Public health response and coordination highlights

Coordination–United Nations Crisis Management Team (UNCMT)
During the United Nations Crisis Management Team (UN CMT) meeting on 17 June 2020, WHO briefed on the overall COVID-19 epidemiological situation, with an in-depth briefing from the Eastern Mediterranean Region (EMR) provided by the Regional Emergency Director (RED). The region has seen a rapid acceleration in COVID-19 cases since May. This is of key concern considering that 12 out of the 22 EMR countries/territories have complex humanitarian emergencies and the region hosts 43% of the world’s refugees. The RED emphasized the need to scale up public health measures to control the spread, such as protecting vulnerable groups, ensuring control of disease spread at points of entry, and engaging communities. Overall, WHO highlighted the importance of calibrating public health measures to avoid an increase in cases that could overwhelm the public health system and further undermine the effectiveness of government responses. During the meeting, WHO also reported on its activities with other UN agencies to support organizers of mass gatherings particularly for the tourism and travel industries in the context of the pandemic.

The COVID-19 Partners Platform
To support countries in anticipating and estimating needs, the COVID-19 Partners Platform will soon integrate a dynamic costing tool that costs actions across Pillars 1-9. Building upon the COVID-19 Essential Supplies Forecasting Tool, this new costing feature also integrates Imperial College modeling of various transmission scenarios and can be adjusted with country-specific information including epidemiological context. The costing of needs and resource gaps (including workforce and supplies) is estimated over four, and 12-week periods, illustrating the investment case for measures within the health sector to reduce transmission.

To date, over 75% of WHO member states (149 countries) have engaged on the Platform (including regular users, as well as requests for demonstrations). 108 COVID-19 national plans have been uploaded and 69 donors have entered their contributions, totaling USD4.3 billion. The Platform was launched as a tool to enable all countries/territories/areas, UN Country Teams and partners supporting the response to coordinate and scale-up efforts to address the COVID-19 pandemic. It features real-time tracking of planned and implemented activities, requests for international support and supplies, and donor contributions that have been committed in the context of this emergency. The COVID-19 Supply Portal is also available through the COVID-19 Partners Platform, enabling users to request critical supplies.
Emergency Medical Teams

EMT network is actively working with the EMTs and the country office and is close to cover the request of assistance in Cameroon, Chad, South Sudan, and Yemen to complete all the international deployments as well as all the national operations supported by EMTs to reinforce the national health surge capacity. During this week a new request for assistance for Armenia has been launched to the network with positive feedback and offer from different teams received in the first 48 hours.

EMT Secretariat is working in close cooperation with the six WHO regions to reinforce the operations in the COVID 19 response as well as provide technical support, revisit training needs and support the integration and adaptation of the EMT methodology at sub-national level. EMT secretariat is working to continue supporting to on-the-job training and expanding option to simulation based training to improve confidence and technical skills of health workforce. During this week new teams have been incorporated in the EMT classification process and mentorship support will be provided to facilitate current engagement in the COVID 19 response.
Health learning
WHO is expanding access to online learning for COVID-19 through its open learning platform for health emergencies, OpenWHO.org. The platform has more than 3.4 million course enrolments, about 80% of which are in COVID-19 courses, and has issued 760 000 certificates. Free trainings are available on 12 different topics translated across 30 languages to support the coronavirus response, for a total of 94 COVID-19 courses. The COVID-19 courses cover the following subjects: an introduction to COVID-19, clinical care, health and safety, infection prevention and control, country capacitation, treatment facility design, the Go.Data tool, personal protective equipment, hand hygiene, waste management, decontamination of medical devices and environmental cleaning.

Global Research Highlights

Stories from the Field

Pakistan, despite facing humanitarian crisis (HRP country) is implementing a national Population-based age-stratified sero-epidemiological study for COVID-19 infection with WHO technical and financial support. Pakistan embarked in the global WHO Unity Studies initiative which proposed master protocols for country use and adaptation. These studies are important because the results help countries to understand the spread, severity and spectrum of disease, to identify the impact of the pandemic on communities and how they can inform public health measures to limit further spread of the virus. The contribution of WHO was to support Pakistan professionals in country with the development of their protocols, implementation of the study, procurement of serological tests for study sites and to assist with the analysis of the data collected. Initial results are expected to be made available in the coming month.

Niger, Madagascar, Cameroon, RCA, Burkina Faso
Collaborating partners (WHO + Pasteur Institutes Network in African continent) have worked hand in hand since February to implement COVID-19 serology-epi study among health workers (HW) in five francophone African countries. Niger, Madagascar, Cameroon, RCA, Burkina Faso engaged in the global WHO Unity Studies initiative which proposed master serologic-epi protocols for country use and adaptation. These studies are important because the results help countries to understand the spread, severity, risk factors and spectrum of disease, to identify the impact of the pandemic on communities and specific populations groups, and how they can inform IPC and public health measures to limit further spread of the virus. The five countries chose to implement the WHO Unity protocol on the assessment of risk factors for COVID-19 in HW, jointly and in a synchronized manner through a prospective cohort study. The study was implemented in each country by the national Pasteur Institute, coordinated by Pasteur International, and weekly collaboration with WHO AFRO and HQ.

Technical Guidance documents

Supply Chain Task Force notes for the record 9 June 2020
Criteria for releasing COVID-19 patients from isolation Scientific Brief 17 June 2020
Addressing violence against children, women and older people during the covid-19 pandemic: Key actions June 18,2020
The following catalogue lists all medical devices, that may be requested through the COVID-19 Supply Portal.

COVID-19 Supply Portal: Frequently asked questions
Read all releases here
Appeals
Elements of the COVID-19 Strategic Response and Preparedness Plan (SPRP) have been updated and are reviewed on a regular basis by WHO in consultation of all six regional offices. These elements are laid out in the COVID-19 WHO Appeal, updated on May 24.

Global Strategic Preparedness & Response Plan (SPRP)
WHO has been engaging donors and the public to mobilize support for the COVID-19 response against the SPRP and many donors have contributed to date. WHO estimates that a total of US$ 1.7 billion is needed to respond to COVID-19 across the three levels of the organization through till December 2020. The resources will be used to implement priority public health measures in support of countries to prepare and respond to coronavirus outbreaks, as well as to ensure continuation of essential health services. The US$ 1.7 billion required under the updated SPRP takes into account the funds that WHO has received to date against SPRP, leaving WHO with a funding gap of US$ 1.1 billion for 2020.

Global Humanitarian Response Plan (GHRP)
The 2nd iteration of the GHRP released on 7 May 2020 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. US$6.7 billion are required through till end 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$550 million of which only some (US$ 184 million) has been pledged and received, leaving WHO with a funding gap of $366 million – or some 67% - for operations in countries affected by humanitarian crises.
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.

WHO funding mechanisms
COVID-19 Solidarity Response Fund
With support from the Solidarity Response Fund, the diagnostics consortium has secured 4 million manual PCR tests for $49 million, and initiated purchase orders for allocation and distribution to 135 countries for the month of May. These initial purchases will serve as a catalyst for securing supplies for additional procurement, as payments from countries receiving these deliveries will provide additional funding for procuring more supplies and equipment for allocation and delivery in the coming months.

The WHO Contingency Fund for Emergencies (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.
Recent progress for COVID-19 response

Epidemiological trends in WHO region:
- Epi. 12. Year 1. Week 7
- Epi. 13. Year 2. Week 7
- Epi. 14. Year 2. Week 7

Information available:
- 23 February 2020
- 29 February 2020
- 13 March 2020

Information required:
- 23 February 2020
- 29 February 2020
- 13 March 2020

COVID-19 surveillance and response

Increasing the knowledge base and country uptake of WHO tools

- 59% of countries have a COVID-19 surveillance platform
- 75% of countries have a national surveillance system
- 85% of countries have a COVID-19 risk assessment plan
- 83% of countries have a COVID-19 preparedness and response plan

WHO Health Information Management System (WHOHIMS)

World Health Organization (WHO) Global Health Observatory (GHO)

PAHO continued to conduct technical assessments of different personal protective equipment (PPE) products as countries and multilateral agencies consider products for procurement and distribution across the Americas. During the week, the UN Humanitarian Hub in Panama received and set up cold chain equipment. In addition, the PAHO logistics team in Panama received additional supplies which will be distributed shortly.

Enhancing COVID-19 mortality surveillance in Latin America and the Caribbean will be facilitated through all-cause mortality surveillance Guidance document Published: 15 June 2020 The purpose of this document is to provide guidance to countries of the Region on improving COVID-19 mortality surveillance. The document expands on methods for analysis of all-cause mortality as one of the proposed approaches to contribute to the evaluation of the true burden of the COVID-19 epidemic in countries in the Latin America and the Caribbean.

PAHO Dominican Republic provided technical support to the Ministry of Public Health in the development of tools to strengthen the reporting of variables including hospitalizations, ICU occupancy, ventilator use, and number of patients discharged. Further the team in Dominican Republic provided medical equipment to the National Health Service (SNS, in Spanish) to be distributed to 7 public network centres located in the provinces of Santo Domingo, Barahona and La Romana.
REGIONAL UPDATES

Eastern Mediterranean Region (EMR)

WHO airlifts over 80 tons of emergency medical supplies from Iraq to northeast Syria, to meet the increasing health needs there. The cargo includes a variety of health kits ranging from trauma kits sufficient to manage 4300 cases to 11 cholera kits, 30 noncommunicable diseases kits, 26 surgical kits and 478 inter-agency emergency health kits providing medicines, medical supplies and consumables enough to treat over one million people. (14 June 2020).

WHO's Regional Office for the Eastern Mediterranean co-organized a regional webinar on infection prevention and control (IPC) in collaboration with the WHO Collaborating center for IPC, as well as a 2 day webinar on strengthening capacities for national rapid response teams for 45 participants from Syria. A webinar was also conducted on "Healthcare Workers’ Protection Against COVID-19" in collaboration with WHO collaborating centre in Saudi Arabia and WHO country offices in Pakistan and Afghanistan, attended by 200 participants. EMRO also reviewed and updated the IPC health care facility response assessment tool for Pakistan.

Regional teams are also working on developing educational videos in Arabic on the proper use of the cloth/medical masks, and working with HQ colleagues on guidelines related to the rational use of antibiotics during COVID-19. The Regional Office is preparing the first draft of the Updated Guidance for the Detection and Diagnosis of Coronavirus Disease 2019 (COVID-19) infection in the Eastern Mediterranean Region, and supporting WHO country office Jordan to document and evaluate the COVID-19 testing strategy, including the testing indicators outlined in WHO guidance.

The weekly webinar on public health operations centres focused this week on the Saudi Arabia experience, and a meeting was held with the Gulf countries to update their preparedness and response plans after COVID-19. Work is ongoing with Sudan and Libya to launch the emergency operations centre software.

The Interagency risk communications and community engagement working group developed and launched "How Can Risk Communication and Community Engagement Include Marginalized and Vulnerable People in the Eastern Mediterranean Region", and a press release announcing the launch was sent out. The regional office also briefed the Interagency risk communications and community engagement working group on the Global Action Plan for Healthy Lives and Well Being as a platform for joint actions. The working group is aligning joint interventions between the global action plan and risk communications and community engagement to foster collaborations across agencies in this regard.

A call was conducted with the International Committee of the Red Cross (ICRC) Asia and the WHO Pacific regional office to discuss COVID in Pakistan and Afghanistan. The 10th partners' SitRep on COVID-19 among refugees and migrants was developed and disseminated, and EMRO presented a regional overview on surveillance of COVID-19 among refugees and migrants in an HQ organized meeting.
WHO has been providing support to hospitals in Italy, in agreement with the Italian Ministry of Health in the design and set-up of COVID-19 facilities. As of Week 24, 11 hospitals, with bed capacities ranging from 32 to 1487, in the regions of Puglia and Bologna have been supported. With the changing epidemiological situation in Italy, the support is now being directed towards repurposing facility for regular clinical service provision while maintaining high level of readiness for COVID-19 management activities during the post-acute phase.

Virtual laboratory training in Kyrgyzstan, Tajikistan, Turkmenistan, Uzbekistan and Ukraine for scaling up of national laboratory capacities: 7-14 June. WHO EURO conducted a virtual training session for 43 laboratory experts from COVID-19 laboratories, at national and regional levels, in Kyrgyzstan, Tajikistan, Turkmenistan, Uzbekistan, and Ukraine providing technical support and answering questions on risk assessment performance, laboratory biosafety measures related to COVID-19 testing, and biosafety measures for use of point-of-care or near point-of-care systems.

Virtual Mission to North Macedonia: 18-19 June
WHO EURO organized a 2-day, virtual technical mission to North Macedonia in collaboration with the Ministry of Health. WHO experts engaged with ministry officials and technical staff, providing technical support and next steps across COVID-19 response areas including planning and monitoring, risk communications, restoring and maintaining essential services, health workforce coordination, infection prevention and control and case management. This virtual mission will be followed by in-country high level support to respond to the increased incidence seen over the past weeks.

WHO EURO convened the Regional WHO-UN-Red Cross coordination platform for its fourth consultation, to engage UN Issue-based Coalitions in the discuss the Global Action Plan on Healthy lives and well-being for all, and to discuss and address current, country-specific challenges in multisectoral health response activities. The platform will continue to be convened to further coordinate the ongoing regional COVID-19 response and to understand, discuss and address current, country-specific challenges in the multi-sectoral health response activities.

Regional UN Issue-based Coalition webinar addressing Gender-Based Violence in the context of COVID-19: 16 June
The regional UN Issue-based Coalition (IBC) on Gender equality convened an interactive webinar focused on sharing lessons learned and challenges in addressing gender-based violence in country-level COVID-19 responses. The session discussed ways to address gender equality and violence against women and girls as a central feature of national socio-economic responses and all efforts to build back better from the pandemic. The webinar was attended by high-level UN staff from WHO, UNFPA, UN Women, UN Resident Coordinators and UNCTs with a total of 212 participants.

1 All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999)
**REGIONAL UPDATES**

**South-East Asia Region (SEAR)**

A flagship learning initiative on COVID-19 preparedness and response was launched virtually in New Delhi on 11 April 2020 a partnership between the government of India, WHO, UNICEF, Sphere India and other organizations. Within two months of its launch, the COVID-19 academy has reached out to more than 48,000 participants from across the country and trained them on a range of topics spanning from basic epidemiology of COVID-19, social protection, continuation of essential health services, food security, addressing stigma and discrimination, and much more. The overarching aim of the COVID-19 Academy is to build capacities of civil society organizations and grassroot volunteers who play critical roles in COVID-19 preparedness and response, both at the community and health facility level. This is to equip them with knowledge and skills on how to protect themselves and deliver key interventions in response to the new virus. Since its launch, the COVID-19 Academy has conducted more than 50 bilingual webinars in Hindi and English on a range of topics such as Climate change agenda in COVID-19 impacted world; Ensuring respectful pregnancy care during COVID-19; Infection prevention and control during COVID-19; Responsive parenting for young children during COVID-19; WASH-health interlinkages in context of covid-19; Impact of covid-19 on migrant workers in the Indian garment industry; and Understanding gender, gender mainstreaming and addressing gender based violence in humanitarian action etc. Each webinar session included technical presentations, country specific case studies and experiences as well as an interactive session for questions and answers.


On 15 June, WHO presented the updated WHO on laboratory testing for COVID-19 during an online training conducted by the Board for Development and Empowerment Human Health Resources (PPSDM) and the NIHRD. A total of 314 laboratory technicians attended from across the country.

On 13 June, WHO convened the tenth weekly meeting of key development partners to discuss and coordinate COVID-19 response interventions. The Asian Development Bank (ADB), the Australian Department of Foreign Affairs and Trade (DFAT), the European Union (EU), UNICEF, the World Food Program (WFP), the United States Agency for International Development (USAID), US Centers for Disease Control and Prevention (US CDC), and the World Bank joined the meeting.

On 16 June, WHO participated in the fifth UN in Indonesia Townhall Meeting, which virtually connected close to 650 colleagues from UN organizations across the country. The WHO Representative to Indonesia updated colleagues on the COVID-19 situation; described the criteria for assessing COVID-19 transmission in Indonesia; explained the non-negotiable measures of the ‘new normal’ scenario (below); and responded to questions.

**Key links**

- [COVID-19 web page](https://www.who.int/)
- [Case dashboard](https://www.who.int/)
- [Daily situation reports](https://www.who.int/)
- [Surveillance Report](https://www.who.int/)
- [Donors and partners](https://www.who.int/)
- [Response in countries](https://www.who.int/)
- [Regional updates (AFRO, EMRO, EURO, PAHO, SEARO, WPRO)](https://www.who.int/)
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