Weekly Operational Update on COVID-19

7 August 2020



Confirmed cases 18 902 735

Confirmed deaths **709 511**

Countries, areas, or territories affected **216**

Public health response and coordination highlights WHO, Africa CDC join forces for research on traditional medicine for COVID-19



WHO Country Representative to Mali Dr. Jean Pierre Baptiste and Professor Rokia Sanogo, Head of the Traditional Medicine Department of the National Institute of Public Health Research (INRSP) in Mali.

Mali, African Region an effort to strengthen research and development of traditional medicines as related to COVID-19 in Africa, World Health Organization and the African Centers for Disease Control and Prevention (Africa CDC) launched advisory committee on July 22nd. This committee, comprised of 25 regional experts, will be responsible for providing independent scientific advice and support to countries on the safety, efficacy and quality of traditional medicine therapies.

The WHO Country Representative, Dr. Jean Pierre Baptiste, expressed appreciation for the participation of the members of the expert committee and assured all committee members that WHO will continue to support national authorities in their efforts to fight against COVID-19 in Mali. <u>Link</u>

a) See Coronavirus Disease (COVID-19) Situational Report for further information



Public health response and coordination highlights

Getting ahead of COVID-19 with the help of PAHO/WHO surveillance app

Jamaica, A COVID-19 monitoring, tracking and tracing system developed by the World Health Organization (WHO) has helped Jamaica get ahead of the virus and reduce transmission. The Go.Data system was developed by WHO to collect and analyze huge amounts of data collected during an outbreak to inform and assist the response of health authorities. This includes case data, contact data, laboratory and clinical data, contact follow-up information.

The rapid installation of the Go.Data surveillance system in Jamaica occurred quickly after the announcement of the pandemic, enabling health authorities to gain control of the virus. Utilizing 77 surveillance sites across the Jamaica, regional health authorities and the Ministry of Health and Wellness (MOHW) were able to adapt the software to suit locals needs and implement an informed response.

According to Dr. Iyanna Wellington, a medical epidemiologist at MOHW, "the [Go.Data] software would automate much of the work that was being done manually to track the spread of COVID-19. The flexibility of the software and the training provided by PAHO meant we got ahead of the outbreak through effective contact tracing and coordination with laboratories." *Link*

WHO Regional Director for the Americas warns of disruptions in regular health services due to COVID-19



"Health services are being disrupted in countries of the Americas as health workers are redirected to care for COVID-19 patients, people hesitate to seek routine care due to fears of infection, and global supply chains of medicines and equipment are strained" said Dr. Carissa F. Etienne, Regional Director for the Americas.

In 27 countries in the region, half of the diabetes and hypertension programs at primary care level have been halted and pregnancy-related visits dropped by 40%.

AMRO is calling on countries to adapt to this new situation to "reengineer how essential care is delivered and invest in the first level of care," using telemedicine, home visits, and community outreach programs to support vulnerable populations. *Link*



From the field:

Putting women and children first: immunization resumes in Sri Lanka amidst the COVID-19 pandemic



Women and children are back at immunization centres in Sri Lanka – following a rigorous appointment-only schedule put together by health workers. These services resumed only recently end of April – a month after they were completely suspended, while the country's health system tried to come to terms with the COVID-19 pandemic amidst a nationwide lockdown. By mid-May, the immunization backlog had been mostly cleared and it was business as usual.

Extensive communication campaigns through print and the electronic media announced the resumption of immunization services.

As immunization resumed, special care was taken to protect health workers. They were advised to wear appropriate personal protective gear, while providing essential health services. Appointments ensured no overcrowding in clinics, and for families where multiple women or children needed vaccination, health workers were advised to attend to all of them during one visit. *Link*

Pooling samples boosts Ghana's COVID-19 testing



A lab technician from the virology labs in Noguchi Memorial Institute for Medical Research

Accra, Ghana – "We are pleased to inform you that after the recent COVID-19 test conducted, your results came out negative," read a text message to Benedict Abbey. "Please do well to continue to strictly adhere to the precautionary protocols and we will get through this healthy and safe."

Six days earlier Abbey had been tested for the virus after being traced and contacted by the Ghana Health Service when a colleague at his workplace tested positive for COVID-19. Waiting for the results while in isolation was agonizing.

Since detecting the first COVID-19 case on 12 March, Ghana's Health Service has anchored the response on tracing, testing and treatment. Noguchi Memorial Institute for Medical Research, the country's pre-eminent biomedical institution, was initially Ghana's only facility able to test for COVID-19. Since May, the Government, with support from the World Health Organization (WHO), Africa Centres for Disease Control and Prevention, and other partners, has expanded COVID-19 testing centres to nine other highly specialized laboratories and conducted over 370 000 tests between March and mid-July. *Link*



Partnership

Global Health Cluster



The <u>COVID-19 Task Team</u> established four peer groups to develop tools and key messages on the following topics: gender-based violence and health, case management, prioritization of essential health services and an ethical framework for humanitarian settings.

To further inform the work of the Task Team a survey will be administered to all partners and Health Clusters to identify operational challenges and technical gaps in adapting existing guidance relevant to humanitarian settings.

The Task Team is currently conducting in-depth case studies in six countries to gather further insights on operational challenges and technical gaps in adapting existing guidance relevant to humanitarian settings. Harvard Humanitarian Initiative, a Task Team partner, will be conducting interviews in Arabic, Bengali, English and French with 10-12 key informants per country in Bangladesh (Cox's Bazar), Burkina Faso, Chad, Iraq, Nigeria (north-eastern region) and Yemen.

The GHC unit provides ongoing technical support to Health Cluster Coordinators via thematic webinars and bilateral support. Recent webinar topics include: a desk review of Gender-Based Violence (GBV) integration in 2020 Humanitarian Response Plans, Mental Health and Psychosocial Support (MHPSS) in the COVID-19 context and the Health People in Need (PiN) guidance and calculator.

The GHC Information Management Task Team is facilitating a second wave of Health Information Management trainings on the Public Health Information Service (PHIS) Standards that are the basis on which Health Clusters resource themselves to plan, execute and elevate their public health information work in any response.

With the Global Information Management,
Assessment and Analysis Cell (GIMAC) on COVID19, the GHC unit is responding to field requests from Ethiopia and Iraq.



Partnership

Emergency Medical Teams



Three Emergency Medical Teams (EMTs) deployed this week to help reinforce country health capacity to respond to COVID-19. Two different specialized Italian Emergency Medical Teams have deployed to Azerbaijan and Serbia respectively for a period of two weeks to support country response. In addition, the SAMU Foundation has deployed 1 Spanish EMT (Type 1) to El Salvador until 29th of August.

The EMT Secretariat is currently facilitating the deployment of UK EMTs to both Chad and Yemen. Clinical management experts from START Spain, Polish Center for International Aid (PCPM) Poland and the Australia Medical Assistance Team (AUSMAT) have also been deployed to support response efforts in Papua New Guinea and occupied Palestinian territory, including east Jerusalem.

The EMT Network is also working with the WHO sub-office in Cox's Bazar to extend the coordination and clinical expert from the AUSMAT Team.

Technical Guidance and Latest Publications

WHO COVID-19 Preparedness and Response Progress Report - 1 February to 30 June 2020, 3 Aug 2020

This report highlights the main points of progress that were made up to 30 June 2020 under the three objectives as outlined in the SPRP: scaling up international coordination and support; scaling up country preparedness and response by pillar; and accelerating research and innovation. The report also discusses key challenges and provides an update on the resource requirements for the next phase of WHO's response.

- Rapid assessment of service delivery for NCDs during the COVID-19 pandemic_29 July 2020 WHO's Department for Noncommunicable Diseases (NCDs) conducted a rapid assessment survey of service delivery for NCDs during the COVID-19 pandemic among 194 Ministries of Health during a three-week period in May 2020. Responses were received from 163 Ministries (84%).
- Estimating mortality from COVID-19 Policy Brief. 4 Aug 2020 This document is intended to help countries estimate CFR and, if possible, IFR, as appropriately and accurately as possible, while accounting for possible biases in their estimation.
- COVAX, the ACT-Accelerator vaccines pillar & The COVAX facility, 6 Aug 2020 The documents provide information on insuring accelerated vaccine development and manufacture; and global procurement for COVID-19 vaccines

Health learning

As of 5 Aug 2020

WHO is expanding access to online learning for COVID-19 through its open learning platform for health emergencies, OpenWHO.org.

The OpenWHO platform was launched in June 2017 and published its first COVID-19 course on 26 January 2020.

Nearly 4 MILLION Course enrollment 80% COVID-19 courses

38 Languages

1 million Certificates

116 COVID-19 Courses

16 Free Trainings

The COVID-19 courses cover the following subjects:

















An introduction to Health & Safety COVID-19

Clinical Care

Go.Data tool

Waste management

Environmental Cleaning

PPF

Infection Prevention & Control

















Risk Assessment for Mass Gathering

Basic Microbiology

Country

Treatment capacitation Facility Design

Decontamination of Hand medical devices

Hygiene

Injection safetv

IPC Core Component



Appeals

WHO appreciates and thanks donors for the support already provided or pledged and encourages donors to **give fully flexible funding for the SPRP or GHRP** and avoid even high-level/soft geographic earmarking at e.g. regional or country level. This will allow WHO to direct resources to where they are most needed, which in some cases may be towards global procurement of supplies, intended for countries.

As of 7 August 2020

Global Strategic Preparedness & Response Plan (SPRP)

WHO's total estimation needed to respond to COVID-19 across the three levels of the organization until December 2020

\$1.7 BILLION

WHO's current funding gap against funds received stands under the updated SPRP

\$890 MILLION

The status of funding raised for WHO against the SPRP can be found <u>here</u>

Global Humanitarian Response Plan (GHRP)

Amount required by UN partners and NGOs until end December 2020 due to COVID-19

\$10.3 BILLION

WHO's financial requirement under the GHRP

WHO current funding gap

\$550 MILLION \$228

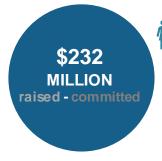
The United Nations released the 3rd update of the Global Humanitarian Response Plan (GHRP) for COVID-19. <u>Link</u>

WHO Funding Mechanisms

COVID-19 Solidarity Response Fund

The new COVID19 <u>Solidarity Response Fund</u> <u>impact report</u> is **now available**.

This third report covers the period June 1 – June 30, 2020 and reports on the Fund's impact on the global response to the COVID-19 pandemic. During this time the Fund received more than **US\$6.4 million** in new contributions and firm pledges.





individual

corporations

foundations

The WHO Contingency Fund for Emergency (CFE)

CFE enables WHO to respond in real-time, playing a critical role in responding to outbreaks around the world in the most vulnerable countries with weak health systems.

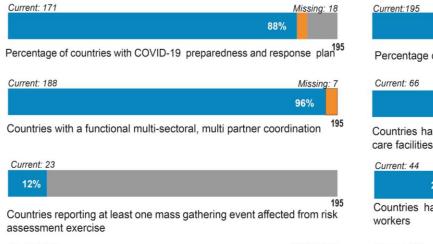


WHO has released US\$10 million for urgent preparedness and response COVID19 activities globally through the CFE and encourages donors to continue to replenish the CFE to allow WHO to respond to health emergencies in real time



COVID-19 Global Preparedness and Response Summary Indicators

Data as of 6 August 2020







Countries in which all designated PoE have emergency contingency





Surveillance reported: 26 countries	AFR 2, AMR 13, EMR 1, EUR 6, SEAR 2, WPR 2
Sentinel specimens tested in week 30: 95 401	19% increase compared to last w eek
COVID-19 positive:	13.5 %
Intention	AFR & AMR O FMR



CLINICAL PLATFORM Clinical characterization



UNITY STUDIES Transmission dynamics, severity & seroprevalence

47 Countries	SLAR 1, WERE 10	
Implementation started:	AFR 12, AMR 4, EMR 3, EUR 17, SEAR 1, WPR 10	
Intention confirmed: 95 countries	AFR 26, AMR 10, EMR 9, EUR 31, SEAR 7, WPR 12	
Implementation started: 21 countries	AFR 4, AMR 5 EMR 1, EUR 7, SEAR 2, WPR 2	١
Intention confirmed: 45 countries	AFR 8, AMR 9, EMR 7, EUR 14, SEAR 2, WPR 5	
COVID-19 positive:	13.5 %	
30. 33 401		

Current:195	Missing: 0
	100%
Percentage of countries with Co	OVID-19 laboratory capacity 195
Current: 66	Missing: 116
34%	
Countries have a national polic	y and guidelines on IPC for long-term



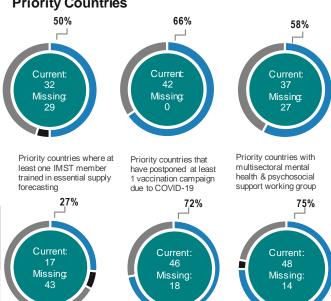
Countries have a health occupational safety plan for health care 195

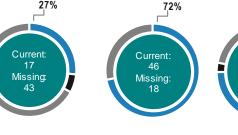


Current: 67		Missing: 93
34	%	
		195

Countries that have defined essential health services to be maintained during the pandemic

Priority Countries





Priority countries with an Priority countries with a active & implemented contact tracing focal point RCCE coordination

Priority countries with an IPC focal point for training











Americas (AMR)

Country-level Coordination, Planning and Monitoring

The **Belize** team together with United Nations counterparts, international NGOs and the Ministry of Health convened coordination meetings to assess support to communities along the border areas. WHO Country Office (WCO) El Salvador continues to coordinate the Health Cluster to support the response, involving cooperation with the United Nations System, development agencies, and national and international NGOs

Risk Communication & Community Engagement

- WCO Costa Rica and its partners began the process for a survey of citizen perception to facilitate the update of the communication strategy. The team, with the International Organization on Migration and Ministry of Health produced posters on cough etiquette, handwashing and other preventative measures for the Ngäbe population
- In Belize the team convened consultations with national authorities to discuss access to the COVID-19 vaccine as well as experiences in pharmacovigilance, techno vigilance and hemovigilance.

Case Management

AMRO has released guidance explaining that based on existing evidence at date of publication, AMRO does not recommend oral or parenteral use chlorine dioxide, sodium chlorite, sodium hypochlorite, or derivates for patients with suspected or diagnosed COVID-19.

Maintaining Essential Health Services

- AMRO Regional Director warns of disruptions in regular health services due to COVID-19, 4 Aug 2020. Link
- Suriname: Responding to COVID-19 boosts health system, 4 Aug 2020. Link

National Laboratories

- During the week, AMRO provided troubleshooting sessions and follow up calls regarding diagnostic implementation to Antigua and Barbuda, Dominica, Guyana, and Paraguay. In addition, detection reagents and materials (primers, probes, positive controls, enzymes) were sent to Costa Rica, Honduras. and Peru.
- The sub-regional Office for Barbados and the Eastern Caribbean Countries and the regional team delivered a webinar on "Scaling up Laboratory Testing Strategy".
- WCO Venezuela supported a national laboratory to improve its physical infrastructure based on biosafety requirements. This intervention enhanced the country's diagnostic capacity which will allow quality testing to be carried

Surveillance, Rapid Response Teams & Case Investigation

- PAHO has developed a Geo-hub for the which includes а series epidemiological dashboards and updated daily. It has four sub-regional and 54 country and territory geo-hubs for the Americas. In addition, the public can consult PAHO's interactive dashboard showing deaths. cumulative cumulative cases. incidence rate, new cases and deaths, as well as several other epidemiological indicators reported countries and territories.
- In collaboration with GOARN, PAHO has trained 31 countries and territories in the use of the Go.Data 20 countries are already using Go.Data actively. The Go.Data app is a tool that supports suspect case investigation and management, display of transmission chains, and contact tracing.



Eastern Mediterranean Region (EMR)

Risk Communication & Community Engagement

- The inter-agency risk communications and community engagement (RCCE) working group conducted a regional training for communication professionals on informed coverage and responsible reporting (UNESCO-American University in Cairo- WHO EMRO).
- Discussions are ongoing to establish an interagency forum for national societies and local partners to share RCCE best practices and success stories (initiated by IFRC).
- The current literature review was updated on pan-regional norms, culture and contextual factors that will influence long term sustainability of COVID-19 prevention behaviors (UNICEF -Anthrologica – WHO- IFRC).

Research, Innovation & Development

- A protocol was finalized for a COVID-19 seroprevalence study to be conducted in Aden, Yemen in collaboration with University of Aden and Médecins Sans Frontières (MSF). The study is awaiting final clearance by the Ministry of Health and the ethical review board. Subnational modelling analyses for Pakistan are ongoing.
- With regards to the Unity Studies, Afghanistan has completed data collection/ early results and will be presented next week. Pakistan and Jordan have started implementation. Yemen, Lebanon, Sudan, Somalia and UAE are finalizing protocols. Syria, Morocco, Libya, Qatar and Iran are in the planning phase.

Case Management

The Yemen surge mission in the area of clinical management is currently underway. Coordination is taking place with Jordan to develop a tailored COVID-19 management course for doctors and nurses, and with Afghanistan to facilitate training for critical care practitioners in rural areas.

National Laboratories:

- Tunisia: UN Resident Coordinator, WHO Representative visit COVID-19 laboratories. Link
- 30 labs from the region participated in the global EQAP. 28 labs received the panels, of which 25 labs scored 5 out of 5, 2 labs scored 4 out of 5 and 1 lab scored 0 out of 5 (due to a reporting error). Work has started with the labs that did not score 100% to improve and strengthen their capacities in the areas that have been identified as problematic.

Operational Support and Logistic

The Supply Chain Working Group organized a session to brief partners on WFP's air cargo services provided for the COVID-19 response. They also discussed the Supply Chain Planning and Ordering tool developed by JSI and the possibility of linking it with the WHO forecasting tool.

Maintaining Essential Health Services

- Together with HQ, discussions took place on the tools and templates for the five Bill and Melinda Gates project work streams on mitigating the effects of COVID on reproductive, maternal, neonatal, child and adolescent health (RMNCAH) in Pakistan, Sudan and Yemen. Follow up on the prioritization of reproductive and maternal health plans of activities for 2020 implementation were conducted for Egypt, Lebanon, Morocco, and Tunisia.
- UNICEF/UNFPA/WHO held a joint meeting the agenda for the upcoming virtual meeting with Ministers of health on continuation of RMNCAH essential services in the context of COVID -19



European Region (EUR)

Surveillance, Rapid Response teams & Case Investigation

Development of an emergency information management system in Kyrgyzstan: 22 July – 31 August

The WHO country Office in Kyrgyzstan is closely supporting the Government and Ministry of Health (MOH) in Kyrgyzstan to assess the existing health information and surveillance system for COVID-19 and other outbreaks.

A WHO epidemiologist has been deployed to work with the WHO Country Office, MOH and other partners to develop a road map to integrate emergency information management into a public health emergency operations centre.

Risk Communication & Community Engagement

The WHO Europe Regional RCCE working group meetings for UN agencies and the International Federation of Red Cross (IFRC): 6 August

On 6 August, WHO Regional Office for Europe held its biweekly meeting of the regional Risk Communications and Community Engagement (RCCE) working group. These meetings bring together focal points of UN agencies and the Red Cross Movement, to focus on issues surrounding RCCE.

National Laboratories

Update – Strengthening Laboratory Capacities in Kazakhstan: 20 July – 02 August

WHO completed a mission to support the Ministry of Health (MOH) in Kazakhstan in strengthening national laboratory capacity and the further investigation of pneumonia cases in the country. The mission carried out a series of visits to 9 laboratories performing COVID-19 testing and conducted technical reviews of the testing process in 7 regions of Kazakhstan.

National Laboratories

Samples from Kazakhstan are also in the process of being sent to a WHO reference laboratory for COVID-19 for confirmatory testing.

Strengthening laboratory and testing capacity in Montenegro: Week 31

The WHO Country Office in Montenegro has continued to closely support the Institute of Public Health in Montenegro in the response to COVID-19 by providing support to expand laboratory and testing capacities for COVID-19 detection and diagnosis. WHO EURO has deployed a laboratory expert for a 5-day mission, from 27 July – 31 July, to assess the Public Health Institute laboratory and review the previous lab assessments carried out in Montenegro to strengthen national laboratory capacity.

Laboratory training in Turkmenistan: 4 - 7 August

The WHO Regional Office for Europe is providing remote assistance and support to the Ministry of Health (MoH) on conducting laboratory trainings for COVID-19. WHO EURO experts are participating in a virtual training of trainers with a specific session for health care workers responsible for taking swabs. This follows the WHO mission to Turkmenistan from 6-16 July.



African Region (AFR)

Country-level Coordination, Planning and Monitoring

- The WHO AFRO continues to support its Member States with a special focus on high risk countries. WHO will soon deploy 43 experts from various fields to support South Africa's COVID-19 response actions. This surge support will deploy to support both at the national level and within the following provinces: Eastern Cape, Free State, Gauteng, Kwazulu Natal and Mpumalanga. The includes experts epidemiology. team in infection surveillance. management, prevention and control, procurement, community mobilization and health education.
- The Nairobi Hub held a meeting "Addis Ababa Humanitarian Hub-regional logistics (RLWG)". The objective was to bring visibility of the hubs operations and align with RLWG with a focus on improving un-interrupted availability of COVID-19 supplies in-country. AFRO also aims to utilize the Humanitarian Hub for the distribution of COVID-19 vaccines in the future

Surveillance, Rapid Response Teams & Case Investigation

- Zimbabwe: Environmental Health Technician officers follow WHO guidelines for early detection of COVID-19 symptoms, 4 Aug 2020. Link
- A mechanism for tracking of cases in neighboring countries in order to report confirmed cases during cross-border screening is being established to avoid missing cases from the country of origin or duplication of notifications in two countries

Infection Prevention Control

The team in the Nairobi Hub held an in-depth review of Infection Prevention and Control (IPC) implementation with focal persons from Zimbabwe, Seychelles and Zanzibar. IPC focal persons from Uganda, Kenya and Malawi also attended and shared their experiences.

Links to how to use the WHO IPC tools and guidance to improve IPC performance in countries were provided during the review.

Operational Support and Logistics

- 2 157 138 tests, 1 844 040 sample collection kits, 2 996 946 reagents, 9 596 482 PPE and 2 472 oxygen concentrators are being shipped.
- Currently, 883 534 tests, 381 600 collection kits, 893 174 reagents and 620 oxygen concentrators are under procurement.
- Supplies under preparation for shipment include; 370 600 tests, 330 540 sample collection kits, 574 504 reagents and 33 039 567 PPE components.

Case Management

World Health Organization surge team to arrive in South Africa, 5 Aug 2020. Link

Maintaining Essential Health Services

- Burundi: WHO to provide medical equipment for the fight against COVID-19 and continuity of essential services, 5 Aug 2020. Link
- Madagascar: Additional provision of personal protective equipment and drugs for the population and health workers, 4 Aug 2020. Link



South-East Asia Region (SEAR)

Surveillance, Rapid Response Teams & Case Investigation

WHO Software Helps Maldives In Tracing COVID-19 Patients & Their Contacts

Maldives has been effectively using Go.Data, a WHO software tool for outbreak investigation and contact tracing, in the ongoing COVID-19 pandemic.

The initiative for getting the tool to the country was taken by the Maldives government when it approached WHO for support on the matter, shortly after the first COVID-19 case was recorded.

WHO also supported Maldives in training the staff involved in the project and continues to do so via a mobile phone app SLACK, where the local teams as well as the WHO teams exchange queries and messages as well as request for support such as trouble shooting issues. *Link*

Risk Communication & Community Engagement

WHO is collaborating with Wahana Visi Indonesia (WVI) for activities related to risk communication and community engagement.

A rapid assessment was conducted during the last week of July to gain insight into community receptiveness and information needs as well as identify appropriate communication strategies in 16 districts of four provinces: East Nusa Tenggara, North Maluku, Papua and West Kalimantan.

On 12 August, WVI, with input from WHO, will present the results of the assessment to the PHOs.

Maintaining Essential Health Services

WHO and UNICEF published a joint release in English and Indonesian to commemorate World Breastfeeding Week from 01 to 07 August.

The statement calls on the government and stakeholders to safeguard and promote access to services that support mothers to continue breastfeeding practices during the COVID-19 pandemic, including:

- a. Prioritizing services and programmes to protect, promote and support breastfeeding as a critical component of the health and nutrition response to the COVID-19 pandemic;
- Continuing to support breastfeeding mothers with improved quality counselling and accurate information on maternal, infant and young child nutrition, including strengthening the 'Baby Friendly Hospital Initiative';
- Ending the promotion of breastmilk substitutes to enable mothers and caregivers to make informed decisions on best way to feed their babies: and
- d. Encouraging women to continue to breastfeed during the pandemic, with no separation of mother and baby, even if a mother is confirmed or suspected to have COVID-19, while adhering to appropriate IPC measures.

WHO: Maintain essential health services during COVID-19 response, 6 Aug 2020. The World Health Organization urged Member countries in South-East Asia Region to maintain essential health and accelerate resumption of disrupted health-care services, hit by the pandemic, as an integral part of the COVID-19 response. Link