# Weekly Operational Update on COVID-19

20 July 2021

Issue No. 64





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

# Confirmed cases **190 169 833**

As of 18 July 2021

Confirmed deaths **4 086 000** 

#### Strengthening clinical management of COVID-19 in Ghana

The World Bank through the Pandemic Emergency Financing Facility (PEF) provided funds to WHO to enhance the capacity of Ghana's health system to adequately equip treatment facilities to support improved clinical outcomes for COVID-19.

Treatment facilities in all 16 regions of Ghana have received critical medical supplies including oxygen concentrators, patient monitors, arterial blood gas analyzers,

electrocardiograms, nasal oxygen cannulas and more. To ensure adequate

protection of health workers, personal protective equipment (PPE) was also supplied to healthcare workers and the National Ambulance Service.

Approximately 360 multidisciplinary health staff were trained to effectively manage COVID-19 patients in isolation, treatment facilities and at home. Additionally, in Greater Accra Region, the hotbed of the COVID-19 outbreak in Ghana, 225 contact tracers were trained to identify and promptly link cases to care, and follow-up contacts of confirmed cases as part of reducing community transmission.

For further information, click here.



Items donated to support Ghana's COVID Response efforts. ©WHO country office Ghana

#### **Key Figures**



WHO-led UN Crisis-Management Team coordinating 23 UN entities across nine areas of work

More than **5.5 million** people registered on <u>OpenWHO</u> and accessing online training courses across **36** topics in **55** languages



20 069 555 PCR tests shipped globally

203 202 426 medical masks shipped globally



**76 101 700** gloves shipped globally

**9 102 511** face shields shipped globally



**185** GOARN deployments conducted to support COVID-19 pandemic response



**3 434 304 520** COVID-19 vaccine doses administered globally as of 19 July

<sup>a</sup> COVAX has shipped over **129** million vaccines to **136** participants as of 19 July

<sup>a</sup>See Gavi's <u>COVAX updates</u> for the latest COVAX vaccine roll –out data



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Viet Nam receives 2 million doses of COVID-19 vaccines donated by United States of America through the COVAX Facility



Airport staff are unloading the vaccines from the cargo airplane landed at Noi Bai International Airport at 04:35 on 10 July 2021. These are Moderna vaccines donated by the US Government through COVAX facility. WHO staff joined the welcome of the vaccine arrival. Photo credit: WHO Viet Nam/Loan Tran

On 10 July 2021, Viet Nam received 2 000 040 doses of the Moderna COVID-19 vaccine donated to the COVAX Facility by the United States Government. The shipment is part of the 80 million doses of vaccine that the President of the United States committed to donating in May, with approximately 41 million of those doses shared through the COVAX Facility to support global needs. In Viet Nam, in addition to this vaccine donation, the United States has contributed over US\$ 17.7 million in COVID-19 related assistance to the country since the start of the pandemic.

Viet Nam has successfully managed the response to the COVID-19 pandemic since 2020. However, due to global supply constraints, the vaccination rates are still low at about 4% of the population vaccinated to date and the number of infections rising sharply in the last few weeks.

In addition to the 10 July shipment, Viet Nam has previously received 2 493 200 doses of the Oxford-AstraZeneca vaccine via the COVAX Facility since its first shipment of vaccines from the COVAX Facility in April. Now, close to four million COVID-19 vaccines have been administered in Viet Nam. The additional vaccines will help the Ministry of Health to expand coverage and reach more people from priority groups, contributing to attaining the country's target of vaccinating more than 70 percent of population by the end of the first quarter of 2022.

For further information, click here.



# WHO/Europe COVID-19 readiness and response at Points of Entry in Armenia: 28 June – 14 July 2021

The reopening of borders and resumption of cross-border movement, as well as increasing flow of travelers due to the summer season, has highlighted the need for well-established International Health Regulation (IHR) capacities at Points of Entry (PoE). The National IHR Focal Point in Armenia (the National Center for Disease Control and Prevention) together with the Health and Labour Inspection Body responsible for public health capacities at the country's PoE, invited WHO to support an internal assessment of COVID-19 capacities at the Zvartnots International Airport in Yerevan and ground-crossing with the neighboring Georgia.

From 28 June - 01 July, a joint mission comprised of representatives from responsible national agencies, WHO/Europe's Incident Management Support Team through WHO Health Emergencies Programme's (WHE) South Caucasus Hub and WHO Armenia conducted several on-site assessments.

During these site-visits, the following preparedness aspects were reviewed: coordination and communication mechanisms, public health and social measures in place, cleaning and disinfection, training of responsible staff, availability and use



Points of Entry assessment at Zvartnots International Airport in Yerevan. Credit: WHO Armenia Country Office

of personal protective equipment and standard procedures to transport suspect cases or ill travelers to designated facilities. Observations of the premises, structural facilities and equipment were noted, and focused discussions were conducted with persons responsible for key functions related to COVID-19 preparedness and response.

These three activities (on-site observations, discussions with key informants and the results of the completed COVID-19 PoE checklists) then served as a basis for a round-table discussion at the WHO Armenia Country Office with key stakeholders on 8 July. Actionable recommendations were provided for immediate strengthening of COVID-19 response capacity at PoEs.

The recommendations will be used to inform the Armenian action plan for PoEs, which will be undertaken by the responsible national agencies in both the shorter- and longer-term perspectives with technical support from WHO through the WHE Hub for the South Caucasus sub-region.



Decentralization and planning in Mumbai, India to fight the second COVID-19 surge

Mumbai was hit hard by the second wave of the COVID-19 pandemic in March 2021. Multipronged strategies, with WHO support, has enabled the city administration to stem the surge.

The Municipal Corporation of Greater Mumbai (MCGM) decentralized its central war room structure, creating 24 peripheral control rooms in all 24 wards for a localized



WHO Surveillance Medical Officer Dr.Vivek Pardeshi(left) and Dr.Pradip Angre, dean at Mulund Jumbo COVID-19 Center, Mumbai reviewing options. ©UNICEF/Bhushan Koyande

COVID-19 response. Patient admissions were mandated through the war rooms, which enabled equitable access to hospital beds as per availability in civic hospitals, dedicated COVID-19 health centres (DCHCs), and private hospitals, preventing health facilities from becoming overwhelmed and optimizing utilization of critical supplies. Senior engineers have been appointed at all Jumbo COVID-19 Centres to ensure seamless supply of electricity and oxygen. Inventory management ensured availability of the critical medical supplies for emergencies.

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"In Mumbai, 69 dedicated COVID-19 health centres were reopened in April 2021 and the WHO team assessed 19 of these facilities based on WHO's standard assessment checklist. The findings were shared with the Mumbai Executive Health Officer for necessary actions. To support the surge response, WHO officers also conducted infection prevention and control trainings for more than 250 health care workers (including staff and medical officers) in five batches," shared Dr Vivek Pardeshi, Surveillance Medical Officer, WHO India.

The MCGM had created five Jumbo COVID-19 Centres as part of the response to the first wave. These Jumbo COVID-19 Centres were not dismantled even when cases declined at the end of 2020. Following the launch of the COVID-19 vaccination drive on 16 January 2021, a part of these facilities were turned into vaccination centres with vaccination teams trained by WHO officers, UNDP teams and MCGM medical officers. Since January, more than 600 000 vaccine doses have been administered at the 55 session sites in the Jumbo COVID-19 centres.

This model has demonstrated that optimum utilization of resources through inventory management, decentralization of responsibilities and response, and a robust real time monitoring system can flatten the COVID-19 curve and save hundreds of lives.

For further information, click here.



Haiti receives 500,000 vaccine doses donated by the United States of America through COVAX Facility

On 14 July 2021, Haiti received 500 000 doses of COVID-19 vaccines donated by the United States Government through the COVAX Facility. "The arrival of these vaccines is quite promising and now the challenge is to get them to the people that need them the most," said PAHO Director, Dr. Carissa F. Etienne.

"These vaccines, which have obtained WHO emergency use license, will be administered free of charge to the Haitian population," declared Dr. Marie Gréta Roy Clément, Haiti's Minister of Public Health and Population. "In public health, vaccination remains one of the most effective interventions. This first allocation of vaccines puts an end to a long period of waiting, an end to a long period of waiting not only for the Haitian population but also for the people of the region who were very concerned that Haiti was the only country in the Americas that had not yet introduced the COVID 19 vaccine," added the Minister.



The PAHO Revolving Fund and the PAHO Representation in Haiti have worked with the Haitian authorities, the USA, and the COVAX Facility on logistics and other relevant aspects to ensure that these vaccines arrived promptly, safely and are ready for deployment as soon as possible.

"Over the last few weeks, PAHO has delivered significant personal protective equipment (PPE), helped expand care for COVID-19 patients and provided thousands of tests and laboratory materials to strengthen surveillance activities in Haiti," added Dr. Etienne. "We have also helped train community health workers and have supported the Ministry of Health in preparing for COVID-19 vaccine introduction and setting up new systems to dispel rumors and COVID-19 misinformation."



So far, in Latin America and the Caribbean through the COVAX Facility, close to 26 million doses of COVID-19 vaccines have been delivered to 31 countries. However, only about 14% of the total population in the Caribbean and Latin America has completed their vaccination schedule, and some countries have not yet been able to vaccinate more than 1% of their population.

For further information, click here,



#### "My Hero is You" mental health campaign enhances resilience among parents and children in the Syrian Arab Republic

WHO Syrian Arab Republic and local nongovernmental organizations in rural Damascus recently launched the "My Hero Is You" campaign, which aims to reduce anxiety and fear associated with COVID-19 among children and enhance the ability of parents to effectively talk to children about their well-being. In the Syrian Arab Republic, one in ten live with a mild to moderate mental health condition and prolonged exposure to conflict and the COVID-19 pandemic have continued to strain the mental well-being of families.

The pilot campaign reached 5000 children and included messages about how to cope with stress through a colouring book. The children's book developed by WHO and members of a UN inter-agency committee on mental health and psychosocial support in emergency settings was adapted to local context. The campaign also included the provision of psychosocial support sessions and focus group discussions, attended by 2000 parents, caregivers and health educators who discussed their concerns, coping mechanisms and



support strategies for children experiencing stress in the context of the COVID-19 pandemic.

"In Syria, the conflict was exacerbated by the COVID-19 pandemic and its adverse economic impact, so the need to address mental health has become even more acute. Thus, our increased focus on mental health aims at listening to communities - to their fears, concerns and experiences of coping with COVID-19 - and empowering them with tools and skills to stay mentally resilient and adapt to a new normal," said Dr Akjemal Magtymova, WHO Representative in Syrian Arab Republic.

The campaign, funded by the WHO Regional Solidarity Initiative, was made possible from partnerships with AI-Tal and AI-Qutayfah nongovernmental organizations, which received training by WHO from the WHO global package tailored to the current needs.

" "Maintaining a healthy lifestyle and work life balance were among the recommendations I received during the psychosocial support sessions, in addition to tips on how to talk to children about COVID-19 related fears. It was important for me to share how the pandemic affected the mental well-being of my family. I felt others shared the same concerns and together we can overcome the challenges of the current times," said one of the parents at the AI-Tal centre.



©WHO country office Syrian Arab Republic

Following the success of the pilot programme in rural Damascus, WHO plans to replicate the initiative in Homs, Aleppo and other governorates this year.



#### Pandemic learning response

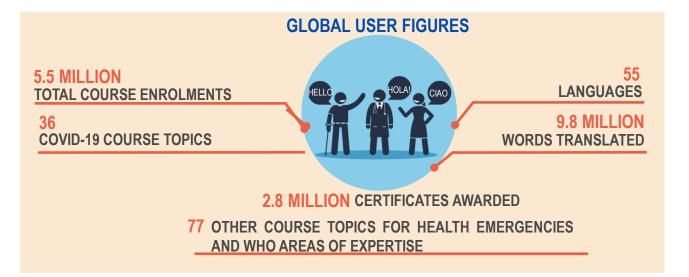
#### Exploring the use of WHO's COVID-19 vaccination online learning in countries

The Access to COVID-19 Tools (ACT) Accelerator's Country Readiness and Delivery workstream developed an OpenWHO training course for national and sub-national stakeholders on key aspects of COVID-19 vaccine deployment. The initial courses launched in December 2020 and were complemented by vaccine product-specific trainings in March 2021. As of June 2021, the <u>Orientation to National Deployment and Vaccination Planning for COVID-19 Vaccines (NDVP)</u> course had more than 15 000 learners in English alone and is available in over 13 languages.

A learner feedback survey was conducted from March to April 2021 to understand the impact of the trainings, usability for learners, and potential value of online training expansion for other immunizations. Using the survey responses and data available from the OpenWHO platform, WHO assessed the knowledge gained from participating in the course. The increase of knowledge from the course was assessed using the average score change between the pretest and the post-test.

The scores increased by an average of 44% for the NDVP course from an average pre-test score of 51.5% to an average post-test score of 95.5%. Additionally, a substantially higher rate of the enrolled learners completed the course than the industry benchmark for a Massive Open Online Course (MOOC).

The user feedback provides insight for WHO learning providers in health emergencies. Over 96% of the survey participants agreed that they have more confidence in performing their professional roles related to COVID-19 vaccination after taking the course. More than 60% of learners in the survey indicated that they prefer online learning over other training options. However, 44% of survey participants had at least one barrier to online learning (such as internet connection, IT related issues, not enough time to complete the course, language barriers, etc.). Despite these limitations, learners, all levels of WHO and partners have expressed strong interest in further expansion of the OpenWHO online learning courses.





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### **COVID-19 Partners Platform**



#### Partners Platform coordinating funding and teaming up with ECHO for a training series to support the scale up and roll-out of vaccine doses

Many countries are in dire need of operational funding to support COVID-19 vaccination. Countries are struggling to maintain routine essential services including routine immunization, while scalingup the COVID-19 vaccine roll-out.

To address this gap in funding, the 'COVID-19 Vaccine Delivery Support' (CDS) managed by Gavi and UNICEF, has started an initial release off US\$ 350 million through an Early Access window closing end of August. This initial fund aims to enable the rapid roll-out and scale up of COVAX-funded vaccine doses for AMC eligible economies plus Angola, Indonesia, Timor-Leste and Viet Nam.



WHO, through the Partners Platform, is playing a critical coordinating role for the CDS funds by hosting the short application form, tracking application submissions and tracking the subsequent allocation of funds following a review process.

In addition, WHO is also partnering with Project ECHO to host a training series to support countries with simultaneous training sessions that align with countries' immediate and medium-term needs by encouraging the optimization of existing resources and providing technical assistance for COVID-19 vaccination programs using ECHO's innovative guided-practice model. Throughout the trainings, guidance and resources will be shared and technical assistance will be provided on budgeting, financing and available tools, including the updated CVIC tool. The sessions will also support a community of practice and the sharing of key challenges and benefits on utilizing these tools, as well as strategies for maintaining routine immunization services. Countries will also learn how the Partners Platform facilitates the use of these costing tools and provides a function for countries to upload the resulting costed resource needs for global donor viewership.

The series will be comprised of fifteen sessions from July to December 2021, beginning on 13 July with the topic 'How to apply for Gavi COVID-19 Vaccine Delivery Support (CDS) funding on the Partners Platform'. Other session topics for July and August include 'Vaccination: Costing for scaleup' and 'Financing alone is not enough - planning and executing on the budget'. 8



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#### **Country Readiness and Delivery**

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**Upcoming:** Clinic 1 on Mini-COVID-19 vaccine Post-introduction Evaluations (mini-cPIE or COVID-19 vaccination <u>Intra-Action</u> <u>Review</u>)





Learn how countries are reviewing their COVID-19 vaccine roll-out

DATE & TIME: 28 July 2021 12:30-13:30 CEST LANGUAGES: English, French and Spanish

#### **CLICK TO REGISTER**

#### **Regular Clinics for countries to:**

- Request technical support from WHO
- Receive practical tips and tools
- Share country learnings and experiences with peers on their review and adjustment to their COVID-19 vaccine roll-out
- Propose new tools
- Directly connect with countries that have already conducted a mini-cPIE
- Seek advice and receive answers to questions

# **WHO Funding Mechanisms**

#### **COVID-19 Solidarity Response Fund**

As of 14 July 2021, <u>The COVID-19 Solidarity</u> <u>Response Fund</u> has raised or committed more than US\$ 253 million from 673 083 donors.

The Fund is powered by the WHO Foundation, in collaboration with the UN Foundation and a global network of partners. It's never been more urgent to support the global response and donations can be made via the website from anywhere in the world.





#### **Operations Support and Logistics**

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 and PAHO-procured items that have been shipped as of 14 July 2021.

Shipped items as of 14 July 2021	Laboratory supplies*			Personal protective equipment					
Region	Sample collection kits	Antigen RDTs	PCR tests	Face shields	Gloves	Goggles	Gowns	Medical Masks	Respirators
Africa (AFR)	4 838 975	1 103 775	2 275 932	1 529 970	33 830 300	316 850	2 016 579	54 214 400	3 224 030
Americas (AMR)	1 348 132	12 069 900	10 555 962	3 333 200	4 785 000	322 940	1 621 120	55 146 330	7 669 760
Eastern Mediterranean (EMR)	1 866 270	1 912 925	2 736 785	1 326 785	14 014 000	253 040	2 136 722	29 875 550	1 826 295
Europe (EUR)	707 500	1 360 550	663 256	1 772 020	15 958 900	525 260	3 046 548	42 051 500	7 196 550
South East Asia (SEAR)	3 184 400	1 440 000	2 872 802	371 836	4 293 500	86 510	625 300	6 940 500	1 894 495
Western Pacific (WPR)	652 100	30 000	964 818	768 700	3 220 000	311 927	466 710	14 974 146	3 107 035
TOTAL	12 597 377	17 917 150	20 069 555	9 102 511	76 101 700	1 816 527	9 912 979	203 202 426	24 918 165

Note: PAHO procured items are only reflected in laboratory supplies not personal protective equipment. Data within the table above undergoes periodic data verification processes. Therefore, some subsequent small shifts in total numbers of procured items per category are anticipated.

\*Laboratory data are as of 13 July 2021

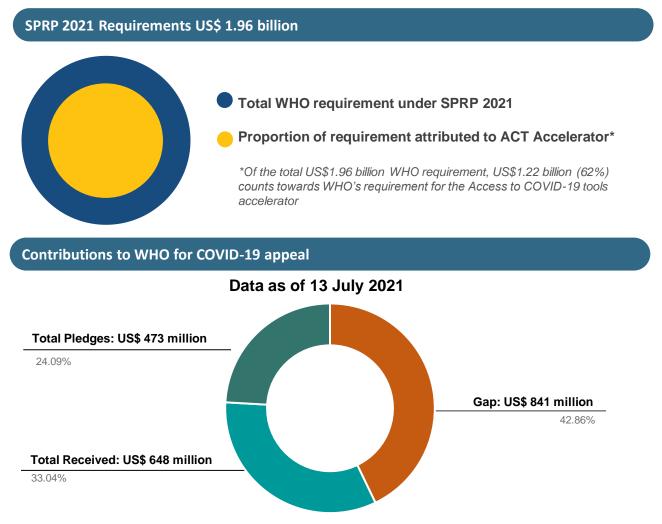
For further information on the COVID-19 supply chain system, see here.



## **Appeals**

WHO's <u>Strategic Preparedness and Response Plan</u> (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.



The 2021 SPRP priorities and resource requirements can be found <u>here</u>. The status of funding raised for WHO against the SPRP can be found <u>here</u>.



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#### **COVID-19 Global Preparedness and Response Summary indicators**

Progress on a subset of indicators from the <u>Strategic Preparedness and Response Plan</u> (SPRP 2021) <u>Monitoring and Evaluation Framework</u> are presented below.

Indicator (data as of)	2020 Baseline	Previous Status	Current Status	2021 Target
<b>Pillar 3:</b> Proportion of countries <sup>a</sup> 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 <sup>b</sup> , as of epidemiological week 25 2021) <sup>c</sup>	22% (n=15) <sup>d</sup>	41% (n=28)	51% (n=35)	50%
<b>Pillar 10:</b> Proportion of Member States that have started administration of COVID-19 vaccines (N=194, as of 19 July) <sup>c</sup>	0e	97% (n=189)	98% (n=190)	100%
<b>Pillar 10:</b> Number of COVID-19 doses administered globally (N=N/A, as of 19 July) <sup>c</sup>	0e	3 114 766 865	3 434 304 520	N/A
<b>Pillar 10:</b> Proportion of global population with at least one vaccine dose administered (N= 7.78 billion, as of 19 July) <sup>c</sup>	0e	16.3% (n=1.3 billion)	17.2% (n=1.3 billion)	N/A

<sup>a</sup> The term "countries" should be understood as referring to "countries and territories"

<sup>b</sup> 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 <sup>C</sup> Weekly reported indicator

<sup>d</sup> Baseline for epidemiological week for southern hemisphere season

e 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



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# 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.

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

## WHO Publications and Technical Guidance

For updated WHO Publications and Technical Guidance on

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 13 July 2021 Weekly Epidemiological Update, click here. Highlights this week include:

- A synopsis of the latest WHO COVID-19 Rapid Risk Assessment, which aims to review the current status of global public health risks associated with the pandemic through an in-depth hazard, exposure and context assessment.
- A short update on the geographical distribution of SARS-CoV-2 Variants of Concern (VOCs) Alpha, Beta, Gamma and Delta.

#### News

- For the WHO Director-General's opening remarks at the 15 July COVID-19 media briefing, including the WHO Emergency Committee expressing concern on both the level of funding for the WHO COVID-19 Strategic Preparedness and Response Plan and that the pandemic is being mischaracterized as coming to an end when it is nowhere near finished, click here.
- For the statement on the eight meeting of the International Health Regulations (2005) Emergency Committee regarding the coronavirus disease (COVID-19) pandemic, click here.
- For more on how COVID-19 has led to a major backsliding on childhood vaccination click <u>here</u>.