



Asia and the Pacific Region

COVID-19 Situation Report No. 10

United Nations Population Fund



In the midst of the COVID-19 pandemic, Viet Nam was hit by a tropical cyclone which caused widespread flooding. UNFPA is ensuring that the needs of women and girls are met. © UNFPA Viet Nam

Reporting Period: 1 - 30 November 2020

Regional Situation

- With over 10 million confirmed cases, India continues to have the highest number of COVID-19 cases in the region and second highest globally. Whereas transmission has reduced over the last month, India still sees a significant number of new cases daily.
- The pandemic continues to spread across other countries in Asia and the Pacific. Iran, Indonesia, Pakistan and Bangladesh are still seeing sustained numbers of new cases per day in the second half of November 2020.
- Exacerbated drought in Afghanistan is among the potential impacts of La Niña of particular concern. The Federated States of Micronesia may also experience increase in the frequency of Tropical Cyclones.

UNFPA Regional Results Highlights (January - November 2020)

- 128 Women-Friendly Spaces supported by UNFPA.
- 15 adolescent and youth-friendly spaces supported by UNFPA.
- 61 mobile clinics supported by UNFPA provide SRH and GBV services to remote and hard-to-reach areas.
- 149,200 Dignity Kits distributed. The majority of kits have been customised for the COVID-19 context with additional protective items and information on available GBV services.
- 88 health facilities provide specialised GBV services, including clinical management of rape.
- 167 health facilities provide Emergency Obstetric Care supported by UNFPA.

Situation in Numbers

 **14,053,116** Confirmed COVID-19 Cases

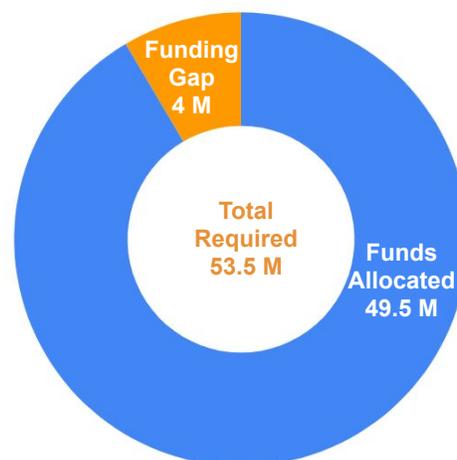
 **258,445** COVID-19 Deaths

Source: WHO, 23 December 2020

Key Population Groups

-  **50 M** Pregnant Women
-  **1 B** Women of Reproductive Age
-  **965 M** Young People (age 10-24)
-  **347 M** Older Persons (age 65+)

Funding Status for Region (US\$)



Regional Response Summary

Coordination

National level:

- UNFPA's activities are in support of government response plans and are conducted in partnership with the UN country team, humanitarian country team and/or disaster management team. Activities are coordinated through national and sub-national coordination mechanisms, including through the cluster/sector system where activated.
- UNFPA leads or co-leads the GBV and SRH sub-sectors/clusters or working groups in most countries, as well as co-leads selected pillars of the UN's framework for the socio-economic response to COVID-19 in several countries.

Regional level:

- UNFPA co-leads the regional Protection against Sexual Exploitation and Abuse (PSEA) task team. UNFPA also co-leads the UNiTE working group on eliminating violence against women and the Risk Communication sub-group on Vulnerable and Marginalised Populations.
- UNFPA chairs the H6 platform for the countries in the WHO South East Asia region to coordinate support on sexual and reproductive, maternal, neonatal, child and adolescent health. UNFPA is a member of several regional inter-agency working groups, including the COVID-19 Working Group, Gender in Humanitarian Action Working Group and the Logistics Working Group as well as Issue Based Coalitions.
- UNFPA hosts the inter-agency Regional Emergency GBV Advisor (REGA) team providing specialized support to countries in Asia and the Pacific.
- UNFPA Pacific Sub-Regional Office¹ co-leads the mental health and psychosocial support cell, the health services delivery cell and telehealth sub cell.

Continuity of sexual and reproductive health (SRH) interventions, including protection of health workforce

All 22 UNFPA country offices in Asia Pacific and the PSRO are supporting continuity of SRH interventions by:

- **Ensuring the continuity of and access to quality lifesaving SRH information and services** for women, adolescents and youth.
- **Supporting national- and local-level planning, coordination and monitoring** to ensure access to SRH services. This includes advocacy, provision of technical and programmatic assistance as well as information management support.
- **Strengthening operational and logistics support to global supply chains**, including provision of personal protective equipment (PPE) to health workers and ensuring the supply of modern contraceptives.

In addition:

- 18 country offices and the PSRO are investing in SRH capacity strengthening, including training frontline health workers and partners on maternal and newborn health services, including infection prevention and control.²

Country examples:

- **Afghanistan:** Conducting rapid assessments of maternity hospitals to assess hospital readiness to ensure infection prevention and control and the protection of maternity health care providers.
- **Bangladesh:** 43,373 people directly reached with SRH information and awareness activities since January 2020.
- **Bhutan:** UNFPA Bhutan continues to work towards availability and improvement of maternal health services in all 20 district health facilities during the nationwide lockdown.
- **China:** UNFPA continues to provide technical assistance to various UNFPA Country Offices on the procurement of PPE for health workers.
- **DPRK:** Prepositioned stocks of Oxytocin and Reproductive Health Kits are expected to last until the end of the year, supporting over 360,000 pregnant women.

¹ Fiji, Kiribati, Federated States of Micronesia, Palau, Marshall Islands, Samoa, Solomon Islands, Tonga and Vanuatu

² Afghanistan, Bangladesh, Bhutan, Cambodia, DPRK, India, Indonesia, Iran, Lao PDR, Mongolia, Myanmar, Nepal, Pakistan, Papua New Guinea, Philippines, Timor-Leste and Viet Nam



AN AGE-INCLUSIVE RESPONSE TO COVID-19

Iran's 7 million older persons are particularly vulnerable to the COVID-19 pandemic. Older persons, particularly those who do not have access to health services, are among the most vulnerable. To date, nearly 80% percent of deaths in Iran are among people aged 60 years old and above.

UNFPA is leveraging its comparative advantage in population ageing and data in collaboration with the State Welfare Organization to meet the needs of older persons. To support the social service system, UNFPA and partners primarily address three key challenges: (1) the critical lack of health and hygiene supplies to protect staff and older persons and to prevent transmission of COVID-19 in the provision of social care; (2) the lack of awareness among older persons and their care providers in preventing transmission of COVID-19; and (3) limited capacities among community care providers to deal with the current crisis.

UNFPA, jointly with other UN agencies, are supporting the Government in implementing a comprehensive age-sensitive multi-sectoral response to COVID-19. This includes strengthening the capacities of the health and social service system and providing PPEs to health and social service providers. Activities are implemented through close engagement with affected communities themselves, in particular social workers.

Support has also been extended to generate a solid evidence base, including through a socioeconomic impact analysis of COVID-19 on households in collaboration with the Statistical Center of Iran; a regional study on the impact of COVID-19 on older persons with the support of HelpAge; and development of guidelines and protocols.

Continuity of SRH interventions, including protection of health workforce continued.

Country examples continued:

- **India:** 30,000 older persons aged 65+ reached with critical SRH services in UNFPA priority states since the outbreak of the pandemic.
- **Indonesia:** 132 pregnant mothers received cash and voucher assistance in Central Sulawesi between April and September 2020, enabling them to access essential SRH services.
- **Malaysia:** UNFPA together with the National Population and Family Development Board is providing SRHR outreach for low income groups to overcome challenges in accessing services as a result of movement restrictions.
- **Maldives:** Service disruptions in the Maldives due to COVID-19 mean that there may be two additional unintended pregnancies every day, raising the already high total to twelve unintended pregnancies per day. UNFPA works to ensure that SRH information and services remain available and accessible for all, even during the pandemic.
- **Mongolia:** 201 adolescents and youth received online counselling on SRH, family planning and mental health issues through online platforms.
- **Myanmar:** 38,954 women of reproductive age (aged 15-49) were reached with SRH services between January and October 2020.
- **Nepal:** 6,219 women of reproductive age were reached with family planning services between January and October 2020.
- **Pakistan:** 6 mobile clinics provide SRH services to refugees and host families affected by the COVID-19 pandemic, across Pakistan.
- **Philippines:** UNFPA supports the continuity of maternal health services in the province of Cebu by equipping health facilities, strengthening inter-local health zone coordination amidst COVID-19 and providing cash and voucher assistance to pregnant mothers.
- **Thailand:** A one-year project on safe delivery targeting vulnerable populations in areas with high maternal vulnerabilities will be implemented by the Ministry of Public Health supported by UNFPA and Reckitt Benckiser.
- **Timor-Leste:** 1,003 women of reproductive age were reached with family planning information and services in rural and remote areas in response to travel restrictions imposed to tackle the pandemic.
- **Pacific Sub-regional Office:** 8,246 women of reproductive age were reached with SRH services in Samoa, Vanuatu and Fiji following disasters caused by weather-related events. Many of these services were provided using a mobile service delivery modality due to movement restrictions.





Following Tropical Cyclone Harold in Vanuatu, UNFPA provided sexual and reproductive health services in affected provinces.

Photo © UNFPA Pacific Sub-regional Office

Addressing Gender-Based Violence

UNFPA country offices are addressing GBV by:

- **Supporting national strategies and response plans** to strengthen GBV prevention and response services through technical and programmatic assistance.³
- **Investing in capacity strengthening of GBV response service providers, including health practitioners**, to provide timely, quality and confidential services to survivors of GBV.⁴ Topics include adapting to remote service delivery modality for case management, psychosocial support, updating referral mechanisms and safe and ethical data gathering.
- **Ensuring the continuity and accessibility of life-saving GBV services** for women and adolescent girls. This includes medical support, psychosocial counselling, hotlines, shelters, one-stop crisis centres, case management, dignity kit distribution and referrals.⁵
- **Leading or co-leading inter-agency coordination mechanisms for GBV** risk mitigation and response in emergencies.⁶

Country examples:

- **Afghanistan:** All 26 UNFPA-supported Family Protection Centers are active in 22 provinces and provide medical, psychosocial and referral services to GBV survivors.
- **Bangladesh:** All 23 Women-Friendly Spaces in Cox's Bazar continue to provide comprehensive GBV case management services, psychosocial support and life-saving services in addition to referrals. Integrated SRH services are available in 19 Women-Friendly Spaces.
- **Bhutan:** Knowledge and skills of more than 60 community-based volunteers on intimate partner violence and COVID-19 prevention were enhanced.
- **India:** 19,000 Dignity Kits customised for the COVID-19 context with additional protective items and information on available GBV services were distributed to women and girls.
- **Lao PDR:** Supporting the Lao Women's Union to conduct awareness-raising on COVID-19 and GBV and providing psychosocial support for migrant women in provinces to which a large number of migrants have returned, including Savanakheth, Saravan, Champasack, Xayyaburi, Oudomxay, Luang Namtha, Bolikhamxay, Khammouane, Attapue and Vientiane capital.
- **Myanmar:** UNFPA distributed more than 24,026 Dignity Kits and 16,2761 mini-Dignity Kits to women and girls in IDP camps in Kachin and northern Shan States and to quarantine centers in Shan, Kaying, Mon and Rakhine States, in collaboration with the Department of Social Welfare.
- **Nepal:** UNFPA in Nepal is working to ensure continuity of multi-sectoral GBV prevention and response services through One Stop Crisis Management Centres, safe houses and shelters including case management, psychosocial support and referral services in seven districts adapting both remote and physical outreach modalities.
- **Pakistan:** UNFPA supported the Social Welfare Department in Khyber Pakhtunkhwa to implement a social media campaign to facilitate outreach of helpline services for people who might experience violence.
- **Papua New Guinea:** Justice and social service providers were trained on the protection against and prosecution of human trafficking crimes and the impacts of COVID-19 on trafficking in seven provinces.
- **Sri Lanka:** 30 people were trained on various aspects of GBV response services, including clinical management of rape.
- **Pacific Sub-Regional Office:** 6,050 people reached with GBV prevention, risk mitigation and response services following disasters caused by weather-related events in Fiji and Vanuatu.

³ Afghanistan, Bangladesh, Bhutan, Cambodia, China, India, Indonesia, Iran, Lao PDR, Malaysia, Mongolia, Myanmar, Nepal, Pacific Sub-Regional Office, Pakistan, Philippines, Papua New Guinea, Sri Lanka, Thailand and Timor-Leste

⁴ Bangladesh, Bhutan, India, Indonesia, Lao PDR, Fiji, Maldives, Mongolia, Myanmar, Pacific Sub-Regional Office, Pakistan, Papua New Guinea, Philippines, Sri Lanka, Timor-Leste, Thailand and Viet Nam

⁵ Afghanistan, Bangladesh, Bhutan, Cambodia, India, Indonesia, Iran, Lao PDR, Maldives, Malaysia, Mongolia, Myanmar, Nepal, Pacific Sub-Regional Office, Pakistan, Philippines, Papua New Guinea, Sri Lanka, Thailand, Timor-Leste and Viet Nam

⁶ Afghanistan, Myanmar, Bangladesh (national GBV cluster and Cox's Bazar GBV sub-sector); India (UN sub group on GBV), Indonesia, Iran, Lao PDR, Mongolia, Nepal, Pakistan, Papua New Guinea, Philippines, Thailand and the Pacific region



"Am I getting married today?"

These are the words that we should never hear from children.

Mother and daughter, Calima and Mimah, are committed to ending child marriage.

Photo © UNFPA Philippines

Impact assessment on the health and socioeconomic impact of COVID-19

Afghanistan, Bhutan, Bangladesh, Cambodia, China, India, Indonesia, Lao PDR, Malaysia, Maldives, Mongolia, Myanmar, Nepal, Pakistan, Papua New Guinea, Philippines, Sri Lanka, Thailand, Timor-Leste, Viet Nam and PSRO are currently engaged in, or have completed, inter-agency assessments of the socio-economic impact of COVID-19. In many other countries, UNFPA is developing more theme-specific assessments.

APRO has supported UNFPA country offices modelling the prospective potential impacts of COVID-19 on maternal health and family planning indicators across 21 countries in the region.

Risk communication and community engagement

UNFPA country offices are undertaking SRH and GBV risk communications and community engagement activities adapted to the local context and language. This includes sharing key messages and health education materials, GBV and MHPSS information for women of reproductive age, pregnant women, youth, elderly, people with disabilities, LGBTQI communities, female health workers and internally displaced populations; and supporting toll-free hotlines where people can access accurate information.

Country examples:

- **Cambodia:** Social media interventions on SRHR, GBV and mental health complement ongoing media campaigns led by the government.
- **China:** An estimated 4 million people were reached by UNFPA and its partners, the National Center on Women and Children's Health of China CDC and Xinhua News Agency, with public communication activities and accurate and updated information and messages on infection prevention, hygiene practices, SRHR and gender issues through social and other media platforms.
- **Indonesia:** 4,176 young people (72% girls) participated in online interactive comprehensive sexuality education sessions.
- **India:** 31,300,000 people were reached with awareness raising messages on COVID-19, through both offline and online platforms including social, electronic and print media and on-ground activities in UNFPA priority states.
- **Iran:** UNFPA has been engaged in joint advocacy through social media in collaboration with the Ministry of Health in support of frontline female healthcare workers who are responding to COVID-19.
- **Lao PDR:** The mobile application Noi Yakhoo provides young people with information regarding feelings, relationships, mental health, gender, health issues, menstruation, pregnancy, sexuality, sexually transmitted infections, contraception and life skills.
- **Mongolia:** A legendary Mongolian queen counsels adolescents about life and love through a chatbot avatar on Facebook.
- **Pakistan:** A UNFPA neighborhood watch project has reached 300,000 people with awareness on COVID-19 and SRH in six districts of Karachi through 600 youth, transgender and women activist volunteers.
- **Philippines:** A national mental health support programme for survivors of GBV, which includes service provision, information sharing and awareness raising, was launched. Activities are implemented by the Philippine Mental Health Association.
- **Viet Nam:** UNFPA is supporting ministries to implement a series of talk shows on domestic violence to raise awareness on the increased risk of violence against women at home during periods of lockdown.
- **Pacific Sub-Regional Office:** UNFPA continues to liaise with various Risk Communications and Community Engagement Teams and support the development of contextualised IEC materials targeting women of reproductive age, female headed households, pregnant women, survivors of GBV and older persons.

UNFPA raises awareness, shares guidance and showcases achievements through media outreach.

Asia Pacific Regional Office:

- We are frontline GBV responders: Supporting survivors of gender-based violence during COVID-19 ([link](#))

Afghanistan:

- Acknowledging the impacts of COVID-19 on GBV ([link](#))
- Working to Raise the Voices of Gender-Based Violence Survivors ([link](#))

Bangladesh:

- Nusrat helps survivors of violence find inner peace in Cox's Bazar ([link](#))
- Roving midwives of Bangladesh ([link](#))

Mongolia:

- Helping women in Mongolia escape violence and rebuild confidence ([link](#))
- Continuing lifesaving services for gender-based violence survivors during COVID-19 in Mongolia ([link](#))
- 8 start-up businesses of young herders established during COVID-19 in Mongolia ([link](#))
- UNFPA Mongolia COVID-19 SitRep #5 November 1 - 15, 2020 ([link](#))

Myanmar:

- The Asia and the Pacific Sexuality Education Virtual Exhibition 2020 ([link](#))
- Distribution of Dignity Kits for women and girls at quarantine centers in Kyaukme Township, Northern Shan State ([link](#))

Pakistan:

- 139 women undergo fistula repair surgery ([link](#))

Philippines:

- Mother and daughter seek to end the practice of child marriage ([link](#))
- Dignity Kits reaching pregnant and lactating women and gender-based violence survivors who have been impacted due to lockdowns ([link](#))

Timor-Leste:

- Emergency Obstetric and Newborn Care training ([link](#))
- Women and girls in quarantine facilities receive Dignity Kits ([link](#))

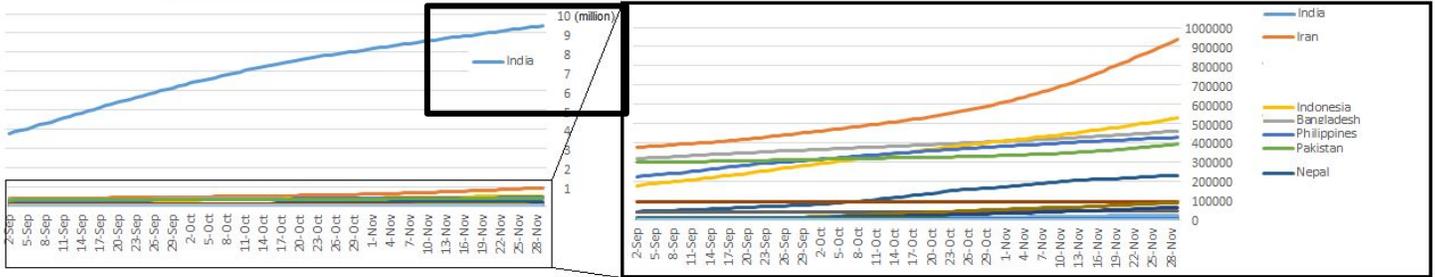
Viet Nam:

- In response to the Viet Nam's devastating floods, UNFPA offers crucial support to central Viet Nam ([link](#))
- UNFPA in Viet Nam provides 3,700 Dignity Kits to support women at risk of violence in Covid19 context ([link](#))

Confirmed Cases

Number of cumulative cases

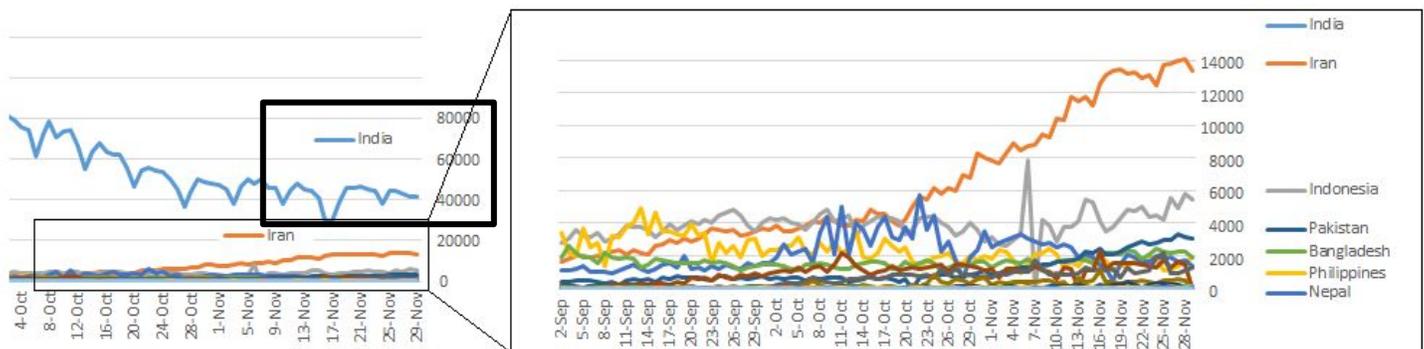
Top 7 countries with highest COVID-19 cumulative caseload in Nov 2020. Duration: Sep - Nov 2020 (WHO, <https://covid19.who.int/>)



- (1) **India** has the most cumulative cases in the Asia Pacific region, reaching more than 9.3 million cases alone.
- (2) **Iran, Indonesia, Bangladesh and Philippines** each has over 400K cases, followed by **Pakistan and Nepal**.

Number of new cases per day

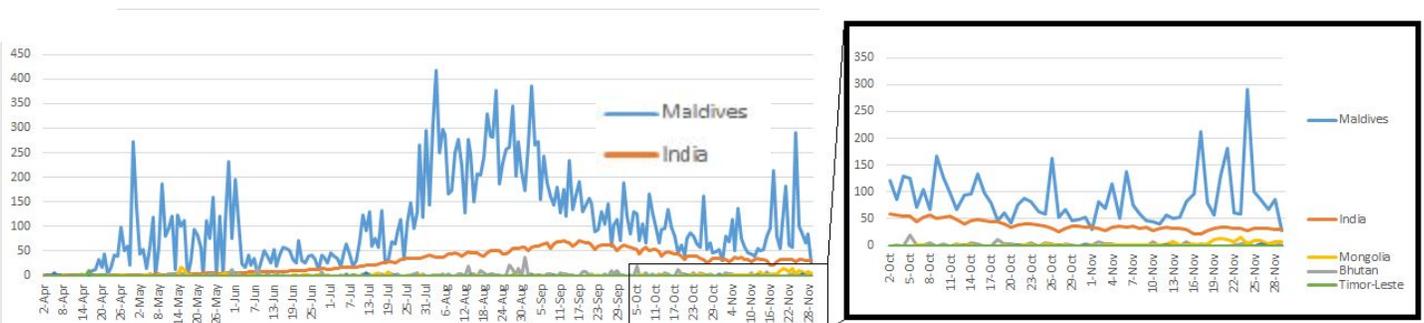
Top 7 countries with highest COVID-19 daily caseload in Nov 2020. Duration: Sep - Nov, 2020 (WHO, <https://covid19.who.int/>)



- (1) **India** continues to experience 25K -40K new cases per day despite a slightly down-going trend.
- (2) **Iran** has seen a sharp increase since late October, bringing the daily caseload to > 12K in late November.
- (3) **Indonesia, Pakistan and Bangladesh** are still seeing sustained numbers of new cases, with 2,000 - 6,000 new cases per day in the second half of November, 2020.

Number of new cases per million population

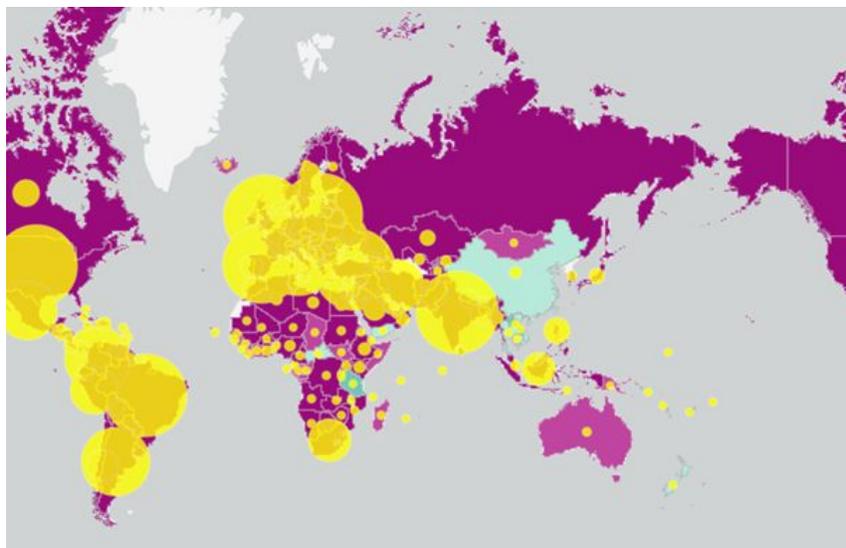
In Asia Pacific countries with small population size (< 5 million) plus India for comparison, Apr-Nov 2020 (WHO, <https://covid19.who.int/>)



- (1) Among Asia Pacific countries with small population size (< 5 million), **Maldives** has the highest number of daily new cases per million population (**~300 cases/ million population**) in Nov, 2020 (compared to less than 10 daily new cases/million population in other countries with < 5 million population).
- (2) Although India (orange line) has the largest number of daily new cases (25-40K/day) in November 2020, Maldives (blue line) has seen the highest daily new cases per million population for many months.

Confirmed Cases and Deaths (UNFPA programme countries) WHO, 23 December 2020

Country	Confirmed Cases	Deaths
Afghanistan	51,070	2,105
Bangladesh	503,501	7,329
Bhutan	482	0
Cambodia	363	0
China	95,998	4,773
Democratic People's Republic of Korea	0	0
India	10,099,066	146,444
Indonesia	678,125	20,257
Iran	1,170,743	54,003
Lao People's Democratic Republic	41	0
Malaysia	97,389	439
Maldives	13,524	48
Marshall Islands	4	0
Mongolia	1,006	0
Myanmar	116,982	2,465
Nepal	255,236	1,798
Fiji	46	2
Pakistan	460,672	9,474
Papua New Guinea	761	9
Philippines	462,815	9,021
Solomon Islands	17	0
Sri Lanka	38,059	183
Thailand	5,762	60
Timor-Leste	33	0
Vanuatu	1	0
Viet Nam	1,420	35
TOTAL	14,053,116	258,445



See UNFPA's [COVID-19 Population Vulnerability Dashboard](#) for real-time updates