Coronavirus Disease 2019 (COVID-19)

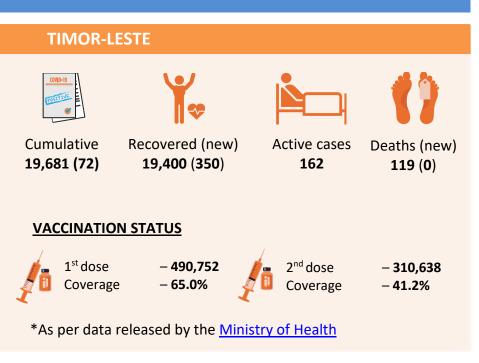
Situation Report – **121**

Timor-Leste



*Data as reported on 12 October 2021

SITUATION IN NUMBERS





HIGHLIGHTS

- Since the last edition of the weekly situation report, the Ministry of Health (MoH) reported 72 new cases of COVID-19, 350 recoveries and 0 deaths. The number of new cases and deaths have been on a declining trend since late August.
- Instituto Nacional de Saúde (INS) under the aegis of MoH with the support from WHO, UNICEF, and St John of God is conducting training of trainer (ToT) for health workers from Dili and Liquica municipalities, partners focal points COVID-19 immunization for Pfizer vaccine.
- In a bid to give an impetus to the COVID-19 vaccine coverage, HE Prime Minister Sr Taur
 Matan Ruak, along with Vice Minister of Health, WHO Representative and Director General of Health Services visited Ermera municipality on Monday.
- Preventing, detecting, and reporting substandard and falsified medicines are important parts
 of post-marketing surveillance to ensure that patients receive quality medicines that are safe
 and effective. The National Directorate for Pharmacy and Medicines (through the Department
 of Pharmacovigilance and Medicine Control) conducted a one-day dissemination workshop
 for health professionals (pharmacy technicians, medical doctors, and nurses) from CHCs and

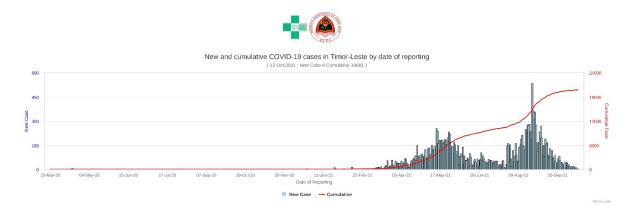
HPs on 6 October 2021 in Liquica and Dili DHS. The objective of this workshop was to disseminate information related to the importance of detecting medicines that are considered substandard and falsified and the process of reporting this issue to the relevant National Medicines Regulatory Authority (MoH). This activity is financially supported by WHO through GAVI post transition funds.

- The National University of Timor Lorosae (UNTL) and WHO signed the first Memorandum of Understanding (MoU) between the two institutions to strengthen the capacity and capability of UNTL over the next five years. This is on the back of a long standing and close collaboration between WHO and UNTL towards strengthening of the schools of medicine, nursing, midwifery, and allied health technicians. This MoU will further strengthen the collaboration in the areas of pre-service education, institution building at UNTL and facilitate joint health related research and development initiatives.
- The Director of Cabinet for Policy, Planning & Cooperation, MoH and WHO Representative participated in a two-day virtual inter-ministerial meeting to revitalize health promoting schools in South-East Asia Region. The objective of the meeting is to disseminate Call for Action on Health Promoting Schools (HPS) implementation and standards, identify the ways to strengthen school health programs advancing to meet the global standards for HPS, to improve coordination for implementation and investment for HPS, and to consider ways to harmonize health promotion, prevention and control of communicable/non-communicable disease, and risk factors to generate high impact for healthier behaviour for children and adolescents and the whole school community.
- WHO, with funding support from the EU, is providing technical and logistical support to train and build the Infection Prevention & Control (IPC) competency of health workers, support staff, security forces, border police and private establishments for COVID-19 through a comprehensive skill-building program with MoH, HNGV and partners. WHO Country Office has also developed guidelines, SoPs, algorithms, and high-quality IPC processes. In addition, a range of IPC products and consumables, including a large amount of PPE procured and provided to the MoH.
- The transmission assessment survey (TAS), the integrated NTD prevalence survey was launched in Dili to evaluate the impact of the National Neglected Tropical Diseases (NTDs) elimination and control program. Starting from the school of EBC 3 Farol and EBC 1.2.3 Manleuana, TAS is continuing until end of this month to target 1st and 2nd graders in 44 primary schools that will cover approximately 4,000 children for skin inspection and stool exam and around 2,500 students for lymphatic filarisis (LF) testing. Supported by KOICA, TAS has been implemented in all municipalities barring Oecusse and Dili since 2020 to find zero LF and yaws cases and <20% of soil transmitted helminthiasis prevalence. The survey results will guide the National Program to make programmatic decisions on the further steps for NTD elimination and control in TLS.

- The National TB Programme, MoH, with support from WHO organised a daylong refresher training on TB Vulnerability Assessment using Mobile TB Application. This is for the first time the national programme is embarking into a programmatic intervention for identifying the people at risk for developing TB, as well as for active case finding, and their treatment and prevention, using electronic case and GIS based surveillance system. TB Vulnerability Assessment is a strategic intervention prioritised by MoH in the Global Fund grant cycle 2021-23 with WHO technical assistance. The intervention will be first demonstrated in targeted population of 14 CHC areas in nine municipalities, before its full-scale implementation in the country.
- UNDP Timor-Leste continues to provide technical support to the MoH through procurement
 of essential medical supplies to respond to both COVID-19 and other health & medical
 requirements. Between late September-early October 2021, UNDP Timor-Leste brought in
 medicines, COVID-19 test kits and supplies, which include 100,000 bottles of multivitamin
 syrup, 35,000 kits of PCR test kits and four sets of medical fragments instruments. These
 supplies have been sourced from India and USA respectively.

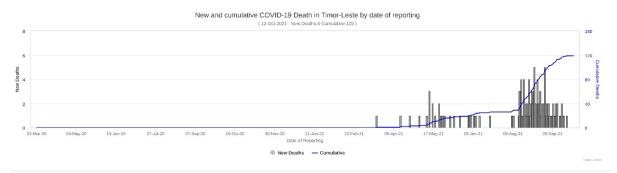
EPIDEMIOLOGICAL UPDATES

New and cumulative COVID-19 cases



- Number of new cases declined further in the current reporting period (6-12 October). A total of 72 new cases were reported during the last seven days compared to previous reporting period (29 September 5 October 2021). There was a 56% reduction.
- Cumulatively 19,681 COVID-19 confirmed cases have been reported since the start of the pandemic in March 2020. However, the vast majority of the cases (99%) were reported after March 2021.

New and cumulative deaths



• No death reported during the past seven days (6-12 October), the first time since the start of the current wave of transmission in August. Cumulatively 119 deaths have been reported in Timor-Leste since the first COVID-19 related death on 18 March.

Distribution of cases and deaths by municipalities

Distribution of newly reported, recovered, and active cases by municipalities, as of 05 October 2021)

Municipality	New case (6 th Oct- 12 th Oct 2021)	Last 7- day % change (case)*	Cumulative case	New recovered (06 th Oct- 12 th Oct 2021)	Cumulative recovered	New death (06 th Oct- 12 th Oct 2021)	Last 7- day % change (death)	Cumulative death	Active Cases (12 th Oct 2021)
Aileu	0	0	126	0	125	0		1	0
Ainaro	0	0	227	0	224	0		3	0
Baucau	7	-91	1535	75	1493	0		7	35
Bobonaro	6	-25	591	44	554	0		9	28
Covalima	5	400	778	8	766	0		2	10
Dili	43	-22	13636	162	13482	0		79	75
Ermera	0	0	1113	0	1111	0		2	0
Lautem	0	0	182	27	177	0		5	0
Liquica	0	0	125	1	124	0		1	0
Manatuto	0	-100	203	0	200	0		2	1
Manufahi	3	200	265	0	262	0		0	3
RAEOA	5	-74	389	29	381	0		3	5
Viqueque	3	50	511	4	501	0		5	5
TOTAL	72	-56	19681	350	19400	0		119	162

^{*}Change in new COVID-19 cases as compared with the previous 7 days

^{**}Change in new COVID-19 related deaths as compared with the previous 7 days

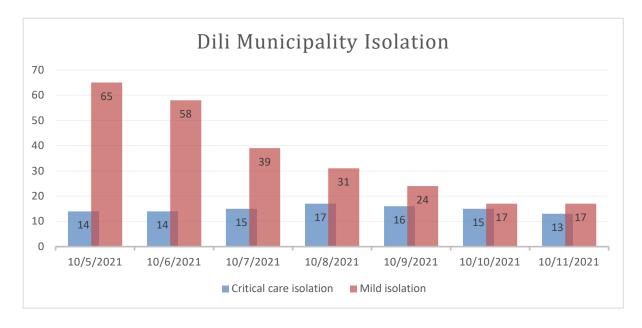
- The number of new cases reported in the current reporting period (6-12 October) decreased by 56% compared to the previous reporting period. Not all municipalities reported decrease in new cases though. In fact, more cases reported from Covalima, Manufahi and Viqueque. It is also noteworthy that no case reported in several municipalities in the past seven days, including Aileu, Ainaro, Ermera, Lautem, Liquica and Manatuto.
- No death reported nationwide.
- Currently there are only 162 active cases across the country.

• Number of test and test positivity rates

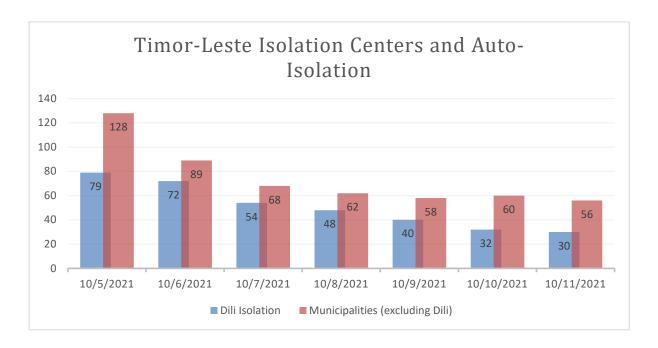
- During the current reporting period, 6-12 October, 1,463 tests were conducted as compared to 2,418 tests in the previous 7 days.
- The test positive rates of this reporting period averaged 4.9%, which is below 5% and considered as limited community transmission. Compared to the averaged test positivity rate of 6.8% in the previous 7 days, there was a 27.4% reduction.

CASE MANAGEMENT

 The isolation centre admissions in Dili continued to decrease steadily throughout October 2021. The numbers admitted to critical care isolation centres (Lahane and Vera Cruz) have also decreased and are between 10-20 patients. Since the start of the lockdown on 27 August 2021, there has been an overall decrease of 92% in admissions in Dili isolation centres.



• This chart shows the total number of people admitted to isolation centres and autoisolation (at home) in 12 municipalities compared to Dili. Throughout Timor-Leste, patients admitted to isolation centres have steadily decreased.



VACCINATION

At the time of writing this report (12th October morning), in total, 801,390 COVID-19 vaccine doses comprising 490,752, first doses (coverage 65.0%) and 310,638 second doses (coverage 41.2%) were administered in Timor-Leste. The breakdown of the number of doses administered and coverage by vaccine type and vaccine dose is given in Table 1.

Table 1: Number of COVID-19 vaccine doses administered and coverage in Dili and Timor-Leste by vaccine brand and doses as of 10:00hrs 12/10/2021

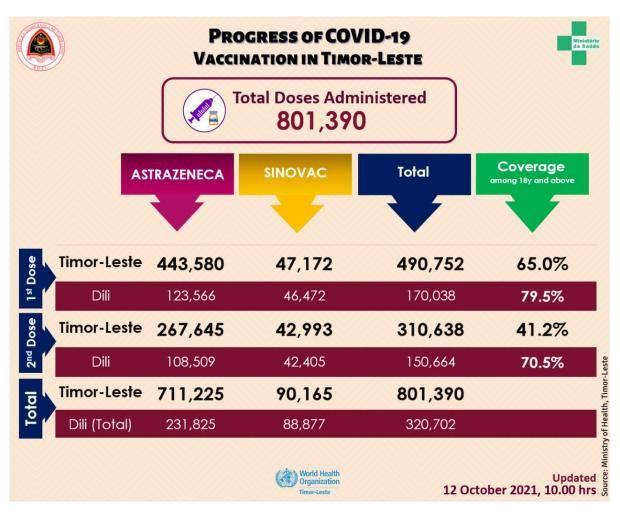


Figure 1: Coverage of COVID-19 vaccination by municipality in Timor-Leste as of 10:00hrs 12/10/2021

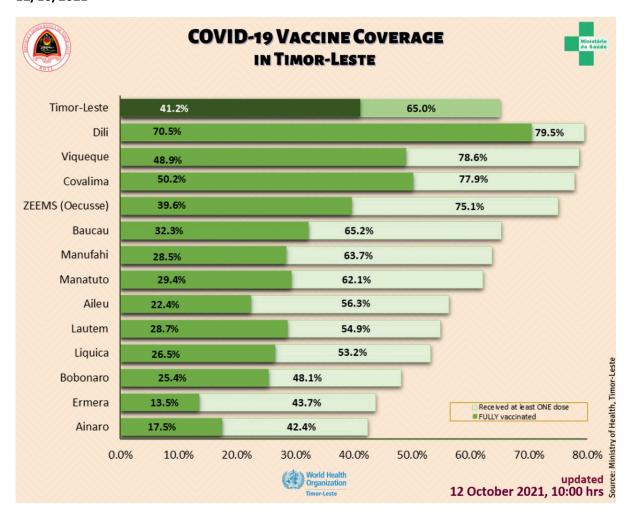


Table 2: Number of individuals vaccinated and AEFI by sex as of 10:00 hrs 05/10/2021

			AEFI							
Municipality		First Dose		S	econd Dos	e	Male	Female	Total	
	Male	Female	Total	Male	Female	Total	iviale	remaie	Total	
Dili	95,413	74,342	169,755	84,064	66,004	150,068	12	21	33	
Aileu	9,384	7,883	17,267	4,153	2,710	6,863	1	1	2	
Ainaro	8,080	6,473	14,553	3,560	2,498	6,058	0	0	0	
Baucau	24,939	22,767	47,706	13,265	10,143	23,408	0	0	0	
Bobonaro	14,635	12,078	26,713	7,841	5,681	13,522	4	6	10	
Covalima	15,963	14,778	30,741	10,742	9,020	19,762	7	6	13	
Ermera	18,125	13,926	32,051	6,266	3,602	9,868	0	0	0	
Lautem	10,207	9,549	19,756	5,446	4,840	10,286	2	0	2	
Liquica	12,609	11,278	23,887	6,606	5,232	11,838	0	1	1	
Manatuto	9,522	7,923	17,445	4,742	3,418	8,160	2	0	2	
Manufahi	11,372	9,609	20,981	5,741	3,660	9,401	1	1	2	
Viqueque	17,377	17,011	34,388	11,172	10,156	21,328	3	0	3	
ZEEMS (Oecusse)	15,838	15,385	31,223	8,446	7,500	15,946	0	0	0	
Total (without Dili)	168,051	148,660	316,711	87,980	68,460	156,440	20	15	35	
Total (Timor-Leste)	263,464	223,002	486,466	172,044	134,464	306,508	32	36	68	

Figure 2: Weekly progress of vaccination in Timor-Leste during as of 10:00 hrs 03/10/2021

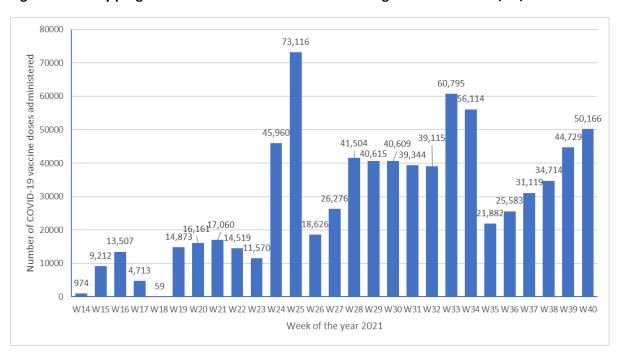


Table 3. Number of individuals among eligible population (18 years and above*) vaccinated in Timor-Leste with COVID-19 vaccine and coverage as of 10:00hrs 12/10/2021

Municipality	Eligible Population			Number vaccinated & Coverage											
		18-59y no		First Dose						Second Dose					
	High Risk Groups (20% Pop.)	comorbidit y (80% Pop.)	Total	High Risk Groups (20% Pop.)	Coverage	18-59y no comorbidit y (80% Pop.)	Coverage	Total	Coverage	High Risk Groups (20% Pop.)	Coverage	18-59y no comorbidit y (80% Pop.)	Coverage	Total	Coverage
Dili	29,980	183,822	213,802	52,067	173.7%	117,971	64.2%	170,038	79.5%	32,679	109.0%	117,985	64.2%	150,664	70.5%
Aileu	6,292	24,943	31,235	8,372	133.1%	9,210	36.9%	17,582	56.3%	3,489	55.5%	3,510	14.1%	6999	22.4%
Ainaro	7,410	27,726	35,136	3,861	52.1%	11,052	39.9%	14,913	42.4%	2,033	27.4%	4,104	14.8%	6137	17.5%
Baucau	18,141	55,175	73,316	13,844	76.3%	33,974	61.6%	47,818	65.2%	7,282	40.1%	16,406	29.7%	23688	32.3%
Bobonaro	13,268	43,476	56,744	8,405	63.3%	18,873	43.4%	27,278	48.1%	4,739	35.7%	9,660	22.2%	14399	25.4%
Covalima	8,725	31,503	40,228	8,593	98.5%	22,726	72.1%	31,319	77.9%	5,533	63.4%	14,664	46.5%	20197	50.2%
Ermera	14,350	60,793	75,143	7,803	54.4%	25,065	41.2%	32,868	43.7%	2,476	17.3%	7,682	12.6%	10158	13.5%
Lautem	8,455	27,963	36,418	6,004	71.0%	13,982	50.0%	19,986	54.9%	3,635	43.0%	6,825	24.4%	10460	28.7%
Liquica	9,588	35,597	45,185	5,923	61.8%	18,102	50.9%	24,025	53.2%	2,975	31.0%	9,005	25.3%	11980	26.5%
Manatuto	6,701	21,718	28,419	4,974	74.2%	12,679	58.4%	17,653	62.1%	2,544	38.0%	5,808	26.7%	8352	29.4%
Manufahi	7,595	25,766	33,361	7,666	100.9%	13,598	52.8%	21,264	63.7%	4,506	59.3%	4,989	19.4%	9495	28.5%
Viqueque	11,034	32,905	43,939	10,401	94.3%	24,127	73.3%	34,528	78.6%	6,948	63.0%	14,546	44.2%	21494	48.9%
ZEEMS (Oecusse)	9,408	32,534	41,942	10,901	115.9%	20,579	63.3%	31,480	75.1%	5,609	59.6%	11,006	33.8%	16,615	39.6%
Total (without Dili)	120,967	420,098	541,065	96,747	80.0%	223,967	53.3%	320,714	59.3%	51,769	42.8%	108,205	25.8%	159,974	29.6%
Total (Timor-Leste)	150,947	603,920	754,867	148,814	98.6%	341,938	56.62%	490,752	65.0%	84,448	55.9%	226,190	37.5%	310,638	41.2%

*Based on 2021 population projections. Population with Comorbidity 12.5% among 30-59y based on 2016 DHS data High Risk Groups (20% of the population) - Healthcare staff, other front line staff, aged 60y and above, and 18-59y with comorbidity 18-59y with no comorbidity (80% of the population)

Total Vaccinated (both doses)

801,390

SITUATION ANALYSIS

- According to the current surveillance and testing data, the number of new cases has further reduced, with decrease in test positivity rates and deaths, the declining transmission seems real, and the current wave of transmission is likely ending.
- Looking at other countries in the region, all the countries reported declining number
 of new cases such as India, Indonesia, Thailand, Nepal, and Bangladesh. In Indonesia,
 the weekly case incidence is on a declining trend. Only North Kalimantan reported a
 higher weekly case incidence of 56.8 per 100 000 population. The TPR has declined
 and is at 1.4% at the national level.
- The implementation of integrated surveillance of SARI/ILI/ARI (Severe Acute Respiratory Infection/Influenza Like Illness/Acute Respiratory Infection) as per the national guidelines, including the Integrated Diseases Surveillance and Response (IDSR) and the COVID-19 surveillance guideline (the 8th version) is crucial at this moment. Samples of patients from health care facilities should be collected and tested to determine the trends and identify the cases.
- Rapidly expanding the vaccination coverage is the key to contain the pandemic and return to the normal social economic life. There are gaps in vaccination coverages, particularly in some municipalities. Actions should be taken to encourage people to come out and get vaccinated, including intensive information and communication campaign among the priority groups and advocacy among opinion leaders.

CHANGES IN NATIONAL COVID-19 POLICIES/GUDIELINES

- The Government has decided to lift the sanitary fence in the capital Dili, starting at 23:59 on 29 September 2021. The movement of the citizens between Dili and Municipalities as well as between the municipalities across the territory will no longer be prohibited. However, the Government called on communities to follow the COVID-19 guideline and safety regulations recommended by the MoH and WHO to keep fighting the spread of coronavirus. (source: The government decided to lift the sanitary fence in Dili).
- National Parliament authorizes President of the Republic to renew the State of Emergency for another 30 days between 00:00 hours 30 September 2021 and 23:59 hours 29 October, 2021 (Source: <u>National Parliament authorizes President of the</u> <u>Republic to renew the State of Emergency for another 30 days</u>).
- Health workers working at isolation centres will no longer be required to quarantine after completing their shift. A swab for the COVID-19 test will be collected on the last day, and if tested negative, the health workers will return to their families.

CURRENT CONCERN

COVID-19 among children

- Overall, there are proportionally fewer cases and deaths from COVID-19 among children, adolescents and young adults as compared to adults.
- Based on age-disaggregated case data reported to WHO from 30 December 2019 to
 6 September 2021, the proportion of global cases increased with age category:
 - Children under the age of five represented the smallest proportion of cases among individuals up to 24 years old;
 - Older adolescents (15 to 19 years old) and young adults (20 to 24 years old) grouped together had the highest proportion of the global cases;
 - Deaths for all age groups represented less than 0.5% of the proportion of global deaths.
- Younger children (under five years old), older children and adolescents (10 to 19 years old) usually have fewer and milder symptoms of SARS-CoV-2 infection than adults >25 years old and are less likely than adults to experience severe COVID-19.
- While a less severe course of disease is a positive outcome, there are concerns that mild symptoms may have led to less testing, resulting in fewer identified cases of SARS-CoV-2 infection in children and adolescents.
- If children and adolescents with mild or no symptoms also transmit the disease, they may also contribute to transmission in the community.
- The use of public health and social measures, including physical distancing, cleaning hands, coughing into a bent elbow or a tissue, adequate ventilation in indoor settings, and masks, should be consistently and appropriately implemented for all ages in schools, especially since children under the age of 12 years are generally not yet eligible for vaccination.

For more on COVID-19 and children, see WHO weekly epidemiological update of 14 Sept.

AVAILABLE RESOURCES

- For public and professionals on prevention, treatment, and vaccination etc.
- WHO Recommendations for COVID-19 Related Decisions
- WHO Free Courses in Tetum OpenWHO.org

COVID-19 INFORMATION AND MEDIA QUERIES

• The MoH has established a hotline number – 119 – for COVID-19 on which people can call to get any COVID-19 related information.

- Additionally, <u>MoH Facebook page</u> provides timely updates on COVID-19 developments in the country.
- WHO Timor-Leste through its <u>Facebook page</u> and <u>Twitter handle</u> also disseminates information on preventive measures, questions and answers, myth-busters and latest updates on COVID-19 globally and nationally.
- For media queries and interviews requests can be sent to singhsho@who.int and hasane@who.int