Weekly operational update on COVID-19

16 - 22 April 2020



Crisis snapshot

As of 24 April 2020

Confirmed cases 2 591 015

Confirmed deaths
178 686

Countries & territories affected

213

Key links

COVID-19 web page
Case dashboard
Daily situation reports
Donors and partners
Response in countries
Rolling updates

Public health response and coordination highlights

Essential Supplies Production and Distribution

WHO has called on all <u>G20 countries</u> to work together to increase the production and equitable distribution of essential supplies and to remove trade barriers.

WHO has also signed the <u>UN agencies</u> call on donor community to urgently fund the global emergency supply system to fight COVID-19.

COVID-19 consortia

WHO has established three consortia: *Personal Protection Equipment* (PPE), *Diagnostics* and *Clinical care* to address global market shortages in critical supplies required for the global COVID-19 response. Each consortium is working to ensure that critical supplies across global markets are made available to meet the requests of countries most in need.

Partners Platform

Launched to facilitate the planning, monitoring, budgeting and advocacy for each countries' preparedness and response plan, the Partners Platform enables real time visibility of country plans, requests for resources and donor contribution tracking. To date, 106 national plans and 322 donor contributions have been uploaded.

Information technology to defeat COVID-19

WHO, the International Telecommunication Union (ITU) and UNICEF are working with telecommunication companies to reach billions of people that can't connect to the internet vital health messages to help protect them from COVID-19. WHO has also launched dedicated messaging services to counter myths and misinformation with reliable, evidence-based advice, working with Facebook, Google, Instagram, LinkedIn, Messenger, Pinterest, SnapChat, Tencent, TikTok, Twitter, Viber, WhatsApp, and YouTube. These services are available in more than 20 languages.

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Emergency Medical Teams (EMTs)

Over a hundred EMTs and focal points worldwide are working closely with the EMT Secretariat hosted by WHO. As of 19 April, international EMTs have deployed to fifteen countries. Thirty-two EMTs included in the WHO Classification process are responding nationally to support and reinforce the local health systems in all regions.



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IASC countries responding to COVID-19

All 29 countries with Inter-Agency Standing Committee (IASC) activated Health Clusters/Sectors are reporting confirmed COVID-19 cases. The 900 national and international health cluster partners are responding to COVID-19 specific needs while maintaining essential health services for 65 million people affected by humanitarian crises.

The Global Outbreak Alert and Response Network (GOARN) is working on the Roll out and implementation, in several countries, of <u>Go.Data</u>, an outbreak investigation tool for field data collection, contact tracing and visualization of chains of transmission during public health emergencies. Since the beginning of the epidemic, thanks to GOARN, WHO has deployed 59 experts from 27 partner institutions and technical networks to support affected countries.

Risk Communications and Community Engagement (RCCE)

IFRC, UNICEF, and WHO with GOARN support are strengthening coordination and collaboration among key stakeholders at the global and regional levels in risk communications and community engagement (RCCE).

New guidance and guidelines issued and updated

Addressing Human Rights as Key to the COVID-19 Response

Considerations in adjusting public health and social measures in the context of COVID-19

Safe Ramadan practices in the context of the COVID-19,

Guidance on Preparedness, prevention and control of coronavirus disease (COVID-19) for refugees and migrants in non-camp settings

Technical specifications for invasive and non-invasive ventilators for COVID-19,

International guidelines for certification and classification (coding) of covid-19 as cause of death

Scientific Brief

The use of non-steroidal anti-inflammatory drugs (NSAIDs) in patients with covid-19: no evidence of severe adverse effects, acute health care utilization, long-term survival, or quality of life in patients with COVID-19.



Strategic Supply Chain

COVID-19 Supply Chain System (CSCS)

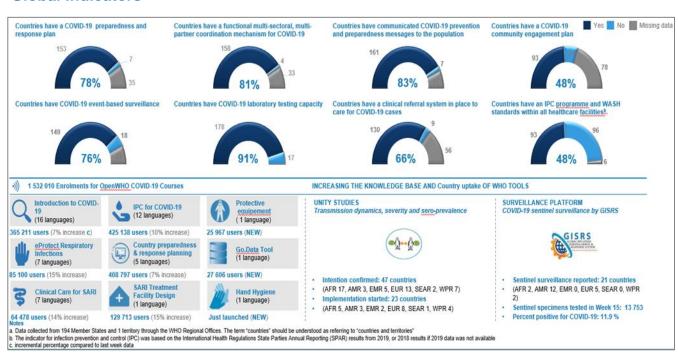
The COVID-19 Supply Chain System (CSCS) managed by the Supply Chain Task Force (announced on 8 April) is a collaborative effort across UN and non-UN actors that aims to identify, certify, source, allocate, direct and deliver essential medical supplies and equipment to where they are needed most during the COVID-19 pandemic. WHO is leading the prioritization and destination of medical supplies and equipment and WFP is serving as logistics lead to direct shipment and distribution of goods. The COVID-19 Supply Portal will shortly be accessible through the Partners Platform (see above)

The heads of the United Nations' major agencies have issued a <u>warning</u> of the risk of COVID-19 to the world's most vulnerable countries and called the international community to urgently support the global emergency supply system.

COVID-19 supply shipped by 20 April 2020

SHIPPED	Mask, Surgical	Mask, N95	Gloves, Examination	Gown	Goggles	Face Shield
AFRO	1,403,750	24.150	386,300	45,879	6,930	30,910
EMRO	334,000	21,170	494,000	69,272	5,060	19,100
EURO	191,080	4,950	199,100	23,748	3,700	1,900
РАНО	74,000	2,440	76,000	12,916	1,300	7,900
SEARO	372,000	35,535	320,500	23,899	8,650	13,736
WPRO	192,050	9,050	166,000	10,463	4,203	5,880
TOTAL	2,566,880	97,295	1,641,900	184,478	29,873	79,426

Global Indicators







Appeals and events

COVID-19 Strategy Update

WHO released an updated COVID-19 strategy on 15 April. This <u>update</u> aims to help guide the public health response to COVID-19 at national and subnational levels, and to update the global strategy to respond to the COVID-19 pandemic. It also provides guidance for countries preparing for a phased transition from widespread transmission to a steady state of low-level or no transmission.

Global Strategic Preparedness & Response Plan (SPRP)

SPRP was released on beginning of February and runs until the end of April. WHO has been engaging donors and the public to mobilize support for the COVID-19 response. Donors have contributed through traditional bilateral contribution agreements (status of funding raised can be found here) and the recently launched COVID-19 International Solidarity Response Fund and the Contingency Fund for Emergencies. An updated SPRP will be released early May.

Global Humanitarian Response Plan (GHRP)

The GHRP released on 25 March 2020, GHRP is a joint effort by members of the Inter-Agency Standing Committee (IASC), to analyse and respond to the direct public health and indirect immediate humanitarian consequences of COVID-19, particularly on people in countries already facing other crises. According to the plan US\$2 billion are required between April and December 2020 for additional humanitarian interventions, above and beyond existing humanitarian needs, due to COVID-19. As part of GHRP WHO is appealing for US\$450 million.

One world together at home

The <u>OneWorld #TogetherAtHome</u> Global Special, a cross-platform gathering celebrities in support of healthcare workers and WHO, raised at total of US\$ 128 million including <u>U\$55 million</u> for the WHO's Solidarity Response Fund.

Ministerial Information Session on COVID-19

During this week's information session on COVID-19, Ministers from six countries (Chile, South Africa, Sweden, India, Iran, Fiji) were invited to present their own national response efforts. Following the presentations, the floor was open for Q&A which enabled real-time discussion, sharing of information and best practices among Member States.

WHO funding mechanisms

Bilateral support from Donors

Bilateral funding support between donors and WHO to directedly fund the SPRP. WHO encourages all donors to provide flexible funding to allow for the greatest flexibility to enable WHO to respond in a timely and agile manner to the rapidly evolving needs during this crisis.

COVID-19 Solidarity Response Fund

United Nations Foundation, Swiss Philanthropy Foundation and WHO established the <u>COVID-19</u> Solidarity Fund to support the response. The Solidarity Fund enables private individuals, corporations and institutions to directly contribute to global response efforts.

The WHO Contingency Fund for Emergencies (CFE)

CFE enables outbreaks around the world in the most vulnerable countries WHO to respond in real-time, playing a critical role in responding to with weak health systems. WHO has released US\$10 million for urgent preparedness and response COVID 19 activities globally through the CFE.

Health Security Learning Platform

The first module on <u>Infection Prevention and Control for Rapid Response Teams</u> was published. It includes the following topics:

- How to apply standard precautions?
- How to apply additional precautions for cases of COVID-19?
- How to safely manage a dead body in the context of Covid-19 outbreak?

You can access them on HSLP

Research and development highlights

Solidarity Trial

More than 100 countries have joined the Solidarity Trial in the search of a vaccine and treatment for COVID-19, with 1,200 random patients from the first five countries that joined.

WHO is working with the Foundation for Innovative New Diagnostics (FIND) and the Clinton Health Access Initiative to identify and validate diagnostics tests that can be manufactured in large quantities.

More updates on research and development here.





REGIONAL UPDATES

Eastern Mediterranean Region (EMRO)

Yemen: WHO has moved quickly to secure scare resources on global markets, procuring and transporting more than 6,700 testing kits with an additional 32,400 scheduled to arrive in coming weeks and provided guidance and training to front line staff. So far 333 specially trained Rapid Response Teams are supporting screening at points of entry, contact tracing, and, where appropriate, isolating suspected cases in every single district.

Three laboratories are now equipped to run testing and this capacity is set to more than double in coming weeks. WHO is also helping to upgrade 37 designated COVID-19 hospitals across the country by rolling out onsite training for health care workers on COVID-19 critical care and providing the necessary high-tech equipment.

So far, WHO has procured and delivered 520 intensive care unit (ICU) beds and 208 ventilators to hospitals and a second deployment of twice this size on its way.

<u>Iraq</u>: Basrah University in collaboration with WHO has started to manufacture its own virus transport medium (VTM) and nasal swabs. So far more than 1620 VTM and 3200 nasal swabs have been produced and delivered to health directorates in the southern part of the country. This new production, along with the Reverse Transcriptase-PRC (RT-PCR) kits provided by WHO, has helped to ramp up testing of suspected cases.

Disinfectants and sterilization material, including hand-rub gel, have also been produced locally with support from WHO and the Government of Iraq.

Pakistan: WHO was initially the sole provider of PPE in the early stages of the outbreak. WHO also provided thermoflash for screening at points of entry including all major airports and set up covid-19 info desks in 3 major airports, providing public health information and assistance to the public and airport / airline staff during the early phases of the response.

With 1.4M funding from GAVI, WHO has established a dedicated Infection Prevention and Control (IPC) team and undertaken assessment of 100 priority hospital facilities to advise them on improvement measures in readiness for COVID-19.

To increase testing capacity, WHO procured and distributed 15 PCR machines for point of care testing and has provided technical assistance to leverage the country's impressive tuberculosis treatment infrastructure across the country to enhance testing by a further 2000 tests per day.

TB centers are being equipped with N95 masks and other PPE to protect frontline workers. To ensure that the country's already vulnerable an immunosuppressed TB and HIV patients are protected, centers are using couriers to delivery 3-months' supply of medicines to patients.

<u>Syria</u>: WHO has supported extensive rehabilitation of the Central Public Health Laboratory in Damascus, trained dozens of laboratory technicians and rapid response team members in testing and sample collection, and procured critical diagnosis equipment, including five polymerase chain reaction (PCR) machines and multiple shipments of testing kits, which has quadrupled testing capacity.

WHO is supporting the training of laboratory technicians to staff three new laboratories in Aleppo, Homs and Latakia governorates, with testing due to commence soon.

WHO and UNICEF have already distributed nearly a million pieces of essential personal protection equipment, including masks, goggles, gloves, and disinfection kits, and provided training in their proper use.

Read more

<u>Iran:</u> WHO has delivered 45 arterial blood gas analyzers to the Islamic Republic of Iran as essential equipment in the fight against COVID-19. The equipment will facilitate arterial blood gas tests in Iranian hospitals.



REGIONAL UPDATES

African Region (AFRO)

The second Strategic Response Plan for the COVID-19 pandemic is being finalized. The plan will cover the period of April to September 2020.

A training on COVID-19 surveillance and contact tracing at district level along with related technical guidance was developed.

A pilot of the polio GIS platform for contact tracing is being implemented in Republic of the Congo.

A control assessment framework of healthcare facilities has been undertaken.

The mapping of diagnostic platforms in the region has been completed.

Chinese EMTs were deployed to Ethiopia and Burkina Faso, and UK EMT to Zambia.

As of 21 April 2020, 42 of the 52 (81%) countries targeted with the solidarity flight distribution supported by WHO and Jack Ma Foundation had been served.

Since the beginning of the epidemic, across all the Region more than 232 experts have been deployed across all the Region, 7127 (948 more than last week) Health Care Workers and 993 trainers (331 more than last week) have been trained in Infection Prevention Control, and 179 heath facilities have been disinfected.

For more details see AFRO situation report

Americas (PAHO)

Interim guidelines on care for health workers exposed to COVID-19 in health facilities have been issued.

A document with ongoing updates regarding potential COVID-19 therapeutics was released.

A shorter version of the guidelines for the critical care of seriously ill adult patients with COVID-19 and interim recommendations on the initial care of persons with acute respiratory illness in the COVID-19 context in healthcare facilities have been distributed

A joint work with Belize and the Eastern Caribbean is allowing to estimate needed hospital beds and other critical care resources, along with a training in the application of a tool to conduct needs analysis of supplies and medicines. The Paraguay team is working with country counterparts to activate department-level emergency operations centers, and with long-term care institutions.

Jamaica and El Salvador are collaborating with designated emergency teams, providing around-the-clock technical guidance and support, and strengthening epidemiological surveillance systems.

Teams in Guatemala, Chile, Honduras, and Mexico are providing countries with guidance on preparing healthcare facilities for treating people infected with COVID-19, promoting measures that protect people in situations of vulnerability.

Honduras and Suriname supported national governments training rapid response teams (RRTs) on evidence-based recommendations.

For more details see PAHO Situation Report

European Region (EURO)

Transition to new normal during the pandemic must be guided by public health principles.

WHO/UNICEF joint statement –
Maintaining routine
immunization services vital
during the COVID-19 pandemic

Western Pacific Region (WPRO)

Philippines: WHO supporting the government to prepare stage 3 stepping up surveillance, case finding and planning for other Nonpharmaceutical Interventions (NPI) measures in preparation for the lifting of the ECQ.



