Press conference, 18 March 2020

Dear colleagues and friends,

Thank you for joining us here again today for the latest updates on COVID-19, as well as updates on some the work that has been happening on a regional level to help countries manage this pandemic.

In the past weeks since many of you were last here, there has been many developments in terms of both the spread of the pandemic, as well as much progress in WHO's response in support of countries.

Today, there have been 167,515 confirmed cases of COVID in 150 countries globally. This includes 6,606 people who have died from the disease.

In our Region, 18,019 cases in 18 countries have been reported, including 1,010 deaths reported from 7 countries. We are now seeing more and more cases of local transmission, and this is a worrying development that requires us to accelerate our efforts even more.

Over the past few weeks, team of experts from WHO, together with other public health experts, have undergone joint missions to several countries in our Region where cases have been reported. More joint missions to countries are under way as I speak, and additional countries have also requested support from WHO.

In all joint missions, the objectives of the teams are to identify transmission dynamics and at-risk populations; provide guidance on strengthening and scaling up the response to the pandemic, including identifying priority control measures; and provide guidance on strengthened preparedness for areas not yet affected.
Today, we have with us colleagues who have just returned from Islamic Republic of Iran, Bahrain, Kuwait, and Iraq, and who will be able to clarify to you the role that WHO is playing to support countries in their readiness and response efforts for COVID-19. They have conducted extensive meetings and field visits to identify areas of work that can be strengthened to ensure that patients are quickly identified, tested, isolated and safely treated, that contacts are traced and that at-risk populations are protected.

Before I talk about these areas of focus, let me take a moment to address the current efforts of countries to fight this disease. Frankly, we are seeing uneven approaches across the Region. While we have observed impressive progress in several countries, not all are yet applying the whole-of-government and whole-of-society approach that are absolutely needed to effectively prepare and respond. We need the highest levels of government – not just the ministries of health – to take full ownership of the fight against coronavirus. This is one of the most important messages that I can convey to you today.

The countries that have made the most progress are those that have engaged all ministries and sectors effectively, including both the private sector and civil society. They are the ones that are providing accurate, transparent and timely information to their people – about the current status of the pandemic, the preparedness actions being taken, and the measures that individuals can take to protect themselves and their families, including the importance of social distancing.

Across the Region, our teams have observed brave and dedicated doctors, nurses and other health staff working on the front lines of this pandemic, and doing their best to save lives despite the challenging context. They have witnessed efforts to strengthen disease surveillance, to rapidly scale up of laboratory testing, and to support families who are isolating loved ones with the disease or who are in quarantine themselves.

But much more needs to be done. In most countries, we still have time to more rapidly accelerate our efforts. We believe that proven containment measures of early detection, early testing, early isolation, early treatment, contact tracing and community engagement represent the best measures to control the pandemic. Overall across the regions where countries have reported cases, we have identified several areas that need strengthening, including strengthening disease surveillance, preparing hospitals, protecting health workers, and educating communities.

However, the global shortages in medical supplies and protective equipment for health workers
pose challenges to our ability to deliver the required amounts of supplies to countries who need them. Our logistics hub in Dubai’s International Humanitarian City is therefore playing a central role in ensuring that countries across the globe are receiving the supplies they need to prepare for and respond to possible cases of COVID-19. So far, all countries in the Region have been provided with laboratory reagents, personal protective equipment, surgical gowns, and other supplies. In addition, the logistics hub is also ensuring the delivery of similar supplies to other countries in all 6 WHO regions around the world.

As you may know, information about cases in the Region are shared with WHO in accordance with the International Health Regulations (IHR 2005). Unfortunately, even today, as the situation is becoming critical, information on cases is insufficiently communicated by countries to WHO.

I would like to stress here the importance of sharing information with WHO regarding identified suspected, probable and laboratory confirmed cases through IHR channels. We can only control this disease if we have access to information that allows us to understand its dynamic in the Region. We are all still students of this new virus, so we need to track its spread closely and quickly apply the proven public health measures that can help us contain it. We all benefit when we have clear information about how the pandemic is evolving in other countries – hence, we all have a responsibility to report in a timely manner.

Let me here also stress the difference between under-reporting, and underestimation of confirmed cases. There has been much coverage in the media that some countries are not revealing the true numbers of reported cases. As you all know, the nature of this virus affects people differently – the majority of people experience mild cases and do not seek medical care, while other have more severe cases and seek medical care. As a result, it is almost entirely the severe cases that are captured in disease surveillance systems. But it is probable that in all the countries in the world, there are many mild cases that are not identified. As a result, we can say that there may be an underestimation of the cases – this is an issue for almost all countries, even those with developed health systems.

Several countries in the Region have conducted their own risk assessments and have subsequently taken measures related to closure of schools and cancelling of mass gathering events. National authorities should make evidence-based decisions about these types of issues, and WHO’s role is to provide public health recommendations if such decisions are made by governments.
Many countries are also implementing travel and trade related restrictions, including suspensions of flights and closure of borders. WHO’s position on this remains the same: travel and trade restrictions or border closures are not generally recommended. When they are applied, they must be based on a clear risk assessment and be proportionate to the risk; any such measures taken by countries must be reported to WHO along with the scientific evidence and rationale within 48 hours of their implementation.

Restrictions on travel also impede our ability to fulfil our role properly as WHO, by delaying the deployment of public health experts to countries that need support, and delaying the delivery of urgently needed supplies to support health systems scale up their capacity to detect and respond.

Describing the situation as a pandemic does not require countries to only focus on placing more restrictive measures on travel or trade. It does not change WHO’s assessment of the threat posed by this virus, or its recommendations. All countries must strike a fine balance between protecting health, minimizing economic and social disruption.

Any travel-related restrictions or social distancing measures must be implemented while scaling up health system capacity to respond:
- active search for cases, aggressive tracing of contacts, and treatment, isolation and quarantine as relevant.

The protection of health care workers is also critical, as they are at the core of responding to this pandemic. Every country has a responsibility to protect health workers and augment their knowledge and skills on investigation and management of this pandemic, without additional personal risk.

Dear colleagues,

Let me repeat - we need urgent and strong commitment within governments, the health sector and the society overall to control this pandemic. This disease can primarily be controlled through aggressive actions related to finding cases, isolating them, testing them, and treating them. Countries that continue finding and testing cases and tracing their contacts not only protect their own people, they can also affect what happens in other countries, regionally, and globally. Rigorous risk communications and community engagement support these efforts.
The time to act is now – I cannot stress enough the level of urgency with which this needs to happen. We have an opportunity to contain this pandemic in our region, and we must all work together to make this happen.

God protect all the countries and people all over the world!

Thank you.

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