

Weekly Operational Update on COVID-19

19 October 2021

Issue No. 76



As of 17 October 2021

For all other latest data and information, including trends and current incidence, see the [WHO COVID-19 Dashboard](#) and [Situation Reports](#)

Confirmed cases

240 014 942

Confirmed deaths

4 887 154

WHO Ghana supports ongoing COVID-19 vaccine rollout

WHO reiterated its commitment to supporting the Government of Ghana and their COVID-19 vaccine rollout by presenting 1000 digital tablets.

Presenting the items to the Ghana Health Service, Dr Sally-Ann Ohene, Disease Prevention and Control Officer at WHO Ghana Country Office said the tablets were to be used to scale up e-registration at the various vaccination centres and help reduce delays in data entry.



Dr Sally Ann Ohene DPC Officer presenting the tablets to Dr Kwame Amponsah-Achiano, EPI Manager, GHS. ©WHO Country office/Ghana

“With funding support from the Government of Canada, WHO Ghana plans to present additional 500 digital tablets to the Ghana Health Service”, Dr Ohene stated.

The Programme Manager for the Expanded Programme on Immunization (EPI) at the Ghana Health Service, Dr Kwame Amponsah-Achiano, stated that the donation of the tablets was very timely and would be deployed immediately to the field for use in the ongoing vaccination campaign.

The digital tablets are anticipated to be useful for data capturing in other health interventions beyond the COVID-19 pandemic.

For further information, click [here](#).

Key Figures



WHO-led UN Crisis-Management Team coordinating 23 UN entities across nine areas of work



More than **5.8 million** people registered on [OpenWHO](#) and accessing online training courses across **38** topics in **57** languages



22 427 470 PCR tests shipped globally



207 591 426 medical masks shipped globally



97 512 700 gloves shipped globally



9 576 791 face shields shipped globally



192 GOARN deployments conducted to support COVID-19 pandemic response



6 542 857 318 COVID-19 vaccine doses administered globally as of 18 October

^a COVAX has shipped over **371 million** vaccines to **144** participants as of 18 October

^a See Gavi's [COVAX updates](#) for the latest COVAX vaccine roll-out data

From the field:

WHO/Europe supports COVID-19 response at mental health care facilities in Azerbaijan: 21 September – 8 October 2021

As World Mental Health Day was marked on 10 October, WHO recognizes that the COVID-19 pandemic has had a major impact on people's mental health.

As part of the European Union (EU) funded Solidarity for Health Initiative, WHO Azerbaijan Country Office and WHO Health Emergency Programme's South Caucasus Hub experts assessed infection prevention control (IPC) and COVID-19 case management capacities at the two largest mental health facilities in the country: the Republican Psychiatric Hospital No. 1 under the Ministry of Health and the Psycho-Neurological Social Service Facility No. 1 under Ministry of Labor and Social Affairs.



The assessment aimed to understand areas where COVID-19 has impacted the daily lives of patients, to identify a means to provide support for the implementation of infection prevention control measures, to identify and manage individuals with COVID-19, and to further support long-term care facilities to access other health services when needed.

From 1 September 2021, the EU-WHO project has deployed 3 psychologists and 3 social workers for 6 months to the abovementioned facilities to boost capacities to cope with the impact of the pandemic. The deployed specialists are providing mental health and psycho-social support capacity building for healthcare workers in these facilities.

The EU Solidarity for Health Initiative, in collaboration with WHO, will continue supporting long-term mental health care facilities in the context of COVID-19 by strengthening response capabilities and by providing the supplies required to help prevent the spread of infections, such as hand hygiene stations, hand sanitizers, and informative posters.

From the field:

Samoa's two-day vaccination campaign helps to boost coverage

From 23–24 September 2021, the Samoa Ministry of Health implemented a two-day lockdown in order to mount its nationwide COVID-19 vaccination campaign. As of 28 September 2021, 94.4% of its eligible population had received their first dose and 52.4% their second dose.

The campaign increased the overall number of vaccinated persons by 12% and 10% for first and second doses of the COVID-19 vaccine, respectively. Samoa is moving steadily toward achieving its vaccination coverage goal of 95-100% of the eligible population by 30 November 2021, using vaccines from the COVAX Facility, the Government of Japan through the COVAX Facility and bilateral donations from the Government of Australia.



WHO and MOH partnering during lockdown. Dr Baoping (Officer-in-Charge, WHO Samoa) and Leausa Dr Take Neseri (Director General, MOH, Samoa) discussing the vaccination roll-out on their way to the field. ©WHO Country office/Samoa

Additional doses are expected in October 2021 from the Government of New Zealand through the COVAX Facility.

Scores of leaders supported the vaccination effort including government ministers, chief executive officers and assistant chief executive officers from various ministries, NGOs, village mayors, matais (chiefs) and women's committees, church leaders and personnel from WHO, UNICEF and the United Nations Development Programme (UNDP). They visited vaccination sites, communities, community and residential fales (homes and meeting venues) and halls, and district hospitals to encourage members of the public to get vaccinated.

Dr Baoping Yang, Officer-in-Charge, WHO Samoa Country Office visited communities, vaccination sites and supported the vaccination effort in general on both days of the lockdown with MOH teams and other government officials.

“The WHO stands with the government and people of Samoa and calls on everyone who is eligible to get vaccinated as soon as it is their turn. I'd like to encourage everyone to get the facts on the vaccine to overcome concerns and misinformation and continue to “Do it all”: cover your coughs and sneezes; clean your hands regularly; avoid crowds, closed spaces, close contacts; and mask-up and get vaccinated”.

Dr Baoping Yang, Officer-in-Charge, WHO Samoa Country

From the field:

PAHO/WHO Belize donate IT equipment and supplies for vaccine safety surveillance to the Karl Heusner Memorial Hospital, the PAHO/WHO selected sentinel hospital

PAHO/WHO continues to support the Karl Heusner Memorial Hospital (KMH) with the latest donation of IT equipment and office supplies to strengthen existing surveillance activities as part of ensuring COVID-19 vaccine safety.

Due to the vast increase in COVID-19 vaccine administration, on both global and national scales, it is imperative to promote safe vaccines and safe vaccination procedures which will ultimately decrease health risks. Thus, monitoring the effects of the vaccines on the population will help prevent unnecessary health risks while maintaining trust in vaccination.



In January 2021, PAHO/WHO conducted a regional survey to evaluate the capacities of potential hospitals for COVID-19 vaccines. Based on the response submitted by the KMH, in May 2021, the hospital was selected as part of the Sentinel Hospital for the Surveillance of AESI (Adverse Event of Special Interest) and AEFIS (Adverse Event Following Immunization) for COVID-19 Vaccines.

As a sentinel hospital, it plays an important role in the surveillance system of the country, particularly in its ability to timely detect and notify ESAVI (Events Supposedly Attributable to Vaccination or Immunization) and AESI through passive, stimulated, or active surveillance. With the donated IT equipment and office supplies, KMH will be able to set up an ESAVI Situation Room to conduct proper vaccine safety surveillance in Belize, in collaboration with the Ministry of Health and Wellness which received the same donation for its own ESAVI Situation Room three weeks earlier. The office supplies and IT equipment included, amongst other miscellaneous stationery items, for use by the ESAVI Situation Room at the Karl Heusner Memorial Hospital: 1 laptop computer, 1 monitor with HDMI Port, 1 tablet with SIM, 1 printer and cartridges, 1 uninterruptible power supply (UPS) or battery backup, 1 Microsoft Office subscription license for a year, and office supplies and stationery items.

“This donation will be used to help with the continuous collection of data from COVID patients and their vaccination status to track any possible side effects of vaccines and to track the number of cases,” said Dr. Selma Bermudez, Epidemiologist at KMH.

For further information, click [here](#).



World Health Organization

REVIEWING THE COVID-19 RESPONSE IN SOMALIA: HIGHLIGHTS OF THE WHO REGIONAL OFFICE FOR THE EASTERN MEDITERRANEAN'S RECENT MISSION

From 26-30 September, six experts from the WHO Regional Office of the Eastern Mediterranean traveled to Somalia, with six additional colleagues connecting virtually, to review the national and subnational COVID-19 response through nine priority areas of the response, expanding a typical Intra-Action Review (IAR). During this mission, the team noted significant success regarding oxygen scale-up, notable progress on laboratory diagnostics, and potential opportunities regarding vaccination; all benefiting health beyond the COVID-19 response with WHO support.

Counting every breath: increasing access to sustainable medical oxygen supply

Prior to the COVID-19 pandemic, only 20% of Somalia's public hospitals had at least one medical oxygen source, despite it being an essential medicine for safe surgery, trauma care, maternal and childcare and many other medical conditions. This critical gap was exacerbated by COVID-19.

To overcome Somalia's challenge in establishing a sustainable oxygen supply, WHO acted quickly to procure medical oxygen in different formats. In addition to providing a surge supply of oxygen cylinders and other oxygen accessories, WHO procured a Pressure Swing Adsorption (PSA) oxygen plant and innovative solar-powered oxygen concentrators. WHO also supported a multi-disciplinary approach to the oxygen scale-up including clinical training and biomedical technical support. The first duplex containerized PSA oxygen plant procured by the WHO Country Office now runs in the De Martino Public Hospital in Mogadishu, one solar-powered oxygen concentrator was installed in the Hanano General Hospital in Dhusamareb (Galmudug State), and the other two units will be installed in Jubaland State and Southwest regional hospitals to support access to treatment across the nation.



Neonatal patient having benefitted from oxygen therapy, and his mother, met by mission members during the visit of Hanano Hospital, Dhusamareb (Galmudug State), 28 September 2021.

In a low-resource setting like Somalia with frequent power outages and referral challenges, the uninterrupted and timely oxygen supply available from the PSA plant and solar-powered systems can be lifesaving for patients requiring oxygen treatment and already benefits many patients beyond COVID-19.

CONTINUED: REVIEWING THE COVID-19 RESPONSE IN SOMALIA: HIGHLIGHTS OF THE WHO REGIONAL OFFICE FOR THE EASTERN MEDITERRANEAN'S RECENT MISSION**Building COVID-19 laboratory testing capacity from scratch**

At the beginning of the COVID-19 pandemic, Somalia had no polymerase chain reaction (PCR) testing capacity. In April 2020, the Federal Ministry of Health and Human Services (FMOH) established three PCR laboratories in Banadir, Puntland, and Somaliland, with WHO support. With further WHO support in laboratory supplies, staff, and training, the testing capacity was expanded to 10 laboratories in both public and private sectors; WHO Somalia is currently working on establishing PCR capacity in the national laboratories of the four remaining states.

In addition, SARS-CoV-2 antigen rapid diagnostic tests (Ag-RDT) have been deployed across the country, giving access to testing to populations who previously had none. WHO Somalia has developed the Ag-RDT testing protocol alongside laboratory training provided to health care workers.

The progress in laboratory diagnostics is an opportunity to leverage the existing COVID-19 PCR laboratory network to detect and respond to diseases beyond COVID-19. With the support of WHO Somalia, the FMOH established Influenza-Like Illness (ILI) and Severe Acute Respiratory Infection (SARI) surveillance, supported by influenza testing, in the country's three reference laboratories.

The Janssen vaccine: A potential game changer for COVID-19 vaccination in Somalia

Somalia initially received vaccines through the COVAX facility in March 2021, yet as of 30 September 2021, vaccination coverage in the country has remained very low, at 3.3%, with 1.6% of the population fully vaccinated and 1.8%

partially vaccinated despite significant efforts and WHO support from training to demand generation and more.

In August 2021, the United States of America (USA) donated 302,000 doses of the one-dose Janssen vaccine through the COVAX facility, and in October 2021, the USA government and USAID announced the upcoming shipment of 336,000 doses of this vaccine.

One recommendation from the review is to scale up vaccination, in particular to a larger geographical area to reach more people; further deployment of the Janssen vaccine could increase access for those living in areas with security concerns and overcome the challenge of follow-up with about 26% of the population in Somalia living a nomadic lifestyle.

WHO will continue supporting Somalia in their COVID-19 response and for sustainable health system gains that will impact beyond the COVID-19 pandemic.



A laboratory technician conducting PCR testing at the National Public Health Reference Laboratory in Mogadishu. ©WHO EMRO



Vaccination center visit, De Martino Hospital, Mogadishu on 27 September 2021, as part of the WHO Regional Office of the Eastern Mediterranean's mission to Somalia to review the COVID-19 response. ©WHO EMRO

From the field:

Six in seven COVID-19 infections go undetected in Africa

A new assessment by WHO shows that only 14.2% COVID-19 infections are being detected in Africa. To reverse that trend and curb transmission, the WHO Regional Office for Africa today announced a new initiative to enhance community screening for COVID-19 in eight countries, aiming to reach more than 7 million people with rapid diagnostic tests in the next year.

The WHO analysis used the COVID-19 calculator developed by Resolve to Save Lives which estimates infections based on reported number of cases and deaths and an infection fatality rate grounded in population-based studies. It estimated that as of 10 October 2021 the cumulative number of COVID-19 infections to be 59 million in Africa, seven times more than the cases reported.



With limited testing, we're still flying blind in far too many communities in Africa... More testing means rapid isolation, less transmission and more lives saved through targeted action ”

- Dr Matshidiso Moeti, WHO Regional Director for Africa

WHO has disbursed US\$ 1.8 million to eight participating countries: Burundi, Cote d'Ivoire, Democratic Republic of the Congo, Guinea-Bissau, Mozambique, Republic of the Congo, Senegal and Zambia.

WHO will support countries in active case finding by deploying teams in local communities to seek out possible contacts of people who have tested positive for the SARS-CoV-2 virus and offer antigen rapid diagnostic tests. The initiative will use a "ring strategy" to target people living inside a circle of 100 metres radius around each new confirmed case to prevent further spread of the disease. Additionally, each household within the 100 metres radius will receive hygiene kits including face masks and hand sanitizers; anyone who tests positive will be assessed for the severity of their condition to determine whether they should receive home-based care or transferred to designated COVID-19 treatment centres.

The programme aims to increase the testing capacity in each participating country by 40%, ensuring they reach the WHO recommended benchmark of 10 tests performed per 10 000 people weekly.

For further information, click [here](#).

Pandemic learning response

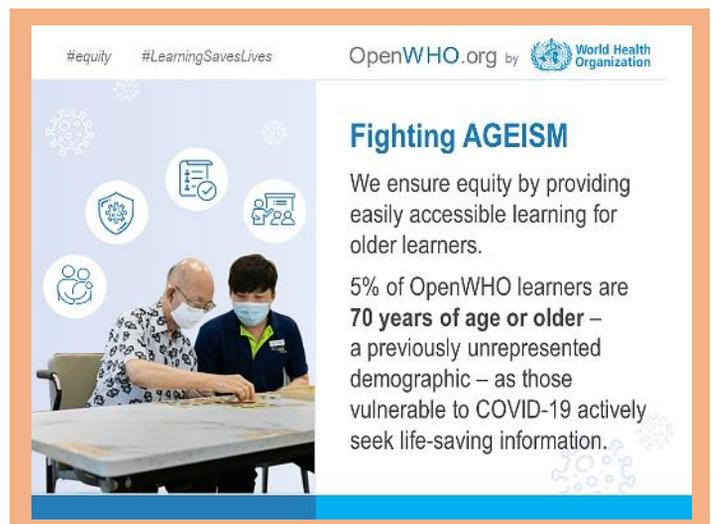
OpenWHO user trends shift to serve new demographics during the pandemic

The COVID-19 pandemic has equalized the use of OpenWHO by gender. Prior to the pandemic, women represented 40% of platform learners, while men represented 60%; during the pandemic, the proportion of women participating in online learning on OpenWHO grew to 51%, slightly overtaking male learners (49%). The percentage of users identifying their gender as 'other' also increased from 0.08% to 0.15%. In courses on topics other than COVID-19, female learners provided fewer enrolments (43%).

Completion rates on OpenWHO have increased from 39% to a platform average of 54% during the pandemic. The platform has also expanded its reach to older and younger user groups. The age bracket of 70 years and older rose from 0% to 4.6% of learners, and users under 20 years have grown from 1.3% to 9.8%.

During the pandemic, enrolments from the WHO African Region have decreased from 23.1% to 8.6% of total enrolments, as interest in COVID-19 courses globally has outpaced courses addressing other, more regionalized outbreaks. Meanwhile, COVID-19 courses are both the most popular and have increased enrolments in the Southeast Asian (36%) and American (26%) regions.

When platform use is assessed based on countries' classification by income level from the World Bank, additional shifts during the pandemic can be observed. Middle-income countries now dominate as the largest percentage of users (rising from 40.2% to 70.6% of total enrolments).



OpenWHO.org learning platform figures



Infection, prevention and control
Clinical management



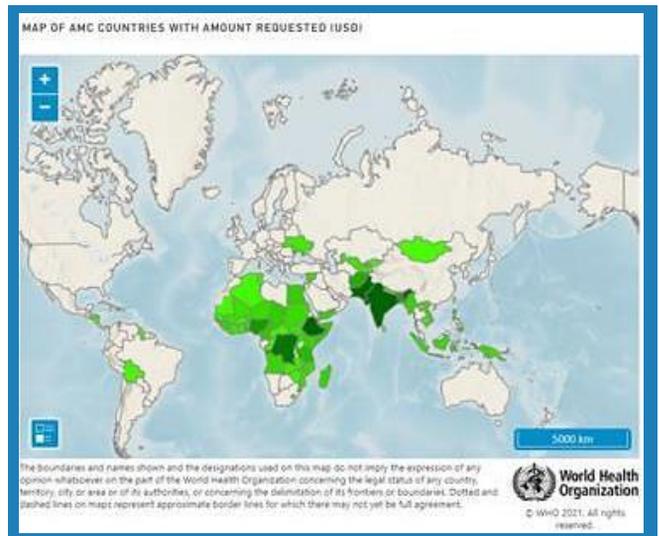
COVID-19 Partners Platform



As COVAX seeks to support countries to rapidly and equitably scale-up COVID-19 vaccines, GAVI and UNICEF provided an Early Window funding opportunity to all eligible Advanced Market Countries (AMC) COVAX participants to support rapidly expanding capacity for delivering COVAX-funded doses from 1 July to 13 October 2021 on the Partners Platform.

Those who wish to learn more about progress of applications can access the Platform's interactive CDS dashboard, which details current status, the amounts of approved or disbursed funds, and the amounts requested per category.

To date, 83 out of 89 eligible participants have submitted requests for CDS early window funds, all of which have already passed the quality check process. In total, US\$ 212 million of funding support to participants has been approved out of the US\$ 225 million requested (or 94%). Additionally, to date, 46% of approved funds have been disbursed to recipients.



The CDS early window funding succeeded as a means to assure rapid disbursement of funds to enable participants to rapidly deliver COVID-19 vaccines. The average number of days between submission and approval was 6.2 and 7.7 days between approval and disbursement.

The Platform's dashboard also provides an overview of how these funds are planned to be used in nine categories from COVID-19 National Deployment and Vaccination Plans (NDVPs). Globally, the three highest totals of requested cost by category of estimated cost are for vaccinators, vaccination delivery, and data management (inclusive of monitoring and evaluation and oversight). When broken down by WHO Region, however, needs differ; for example, the European and South-East Asian Regions' funds are primarily planned to strengthen data management, whereas Eastern Mediterranean participants plan to primarily use these funds for cold chain investment.

Operations Support and Logistics

The COVID-19 pandemic has prompted an unprecedented global demand for Personal Protective Equipment (PPE), diagnostics and clinical care products.

To ensure market access for low- and middle-income countries, WHO and partners have created a COVID-19 Supply Chain System, which has delivered supplies globally.

The table below reflects WHO and PAHO-procured items that have been shipped as of 18 October 2021.

Shipped items as of 18 October 2021	Laboratory supplies*			Personal protective equipment					
	Region	Sample collection kits	Antigen RDTs	PCR tests	Face shields	Gloves	Goggles	Gowns	Medical Masks
Africa (AFR)	5 303 570	1 571 550	2 209 684	1 553 010	35 478 300	453 536	2 373 079	54 810 400	3 654 630
Americas (AMR)	939 092	18 414 325	11 187 308	3 341 840	4 859 000	322 940	1 639 720	55 168 330	7 716 960
Eastern Mediterranean (EMR)	2 639 520	2 285 875	2 844 128	1 606 585	16 835 000	348 080	3 119 722	32 987 550	2 478 695
Europe (EUR)	937 180	1 264 200	673 524	1 913 220	28 195 900	627 860	3 321 548	42 666 500	7 682 950
South East Asia (SEAR)	3 790 800	4 657 250	2 967 602	385 036	8 710 500	91 470	639 300	6 950 500	2 841 695
Western Pacific (WPR)	1 736 650	132 650	2 545 224	777 100	3 434 000	311 427	488 210	15 008 146	3 206 035
TOTAL	15 346 812	28 325 850	22 427 470	9 576 791	97 512 700	2 155 313	11 581 579	207 591 426	27 580 965

Note: PAHO procured items are only reflected in laboratory supplies not personal protective equipment. Data within the table above undergoes periodic data verification processes. Therefore, some subsequent small shifts in total numbers of procured items per category are anticipated.

**Laboratory supplies data are as of 15 October 2021*



Appeals

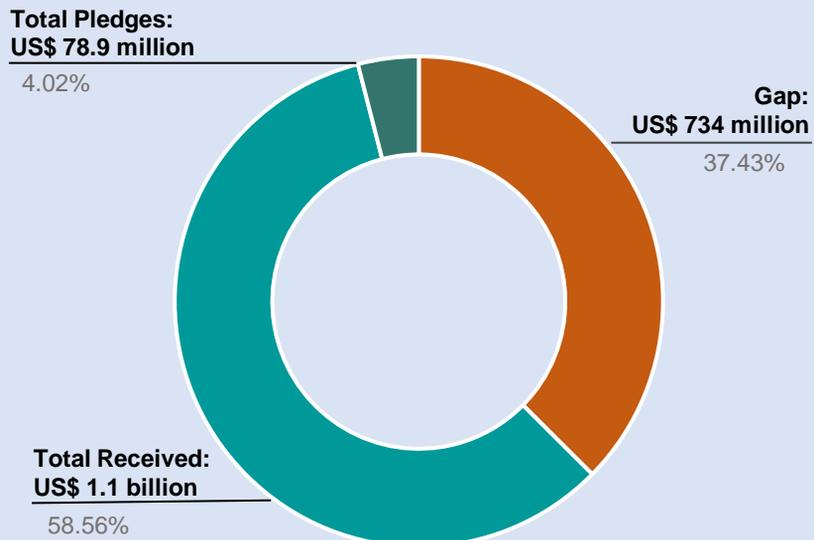
WHO's [Strategic Preparedness and Response Plan](#) (SPRP) 2021 is critical to end the acute phase of the pandemic, and as such the SPRP is an integrated plan bringing together efforts and capacities for preparedness, response and health systems strengthening for the roll out of COVID-19 tools (ACT-A). Of the US\$ 1.96 billion appealed for, US\$ 1.2 billion is directly attributable towards ACT-A, US\$ 643 million of the total appeal is intended to support the COVID-19 response specifically in countries included in the Global Humanitarian Overview.

As of 12 October 2021, WHO has received US\$ 1.1 billion out of the 1.9 billion total requirement. **A funding shortfall of 41% remains during the third quarter of the year, leaving WHO in danger of being unable to sustain core COVID-19 functions** at national and global levels for urgent priorities such as vaccination, surveillance and acute response, particularly in countries experiencing surges in cases.

Of note, only 5% of funding received for SPRP 2021 to date is 'flexible', compared with 30% flexible funds received for the 2020 SPRP. The continuous lack of operating funds is already having an impact on operations and WHO's ability to rapidly react and respond to acute events and provide swift and needed support to countries.

Contributions to WHO for COVID-19 appeal

Data as of 12 October 2021



A mid-year report on SPRP 2021 will be available by end of September, in addition to an updated appeal with concrete asks and priorities. WHO appreciates and thanks donors for the support already provided or pledged and encourages donors to give fully flexible funding for SPRP 2021, allowing WHO to direct resources to where they are most needed.

The 2021 SPRP priorities and resource requirements can be found [here](#). The status of funding raised for WHO against the SPRP can be found [here](#).

COVID-19 Global Preparedness and Response Summary indicators

Progress on a subset of indicators from the [Strategic Preparedness and Response Plan \(SPRP 2021\) Monitoring and Evaluation Framework](#) are presented below.

Indicator (data as of)	2020 Baseline	Previous Status	Status Update	2021 Target
Pillar 3: Proportion of countries ^a testing for COVID-19 and timely reporting through established sentinel or non-sentinel ILI, SARI, ARI surveillance systems such as GISRS or other WHO platforms (N=69 ^b , as of epidemiological week 39 2021) ^c	22% (n=15) ^d	52% (n=36)	No change	50%
This week (epidemiological week 39), of the 69 countries in the temperate zone of the southern hemisphere and the tropics expected to report, 36 (52%) have timely reported COVID-19 data. An additional 16 countries in the temperate zones of the northern hemisphere have timely reported COVID-19 data for this week.				
Pillar 10: Proportion of Member States that have started administration of COVID-19 vaccines (N=194, as of 18 October) ^c	0 ^f	98% (n=191)	No change	100%
Pillar 10: Number of COVID-19 doses administered globally (N=N/A, as of 18 October) ^c	0 ^f	6 364 021 792	6 542 857 318	N/A
Pillar 10: Proportion of global population with at least one vaccine dose administered in Member States (N= 7.78 billion, as of 18 October) ^c	0 ^f	46.6% (n=3.64 billion)	47.6% (n=3.7 billion)	N/A

^a The term "countries" should be understood as referring to "countries and territories"

^b 69 countries and territories (the denominator) is the number of countries expected to conduct routine ILI, SARI and/or ARI surveillance at the time of year

^c Weekly reported indicator

^d Baseline for epidemiological week for southern hemisphere season

^e Quarterly reported indicator

^f Indicator reporting start data: start of COVID-19 vaccination used to calculate baseline

N/A not applicable; TBD to be determined; ILI influenza like illness; SARI severe acute respiratory infection; ARI acute respiratory illness; GISRS: Global Influenza Surveillance and Response System



WHO Funding Mechanisms

COVID-19 Solidarity Response Fund

As of 10 October 2021, [The Solidarity Response Fund](#) has raised or committed more than US\$ 256 million from more than 675 704 donors.

The Fund is powered by the WHO Foundation, in collaboration with the UN Foundation and a global network of fiduciary partners. Donations to the COVID-19 Solidarity Response Fund (SRF) support WHO’s work, including with partners to suppress transmission, reduce

exposure, counter misinformation, protect the vulnerable, reduce mortality and morbidity and accelerate equitable access to new COVID-19 tools.

The world has never faced a crisis like COVID-19. The pandemic is impacting communities everywhere. It’s never been more urgent to support the global response, led by WHO.

More than US\$ 256 Million



675 704 donors

[individuals – companies – philanthropies]

The following amounts have already been dispersed to WHO and partners:

<p>\$169 million</p> <p>to the World Health Organization to procure and distribute essential commodities and coordinate response.</p>	<p>\$10 million</p> <p>to CEPI to catalyze and coordinate global vaccine R&D.</p>	<p>\$10 million</p> <p>to UNHCR to protect at-risk Internally Displaced People and refugees.</p>
<p>\$10 million</p> <p>to UNICEF to support vulnerable communities in low-resource settings.</p>	<p>\$20 million</p> <p>to WFP to support the shipment of vital commodities where they are most needed.</p>	<p>\$5 million</p> <p>to UNRWA to support refugee populations in Gaza, Jordan, Lebanon, Syria and the West Bank.</p>
<p>\$2.6 million</p> <p>to the World Organization of the Scout Movement to alleviate the pandemic's negative impact on youth development.</p>		



Key links and useful resources



GOARN

For updated GOARN network activities, click [here](#).

Emergency Medical Teams (EMT)

For updated EMT network activities, click [here](#).

WHO case definition

For the WHO case definitions for public health surveillance of COVID-19 in humans caused by SARS-CoV-2 infection, published December 2020, click [here](#).

WHO clinical case definition

For the WHO clinical case definitions of the post COVID-19 condition, click [here](#).

EPI-WIN

For EPI-WIN: WHO Information Network for Epidemics, click [here](#)

WHO Publications and Technical Guidance

For updated WHO Publications and Technical Guidance on COVID-19, click [here](#)

For more information on
COVID-19 regional
response:



- [African Regional Office](#)
- [Regional Office of the Americas](#)
- [Eastern Mediterranean Regional Office](#)
- [European Regional Office](#)
- [Southeast Asia Regional Office](#)
- [Western Pacific Regional Office](#)

For the 13 October 2021 **Weekly Epidemiological Update**, click [here](#). Highlights this week include:

An update on SARS-CoV-2 Variants of Concern (VOCs) Alpha, Beta, Gamma and Delta along with their geographical distribution.

News

- Click [here](#) for the interim statement on booster doses for COVID-19 vaccination.
- Click [here](#) for the announcement on proposed members of the WHO Scientific Advisory Group for the Origins of Novel Pathogens (SAGO).
- Click [here](#) for more on WHO, UN setting out steps to meet the world COVID-19 vaccination targets.