

THE COVID-19 SEX-DISAGGREGATED DATA TRACKER

NOVEMBER UPDATE REPORT

Regional Report

South-East Asia & Eastern Mediterranean

Findings of the November Update

The [COVID-19 Sex-Disaggregated Data Tracker](#) reports data from 186 countries, which together account for more than 99% of global cases and deaths due to COVID-19. Globally, only 53% of countries reported any sex-disaggregated data on COVID-19 during the month of November. At the end of the month, the Tracker had sex-disaggregated data for 55% of all cases and 72% of all deaths reported to the World Health Organization. This indicates that, globally, the sex of roughly 4 in 10 cases and 3 in 10 deaths remains unknown.

This regional update reports on the nine countries of the South-East Asia Region (SEARO) [1] that are included in the Tracker (Bangladesh, Bhutan, India, Indonesia, Maldives, Myanmar, Nepal, Sri Lanka and Thailand). It also includes two Eastern Mediterranean (EMRO) countries [1], Afghanistan and Pakistan, given their proximity to the SEARO countries.



[1] WHO regional groupings.

KEY TAKEAWAYS

- 1 Among 11 countries in the SEARO and EMRO regions, six reported sex-disaggregated COVID-19 data on both cases and deaths in the past month. Incomplete and irregular reporting of data poses a challenge in designing and monitoring effective COVID-19 responses.
- 2 None of these 11 countries are reporting sex-disaggregated data on all key indicators along the testing-to-outcome pathway, despite the centrality of this data to understanding who is getting infected, getting sick and dying from COVID-19.
- 3 The data that is available in these 11 countries shows a bigger gender gap in cases and deaths than at the global level. Men in the region account for nearly two-thirds of all COVID-19 cases and deaths reported, compared to 51% of cases and 58% of deaths globally.
- 4 Sub-national data in Afghanistan, India and Nepal show important geographical variation in outcomes for women and men. Such data can inform more effective management of the outbreak at local levels. However, most countries are not publishing sub-national sex-disaggregated data.

Of these 11 countries, six reported sex-disaggregated data on both COVID-19 cases and deaths at the same time point during this reporting period (Table 1). Three countries that had previously reported some sex-disaggregated data did not do so over the past month. One country (Sri Lanka) has never reported any sex-disaggregated data on COVID-19. None of the countries reported sex-disaggregated data on testing, intensive care unit (ICU) admissions or cases among healthcare workers in the past month. Among the countries, Afghanistan is the only country reporting sex-disaggregated data for hospitalisations.

Table 1. Availability of sex-disaggregated data within the past month, globally and among 11 SEARO/EMRO countries as of 30 November

	Global Data (186 Countries)		Regional Data (11 Countries)	
Sex-disaggregated indicator	Countries that ever reported	Reported in past month	Countries that ever reported	Reported in Past Month
Testing	10	9	0	0
Confirmed cases	127	91	10	7
Confirmed cases disaggregated by sex & age	60	52	5	4
Confirmed cases among healthcare workers	10	4	0	0
Hospitalisations	24	13	1	1
ICU admissions	16	10	0	0
Deaths	99	72	10	7
Deaths disaggregated by sex & age	54	44	6	4
Confirmed cases and deaths at the same time point	85	63	10	6

The full data-table can be viewed [here](#).

Snapshot of regional gender differences along the COVID-19 clinical pathway

At the end of November, the Tracker had data on the sex of 4,426,567 cases across the 11 countries included in this brief. Among these cases, 64% are men and 36% are women. Across the 11 countries, the Tracker had data on the sex of 35,797 deaths, of which 65% are men and 35% are women. India [2] and Pakistan [3] have reported some of the highest numbers of confirmed COVID-19 cases in their regions; however the reporting of sex-disaggregated data in both countries has been irregular. Neither country has reported sex-disaggregated data for a number of months. Excluding the data from these two countries, the gap between men and women for both cases and deaths reduces slightly, with men accounting for 61% of cases and 64% of deaths.

[2] India last publicly reported sex-disaggregated data on cases in September and on deaths in May

[3] Pakistan stopped publicly reporting sex-disaggregated data on cases and deaths in August

The gender gap in cases and deaths in the region is notably larger than the gap recorded at the global level. While men account for 64% of cases and 65% of deaths in the 11 countries (Figure 1), globally men account for 51% of cases and 58% of deaths (Figure 2).

Figures 1 and 2 show the distribution of testing, confirmed cases, hospitalisations, ICU admissions and deaths in men and women across the SEARO/EMRO countries (Figure 1) and across all available global data (Figure 2).

Country-specific data on each of these variables can be explored [here](#).

Fig 1. Data along the COVID-19 clinical pathway in 11 SEARO/EMRO countries, % male / % female (n=countries reporting)

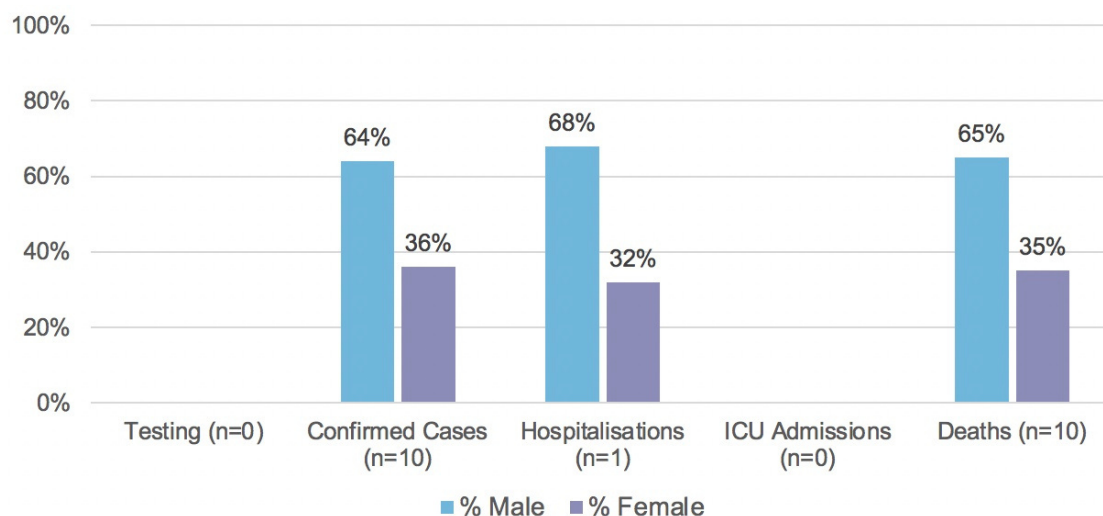
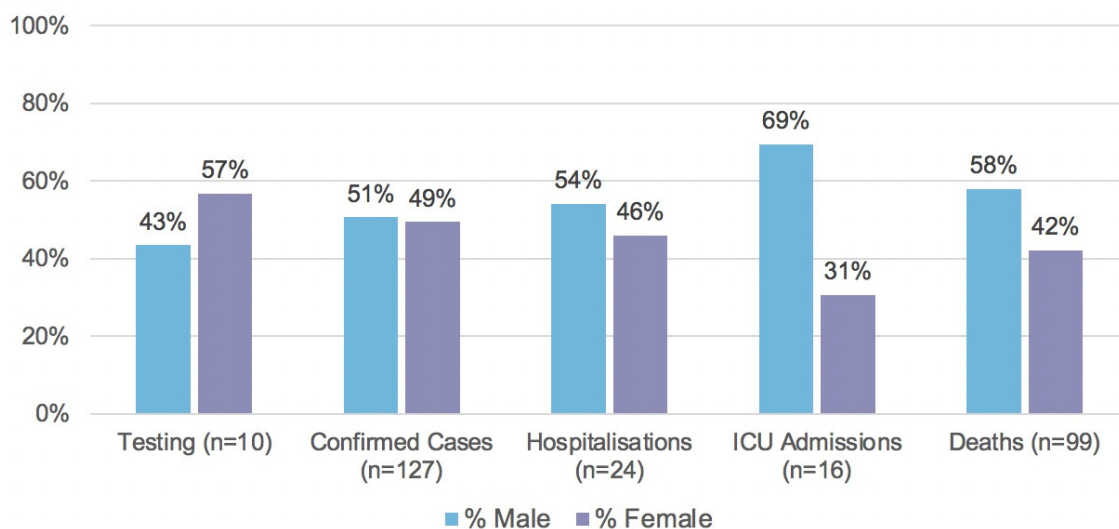


Fig 2. Global COVID-19 clinical pathway, % male / % female (n=countries reporting)



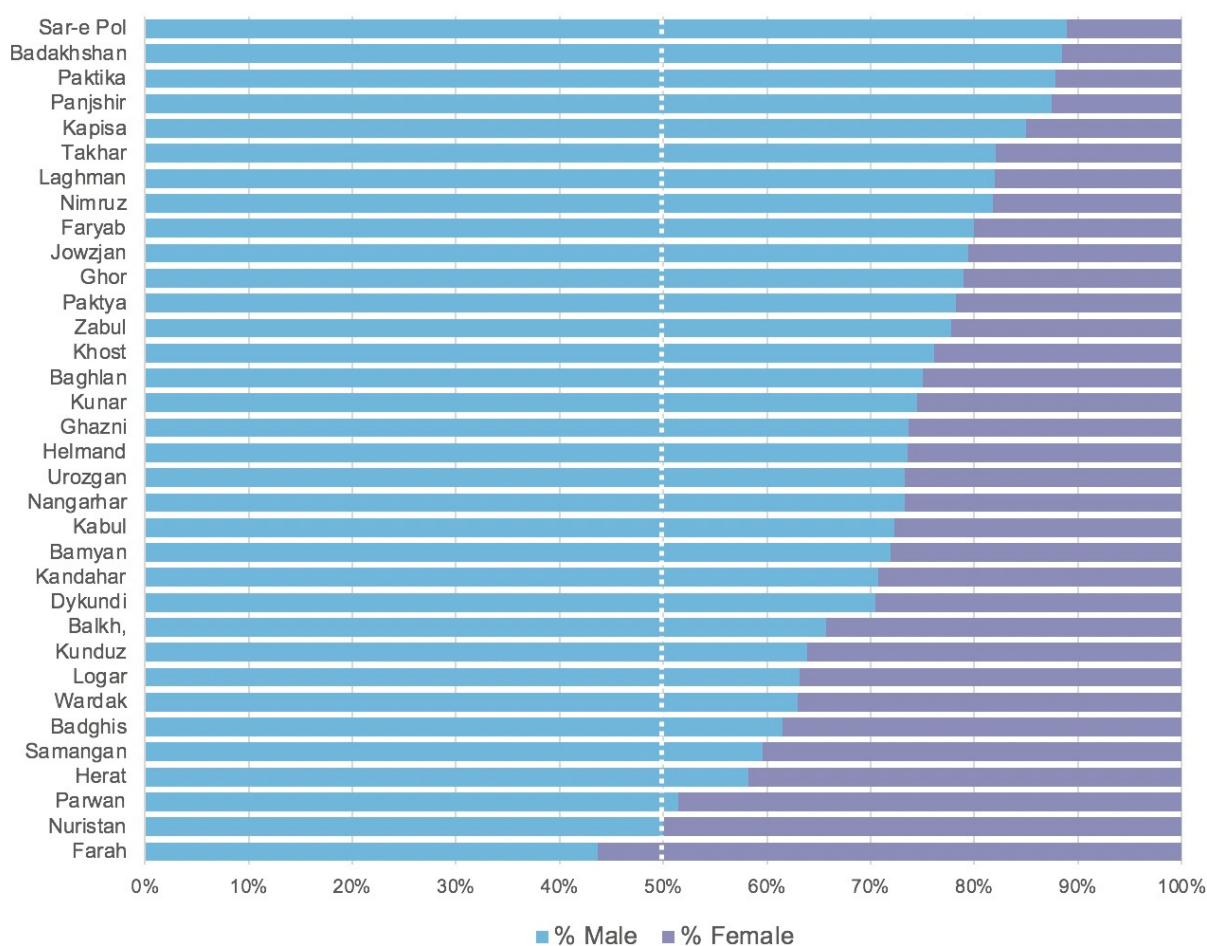
Sub-national sex-disaggregated COVID-19 data availability

In November, the COVID-19 Sex-Disaggregated Data Tracker began publishing available data at the sub-national level for the first time. In India, sex-disaggregated data at the sub-national level is available in four states, (with one state reporting on both cases and deaths, and three states reporting only cases). In Nepal, sex-disaggregated data is reported for cases in all provinces. In Afghanistan, hospitalisation data is reported for all provinces.

Sub-national data collected to date shows important geographical variation in outcomes by sex. In Afghanistan, men comprise between 44% to 89% of all hospital admissions due to COVID-19. In one province (Farah), hospital admissions in women are higher than in men, while in all but three of the 34 provinces, men account for substantially more hospital admissions than women (Figure 3). In Nepal, COVID-19 cases among men range from 61% to 83% of all cases. In the few states of India publishing sub-national data, men account for 52% to 67% of cases. One Indian state reports sex-disaggregated data on deaths, which shows that a notable two-thirds of COVID-19 deaths are among men.

These vast differences can both lend essential insights into understanding gendered and other social inequities and to informing more effective management of the COVID-19 outbreak in that area. Despite this evidence of stark regional differences within countries, most are not publishing sub-national sex-disaggregated data.

Fig 3. COVID-19 hospital admissions by province in Afghanistan, % male / % female



About the COVID-19 Sex-Disaggregated Data Tracker

The COVID-19 Sex-Disaggregated Data Tracker is the world's largest database of sex-disaggregated data on COVID-19 health outcomes. The tracker currently collects data on testing, confirmed cases (including among health workers), hospitalisations, intensive care unit (ICU) admissions, and deaths among women and men. It is also tracking the availability of data disaggregated by other social and demographic characteristics as well as data on pre-existing comorbidities. Data is collected directly from official national sources, including ministry of health websites, national statistics sites, death registers and government social media accounts. The Tracker is updated every two weeks.

About the Sex, Gender and COVID-19 Project

The Sex, Gender and COVID-19 Project is a partnership of Global Health 50/50, the International Center for Research on Women, and the African Population and Health Research Center. Together, these partners are investigating the roles sex and gender are playing in the pandemic, building the evidence base of what works to tackle gender disparities in COVID-19 health outcomes, and advocating for effective gender-responsive approaches to COVID-19.

Learn more about sex, gender and COVID-19 and explore the Sex-Disaggregated Data Tracker here: <https://globalhealth5050.org/the-sex-gender-and-covid-19-project/>

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If you are aware of countries that are reporting data that we have not been able to locate or collect, we would be grateful if you could make us aware by emailing us at info@globalhealth5050.org and sharing a link to where the data can be found.

Engage with us: [@Globalhlth5050](#) [@APHRC](#) [@ICRW](#)
