

19 March 2020



Emergency kits, intravenous solutions and protective equipment, such as masks have been shipped into northwest Syria from Turkey to better prepare health partners for COVID19

### Highlights

- Out of 22 countries in the Eastern Mediterranean Region, 19 countries have reported cases. WHO is concerned about countries that have not yet reported cases and urges them to enhance surveillance systems and lab capacities.
- Data reporting continues to be a challenge. Case reporting forms are not submitted by countries and those submitted are partially complete.
- 53 countries across all 6 WHO regions have received supplies from the Regional logistics hub in Dubai. Demand for supplies exceeds availability by several orders of magnitude. Daily flight cancelations and/or routing changes are disrupting the global supply chain. Misuse of PPE kits by some countries are increasing demand and creating additional shortages.
- The Regional Strategic Preparedness and Response Plan is being updated and will include activities by partners.
- Discussions are ongoing with UNHCR and IOM to address region-specific needs for protecting refugees and internally displaced persons.
- Multidisciplinary support missions to Afghanistan, Somalia, Syria,
   Morocco and Sudan are on hold due to travel restrictions and closures of borders.

Key figures in the Region
As of 18:00, 19 Mar. Cairo local time

19

Countries reporting cases

20,759

Total laboratory-confirmed cases reported (9723 new cases since 12 March situation report)

1312

Total deaths reported (1181 new deaths since 12 March situation report)

1306

Cases reported in past 24 hours (6pm March 18 – 6pm March 19)

5640

Total cases recovered

9%

Regional burden of global caseload

103

Shipments delivered from Dubai hub Jan-Mar 2020 (Compared to 92 total shipments in 2019)

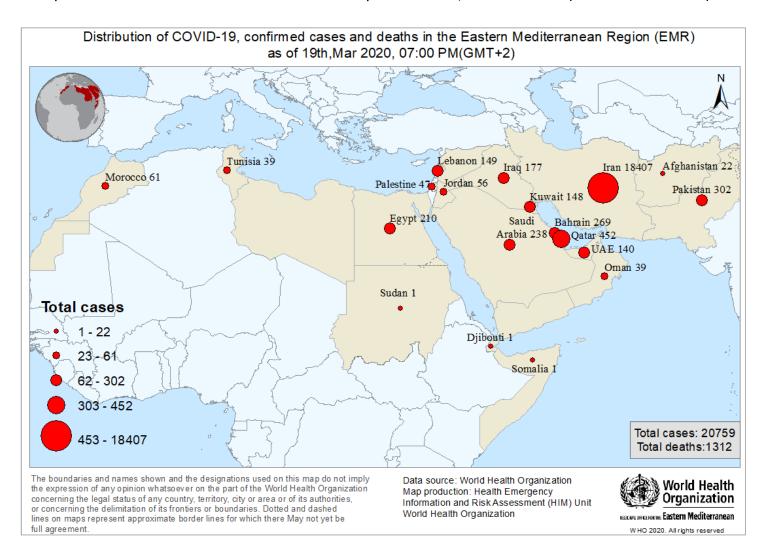
High

Risk assessment level for the Region



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Map 1. Distribution of COVID-19 confirmed cases reported in EMR, 12 March 2020 (7PM Cairo local time)



#### Surveillance

Table 1. Laboratory-confirmed cases of COVID-19 and associated deaths reported by countries in the EMR as of 19 March 2020 (18:00 Cairo local time)

Country	New Cases	New Deaths	Cumulative deaths	Cumulative cases	Local / Unknown	Numbers Recovered
Afghanistan			0	22	Imported (22)	1



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					Contacts (19	
Bahrain	13		1	269	Imported (161) Unknown (89)	95
Djibouti			0	1	Imported (1)	
					Contacts (165)	
					Imported (14)	
Egypt	14		6	210	Unknown (31)	28
					Local (18,406)	
Iran	1046	149	1284	18407	Imported (1)	5389
					Contacts (12)	
Iraq	11		12	177	Imported (94) Unknown (71)	43
					Contacts(40)	
l				5.0	Imported (8)	
Jordan	4		0	56	Unknown (8)	1
					Contacts (37)	
Kuwait	6		0	148	Imported (97) Unknown (14)	18
Kuwait	0		U	140		16
					Contacts (81)	
Lebanon	16	1	4	149	Imported (12) Unknown (56)	2
Lebanon	10	1		143	Olikilowii (30)	2
Libya			0	0		
					Contacts (1)	
Morocco	12		2	61	Imported (21) Unknown (39)	2
	12		2	01	Olikilowii (59)	2
occupied					Control (42)	
Palestinian territory	3		0	47	Contacts (43) Unknown (4)	0
Control				7,	CHRIIOWII (Ŧ)	J
					Imported (20)	
Oman	6		0	39	Unknown (19)	13



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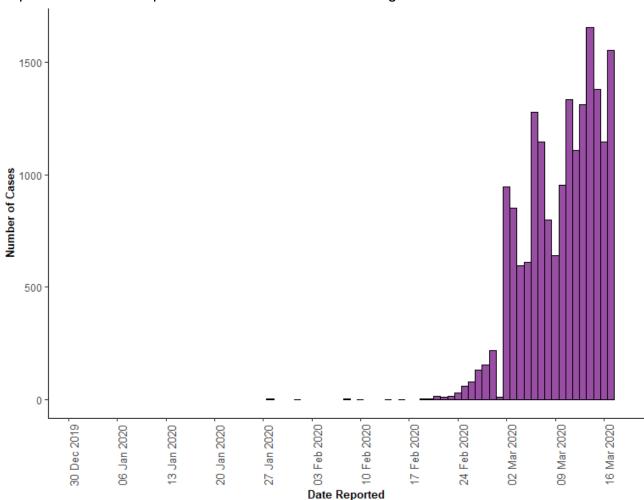
Pakistan	61	2	2	302	Imported (16) Unknown (286)	5
					Contacts (301) Imported (19)	_
Qatar	10		0	452	Unknown (132)	4
Saudi Arabia	67		0	238	Imported (224) Unknown (14)	8
Somalia			0	1	Imported (1)	
Sudan			1	1	Imported (1)	
Syrian Arab Republic			0	0		
Tunisia	10		0	39	Contacts (14) Imported (25)	0
United Arab					Contacts (79) Imported (33)	
Emirates	27		0	140	Local (28)	31
Yemen			0	0		
TOTAL	1306	152	1312	20759	0	5640.0

### WHO strategic objectives

- Interrupt human-to-human transmission, including reducing secondary infections among close contacts and health care workers, prevent transmission amplification events, and prevent further international spread.
- Identify, isolate and care for patients early, including providing optimized care for infected patients.
- Address crucial unknowns regarding clinical severity, extent of transmission and infection, treatment options.
- Communicate critical risk and event information to all communities and counter misinformation.
- Minimize social and economic impact through multisectoral partnerships.

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Graph 1: Trend of cases reported in the Eastern Mediterranean Region



#### Preparedness, readiness and response

#### Regional Level Highlights

- Out of 22 countries in the Eastern Mediterranean Region, 19 countries have reported cases.
- 13 countries in the Region have developed national plans for COVID-9.
- 53 countries across all 6 WHO regions have received supplies from the Regional logistics hub in Dubai. The Dubai hub has processed more than 100 shipments from January-March 2020, compared to a total of 92 of shipments in f 2019.
- Multidisciplinary support missions to Afghanistan, Somalia, Syria, Morocco and Sudan are on hold due to travel restrictions and closures of borders.
- Coordination with IHR focal points to discuss sharing of timely and complete case report forms for better understanding of country transmission dynamics and to guide response measures.



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- The Regional Office has established a modelling group: coordinating with HQ to provide advice on relevance of predictive models developed in several countries of the region
- Meeting of the data management group of the information management/surveillance pillar to ensure effective collection of COVID-19 data from countries, produce regular data analysis, and make available via dashboards. 2 information management/surveillance experts deployed to Afghanistan and in Pakistan.
- Developing strategy for implementing aggregate reporting from countries (case-based, daily and weekly aggregate reporting). Aggregate reporting will also include self-reporting at first admin level of the ongoing transmission status (no case, sporadic cases, clusters, and community).
- Provided input to the global laboratory testing strategy for each transmission scenarios.
- Provided input to interim guidance for COVID-19 surveillance using GISRS/influenza platform
- Regional contributions made to the revision of the global list of indicators for monitoring the implementation of the COVID-19 Regional Plan.
- Due to the announcement of the pandemic and the evolving situation in the Region, the Regional Strategic Preparedness and Response Plan is being updated and will include activities by partners. Priority activities under each function and the budget will be reviewed and updated based on different scenarios.
- Contributed to the revision of global surveillance guidelines (case definitions).
- Finalization of epidemiological analysis plan and identification of new indicators to be regularly reported
- Discussions are ongoing with UNHCR and IOM to address region-specific needs for protecting refugees and internally displaced persons.
- Regional Director of WHO updated other UN regional Directors on the progress of responding the COVID-19

#### Country support mission highlights

- Multidisciplinary technical teams from WHO, GOARN partners and other experts have been deployed to Iran Bahrain, Kuwait, and Iraq to support ongoing response efforts. Final reports are forthcoming. Key verall findings are as follows:
  - Multisectoral strategies and scenarios are proportionate to transmission dynamics
  - o There is overall high-level, multisectoral leadership and coordination
  - Active surveillance and tracing of contacts is ongoing
  - Data management requires streamlining
  - Varied capacities at points of entry
  - o Excessive use of PPEs resulting in shortages in other countries
  - Varied laboratory capacity and availability of lab kits and supplies
  - Clarity is required around case management, isolation and quarantine
  - Standardized systems are needed for regular monitoring or auditing of implementing IPC measures
  - o Extensive social distancing measures are being implemented
  - Proactive engagement of communities is taking place

#### Country Level Highlights

• Afghanistan: WHO supporting surveillance and screening activities in all points of entry across the country and conducting TOT for 246 medical staff on IPC and Case Management from Kabul and 13 high risk



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provinces. WHO supported Risk Communication through mass awareness and the awareness for 1364 medical and supportive staff across the country.

- **Djibouti**: WHO has delivered protective equipment to the Ministry of Health including goggles, surgical gowns, gloves, face masks and hand sprayers. WHO has also ordered 500 tests and 80 respirators for COVID-19 preparedness in the country. WHO is working closely with the Ministry of Health on a preparedness and response plan to reduce the risk of a coronavirus epidemic and is collaborating with the ministry to continue adapting and updating it according to the evolving situation.
- Islamic Republic of Iran: All people are asked to participate in the screening process using the MOH's self-assessment portal (salamat.gov.ir). Health workers and public volunteers actively contact suspected cases using information recorded in this portal, as well as the electronic health record (SIB portal). Where needed, clients are referred to 16-hour treatment clinics, which are specifically set up for the diagnosis and treatment of the disease, to the hospitals, or will be treated at home.
- **Jordan:** Active surveillance has been initiated by MoH to collect samples from Intensive Care Units (ICUs) acute respiratory infection patients, samples will be collected to be tested for COVID 19;
- **Libya**: Supporting capacity building activities in Tripoli and Benghazi. 10 WHO supported field coordinators are working closely with districts and municipalities' authorities. Team in Benghazi works closely with the authorities on the issues of risk assessment and identification of hospitals for isolation of potential cases.
- Occupied Palestinian territory: WHO supported the delivery of lab testing kits, personal protective
  equipment and goggles. The national COVID19 committee supported the establishment of a Field Hospital at
  the Rafah Crossing featuring a 38-bed treatment facility with 6 intensive care unit beds and 30 for moderate
  cases. The quarantine area includes 50 rooms for quarantined travelers.
- **Pakistan**: WHO is contributing to an action plan for the establishment of a quarantine facility for 500 to 1000 travelers and Isolation units in Lahore.
- **Sudan**: Training Rapid response teams throughout the country in preparation for upcoming flood season integrating CoVID module. Specific training for 8 additional Khartoum rapid response teams has started. Training for clinical staff on case management, surveillance, laboratory sampling and IPC is under preparation.
- Syrian Arab Republic: . Across the country, efforts are being accelerated to prepare laboratories and isolation wards and inform the public. Health facilities and selected intensive care units are being prepared and communities most at risk have been identified. Testing capacity is available across the country, including the northwest.
- Yemen: Surveillance and Laboratory preparedness through Personal Protective Equipment and other necessary supplies have donated to the relevant bodies in Sana'a and Aden. 200 testing kits have been delivered to Sana'a and 300 testing kits delivered to Aden. 80 medical doctors from 13 southern governorates trained in case management in Aden.

### Challenges

 Almost all countries are going through complete closure of their borders, closing schools and public places, and canceling Friday prayers. These measures are being done irrespective of level of transmission inside the country, which highlights fact that these decisions are not based on a proper risk assessment. This will have costly economic and social implications, and only time will tell how long this will be sustainable for.



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- WHO's capacity to provide technical support to countries is becoming very difficult in light of to travel
  restrictions. There are urgent requests for surge support to Syria and Somalia, but with Egypt border closure
  this will be delayed. We are looking at option of remote support, but some countries need full time expertise
  on the ground to provide the needed support. Social/physical distancing is also impacting our ability to
  support countries on the ground through technical and logistics support.
- Data reporting continues to be a challenge. Case reporting forms are not submitted by countries and the
  ones that have been submitted are partially complete. WHO is concerned about countries that have not yet
  reported cases and urges them to enhance surveillance systems and lab capacities.
- Demand for supplies exceeds availability by several orders of magnitude. Daily flight cancelations and/or
  routing changes are disrupting the global supply chain. Misuse of PPE kits by some countries are increasing
  demand and creating additional shortages. Supplier production of trauma and intergaceny health kits for
  other emergencies have also been impacted due to telework and illnesses in Europe.
- Concern over COVID-19 Pakistan and Afghanistan with thousands of returnees from Iran.

#### Recommendations and advice to countries

- Ensure the rational use of test kits based on the case definitions.
- Ensure contingency plans are in place for surge mobilization, including for human resources and supplies
- Reinforce information sharing with WHO regarding identified cases through IHR channels
- Recognize the criticality of timely sharing of fully completed case forms via NFPs to improve global understanding of COVID-19.
- Enhance surveillance at points of entry, health facilities, and within the community to identify suspected cases as early as possible
- Conduct risk assessments for all mass gatherings planned in the Region.
- Conduct rapid mapping exercise for the existing preparedness and response capacities and identify key gaps to be prioritized.
- Establish proper coordination mechanisms to coordinate preparedness and response activities with government institutions and partners and assign roles and responsibilities to address key gaps.
- Invest more in preparedness and response to this outbreak, and prioritize improvement of infection
  prevention and control practices, protection of health workers, individuals at risk, and communicating
  better the risks of transmission to the public.
- Augment the knowledge and skills among frontline health workers on investigation and management of COVID-19 outbreaks.

#### Recommendations and advice for the public

- Standard recommendations to reduce exposure to and transmission of a range of illnesses include:
  - Maintaining basic hand-washing and respiratory hygiene, including proper cough and sneezing protocol.
  - o Maintaining safe food practices, including avoiding eating or drinking uncooked animal products.
  - Avoiding close contact, when possible, with anyone showing symptoms of respiratory illness such as coughing and sneezing.
  - o More information here



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### **Funding Update**

Country needs: U\$\$ 8.9 million
 Funds received: U\$\$ 6.8 million
 Pipeline: U\$\$ 74.2 million

#### **Useful links**

- Technical guidance
- Protect yourself and others
- Myth busters
- Travel health
- Videos
- Questions and answers

For further information, contact <a href="mailto:emrgonCoV@who.int">emrgonCoV@who.int</a>