Weekly update on COVID-19
16-22 May 2020

Snapshot
As of 22 May 2020

<table>
<thead>
<tr>
<th>Confirmed cases</th>
<th>Confirmed deaths</th>
<th>Countries &amp; territories affected</th>
</tr>
</thead>
<tbody>
<tr>
<td>4,962,707</td>
<td>326,459</td>
<td>216</td>
</tr>
</tbody>
</table>

Public health response and coordination highlights

World Health Assembly
On the occasion of the 73rd World Health Assembly the Secretary-General warned that the fragility exposed by the COVID-19 pandemic is not limited to our health systems, calling for the international community to work together in solidarity to stop COVID-19 and its shattering consequences. WHO has cautioned against recommending or administering unproven treatments to patients with COVID-19 or that people self-medicate with them. Links to Statements by Member States at the opening of the World Health Assembly.

More information: Historic health assembly ends with global commitment to COVID-19 response

WHO joint statements
UNODC, WHO, UNAIDS and OHCHR issued a joint statement on COVID-19 in prisons and other closed settings, highlighting the heightened vulnerability of prisoners and other people deprived of liberty to the COVID-19 pandemic, and urging political leaders to take all appropriate public health measures in respect of this vulnerable population that is part of our communities.

OCHA, UNICEF, IOM, UNHCR, WFP, WHO, UNFPA issued a joint statement to draw attention to how conflict and the COVID-19 pandemic present a significant threat to life in Libya, and to how the health and safety of the country’s entire population are at risk.

WHO has signed an agreement with the International Olympic Committee (IOC) to work together to promote health through sport and physical activity. The agreement has a special focus on preventing non-communicable diseases (NCDs). This collaboration is timely because the current COVID-19 pandemic is particularly affecting people with NCDs.

Accelerating a treatment with the Solidarity Trial
While the research for an effective treatment continues, WHO has cautioned against recommending or administering unproven treatments to patients with COVID-19 or people self-medicating with them. The consensus among world experts is that potential exists but that far more studies are urgently needed to determine if existing anti-viral drugs can be effective to treat COVID-19. In order to fast-track this research, WHO launched the Solidarity Trial on March 18 – a large international clinical trial to help find an effective treatment for COVID-19. Enrolling patients in one single randomized trial will help facilitate the rapid worldwide comparison of candidate treatments and overcome the risk of multiple small trials not generating the strong evidence needed to determine the relative effectiveness of potential treatments.
Online Survey on Healthy Recovery from COVID-19
WHO calls on health professionals to participate in an [Online Survey on Healthy Recovery from COVID-19](https://www.who.int/). The survey will inform the WHO-Civil Society Working Group on Climate Change and Health in their work around a healthy recovery from COVID-19.

COVID-19 Biomedical Equipment Inventory Tool
WHO has developed a [COVID-19 Biomedical Equipment Inventory Tool (survey)](https://www.who.int/epi) whose aim is to collect facility data on the availability of biomedical equipment. This information can help inform planning and readiness at facilities and in-country, as well as provide valuable information to WHO.

WHO Prequalification Unit
The WHO Prequalification Unit is assessing products for Emergency Use Listing (EUL) for candidate in vitro diagnostics (IVDs) detecting SARS-CoV-2. [The sixth Nucleic Acid Test (NAT) assay was listed](https://www.who.int/). Eligible products include rapid tests (RDTs) for SARS-CoV-2 Nucleic Acid. An invitation for antibody detection enzyme immunoassays and instructions for submission requirements for these IVDs detecting antibodies to SARS-CoV-2 virus have also been published. The WHO Prequalification Unit has received many questions on regulatory expectations and flexibility during the COVID-19 pandemic. Therefore, [a Question and Answer document](https://www.who.int) has been prepared. This document will be updated periodically.

Priority medical devices for COVID prevention, diagnostic and management
A [new website has been launched](https://www.who.int) on priority medical devices for COVID-19 prevention, diagnostic and management. This site provides an overview of, and information on, medical devices needed to protect health care workers and to diagnose and treat COVID-19.

News release on ‘Substantial investment needed to avert mental health crisis’
The COVID-19 pandemic is highlighting the need to urgently [increase investment in services for mental health](https://www.who.int) or risk a massive increase in mental health conditions in the coming months, according to a policy brief on COVID-19 and mental health issued by the United Nations.

Feedback from WHO country teams: supporting countries to address PPE shortages
WHO and partner agencies recently released a series forecasting tools and the Supply Portal to help countries plan supply needs for both COVID-19 and maintaining essential health services. To check the suitability of the guidance and tools available, and to inform next steps on technical requirements, a focus group discussion was held with a small group of WHO representatives and operations support teams on 14 May. Five WHO country teams from two regions participated in the discussion. They explained the supply forecasting and planning processes to date, the challenges experienced at country level including financing the country’s needs, and the technical guidance still needed such as addressing the needs of the non-health sector. From this discussion which served as a critical feedback mechanism, WHO will refine the forecasting tools and further disseminate guidance on IPC requirements in different settings.

New feature to the EPI-WIN – WHO information network for epidemics
New, ‘subscribe’ feature was recently added to the EPI-WIN network: now, those interested can subscribe and receive updates and webinar invites (link to website: [www.who.int/epi-win](https://www.who.int/epi-win)).
Update of the Preparedness and Response Status list
The country categorization list of Preparedness and Response Status for COVID-19 was updated as of the 20th of May.

The COVID-19 Partners Platform
The Platform was launched as a tool to enable all countries, UN Country Teams and key partners supporting the response to coordinate and combine efforts to address the COVID-19 pandemic. It features real-time tracking of planned activities, implementation and resourcing of COVID-19 national plans. The COVID-19 Supply Portal is now also available through the COVID-19 Partners Platform. It enables users to request critical supplies. Click here for more information. To date, 75% of WHO member states (149 countries) have engaged on the Platform (including regular users, as well as requests for demonstrations). In the majority of WHO regions, more than 70% of countries are active on the platform. 100 COVID-19 national plans have been uploaded and 57 donors have entered their contributions, totaling USD3.0 billion

Emergency Medical Teams (EMT)
EMT priorities during the reported period have been focused mostly on operations and new deployments to complete a total of 21 international missions that have already been carried out since February. Two new Request for Assistance for Guinea-Bissau and Tajikistan. Both ministries are seeking EMT teams to deployed as specialized care team with expertise in COVID-19 clinical management, IPC, imaging and diagnostic and Operational Support experts (WASH and Logistics). National operations supported or complemented by EMTs are still in place in most of the countries affected up to 37 reported in total. Additionally, over 500 national teams have been mobilized using the EMT methodology. EMT senior experts will also support operations in Accra and Cox’s Bazar.

Releases

Information notes
Ensuring continuity of TB services during the COVID-19 pandemic

Technical Guidance documents
Cleaning and disinfection of environmental surfaces in the context of COVID-19
Overview of Public Health and Social Measures in the context of COVID-19
Immunization in the context of COVID-19 pandemic
Laboratory biosafety guidance related to coronavirus disease (COVID-19)
Gender and COVID-19
Contact tracing in the context of COVID-19
Surveillance strategies for COVID-19 human infection
Guidelines for assuring the quality, safety, and efficacy of plasmid DNA vaccines

IASC Interim Guidance
Commitments into Action: A holistic and coherent response to COVID-19 across the Humanitarian- Development-Peace Nexus

Scientific Briefs
Multisystem inflammatory syndrome in children and adolescents with COVID-19

Read all releases here.
Strategic Supply Chain

The roll-out of the Supply Portal continues. In requesting PPE through the Portal, the full needs for the COVID-19 response, including the maintenance of essential health services can be included. However, this is recognizing that the overall stocks available for distribution are limited and full requests may not be met even if full funding is secured.

COVID-19 supply shipped as of 20 May 2020

<table>
<thead>
<tr>
<th>SHIPPED</th>
<th>Mask, Surgical</th>
<th>Mask, N95</th>
<th>Gloves, Examination</th>
<th>Gown</th>
<th>Goggles</th>
<th>Face Shield</th>
</tr>
</thead>
<tbody>
<tr>
<td>AFRO</td>
<td>1,439,750</td>
<td>24,200</td>
<td>386,300</td>
<td>46,779</td>
<td>6,930</td>
<td>30,910</td>
</tr>
<tr>
<td>EMRO</td>
<td>474,250</td>
<td>35,845</td>
<td>694,000</td>
<td>79,922</td>
<td>7,420</td>
<td>25,800</td>
</tr>
<tr>
<td>EURO</td>
<td>221,100</td>
<td>7,250</td>
<td>249,100</td>
<td>24,648</td>
<td>4,140</td>
<td>7,000</td>
</tr>
<tr>
<td>PAHO</td>
<td>76,000</td>
<td>2,440</td>
<td>76,000</td>
<td>13,016</td>
<td>1,300</td>
<td>7,900</td>
</tr>
<tr>
<td>SEARO</td>
<td>452,000</td>
<td>41,065</td>
<td>371,500</td>
<td>25,600</td>
<td>9,950</td>
<td>15,336</td>
</tr>
<tr>
<td>WPRO</td>
<td>314,550</td>
<td>15,365</td>
<td>199,000</td>
<td>10,010</td>
<td>6,107</td>
<td>7,200</td>
</tr>
<tr>
<td>TOTAL</td>
<td>2,977,650</td>
<td>126,165</td>
<td>1,975,900</td>
<td>199,975</td>
<td>35,847</td>
<td>94,146</td>
</tr>
</tbody>
</table>

Appeals

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. The status of funding raised for WHO against the SPRP can be found here. 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. Link: https://reliefweb.int/report/world/global-humanitarian-response-plan-covid-19-april-december-2020-ghrp-may-update-0

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
As of today the [COVID-19 Solidarity Response Fund](https://www.who.int/covid-19) (Solidarity Fund) has reached more than $214 million raised or committed from more than 375k individual donors, and more than 150 corporations and foundations. A total of $163M has already been allocated including $105M to WHO to procure and distribute essential commodities, such as personal protective equipment (PPE) and testing kits to more than 135 countries. 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.

This week the [China Population Welfare Fund (CPWF)](https://www chinapw.org) joined the Solidarity Fund as fiduciary recipient, and [UNHCR](https://www.unhcr.org) joined to support the response in refugees settings.

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](https://www.who.int/emergencies/diseases/novel-coronavirus-2019) and encourages donors to continue to replenish the CFE to allow WHO to respond to health emergencies in real time.

Health learning
OpenWHO now has more than 2.7 million enrolments. The platform hosts free trainings on 10 different topics across 25 languages to support the coronavirus response, for a total of 77 learning resources. In the past week, [OpenWHO launched COVID-19 courses](https://www.openwho.org/courses) in Amharic, Arabic, French, Hausa, Macedonian, Odia, Spanish and Vietnamese.

The BBC Hausa reported on the platform’s new African-language resources for COVID-19 (Amharic, Hausa and Swahili), citing a tweet from Director-General Tedros. The most popular resource is currently the infection prevention and control training (579 000 enrolments, 15 languages), followed by the country capacitation training (447 000 enrolments, 8 languages) and the introductory COVID-19 training (444 000 enrolments, 22 languages).

Global Research Highlights
The Solidarity Trial of COVID19 potential treatment options has been initiated and the [Solidarity Vaccine Trial protocol](https://www.who.int/clinical-trials/solidarity-trial) developed. WHO is now seeking expressions of interest from vaccine trial sites around the world to take part in this protocol which will include several candidate COVID19 candidates that meet WHO prioritization criteria.

Additional medicines were sent to Iran for its participation in the Solidarity Trial; four re-purposed medicines – Remdesivir, Lopinavir/Ritonavir, Interferon (β1a), and hydroxychloroquine – are being evaluated.

The WHO recently issued two publications on the vaccine landscape, including:
- [Criteria for COVID-19 vaccine prioritization](https://www.who.int/publications/m/item/criteria-for-covid-19-vaccine-prioritization)
- [Draft landscape of COVID-19 candidate vaccines](https://www.who.int/publications/m/item/draft-landscape-covid-19-candidate-vaccines)

For more information on global research, please refer to:
- [Updated list of COVID-19 trials from the ICTRP database](https://www.who.int/immunization/coronavirus/covid-19-trials)
- [Updates on current research and development](https://www.who.int)
COVID-19 Global Preparedness and Response Summary Indicators

Data as of 19 May 2020

Notes
a) Data collected from 194 Member States and 1 territory through the WHO Regional Offices. The term “countries” should be understood as referring to “countries and territories”
b) WHO immunization Repository https://www.who-immunization-repository.org/dhis-web-commons/security/login.action
c) Data as of 19 May 2020. d) Incremental percentage compared to last week data
African Region (AFRO)

The AFRO region has been facilitating multiple capability building programs this week, including the training of 127 healthcare workers (948 more than last week) in IPC. On top, a laboratory reporting platform has been launched which aims to facilitate the monitoring of the number of specimens tested, stock levels and other laboratory performance parameters from a regional level. A webinar was conducted during which key regional laboratories shared experiences on laboratory testing methodologies, decentralization and coordination of laboratory activities, among others. This was attended by over 500 participants and generated valuable discussion. During the reporting week, laboratory equipment arrived in Comoros, Lesotho and Sao Tome and experts will be deployed to support the establishment of molecular testing for the first time in these countries.

The WHO AFRO case management team held virtual meetings with WHO counterparts in Guinea-Bissau, Nigeria, Tanzania, Ghana and Zanzibar to discuss case management challenges in the countries. The key output was agreed strategies to resolve identified gaps. The Senegal hub had in-depth discussions with Algeria, Cameroon, Benin, Togo and Democratic Republic of the Congo country teams to define strategies to improve capacity. The Nairobi team had a webinar with 200 journalists on emerging issues and stigma.

Americas Region (AMRO/PAHO)

PAHO has joined forces in the fight against COVID-19 with Sony Music Latin and international advocacy organization Global Citizen, which collaborated to release a brand-new version of Diego Torres’ “Color Esperanza (The Color Hope),” All record label net proceeds from the song will benefit PAHO and its COVID-19 relief efforts. Fans may stream the song on all platforms and join the movement at this link.

In Venezuela, PAHO partnered with Digitel, a mobile phone company, to send out 1.5 million SMS messages to the public this week. These messages focused on managing stress while under lockdown as well as preventing infection. In Mexico, PAHO has reached over 16 million speakers of indigenous languages by partnering with the government to produce radio messages.

Having received PAHO support, Honduras now monitors COVID-19 cases using its routine severe acute respiratory illness / influenza-like illness (SARI/ILI) surveillance systems. This makes twenty countries in the Americas that use SARI/ILI systems, which is more efficient and cost-effective and lays the groundwork for capturing future respiratory diseases in the future.

PAHO supported Colombia and Nicaragua with primers and probes to conduct 390,000 PCR tests for the molecular detection of SARS-CoV-2. It also sent 19,000 swabs to Bahamas, Belize, Guyana, Nicaragua, and Trinidad and Tobago. To date, PAHO has sent materials for over 3 million COVID-19 tests, as well as 20,000 swabs, 83 enzymes and 112 extraction kits (among other material).

With the Atlantic hurricane season approaching in the Caribbean, PAHO produced guidance for establishing shelters in the Caribbean in the context of COVID-19. These recommendations are designed to mitigate the risk of COVID-19 infections among those seeking urgent shelter and includes advice on spacing for beds and cots, recreation areas, ventilation, and other key factors.
REGIONAL UPDATES

Eastern Mediterranean Region (EMRO)

The regional office has been convening regular regional interagency RCCE working group calls to discuss and finalize a joint regional action plan and framework providing also support to country focal points on requests related to RCCE messaging and materials. For example, the office has shared with global RCCE focal points Islamic guidance documents related to COVID-19 as developed by prominent Islamic institutions in the Regio and prepared messaging on Ramadan and Eid for different stakeholders, including health workers, the general public, and leaders of faith-based organizations.

The office has developed interim guidance on the reopening of points of entry, including key considerations for governments, points of entry operators, conveyance operators and passengers. A regional working group on Points of Entry has been established to coordinate efforts at the regional level and ensure that all travel related aspects raised under COVID-19 are well addressed from a public health perspective. Members of this group are WHO, the International Organization for Migration (IOM), the International Maritime Organization, and the international Civil Aviation Organization, and others.

The regional office engaged all countries in the Region on the subnational EQA to help monitor the performance of laboratories that are testing for SARS-CoV-2 by PCR. On top, participated as presenters and panelists with US-CDC and Africa-CDC on a series of IPC webinars to discuss appropriate use of PPEs for the COVID-19 response (triage in the context of COVID-19, discuss healthcare workers infected with COVID-19). The first meeting of the MENA Regional Taskforce on COVID-19 and Migration/Mobility was held on 21 May for finalize the TORs and draft workplan.

The region has been pushing training and capacity-building activities; WHO Jordan have supported 3 training sessions for 320 health staff medical teams on the use of electronic modules for COVID-19 case reporting and contact tracing to record information in the electronic platform. Jordan also donated 15 tablets to MOH to be used by teams in the field during contact tracing, 100 more tablets are expected to be donated in coming week for teams. On top, the regional office has been working with countries to identify key national clinicians to jointly conduct training on ICU/critical care and scale up critical care capacities. Also, the WHO HQ / OSL team led an introduction to new Supply Portal to familiarize WCOs across the Region on how the system is expected to work and the process for ordering supplies at the country level. The office has also been engaged with the development of a mental health and psychosocial support project (MPHSS) for Libya, the strengthening of the MHPSS technical working group (TWG) in Somalia, Sudan, Yemen through using the RVO surge mechanism for MHPSS (Dutch MHPSS Surge support) and setting up of technical working groups in Egypt and Pakistan.

In the region, a charter to Somalia carrying 7 tons of PPE and 10 ventilators landed in Mogadishu on 13 May. Charters to Iran and to Yemen planned on 21/22 May. The Dubai hub operation has now supported 102 countries through 164 shipments – dispatching over 3 million masks, 4 million gloves, and over 224,000 screening tests. Supplies now being prepared by WFP for transport from China to Dubai to replenish several critical items.
REGIONAL UPDATES

European Region (EURO)

A national training on the management of Points of Entry was organized jointly by the Ministry of Health and the OSCE and WHO country offices in Turkmenistan, and the partner organization EU Healthy Gateways. Over 30 national health, migration and law enforcement officers participated in the training, in which the latest WHO guidance available on the management of ill travelers and suspected cases at border crossings was disseminated and discussed.

On top, a clinicians training platform is being developed in Azerbaijan with support from experts from Turkey. Through the REACT-C19 project, 36 medical workers have been trained in the areas of IPC, PPE use, and patient management and are capacitating health care workers in Azerbaijan, using WHO’s hospital readiness checklist to support various health facilities. A learning platform has also been created where monitoring and evaluation, research systems, peer learning and mentoring platforms, information and guidelines dissemination resources are made available.

A multilingual interactive chatbot – HealthBuddy, was developed as a new tool and resource for countries within the Region in response to the COVID-19 pandemic, helping countries access accurate information and countering misinformation. The chatbot, developed by WHO EURO and UNICEF, uses artificial intelligence to answer questions about COVID-19, and provides local information (i.e. COVID-19 hotlines).

WHO EURO has been collaborating with the Global Shapers community to ensure that tailored health advice reaches communities, families and individuals. Using a Facebook group, members can post rumours they encounter and ask questions. The “Shapers” also publish WHO-sourced information about COVID-19 on social media, addressing the rumors found through the group. These posts have reached 12 000 people and aim to reach 100 000 by the end of May.

The Central European Initiative (CEI), is a regional intergovernmental forum committed to supporting European integration and sustainable development through cooperation. WHO EURO in collaboration with the CEI Executive Secretariat organized an Extraordinary Virtual Summit with Heads of State on COVID-19, which led to the formation of a CEI Health Taskforce to deal with the wider implications and dimensions of the crisis. A joint statement on solidarity and cooperation of the CEI Member States in the context of COVID-19 was also published, available Here.

Western Pacific Region (WPRO)

WPRO is working with countries and partners to ensure that investments made now in strengthening healthcare systems to cope with COVID-19 lead to sustainable healthcare system strengthening over the longer term. The Organization is also working to support the continuation of routine healthcare service delivery. A webinar, held on 13 May on “Communicating the new normal: Phase 1”, was the most successful webinar held to date. More than 70 participants tuned in to the webinar, comprising mostly of risk communication and community engagement staff from WHO country offices and health ministries.

A second 4-week regional communication plan on mental health and psychosocial support is underway covering: (1) promoting a mentally healthy workplace for frontline and other essential workers; (2) addressing emerging mental health conditions (e.g. depression, anxiety, suicidality) and decompensation of people living with mental disorders; (3) addressing isolation of confirmed COVID-19 cases and complicated grief; and (4) promoting resilience to prolonged exposure to adversity.
REGIONAL UPDATES

Western Pacific Region (WPRO) – cont’d
A regional IPC network webinar on “Healthcare Facility Ventilation in the context of COVID-19” was conducted by the Infection Prevention and Control (IPC) and Clinical Management team. This is the sixth in the series, which saw attendance by over 275 participants, including specialists in nursing care, dentistry, laboratory, first responders, radiologists and health care facility managers, to name a few, across the region. Following the establishment of the Partners Platform, more than 20 participants from across the Region participated in a virtual meeting to discuss training on the new Supply Portal. The Partner Coordination pillar is also working with UN OCHA to explore options for mapping partners’ operational presence by geography and technical area.

South-East Asia Region (SEARO)
Routine Immunization services resumed in Male Maldives with the adoption of the ‘new normal’ from 3 May,2020. Health workers pro-actively communicated with the care-givers of beneficiaries through social media and informed them about due vaccination. All care-givers were advised to wear a mask while attending the immunizations session and those with respiratory system to send children with alternative care givers. At the vaccination facility the caregivers and beneficiaries were given appointment with staggered timings. This prevented crowding at the vaccination centers. Seating arrangements were made to ensure social distancing. Hand washing facilities and hand sanitizers were made available for them. Vaccinators were provided with PPE such as medical masks, gloves and surgical apron/gowns. Following the reporting of the first cluster of COVID-19 cases on 15th April in Male City, a complete lock-down was declared from 17th April. Being in a ‘red zone’, this allowed only COVID-19 related healthcare services to be operated with temporary suspension of routine services till 2nd May. Thus routine immunization activities were suspended as well. However, even though the lock-down continued, it was decided to re-start immunization considering the benefits offered to children. In mid-March, the Technical Advisory Group (TAG) prepared a health business continuity plan. With WHO support to the Health Protection Agency (HPA) & Maldives Technical Advisory Group on Immunization (MTAGI), a guideline for Routine Immunization in the COVID-19 context was prepared keeping different scenarios in mind. Since none of the islands were in ‘red zone’ It was decided to continue vaccination as per plan. Routine Immunization continued in these islands without disruption, following the ‘new normal’ guidelines shared in mid-March.

The Southeast Asia Region and the Western Pacific Region share many commonalities and geographical borders. This creates the critical need of closer collaboration among the two regions and countries, to ensure effective and efficient response to the pandemic. Identifying this need the two regional Incident Management Support Teams and Health Systems Departments initiated close communication on a range of technical issues which are relevant to both settings. Some of the key activities carried out in the past week included conducting country calls between countries that share land borders, conducting webinars on critical thematic areas as well as organizing experience sharing sessions. The regular coordination activities ensure stronger information sharing and provides opportunities to share best practices and lessons learnt. Challenges common to both regions are discussed including common solutions to plan ahead.

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

Contact
Emanuele Bruni
Planning / M&E Officer
brunie@who.int