

COVID-19 Situational Report in the ASEAN+3 Region

ASEAN BioDiaspora Virtual Center (ABVC)

as of May 6, 2022



COVID-19: Highlights and Situation Overview

Global Update

- Worldwide, there have been over 516 million cases and over 6 million deaths attributed to COVID-19.
- According to the World Health Organization's (WHO) Weekly Epidemiological Update, globally, the number of new COVID-19 cases and deaths has continued to decline since the end of March 2022. During the week of 25 April through 1 May 2022, over 3.8 million cases and over 15,000 deaths were reported, decreases of 17% and 3% respectively, as compared to the previous week. However, not all the Regions reported decreasing trends: the number of new weekly cases increased in the African Region (+31%) and in the Region of the Americas (+13%), while the number of new weekly deaths increased in the South-East Asia Region (+69%) largely due to a delay in the reporting of deaths from India. As of 1 May 2022, over 500 million confirmed cases and over six million deaths have been reported globally. These trends should be interpreted with caution as several countries have been progressively changing their COVID-19 testing strategies, resulting in lower overall numbers of tests performed and consequently lower numbers of cases detected. At the country level, the highest number of new weekly cases were reported from Germany (558,958 new cases; - 24%), Italy (384,825 new cases; -8%), France (382,208 new cases; -30%), the Republic of Korea (380,455 new cases; - 35%), and the United States of America (372,167 new cases; +27%). The highest number of new weekly deaths were reported from the United States of America (2 199 new deaths; - 5%), India (1,650 new deaths; +273%), the Russian Federation (1,129 new deaths; -19%), France (900 new deaths; +2%), and Italy (898 new deaths; -11%). The Omicron variant of concern is the dominant variant circulating globally, accounting for nearly all sequences reported to GISAID. Since its designation as a VOC by WHO on 26 November 2021, Omicron has continued to evolve, leading to variants with slightly different genetic constellations of mutations. Each constellation may differ in the public health risk it poses, including the change in epidemiology and or the severity profile. The main features of Omicron sublineages are the high growth advantage over other variants, which is mainly driven by immune evasion. Omicron sublineages have led and are still leading to a high number of cases and, as a result, to a high number of hospitalizations and deaths. Three Omicron sublineages BA.4, BA.5 and BA.2.12.1 have acquired a few additional mutations that may impact their characteristics (BA.4 and BA.5 have the del69/70, L452R and F486V mutations; BA.2.12.1 has the L452Q and S704L mutations). Based on GISAID data and reports from WHO regional offices and countries, the number of cases and the number of countries reporting the detection of these three variants are rising. Limited evidence to date, does not indicate a rise in hospital admissions or other signs of increased severity. Preliminary data from South Africa using S gene target failure data (absent in BA.2, present in BA.4 and BA.5) indicate no difference in the risk of hospitalization for BA.4 and BA.5, as compared to BA.1; however, the short follow-up of BA.4 and BA.5 cases does not allow for conclusions on disease severity of these sublineages to be drawn at this stage. WHO continues to closely monitor the BA.4, BA.5, and BA.2.12.1 variants as part of Omicron VOC and provide further updates as more evidence on severity becomes available. WHO requests countries to continue to be vigilant, to monitor and report sequences, as well as to conduct independent and comparative analyses of the different emerging variants.
- World Health Organization (WHO) said on May 4 (Wednesday) that two sub-variants of Omicron are increasing the number of COVID-19 cases in South Africa, thereby once again emphasizing the importance of testing to monitor the spread and variation of the SARS-CoV-2 virus. Sharing with the press, WHO Director-General said that South African scientists have shown that the cause of the recent increase in the number of new COVID-19 cases in South Africa is the spread BA.4 and BA.5. These are two of the 5 sublineage of Omicron that

have been identified by the scientific community so far. Since being detected in South Africa at the end of November 2021, until now, Omicron has become the dominant infection variant globally, in which the "stealth Omicron" BA.2 sub-lineage causes the majority of new infections due to its faster infectious nature. According to the WHO, it is too early to determine whether these two sub-variants can make the COVID-19 epidemic more severe than other sub-variants of Omicron. However, WHO emphasized that early data shows that vaccination against COVID-19 is still an effective way to protect people from the risk of death and severe disease when infected. Despite an outbreak of the coronavirus caused by two new Omicron sublineage, South Africa has now put an end to school children wearing masks starting May 5 (Thursday). The health ministry announced that regulations requiring all students to wear masks in class expired at midnight and were not renewed. However, adults are still required to wear masks in public indoor locations, and there are still limits on the number of people for gatherings.

Regional Update

- Cambodia, current chair of Association of Southeast Asian Nations (ASEAN), will host a consultative meeting on ASEAN humanitarian assistance to Myanmar on May in a hybrid format. ASEAN chair's special envoy to Myanmar, Cambodian Deputy Prime Minister, and Foreign Minister Prak Sokhonn together with the Secretary General of ASEAN in the Capacity as the ASEAN Humanitarian Assistance Coordinator will co-chair the meeting in Phnom Penh and via videoconference. The meeting will touch on addressing the operational challenges faced by the Asean Coordinating Center for Humanitarian Assistance on disaster management. It will also discuss how to support the distribution of COVID-19 vaccines to all communities in Myanmar.
- Vietnam's Ministry of Health has issued Official Letter 2213/BYT-DP to the People's Committees of the provinces and cities on the suspension of the application of domestic health declaration. According to the issued letter, the People's Committees of provinces and cities' direct relevant agencies will suspend the application of domestic health declarations (domestic travel, public places, restaurants, etc.), but have to continue to maintain surveillance, early detection, investigation and handling of COVID-19 outbreaks in a timely and effective manner. According to information from the Ministry of Health, currently, the COVID-19 epidemic in Vietnam has been controlled nationwide with the number of infections and deaths significantly reduced.

Vaccine Update

- Myanmar has begun inoculating locally-produced China's Sinopharm COVID-19 vaccines, locally known as Myancopharm vaccines, Ministry of Health said on May 5. Union Minister for Health Thein Khaing Win observed the administering of Myancopharm Covid-19 vaccines in Nay Pyi daw on Wednesday. Myanmar's Ministry of Industry, in collaboration with China National Biotec Group (CNBG), affiliated with Sinopharm, domestically packed and produced the Myancopharm COVID-19 vaccines. The health ministry said it received a total of 1 million doses of the Myancopharm COVID-19 vaccine from the Ministry of Industry on April 29 and 30, and administered the vaccine doses to targeted groups of people.
- Based on Malaysia's CovidNow portal, 22,967,541, or 97.6%, of the adult population are fully vaccinated, 23,243,696 or 98.8% have received at least one dose, and 16,038,512 individuals or 68.2% have received booster doses. For adolescents aged 12 to 17 years old, a total of 2,895,394 individuals or 93.1% are fully vaccinated, while 2,993,097, or 96.2% of the group's population have received at least one

dose of the vaccine. In addition, a total of 881,602, or 24.8%, of children aged five to 11 years old are fully vaccinated and 1,538,685 or 43.3% of the group have received at least one dose under the National COVID-19 Immunization Programme for Children (PICKids) as of May 5 (Thursday). A total of 11,121 vaccine doses were administered on Thursday, with 1,959 as the first dose, 7,539 as second dose and 1,623 as booster shot, bringing the cumulative number of vaccine doses dispensed under the National COVID-19 Immunization Programme to 70,345,153.

- Thailand's first COVID-19 vaccine, ChulaCov19, has shown promising effects in the first and second rounds of human trials. The director of the vaccine project claims the Thai vaccine is safe and more effective than Pfizer vaccines used in Thailand. The developing team expects the vaccine to be approved by Food and Drug Administration before the end of 2022. ChulaCov19 is the first mRNA-based vaccine developed and produced in Thailand by the Chula Vaccine Research Centre at Chulalongkorn University and King Chulalongkorn Memorial Hospital in Bangkok. The director of the developing team, Kiat Rakroungtham, explained to Thai media that the trial results were impressive. He claims that the antibody generated by ChulaCov19 were higher than Pfizer vaccines used in Thailand.

Travel Advisories (new update/s)

- Malaysia: Travellers from Malaysia and Thailand can now use their border passes to enter the two countries starting May 5 (Thursday). Perlis Border Relations and Cooperation Committee chairman said that the relaxation was given after Malaysia and Thailand reached an agreement to spur the economic recovery of both nations. Travellers who wanted to use the border pass needs to apply through the Thailand Pass web portal 24 hours prior to their departure. However, only residents in four states, namely Perlis, Kedah, North Perak and Kelantan are allowed to use this border pass and are only allowed to enter Thailand for three days. Meanwhile, travellers from Thailand entering Malaysia using the border pass are also allowed to travel back and forth into the country provided that they had been fully vaccinated. Likewise, all travellers are also required to have travel insurance and undergo a health screening first.
- Vietnam received around 192,400 international arrivals in the first four months of this year, higher of almost 185% year-on-year, following the resumption of tourism activities and international flights in country, General Statistics Office said. In the period, visitors entering the country by air accounted for around 88.6% of the total, Xinhua news agency quoted the Office as saying. Over the four months, approximately 118,300 foreign visitors to Vietnam were from Asia, up 96.7% year-on-year. The number of tourists from Europe, the Americas and Oceania also saw hikes of more than six times, 15 and 19, respectively, from the same period last year. Vietnam fully reopened its borders to international visitors on March 15 as part of its efforts to revive the country's tourism and economy after nearly two years of interruption due to the COVID-19 pandemic. The Southeast Asian nation received a record number of over 18 million international arrivals in 2019, the last full year before the pandemic broke out, according to the office.
- South Korea: Starting June 1, people can travel directly to the Jeju and Yangyang international airports and avail of the visa-waiver programme, the Seoul-headquartered Yonhap News Agency reported. Visa-free entry system to Jeju Island allows travellers to stay up to 30 days without a visa. The visa-free entry was previously suspended for more than two years due to the COVID-19 pandemic, the South Korean Interior Minister Jeon Hae-cheol said. Since 2002, the country has implemented a visa-free system under which all foreign visitors, except for those from 24 countries designated by the justice minister, can stay on the southern resort island of Jeju for up to 30

days without a visa. However, the measure was halted on 4 Feb, 2020, following the outbreak of the pandemic. International flights were also suspended at Jeju International Airport in April 2020.

- China: Beijing municipal government said on May 4 that travelers entering China via Beijing will be subject to 10-day concentrated isolation and seven-day home quarantine. Those entering China through other cities who have completed 14-day quarantine can travel to Beijing if they meet related requirements that are the same as those of other domestic residents, said Xu Hejian, spokesperson of the municipal government. The adjustment was made according to the characteristics of a short incubation period and mild clinical symptoms of the Omicron variant, Xu said. The municipal government also ordered employers in Chaoyang District and other areas where public transportation has been suspended to arrange for their employees to work from home from Thursday due to the recent COVID-19 resurgence. For those who must continue to work at their offices, self-driving is encouraged, said Xu, adding that commuters should avoid office gatherings and try not to visit places other than their office and home.
- Japan will further ease border controls implemented in response to the COVID-19 pandemic and bring them on par with other Group of Seven nations in June, Prime Minister Fumio Kishida said May 5. Japan initially enforced an effective ban on the entry of nonresident foreign nationals late last year, drawing criticism at home and abroad that the measures were too strict. The government has gradually been easing the rules, currently allowing up to 10,000 people a day to enter Japan. Visitors are limited to businesspeople, technical interns and students, while foreign tourists are still not allowed in. Prior to the coronavirus pandemic, Japan had been keen to boost tourism as a driver of economic growth, with a goal in 2020 to attract 40 million foreign visitors. Japan's strict border controls as well as similar measures by other countries amid the global health crisis, however, made the target unachievable. The number of foreign visitors expanded fivefold between 2011 and 2019.

Cases and Deaths as of 06 May 2022

- As of 06 May 2022 (2PM, GMT+8), worldwide, there were **516,720,174** confirmed cases, including **6,279,845** deaths. Globally, Case Fatality Rate (CFR) was **1.2**.
- 58,540,406 confirmed cases** of COVID-19 have been reported in the **ASEAN +3** countries including **31,459,850 cases** in the ASEAN region and **27,080,556 cases** in the PLUS THREE countries, with CFR of **0.7**.

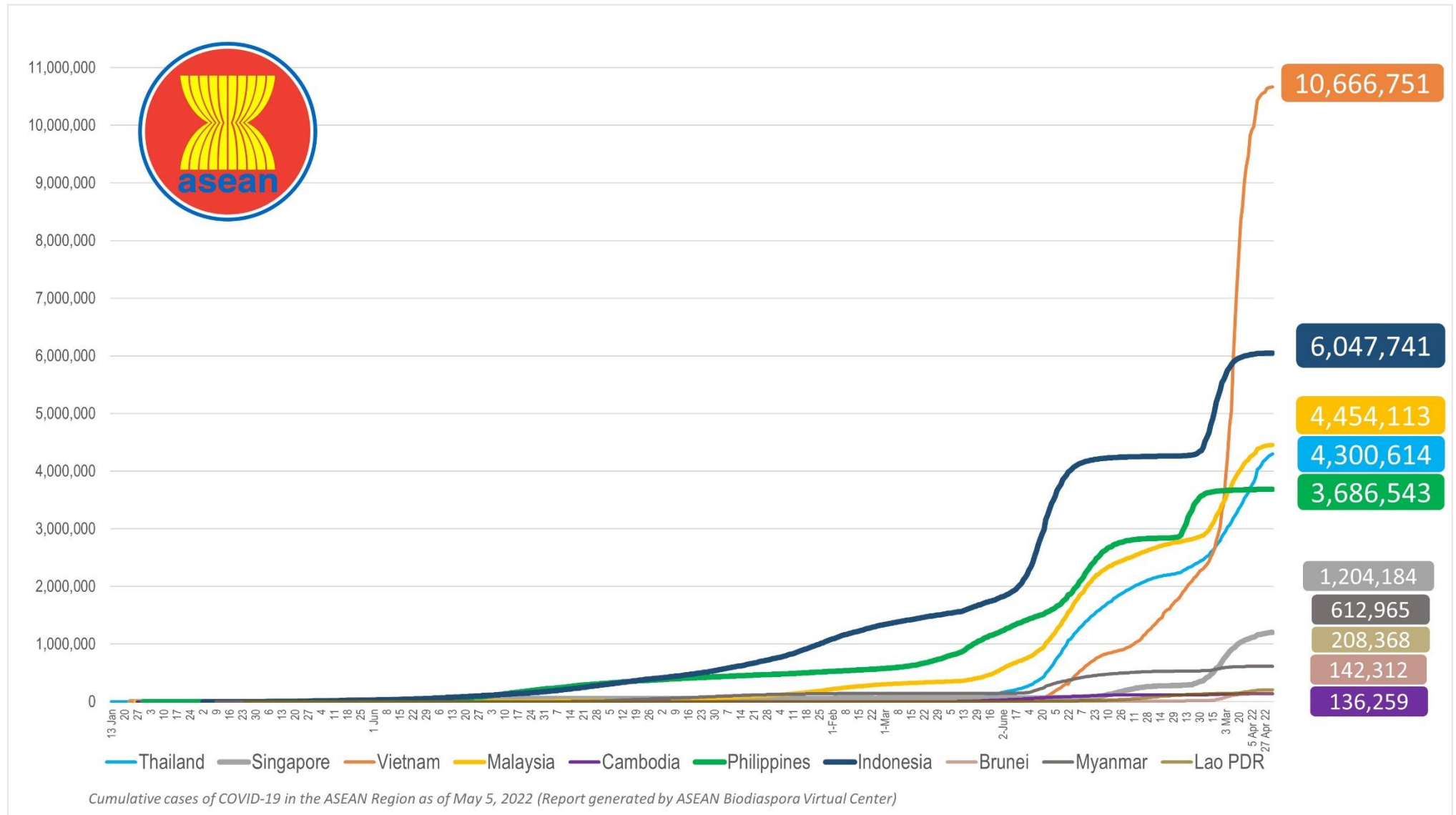
| REGION | COUNTRY | FIRST CONFIRMED CASE(S) | LATEST REPORT ON CONFIRMED CASE(S) | TOTAL CONFIRMED CASES | NEW CASES | TOTAL DEATHS | NEW DEATHS | CASE FATALITY RATE | CUMULATIVE CASES/ 100,000 | NUMBER OF TESTS LAST 14 DAYS/ 100,000 | CUMULATIVE VACCINATED | CUMULATIVE FULLY VACCINATED | CUMULATIVE BOOSTERED | FULLY VACCINATED / 100 |
|------------------------|-----------------------------|-------------------------|------------------------------------|-----------------------|-------------------|----------------|---------------|--------------------|---------------------------|---------------------------------------|-----------------------|-----------------------------|----------------------|------------------------|
| ASEAN REGION | Brunei | 10 Mar 20 | 05-May-22 | 142,312 | 146 | 218 | - | 0.2% | 32,845 | | 412,058 | 405,414 | 267,071 | 91.8 |
| | Cambodia | 27 Jan 20 | 05-May-22 | 136,259 | 1 | 3,056 | - | 2.2% | 826 | 57 | 14,941,444 | 14,201,629 | 10,300,780 | 83.8 |
| | Indonesia | 02 Mar 20 | 05-May-22 | 6,047,741 | 250 | 156,340 | 19 | 2.6% | 2,235 | - | 199,346,528 | 165,425,255 | 37,458,813 | 59.9 |
| | Lao PDR | 24 Mar 20 | 05-May-22 | 208,368 | 257 | 748 | 3 | 0.4% | 2,906 | 80 | 5,782,266 | 4,921,879 | | 66.7 |
| | Malaysia | 25 Jan 20 | 05-May-22 | 4,454,113 | 1,278 | 35,569 | 2 | 0.8% | 13,941 | 1,521 | 27,773,404 | 26,735,674 | 16,036,713 | 81.6 |
| | Myanmar | 23 Mar 20 | 05-May-22 | 612,965 | 14 | 19,434 | - | 3.2% | 1,134 | 314 | 30,782,442 | 23,672,564 | | 43.2 |
| | Philippines | 30 Jan 20 | 05-May-22 | 3,686,543 | 168 | 60,439 | - | 1.6% | 3,410 | 20 | 70,173,137 | 67,911,464 | 13,231,643 | 61.2 |
| | Singapore | 23 Jan 20 | 05-May-22 | 1,204,184 | 1,638 | 1,340 | 2 | 0.1% | 21,113 | | 5,013,097 | 4,982,801 | 4,000,697 | 91.4 |
| | Thailand | 13 Jan 20 | 05-May-22 | 4,300,614 | 9,790 | 28,917 | 54 | 0.7% | 6,177 | 95 | 56,144,703 | 51,278,384 | 26,057,521 | 73.3 |
| | Vietnam | 23 Jan 20 | 05-May-22 | 10,666,751 | 4,305 | 43,049 | 2 | 0.4% | 11,058 | 122 | 79,947,189 | 77,754,108 | 45,443,077 | 79.2 |
| ASEAN COUNTRIES | | | | 31,459,850 | 17,847 | 349,110 | 82 | 1.1% | | | 490,316,268 | 437,289,172 | 152,796,315 | |
| ASEAN PLUS THREE | South Korea | 20-Jan-20 | 05-May-22 | 17,438,068 | 42,277 | 23,158 | 79 | 0.1% | 33,723 | 3,857 | 45,035,380 | 44,551,813 | 35,749,147 | 86.8 |
| | Japan | 16-Jan-20 | 05-May-22 | 7,985,716 | 20,582 | 29,560 | 18 | 0.4% | 6,325 | 2,055 | 103,204,264 | 101,532,326 | 67,264,156 | 80.6 |
| | China | 31-Dec-19 | 05-May-22 | 1,656,772 | 30,678 | 15,360 | 23 | 0.9% | 17,104 | 3,309 | 1,311,965,369 | 1,275,079,619 | 768,025,178 | 82.8 |
| | PLUS THREE COUNTRIES | | | | 27,080,556 | 93,537 | 68,078 | 120 | 0.3% | | | 1,460,205,013 | 1,421,163,758 | 871,038,481 |
| ASEAN +3 | | | | 58,540,406 | 111,384 | 417,188 | 202 | 0.7% | | | 1,950,521,281 | 1,858,452,930 | 1,023,834,796 | |

- 458,179,768 confirmed cases** of COVID-19 have been reported in **5 continents** (other than ASEAN +3 countries):

| CONTINENT | TOTAL CONFIRMED CASES | NEW CASES | TOTAL DEATHS | NEW DEATHS | CASE FATALITY RATE | CUMULATIVE CASES/ 100,000 | NUMBER OF TESTS LAST 14 DAYS/ 100,000 | CUMULATIVE VACCINATED | CUMULATIVE FULLY VACCINATED | CUMULATIVE BOOSTERED |
|--------------|-----------------------|----------------|------------------|--------------|--------------------|---------------------------|---------------------------------------|-----------------------|-----------------------------|----------------------|
| AFRICA | 11,955,503 | 10,314 | 253,919 | 66 | 1.1 | 210,098 | 11,972 | 303,364,702 | 229,355,355 | 22,313,561 |
| AMERICAS | 156,145,509 | 52,242 | 2,762,770 | 330 | 0.8 | 909,613 | 39,512 | 797,579,828 | 702,087,614 | 355,929,440 |
| ASIA PACIFIC | 71,620,638 | 66,168 | 732,350 | 134 | 0.2 | 322,144 | 12,025 | 1,403,031,395 | 1,223,782,906 | 112,841,833 |
| EUROPE | 197,695,612 | 257,226 | 1,880,794 | 1,431 | 0.6 | 1,737,249 | 115,686 | 557,070,421 | 529,438,325 | 308,502,997 |
| MIDDLE EAST | 20,762,506 | 1,281 | 232,824 | 6 | 0.3 | 188,836 | 49,305 | 140,964,475 | 126,203,656 | 54,565,526 |
| TOTAL | 458,179,768 | 387,231 | 5,862,657 | 1,967 | 1.3% | | | 3,202,010,821 | 2,810,867,856 | 854,153,357 |

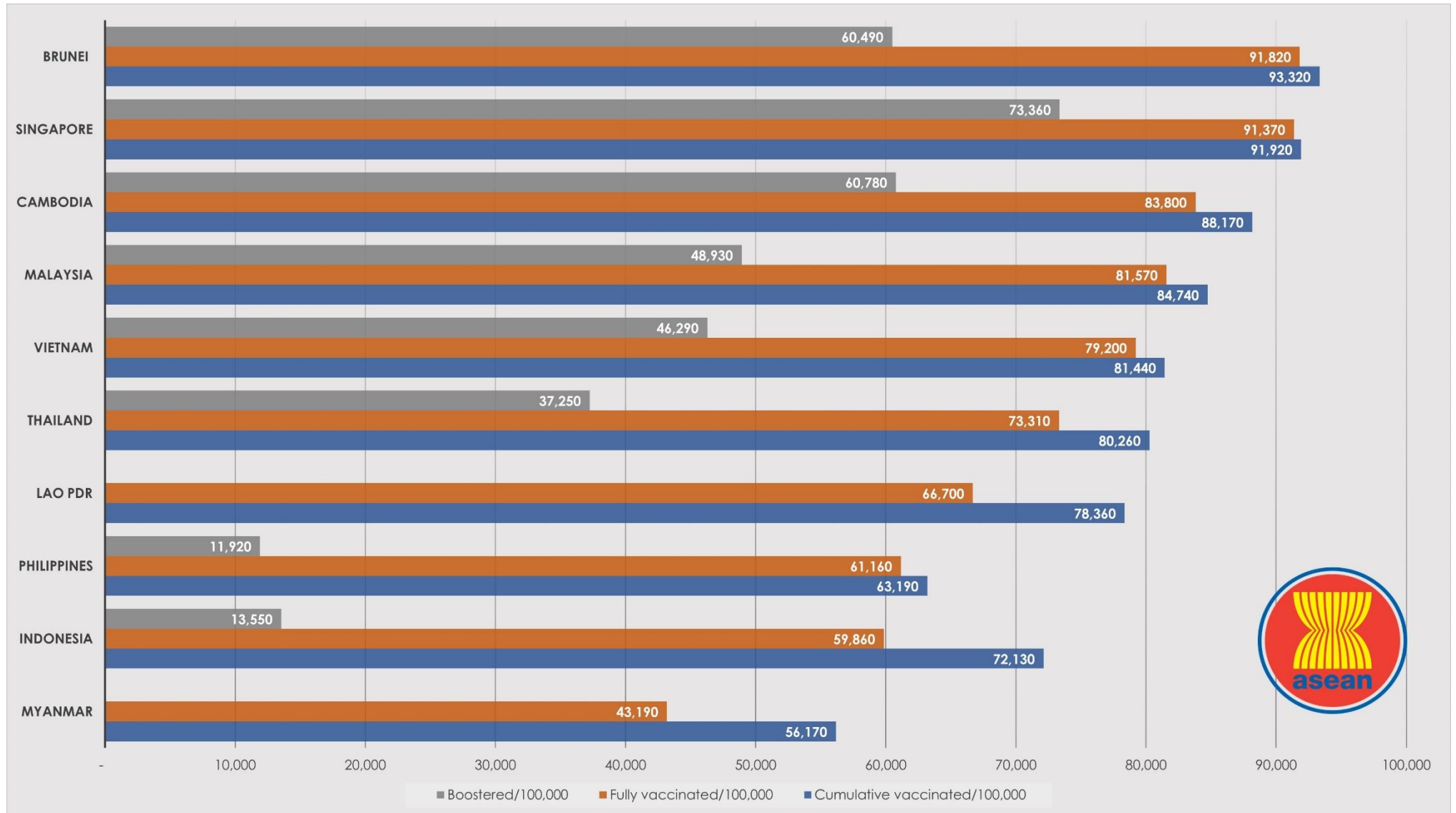
COVID-19 Epi curve among ASEAN Countries:

From January 1, 2021 to May 5, 2022




COVID-19 Vaccination Status

as of 05 May 2022



COVID-19 Outlook Assessment

as of 03 May 2022

|  ASEAN MEMBER STATE | REQUIREMENT | | | | | | | |
|--|---|---|---|---|--|------------------------------|---|------------------------------|
| | At least 80% of the high-risk population has been vaccinated with at least one dose of a COVID-19 vaccine. | | At least 65% of the total population has a level of immunity to COVID-19; either recovered from COVID-19 or have been vaccinated with at least one dose of a COVID-19 vaccine. | | Case levels are generally low (a 7-day rolling average number of daily new cases that is <10 cases per 100,000, with each day's past-14-day test positivity is consistently <5%). | | Government Policy on containment and health (strictness and comprehensiveness in COVID-19 related government policies) | |
| | % of High risk population fully vaccinated | Population vaccinated/day (7-day average) | % of Total population fully vaccinated / boosted | Population vaccinated/day (7-day average) | Daily cases/100,000 | Test positivity last 14 days | Containment and health index score - Oxford COVID-19 Government Response Tracker (OxCGRT) | Change over the past 30 days |
| Brunei | ≥90.0 | Unknown | ≥90.0/60.5 | Unknown | 20.93 | Unknown | 65.5/100 | 0.0 |
| Cambodia | ≥90.0 | 0%/day | ≥90.0/60.8 | 0.07%/day | 0.02 | 1.9 | 38.1/100 | -1.8 |
| Indonesia | ≥90.0 | 0%/day | 63.4/13.6 | 0.07%/day | 0.10 | Unknown | 53.0/100 | -4.5 |
| Lao PDR | ≥90.0 | 0%/day | 72.7/ND | Unknown | 3.18 | 100 | 71.2/100 | 0.0 |
| Malaysia | ≥90.0 | 0%/day | 82.1/48.9 | 0.04%/day | 5.60 | 9.2 | 58.0/100 | 0.0 |
| Myanmar | ≥90.0 | 0%/day | 44.4/ND | Unknown | 0.04 | 0.3 | 63.1/100 | -14.6 |
| Philippines | ≥90.0 | 0%/day | 65.7/11.9 | 0.13%/day | 0.18 | 1.3 | 62.8/100 | +1.8 |
| Singapore | ≥90.0 | 0%/day | 88.4/73.4 | 0.02%/day | 36.64 | Unknown | 55.4/100 | -15.5 |
| Thailand | ≥90.0 | 0%/day | 74.4/37.2 | 0.06%/day | 16.67 | 49 | 47.9/100 | 0.0 |
| Vietnam | 88.0 | 0.06%/day | 83.9/46.3 | Unknown | 6.25 | 100 | 58.3/100 | -13.1 |

