partial  (closures at sub-district-level Kathmandu valley)	Restricted*    	 	Ban  >25	Mandatory
<b>Sri Lanka</b>	Partial  (Restrictions imposed in specified Isolation areas)	Restricted*    	 	Ban 	Mandatory
<b>Thailand</b> (Emergency extended until 15 Jan )	None 	Restricted*     (at Myanmar border)	 	No restriction 	Mandatory
<b>Timor-Leste</b> (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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