Weekly Operational Update on COVID-19
5 July 2021

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

Confirmed cases 183 198 019
Confirmed deaths 3 971 687

Key Figures

* WHO-led UN Crisis-Management Team coordinating 23 UN entities across nine areas of work
* More than 5.4 million people registered on OpenWHO and accessing online training courses across 35 topics in 55 languages
* 18 822 041 PCR tests shipped globally
* 203 192 426 medical masks shipped globally
* 75 718 700 gloves shipped globally
* 9 102 511 face shields shipped globally
* 184 GOARN deployments conducted to support COVID-19 pandemic response
* 2 988 941 529 COVID-19 vaccine doses administered globally as of 5 July

* See Gavi’s COVAX updates for the latest COVAX vaccine roll-out data

Germany donates medical masks to Barbados and the Eastern Caribbean Countries

On 22 June 2021, a donation from Germany of 924,000 medical masks arrived at the PAHO/WHO Barbados Office for distribution to Barbados and the Eastern Caribbean Countries to support COVID-19 efforts.

The delivery is part of Germany’s donation of 250 million masks worth US$ 327 million to the WHO for distribution to countries hardest hit by COVID-19.

Dr Yitades Gebre, PAHO/WHO Representative for Barbados and the Eastern Caribbean countries noted his sincere gratitude to the government of Germany and said: "This generous donation facilitated by Germany will greatly expand the current public health and social measures and enhance preparedness to address health emergencies."

In accepting the masks, the Minister of Health and Wellness of Barbados, Lt. Col. Hon. Jeffery Bostic acknowledged appreciation and said, "Over the last several months I came to the realization and understanding as to how important it is to wear a mask in fighting this virus. The donation of masks by the Federal Republic of Germany will go a long way towards helping us in continuing with this fight."

For further information, click here.
From the field:

Control Room at COVID-19 Unified Central Hospital now in operation: Nepal

Now ready for operations with technical and financial support from WHO/Nepal, the Control Room at the COVID-19 Unified Hospital was officially handed over on 28 June in a ceremony with Dr Rajesh Sambhajirao Pandav, WHO Representative to Nepal, and Dr Jageshwar Gautam, Chief Administrative Officer at the Unified Central Hospital. The center will essentially function as a "war room" by leading communication and coordination efforts with COVID-19 designated hospitals in the country, and directing resources, information and people, where necessary.

This is the first time that a uniform channel has been created to govern a group of COVID-19 designated hospitals in Nepal. The center is conducting a rapid assessment of all COVID-19 designated hospitals in Kathmandu Valley, which will gradually expand to cover province-level designated COVID-19 hospitals. The assessment will be followed by the development of plans and policies to address any identified weaknesses. The center will also play a crucial role in ensuring that hospitals follow standard operating procedures and adhere to treatment protocols by providing regular updates to aid proper case management.

The Unified Central Hospital coordinates with the Ministry of Health and Population (MoHP) for management and deployment of required infrastructure, medical supplies, and human resources, as required.

WHO Nepal has deployed an Emergency Health Intervention Officer, an Incident Management Assistant, IT Support and a Liaison Officer at the Control Room to support the effective functional operations, along with 13 liaison officers deployed at COVID-19 hospitals within the Kathmandu Valley covering 3 districts (Kathmandu, Bhaktapur and Lalitpur). Dr Rajesh Sambhajirao Pandav noted "This is an important achievement not only for dealing with the current pandemic but will also support to strengthen the response to other health emergencies in the future.".

For further information, click here.
Hellenic Ministry of Health and WHO hold a high-level meeting on post-COVID conditions in Greece

On 28 June 2021, the Hellenic Ministry of Health, in collaboration with the WHO Greece, convened a high-level meeting to discuss post-COVID conditions.

The meeting was coordinated by the Alternate Minister of Health, with the participation of Deputy Minister of Health, Secretary-Generals for Public Health and Health Services, and the President of the National Health Council. The WHO team was led by the WHO Country Representative to Greece and included WHO/EURO Regional Office technical experts.

The Alternate Minister of Health invited health professionals, scientists, academia and patients to join forces to study the consequences of post COVID-19 conditions, both for the benefit of patients and the health system. The correlation between post COVID conditions and mental health were discussed and the Deputy Minister emphasized the need for follow-ups to ensure mental health needs are not left behind.

The WHO Representative to Greece highlighted the key role of the global health community to further study, document and share clinical and health service data related to the post-COVID-19 conditions, to facilitate further understanding on these conditions and best practices for health systems to subsequently pave the way for the development of common evidence-based recommendations. The technical experts from the WHO Regional Office for Europe highlighted ongoing efforts towards defining case definitions and provided WHO’s recommendations on the clinical management and the optimal health system response.

Challenges identified included the lack of guidelines leading many professionals, particularly in the private sector, to follow their own protocols. The wide range of symptoms and different patient journeys was another challenge noted to the public health response. Participants also remarked that post-COVID conditions emphasize the need for and expose pre-existing gaps in the provision of rehabilitative care.

The meeting resulted in an agreement to collaborate closely with WHO on post-COVID conditions. The Alternate Minister announced a subsequent meeting will follow to solidify next steps, including the potential creation of a working group to focus on producing systematic data on the management of the post-COVID conditions.
From the field:

Strengthening partnerships with media in the Syrian Arab Republic to improve communication on COVID-19 vaccines

On 27 June, more than 30 representatives from key Syrian national media outlets took part in an information session organized by the Syrian Ministry of Health and the WHO country office in Syria to address rumours and misinformation and increase public acceptance of COVID-19 vaccines.

The information session presented new approaches for the media to deliver effective and consistent messages, so that individuals can understand the risks associated with vaccine-preventable diseases, the benefits and risks associated with vaccines, and know where to find accurate, trustworthy and clear information. The session allowed participants to openly share challenges, lessons learned and best practices from their coverage of COVID-19 vaccines over the past months. The discussion focused on the importance of effective risk communication and community engagement as key factors towards improving compliance with public health and preventive measures to reduce the spread of COVID-19.

“For fighting the pandemic and misinformation requires a whole-of-society approach and since the pandemic started, access to reliable, consistent, and accurate information has been critical. In addition to supporting national authorities to develop and disseminate public health messages, media professionals play an important role in ensuring that the public can make informed decisions about critical issues that affect their health and well-being by tracking and addressing rumours and misinformation related to vaccines, along with their core responsibilities of accurate reporting and evidence-based coverage,” said Dr Akjemal Magtymova, WHO Representative in the Syrian Arab Republic.

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

World Zoonosis Day 6 July: Online learning supports governments to operationalize a One Health approach in countries

‘One Health’ is an approach in which multiple sectors communicate and work together to achieve better public health outcomes. The One Health approach is particularly relevant includes the control of zoonoses (diseases that can spread between animals and humans, such as avian flu, rabies and Rift Valley Fever). A One Health approach is key to the management of shared threats for future outbreaks and pandemics at the human-animal-environment interface.

Three new courses are now available on the OpenWHO One Health Channel, allowing learners from around the globe to explore principles and best practices for a One Health approach for zoonotic diseases. The first course introduces the critical role of international frameworks to help human and animal health sectors ‘bridge’ their work to meet shared goals for disease preparedness and response. Once learners understand the role of collaborative work in their country context, they can then explore the practical approaches set forth in the Tripartite Zoonoses Guide and its operational tools.

The second course offering on the One Health channel allows learners to explore and navigate the technical chapters of the Tripartite Zoonoses Guide in more depth, using country examples to propel their learning to the next level. And finally, a training for implementers is available for those interested in using the Joint Risk Assessment operational tool to assess and manage zoonotic diseases hazards at national and subnational levels.

Join us today and begin exploring the principles and best practices for a One Health approach in countries!
COVID-19 Preparedness


In June 2021, WHO published the "Health Systems for Health Security" (HSforHS) Framework to support countries and partners in bringing together capacities required for implementation of the International Health Regulations (2005), and components of health systems and in other sectors. To develop the Framework, WHO organized two consultations in 2019 (expert group consultation) and 2020 (Technical consultation). The framework is an innovative approach that complements existing emergency management concepts and tools for multisectoral, multidisciplinary, effective management of health emergencies, while maintaining the continuity of essential health services throughout.

The HSforHS Framework builds on lessons learned from recent health emergencies, including the COVID-19 pandemic, which highlighted limitations in health systems to absorb the shock and increased demands of severe and large-scale public health emergencies, including the need for flexibility and agility to adapt to the scale and severity of the emergency, while ensuring continuity of essential health services. This has highlighted the need for identifying and closing gaps in a wide range of capacities across all relevant sectors, in order to better prevent, detect and respond to future health threats.

The Framework contributes to:

- promoting a common understanding of HSforHS and how it contributes to national and global health security,
- delineating the essential components of health systems and other sectors that play a key role in meeting the demands imposed by health emergencies,
- explaining how countries can define, prioritize and monitor actions and investments in health security, health systems and other sectors,
- helping partners and donors better support countries by identifying where investment in health systems is most needed, how best to do so, and how financing can be sustained, and
- highlight challenges related to implementation of HSforHS.

To support the implementation of this framework in countries, WHO is currently updating the WHO benchmarks for IHR capacities with actions that countries can take to strengthen their health systems and components in other sectors towards better health security.

The implementation of HSforHS approach in countries using the Framework, updated Benchmarks and subsequent products is necessary to achieve more synergistic working relationships between health security, health systems and other sectors. This will lead to improved national, regional and global preparedness for future health emergencies.
The COVID-19 outbreak poses a significant challenge for all countries – creating an unprecedented need for international solidarity and a coordinated global response.

The COVID-19 Partners Platform was launched as an enabling virtual space for all countries to share their plans for the response and coordinate efforts between implementing partners, UN agencies, donors and contributors. This includes mechanisms to monitor and progress implementation of readiness and response plans regularly, to cost technical assistance and resource needs not covered by domestic budget and to match country needs with donor contributions. As the Partners Platform has continued to expand to match global needs of the evolving pandemic, this now includes its role with the COVAX Facility in tracking vaccine contributions and country needs.

The Partners Platform features real-time tracking to support the planning, implementation and resourcing of country preparedness and response activities in a transparent and efficient manner across all 10 response pillars of the COVID-19 Strategic Preparedness and Response Plan (SPRP 2021) and its accompanying Operational Planning Guideline.
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/PAHO-procured items that have been shipped as of 1 July 2021.

<table>
<thead>
<tr>
<th>Region</th>
<th>Laboratory supplies*</th>
<th>Personal protective equipment</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Sample collection kits</td>
<td>Antigen RDTs</td>
</tr>
<tr>
<td>Africa (AFR)</td>
<td>4 904 925</td>
<td>1 103 775</td>
</tr>
<tr>
<td>Americas (AMR)</td>
<td>1 348 132</td>
<td>12 069 900</td>
</tr>
<tr>
<td>Eastern Mediterranean (EMR)</td>
<td>1 724 920</td>
<td>2 012 925</td>
</tr>
<tr>
<td>Europe (EUR)</td>
<td>924 850</td>
<td>1 138 150</td>
</tr>
<tr>
<td>South East Asia (SEAR)</td>
<td>3 205 800</td>
<td>1 440 000</td>
</tr>
<tr>
<td>Western Pacific (WPR)</td>
<td>652 100</td>
<td>30 000</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>12 760 727</strong></td>
<td><strong>17 794 750</strong></td>
</tr>
</tbody>
</table>

*Laboratory data are as of 22 June 2021

Note: Data within the table above undergoes periodic data verification and data cleaning exercises. Therefore, some subsequent small shifts in total numbers of procured items per category are anticipated.

For further information on the **COVID-19 supply chain system**, see [here](#).
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, and as such also part of the ACT-A workplan. In 2021 COVID-19 actions are being integrated into broader humanitarian operations to ensure a holistic approach at country level. US$ 643 million of the total appeal is intended to support the COVID-19 response specifically in countries included in the Global Humanitarian Overview.

WHO appreciates and thanks donors for the support already provided or pledged and encourages donors to give fully flexible funding for SPRP 2021 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.

SPRP 2021 Requirements US$ 1.96 billion

- Total WHO requirement under SPRP 2021
- Proportion of requirement attributed to ACT Accelerator*

*Of the total US$1.96 billion WHO requirement, US$1.22 billion (62%) counts towards WHO’s requirement for the Access to COVID-19 tools accelerator

Contributions to WHO for COVID-19 appeal

Data as of 29 June 2021

- Total Pledged: US$ 489 million
  - 24.92%
- Total Received: US$ 635 million
  - 32.39 %
- Gap: US$ 838 million
  - 42.69%

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.

<table>
<thead>
<tr>
<th>Indicator (data as of)</th>
<th>2020 Baseline</th>
<th>Previous Status</th>
<th>Current Status</th>
<th>2021 Target</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Pillar 1:</strong> Proportion of countries(^a) that have conducted at least 1 Intra-Action Review (IAR) or equivalent country-level review of the COVID-19 response (N=194, as of 2 July)(^b)</td>
<td>19% (n=37)</td>
<td>5% (n=10)</td>
<td>7% (n=13)</td>
<td>100%</td>
</tr>
<tr>
<td><strong>Pillar 1:</strong> Proportion of countries(^a) that have conducted at least 1 COVID-19-related simulation exercise (N=194, as of 2 July)(^b)</td>
<td>14% (n=27)</td>
<td>3% (n=6)</td>
<td>3% (n=6)</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>Pillar 3:</strong> 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(^c), as of epidemiological week 24 2021)(^d)</td>
<td>22% (n=15)(^e)</td>
<td>49% (n=34)</td>
<td>42% (n=29)</td>
<td>50%</td>
</tr>
<tr>
<td><strong>Pillar 3:</strong> Number of countries(^a) that integrate COVID-19 surveillance into sentinel systems that monitor influenza (N=N/A, as of Quarter 2 / 2021)(^f)</td>
<td>n=59(^g)</td>
<td>66</td>
<td>69</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>Pillar 5:</strong> Proportion of Member States that publicly shared(^h) SARS-CoV-2 genetic sequence data (N=194, as of 30 June)(^b)</td>
<td>39% (n=75)(^i)</td>
<td>51% (n=98)</td>
<td>56% (n=109)</td>
<td>75%</td>
</tr>
<tr>
<td><strong>Pillar 10:</strong> Proportion of Member States that have started administration of COVID-19 vaccines (N=194, as of 5 July)(^d)</td>
<td>0(^j)</td>
<td>97% (n=189)</td>
<td>97% (n=189)</td>
<td>100%</td>
</tr>
<tr>
<td><strong>Pillar 10:</strong> Number of COVID-19 doses administered globally (N=N/A, as of 5 July)(^d)</td>
<td>0(^j)</td>
<td>2 658 604 949</td>
<td>2 988 941 529</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>Pillar 10:</strong> Proportion of global population with at least one vaccine dose administered (N=7.78 billion, as of 5 July)(^d)</td>
<td>0(^j)</td>
<td>13.5% (n=1.05 billion)</td>
<td>15.3% (n=1.2 billion)</td>
<td>N/A</td>
</tr>
</tbody>
</table>

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

\(^b\) Monthly reported indicator

\(^c\) 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

\(^d\) Weekly reported indicator

\(^e\) Baseline for epidemiological week for southern hemisphere season

\(^f\) Quarterly reported indicator

\(^g\) Baseline as of 31 December 2020

\(^h\) Data source for indicator calculation: GISAID submissions

\(^i\) Baseline calculated for December 2020

\(^j\) 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 25 June 2021, The Solidarity Response Fund has raised or committed more than US$ 252 million from more than 673 083 donors.

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 the WHO.

Global COVID-19 Clinical Data Platform

Global understanding of the severity, clinical features and prognostic factors of COVID-19 in different settings and populations remains incomplete.

WHO invites Member States, health facilities and other entities to participate in a global effort to collect anonymized clinical data related to hospitalized suspected or confirmed cases of COVID-19 and contribute data to the Global COVID-19 Clinical Data Platform.

More than US$ 252 Million

673 083 donors

[individuals – companies – philanthropies]
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.

EPI-WIN
For EPI-WIN: WHO Information Network for Epidemics, click here.

WHO Publications and Technical Guidance

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 29 June 2021 Weekly Epidemiological Update, click here. Highlights this week include:

A special focus update on the variants is provided, along with the geographical distribution of variants of concern (VOCs) Alpha (B.1.1.7), Beta (B.1.351), Gamma (P.1) and Delta (B.1.617.2). This edition also includes an overview of current challenges in the context of the COVID-19 pandemic, as well as a summary of the WHO global conference on communicating science during health emergencies.

News

- For the Joint COVAX Statement on the Equal recognition of Vaccines, click here.
- For the Joint Statement on the first meeting of the Task Force on COVID-19 Vaccines, Therapeutics and Diagnostics for Developing Countries, click here.