

## COVID-19 OUTBREAK

### Operations update #4

28 February 2020

**Emergency appeal:** MDR00005  
**GLIDE:** [EP-2020-000012-CHN](#)  
**Operation timeframe:** 31 Jan - 31 Dec 2020

**Funding requirements:** CHF 32,000,000  
**Funding gap<sup>1</sup>:** CHF 20,707,227



## A. SITUATION UPDATE



Nearly 50 countries reporting confirmed cases; 7,900 new cases since last update

- New hotspots outside of China emerged including South Korea, Iran and Italy, providing new sources of exported cases.
- All countries with cases are in the containment phase, while China is involved in containment and mitigation activities; unaffected countries are preparing for their first cases.

*The Map shows the number of COVID-19 cases per 100,000 population per country.*

Number of COVID-19 cases per capita (per 100,000 persons)  
Produced 27 February 2020



[Click here](#) FOR THE DETAILED UP-TO-DATE INFORMATION ON THE SITUATION AND GUIDANCE DOCUMENTS ON [GO.IFRC.org](#)

## B. USEFUL INFORMATION & GUIDANCE

### Health:

- Novel coronavirus (COVID-19) outbreak Guidance note for IFRC and National Societies, including Checklist: Mobilization of Personnel for novel coronavirus response (Version 3, 7 February 2020) available on [GO.IFRC.org](#) in English, French, Spanish, Arabic, Russian and Portuguese

### Risk Communication and Community Engagement:

<sup>1</sup> Funding gap calculated after factoring-in soft pledges as well as hard pledges.

<sup>2</sup> [WHO Situation Report #38 of 27 February 2020](#)

- Effective Risk communication and community engagement in Epidemics, Presentation for NS leadership (11 February 2020) - [EN](#)
- Social Stigma associated with COVID-19 (20 February 2020) - [EN](#)
- Key tips and discussion points for community workers, volunteers and community networks (23 February 2020) - [EN](#)

The latest WHO situation reports are available [here](#) and the latest WHO visualization and case numbers available [here](#)

## C. OPERATIONAL UPDATE

### Global Overview and Highlights

- Red Cross and Red Crescent continues to address the rational use of Personal Protective Equipment (PPE) considering observed and predicted shortages in the health care system. These shortages are caused by increased demand, inappropriate and overuse of PPE and lower supply due to reduced factory capacity. See WHO guidelines on rational use of PPE [here](#).
- There is an ongoing need to address stigma and misinformation by providing (or signposting) correct information, as well as encouraging the public to remain calm, react appropriately and make appropriate behaviour modifications.
- Good collaboration between National Societies (NS) and national governments is taking place while at the global level close coordination with the WHO and other key health agencies is emphasized. A dedicated WHO liaison person is part of the IFRC Global Coordination Cell. The WHO liaison ensures that IFRC's strategic interests and priorities are brought in to external coordination meetings with WHO, and other key global health interlocutors, and remain informed on the evolving situation.
- According to the WHO, for the first time since the onset of symptoms of the first identified case of COVID-19 on 8 December 2019, there have been more new cases reported from countries outside of China than from China. WHO is working with the World Bank and the IMF to estimate the potential economic impact of the epidemic and to develop a strategy as well as policy options for mitigation.
- All continents have now reported at least one confirmed case of COVID-19, and the risk of continued spread between and within countries is very high.

### [Red Cross and Red Crescent activity:](#)

#### **ASIA PACIFIC**

The IFRC Asia Pacific Regional Office (APRO) continues to provide guidance and coordination support to National Societies through five Country Cluster Support Teams (CCSTs) and eight Country Offices, with regular communications and coordination at all levels and with the global headquarters in Geneva.

Country Cluster Support Team (CCST) Beijing continues to support the Red Cross Society of China (RCSC) as requested and continues to monitor the situation and update relevant stakeholders.

#### **Red Cross Society of China (RCSC)**

To date, the Beijing Red Cross Emergency Response Center has provided more than 13,980 ambulance services for patients. The RCSC National Headquarters has purchased and delivered to Wuhan essential medical equipment, including 10 negative pressure ambulances, five Extracorporeal Membrane Oxygenations (ECMO), 470 large non-invasive ventilators, and five respiratory humidifiers.

On 21 February, the Guang Xi Branch sent three relief Emergency Response Team members, a rescue vehicle and equipment to Hubei province. The team is assisting the local branch in the prevention and control of the epidemic in Wuhan.

#### *Hong Kong branch of RCSC (HKRC)*

HKRC continues to provide clothing, blankets, and personal sanitary items to quarantine centres through the Social Welfare Department. Since mid-February, HKRC has been supporting the department in providing necessity shopping services to people under home quarantine in Kwun Tong District.

Dissemination of health messages in collaboration with community partners is continuing, aimed at reaching 30,000 vulnerable people by the end of March, including elderly people who live alone, elderly aged 60 or above with chronic illnesses, people with mental illnesses, and people with a low income.

To date, HKRC has distributed 13,700 surgical masks to health practitioners, over 2,600 alcohol hand sanitizers, about 2,000 alcohol based wet wipes, nearly 2,000 packs of disinfectant hand towels, and 180,000 information leaflets.

#### **Afghan Red Crescent Society (ARCS)**

Following confirmation of the first COVID-19 case, a health emergency was declared in Herat province. ARCS has mobilized 26,500 volunteers across the country to raise awareness in its communities and has deployed two Mobile Health Teams at two airports for screenings. ARCS continues to be actively involved in inter-sectoral meetings led by the Ministry of Public Health, and has its District Hospital in the capital dedicated for suspected patients in the state.

#### **Australian Red Cross (ARC)**

The ARC has established an Incident Management Team and has been engaging with the Federal and State Agencies responsible for preparedness, response and education, including on the needs of returning citizens. In addition, ARC will continue working with the Department of Foreign Affairs and Trade (DFAT) on plans for the Pacific. At the community level, ARC provides information and psychological first aid with plans to scale up these activities.

#### **Bangladesh Red Crescent Society (BDRCS)**

During February BDRCS has been conducting awareness sessions for staff and volunteers and has been keeping close communications with the government Health department and the WHO Country Office. BDRCS has been engaging with Movement partners (and others) on mother and child health, communications, Community Engagement and Accountability (CEA), epidemic response, and public health, in relation to COVID-19. With the support of the IFRC Bangladesh Country Office and the Danish Red Cross, BDRCS will be organizing two epidemic and pandemic preparedness sessions on 1 March, with 60 volunteers. Information, Education and Communications (IEC) materials have been translated into Bangla by BDRCS, in collaboration with the IFRC Country Office.

#### **Red Cross Society of the Democratic People's Republic of Korea (DPRK RCS)**

The IFRC Secretariat has negotiated a one-off exemption for the importation of COVID-19 related goods with the UN Sanctions Committee. Procurement and logistical processes are ongoing, coordinated at the Asia Pacific Regional Office and Geneva. To date, more than 650 volunteers have been trained in preparedness activities, including early detection, health promotion, psychological first aid and disinfection, and have reached remote areas of the country by bicycles.



*Figure 1. Volunteer Emergency Medical Teams transporting critically ill patients in Wuhan, Hubei Province (source: Red Cross Society of China / IFRC)*

National and Provincial disaster response teams are currently on a 24-hr standby. Approximately 1,500 volunteers have been mobilized in four provinces, including 700 bicycles as part of the “Volunteers on Wheels” initiative. Coordination continues with the Ministry of Public Health, ICRC, UNDP, WHO, UNICEF, and Red Cross Red Crescent Movement partners. Public campaigns have been provided by DPRK RCS and chlorine powder and soaps were provided to health institutions, schools and kindergartens.

### Palang Merah Indonesia (PMI)

PMI has continued to scale up preparedness actions at the provincial and district levels. These include risk communication, community engagement and provision of basic services to vulnerable communities. To date, eight PMI provinces have conducted risk communication and public health awareness activities, and PMI is finalizing its national plan of action and on COVID-19 community preparedness, focusing on local coordination, community-based surveillance, Epidemic Control for Volunteers (ECV), psychosocial support, and supporting hospital and home-based care services.

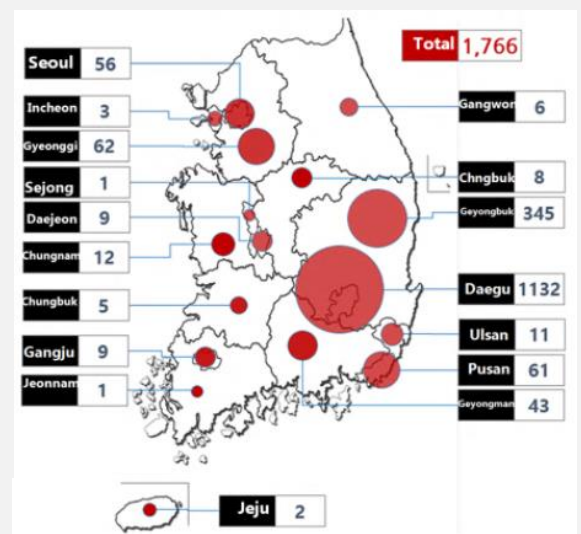
This week, through support from CP3 (Community Epidemic/Pandemic Preparedness Project), IFRC and PMI have conducted “Lifeline Training on Media in Humanitarian Emergency” which presented COVID-19 as a case study. The training was facilitated by BBC Media Action HQ and was attended by representatives from media in Indonesia, PMI staff and USAID-GHS partners. PMI has also been actively involved in the national technical working group on COVID-19 risk communication and community engagement (RCCE), together with UN and government agencies, and humanitarian actors in Indonesia.

### Japanese Red Cross Society (JRCS)

While small clusters of confirmed cases have been reported in Japan, the government has imposed country-wide measures to attempt to limit the spread of infections, closing all schools until the end of March (from elementary to high schools). Since 10th February, JRCS has been supporting the Ministry of Health, Labour and Welfare (MHLW) in conducting medical operations on board the *Diamond Princess*, monitoring quarantine facilities for those tested negative, and treating COVID-19 patients across 20 JRCS hospitals. The Canadian Red Cross, as part of the Canadian government team, has increased psycho-social support to Canadian citizens hospitalized in Japan and their family members. JRCS has been involved in blood donation collection and producing blood products. Mental Health Psycho-social Support (MHPSS) task force for Red Cross staff and volunteers was initiated, distributing translated copies of the “Mental Health and Psychosocial Support for Staff Volunteers and Communities in an Outbreak of Novel Coronavirus” to medical staff on the *Diamond Princess* and quarantine facilities.

### Korean National Red Cross (KNRC)

Since late January, KNRC has been actively mobilizing cash and in-kind contributions in response to the needs of RCSC, focusing on domestic preventive activities. These include distribution of relief and comfort items to 847 quarantined evacuees from Wuhan City, China, and health promotion to the public. Following a sudden surge in the number of confirmed cases earlier in the week, KNRC expanded its response mechanism by activating the Emergency Disaster Relief Countermeasure Headquarters (EDRCH), in-line with the government’s escalated measures for the COVID-19 response.



KNRC has been providing psycho-social support to those evacuated from Wuhan, China and quarantined in government designated places through phone consultation and by providing books, stretching bands, etc. This service will be expanded to the people isolated and quarantined in

Daegu and other cities. To this end, a field operational center in the Daegu Chapter was set up. Four relief experts deployed by HQ EDRCH have been supporting these activities. The Daegu Chapter is in the process of distributing disease prevention kits, emergency relief kits, and providing meal services to 9,951 people. Every day, five volunteers are dispatched on a rotational basis from the Daegu Chapter to support hospitals designated for COVID-19, guiding people and visitors for tests and consultations.

*Figure 2. Mapping of COVID-19 cases in RoK as of 28th February (source: KNRC)*

Six KNRC hospitals nationwide are also designated as triage centers for COVID-19. Upon request from the Ministry of Health (MoH) last weekend, KNRC has deployed medical personnel, including two doctors, four nurses, and 21 volunteers to Daegu.

#### **Myanmar Red Cross Society (MRCS)**

Together with township medical officers from the Ministry of Health and Sports (MoHS), MRCS volunteers have shared proper handwashing techniques and distributed IEC materials to communities and through social media. MRCS is assisting MoHS in screening activities at border gates in Kachin state and all Northern border crossings along the border with China and continues to lead the weekly Movement Task Force.

#### **Nepal Red Cross Society (NRCS)**

NRCS has mobilized and trained volunteers on Psychological First Aid, Epidemic Control, and CEA, and has regularly participated in meetings with government stakeholders (including the Epidemiology and Disease Control Division and External Development Partners), district leaders, and humanitarian coordination mechanisms. In collaboration with the government, WHO, and IFRC, NRCS has developed and distributed IEC materials to the public and to all 77 NRCS district chapters and continues to maintain its 11AM-12PM hotline service for COVID-19 queries. Social media is used to engage communities, and rumors tracking system has been put in place, in collaborations with WHO and UNICEF.

#### **Samoa Red Cross Society**

As part of its outreach activities, the Samoa Red Cross Society has taken part in a TV interview on hygiene promotion, has disseminated health and hygiene messaging through the youth education network, and has trained its volunteers on appropriate mask use. IFRC resources have been translated for health promotion and awareness-raising activities.

#### **Cruz Vermelha de Timor-Leste (CVTL)**

CVTL has been actively involved in national health cluster coordination meetings, together with WHO and humanitarian actors, and will be engaging its 13 municipalities on epidemic control activities. Information sharing materials and tools are being adapted for COVID-19.

### **AFRICA**

Data on preparedness to respond to COVID-19 is being collected in 49 African NS. In addition, a template for National Society COVID-19 Contingency Plan was developed by the Africa Regional Office and shared with WHO priority 1 (12 in total) and Priority 2 (10 in total). IFRC will provide technical support in the completion of the plans as necessary. To date, data from 6 WHO Priority 1 countries and 4 WHO Priority 2 countries was received. Additional activities at the country level include:

- Five countries have a National Epidemic Preparedness Plan (Ethiopia, Uganda, Nigeria, Zambia, Rwanda, Zimbabwe) and six countries have an Epidemic Preparedness programme/systems in place.
- Six NSs attended their National COVID-19 preparedness meetings organized by the MOH.
- Three WHO Priority 2 countries developed an event-based/community-based surveillance signal for COVID-19, in collaboration with the NS.

- To date, only three NS confirmed having a designated role in the event of an outbreak, including community engagement, risk communication and logistics support.
- Based on available resources, NSs have been integrating COVID-19 into existing programmes, ranging from RCCE (Senegal), volunteers training (Guinea), circulation of COVID-19 guidelines and materials (Nigeria and Ethiopia), and community engagement and information sharing (in South Africa).

## THE AMERICAS

The IFRC Regional Office has been focusing on preparedness actions in the region, including the development of a business continuity plans and a regional contingency plan. In addition, the following has been done:

- Dissemination of risk communication material, and community engagement strategy, with focus on addressing rumors, misconceptions and misinformation through both online and offline through the volunteer's network
- Preposition of protective equipment for Red Cross personnel working with suspected cases.
- Roll-out contingency and response actions with National Societies
- Surge personnel to increase the Regional capacities on health, information management, communication and operations
- Coordination at the Regional level

### North America

The American Red Cross (AmRC) is closely monitoring the evolving situation and is currently working with government agencies and state officials to determine what Red Cross support may be needed in the coming days and weeks. AmRC is filling the Surge Information Management Support (SIMS) request to support the Emergency Appeal.

The Canadian Red Cross (CRC) is monitoring the situation and has activated its roster of trained personnel ready to be deployed if requested. It has also launched a national campaign through its media resources to raise funds to the Red Cross Society of China's response to COVID-19.

In addition, CRC, at the request of the Government of Canada, facilitated an in-kind donation of personal protective equipment by the Government of Canada to the Red Cross Society of China, and is supporting the return of Canadians from China who are staying in isolated interim lodging sites for a period of 14 days. CRC is supporting the reception, registration, information and resources for those staying at the site. This includes providing meals, cloths and laundry services and necessary age- appropriate personal items such as hygiene kits; safety and well-being support, including referrals for mental health needs and feedback mechanisms; and family reunification services.

### Central America

The National Societies in Central America have been working actively from the beginning of the outbreak. The efforts have been channeled in two directions:

- The actions delivered by the National Societies have focused on the internal scope within each National Society: there have been information and awareness campaigns for the staff to address the concerns related to the COVID-19 outbreak. There have been active participation and information sharing with the colleagues at the Regional Office. Contingency plans for COVID-19 have been developed in El Salvador, Guatemala, Honduras and Costa Rica. In Nicaragua, information/coordination plans have been worked on both internally and externally.

- The main activities delivered so far from the National Societies have been concentrated on coordination and collaboration with the Ministers of Health on preventive measures and pre-hospitalization protocols to attend suspicious cases of Coronavirus.

### **South America**

In Chile, Brazil, Uruguay, Ecuador, Bolivia, Venezuela, and Colombia, prevention and surveillance systems have been established, and National Societies are in contact with health authorities or national disaster coordination entities, carrying out awareness campaigns.

Internal campaigns to prepare personnel, update inventories and update contingency protocols of National Societies have taken place in Ecuador, Colombia and Venezuela.

At the country level, National Societies and IFRC are observers to, and participate in, meetings of the Humanitarian Country Team and Inter Cluster Coordination held both during disasters and non-emergency times. The OCHA Regional Office is closely liaising with regional offices of UN agencies, International organization working on Health and International NGOs.

### **EUROPE AND CENTRAL ASIA**

As of 26 February 2020, 20 National Societies across Europe are involved in preparedness and / or response activities, and in the national as well as the regional coordination mechanism, including: Armenia RC, Azerbaijan RC, British RC, Bulgaria RC, Croatia RC, Czech RC, Finnish RC, French RC, Georgia RC, German RC, Hungarian RC, Italian RC, Kyrgyzstan RC, Magen David Adom (Israel), The Red Cross of Republic of North Macedonia, Slovak RC, Slovenia RC, Spanish RC, Tajikistan RC and Ukrainian RC. This includes developing, adapting, translating and disseminating information materials among at-risk populations, including via social media. IFRC offices across Europe are providing support and technical guidance as necessary and a systematic information exchange between IFRC Europe Regional Office and National Societies has been established.

The offices are in the process of updating their business continuity plans to ensure their ability to deliver services to and support National Societies as the situation evolves

### **Italian Red Cross (ItRC)**

Italian Red Cross (ItRC) is conducting body temperature checks of passengers arriving in Italy (3,000 activations per month in 25 airports), training on bio-containment, and medical transport for suspected cases. Italian RC purchased vehicles such as ambulances and PPE to be distributed to volunteers in direct contact with suspected cases. Through the "CRI per le persone" call center calls are taken 24 hours a day, responding to queries, with medical staff available to support specific medical queries.

### **Ukraine Red Cross Society**

The Ukrainian Red Cross Society (URCS) is actively involved in communication and information exchange with state ministries and agencies representatives. A specific meeting was convened with the Ombudsperson of the President of Ukraine on volunteering, as part of the cooperation on COVID-19.

An evacuation of 45 Ukrainians and 27 foreign nationals from Wuhan to Kharkiv in eastern Ukraine was organized by the government. In response to protests and blockages of regional airports, the government requested URCS to organize a public awareness campaign to ensure calm is maintained and address stigma and discrimination.

In coordination with WHO and the Health Public Center of Ukraine, URCS confirmed the sharp necessity to start coordinated crisis communication as soon as possible. URCS has developed the preliminary Plan of Action which is in the process of being approved by the Ministry of Health and IFRC support is requested to assist URCS in their activities. The URCS Emergency Response Team is conducting an assessment mission in the town where the evacuated Ukrainians are settled for the 14- days quarantine period. URCS established a Red Cross point (tent) in Poltava region close to the military hospital where evacuated people are under quarantine. URCS volunteers provide necessary support to the local

population: water, food, hygiene materials, PSS and also organize awareness sessions for the host population community.

### **Russian Red Cross**

Russian Red Cross regional branches are in close contacts with the regional and local authorities, especially the regions bordering with China. In the Primorsky Krai, by the request of regional authorities, RRC branch collected sanitary and hygienic items to equip three quarantine institutions/points. In addition, in the areas bordering with China, local RRC branches offices, at the request of local authorities in response to call from the bordering regions of China, collect sanitary and hygienic items (including masks) to be shipped to China as humanitarian assistance.

Currently, Russian Red Cross and its regional branches are mostly considered to provide support in dissemination of the prevention information among the population through social networks; web-sites of RRC and regional branches; distribution of leaflets among population (in Irkutsk region). All informational materials were developed on the basis and with the usage of Federation material which has been developed and translated into Russian by IFRC Office in Moscow and distributed among NSs in the region.

### **Magen David Adom (MDA)**

MDA Emergency Medical Service personnel are supporting the transportation of symptomatic suspected patients with symptoms to the hospitals, as well as the transportation of all other passengers non-symptomatic from the airport to their homes for 14 days quarantine. In order to deal with the many calls of possible exposures to the tourist group, and persons who travelled abroad, MDA together with the Ministry of Health and the primary health care providers opened a dedicated call center (as part of the MDA system). Since then a 100% increase in the volume of calls to MDA emergency lines was recorded. MDA has a dedicated page on it's website for the COVID related activities, and instructions in 7 languages (including Amharic), [available here](#).

### **French Red Cross**

Is working with the French Government's to ensure the logistics of the reception center for French nationals repatriated from the Chinese province of Hubei currently affected by the epidemic of viral pneumonia.

Volunteers from the FRC have been mobilized for more than a week; providing telephone advices response on behalf of the Ministry of Europe and Foreign Affairs. Volunteers are present at the arrival of passengers from China at the Roissy-Charles de Gaulle airport, to welcome, inform, reassure and guide travelers. Mobilization has intensified with the participation of around 30 volunteers in the preparation of the reception center based in Carry-Le-Rouet and in the airport reception of returnees. FRC volunteers will also distribute meals and run the center to best meet the needs of the confined.

### **Kyrgyzstan Red Crescent (RCSK)**

RCSK has been directly involved in response actions: staff and volunteers of Kyrgyzstan Red Crescent with local Chinese language skills provided support to the MoH in the medical checkpoints established in the international airports (including Manas International Airport) and road checkpoints. The NS is planning a country-wide awareness campaign in all seven regional branches of Kyrgyzstan. RCSK staff and volunteers will conduct family and community sessions for the general population: with special focus on older alone people, multi-children families, people with chronic diseases, disable people, pregnant women, migrating populations and distribute IEC materials. A joint/inter-agency contingency plan is being developed with the facilitation of WHO Country Office and with support of all relevant partners, including RCSK.



**German Red Cross** continuous providing accommodation and care for returnees and their family members from the quarantined city of Wuhan in China.

### **Other National Societies preparedness measures**

**Bulgarian RC** has set up an internal taskforce to coordinate information flow and activities linked to the 2019-nCoV. All related relevant materials sent by the IFRC have been translated and shared within the HQ and the regional branches for consideration. A short Q&A has also been compiled and shared with the NS structures. Branches have been requested to display the infographic tips developed by the IFRC and translated into Bulgarian language.

A decision was taken to supply and store quantities of personal protective equipment, e.g. gloves, masks, hand-gel for disinfection at HQ and branch level. In addition, a briefing for staff and employees travelling abroad has been developed, and there is a regular communication chain with Bulgarian RC structures in the country for updates and / or signals in case of necessity.

**The Croatian Red Cross (CRC)** is closely monitoring the evolving situation regarding the outbreak of the COVID-19, since December 2019. According to its national preparedness capacities, the CRC is able to ensure timely and effective humanitarian assistance and is preparing for effective response to determine, what may be needed in the coming days and weeks. The CRC activated its roster of trained personnel and launched general information about COVID-19, following IFRC recommendations, as well as respecting preventive measures and risk reduction instructions by the National Institute of Public Health. The CRC finalized its procurement procedure for Personal Protective Equipment (PPE - masks, gloves, hand sanitizers) for front line health workers.<sup>3</sup>

The **Hungarian Red Cross** Translation of IFRC flyers for coronavirus prevention measures into Hungarian language and dissemination of these materials using social media.

The **Red Cross of the Republic of North Macedonia** has prepared the educational materials needed for coronavirus prevention. The materials contain key information about the onset and course of coronavirus, the mode of transmission, symptoms and ways of preventing it. The National Society also translated educational material with measures of activities of National Societies in case of epidemic, recommended by IFRC. Translation of IFRC flyers for coronavirus prevention measures into Macedonian and Albanian language have been disseminated to RC branches and the general public using social media. A task force (Health, DM, Communications) was established at the HQ of the NS with participation of MoH and WHO country office Skopje

The **Slovak Red Cross** HQ informed its regional branches and distributed COVID-19 flyers electronically to all of them, as well as to all of its social facilities. The flyers as well as the link to frequently asked questions on new coronavirus have been posted on the Slovak RC social media profiles. The Slovak RC also translated and used the IFRC visuals and posted them via its social media profiles.

**Slovenian Red Cross** preparedness measures consist of an internal taskforce to coordinate information flow and activities linked to COVID-19. The Taskforce is headed by the Secretary General of Slovenian RC. The IFRC infographic package of tips will be adapted and shared on the official website as well as on social media channels for the benefit of general public. The NS will organize education for staff and volunteers about symptoms and individual prevention measures.

**Czech Red Cross** together with the government of the Czech Republic is organizing an evacuation flight to China to bring students and other citizens of Czech Republic back from China in March. On the way to China the empty plane will be filled with essential prevention materials, funded by the government

and it will be a bilateral in-kind donation to the Chinese RC. The Czech RC is currently negotiating the details with the MoFA.

## MENA

As of 27<sup>th</sup> February, 8 out of 17 countries have reported COVID-19 cases in the MENA region with a total of 344 cases and 26 fatal cases. MENA Mental Health and Psycho-Social Support (MHPSS) network convened to discuss how to support each other on MHPSS issues. Additional materials such as Introduction to PFA and Social Stigma associated with COVID-19 have been shared, and information sharing session with IFRC MENA RO and PNSs in based in Lebanon was conducted. Further, business continuity plans are being updated and finalized for the Regional Office and Country Offices.

**Lebanese Red Cross (LRC):** To date, LRC Emergency Medical Service team transferred 10 suspected cases to hospitals. Further, 10 EMS stations have been equipped to respond to suspected cases, and 30 new EMTs have been trained (making a total of 144 trained METS are ready to respond).

**Iraq Red Crescent Society:** Awareness sessions are conducted in communities and schools to reduce the risk across the country.

**Palestine Red Crescent Society:** PRCS is providing PPE to ambulance and emergency staff to safely assist affected population in the West Bank.

### Iran Red Crescent Society (IRCS)

Since the surge in the number of cases in the country, IRCS has stepped up activities. Previously, the IRCS has focused on preventive measures and has been engaging in preparedness activities. The IRCS is equipped to take additional required measures together with the MoH in response to the outbreak. The following key activities took place:

- A COVID-19 Coordination Committee was activated at IRCS' Headquarter
- A COVID-19 Coordination Secretariat was formed at national and provincial levels
- Constant communication and coordination between the National Secretariat and the Ministry of Health is taking place.
- Educational brochures, pamphlets, footage, banners have been produced for volunteers, relief workers, staff and the public.
- Public awareness training courses in relation to COVID-19 have been organized at national and provincial levels
- Online courses on COVID-19 have been prepared for public awareness in collaboration with the Medical Council Organization
- Guidelines on high-risk staff and suspected cases have been prepared and daily screening of staff is ongoing to prevent further transmission.
- Needs assessment regarding PPE was conducted and the required equipment was distributed to relief and health workers
- Guidelines and standards on individual and environmental health have been shared at national and provincial levels

## Response by Red Cross Red Crescent globally

### Communications

Communications on COVID-19 is focused on promoting Red Cross Red Crescent response, supporting National Societies communications, and addressing misinformation and stigma. Media statements on our COVID-19 response are available [here](#)<sup>4</sup>. Key messages and a list of spokespersons are updated/shared regularly within IFRC, with ICRC and with National Society communication focal points. Media interest and coverage of Red Cross Red Crescent response remains high. A webinar on *The Role of Media in Containing COVID-19 and Saving Lives* is being planned in collaboration with partners

<sup>4</sup> <https://media.ifrc.org/ifrc/news/press-releases/>

and media in priority countries. Cross media assets for all National Societies are communicated across all IFRC social platforms to help our audiences understand ways to protect themselves and their loved ones, as well as showing the different aspects of the Red Cross Red Crescent response. Follow these links for more information:

- [Twitter](#) (click latest)<sup>5</sup>
- [How advice and design tackle the coronavirus](#)<sup>6</sup>
- [LinkedIn](#) – a live Q&A with IFRC Director of Health<sup>7</sup>
- [Facebook and Instagram](#)- National Society COVID-19 response<sup>8</sup>
- [Tik Tok videos](#) to address misinformation and stigma and mobilize adolescents and youth to be part of the solution

### Risk Communication and Community Engagement (RCCE)

RCCE work is focused on developing the tools for National Societies to prepare and respond to COVID19. The focus this week has been on the launch of the interagency ones developed by IFRC with UNICEF and WHO.

1. [A guide to preventing and addressing social stigma](#)
2. [Risk communication and community engagement: Guidance note \(version 2 Feb 2020\)](#)
3. [Key tips and discussion points for community workers, volunteers and community networks \(with messages and FAQ\) – \(version 23 Feb 2020\)](#)

An interagency template country strategy and assessment tool is drafted to be used by country teams for developing COVID19 RCCE plans and rolling out rapid assessment of people’s perceptions and beliefs.

All documents will continue to be available on the GO platform on a dedicated section of [Community Engagement Hub](#).

### Business Continuity Plans

Business Continuity Plans – considering that this could affect our collective Red Cross and Red Crescent ability to respond reinvigoration of BCP is essential. Rapid changes in the instructions around isolation and containment are taking place and the Red Cross and Red Crescent needs to be able to adapt quickly. The RCRC encourages to remain calm and rationale while adapting to local contextual changes.

## C. FUNDING UPDATE

[Donor response to the Appeal MDR00005](#)

## D. CONTACTS

*For further information, specifically related to this operation please contact:*

### Global Coordination Cell

Frido Herinckx	Operations Coordinator	RROps.GVA@ifrc.org +41 79 103 98 82
Tamar Gabay	Planning Monitoring Evaluation and Reporting	PMER.GVA@ifrc.org +44 7825 907 689
Benjamin Labit	Supply Logistics	SupplyCC.GVA@ifrc.org +33 61 632 5275
Hanne Eriksen	WHO liaison	WHOLiaison.GVA@ifrc.org +47 48 033 535
Gwen Eamer	Public Health in Emergencies	Gwen.Eamer@ifrc.org +41 79 217 33 37

- *IFRC Geneva Programme and Operations:*

<sup>5</sup> <http://bit.ly/2vnsPjz>

<sup>6</sup> <http://bit.ly/374ytUt>

<sup>7</sup> [https://www.linkedin.com/posts/ifrc\\_join-our-director-for-health-and-care-emanuele-activity-6631525752682741760-9Bwb](https://www.linkedin.com/posts/ifrc_join-our-director-for-health-and-care-emanuele-activity-6631525752682741760-9Bwb)

<sup>8</sup> <https://www.facebook.com/21976174279/posts/10157855178719280/>

*Nelson Castano, Operations Coordination Manager, Nelson.CASTANO@ifrc.org +41-22-730-4926  
Panu Saaristo, Emergency Health Team Leader, panu.saaristo@ifrc.org +41 79 217 3349*

- *For IFRC Resource Mobilization and Pledges support:  
Diana Ongiti, Emergency Appeals and Marketing Sr. Officer, diana.ongiti@ifrc.org +41 22 730 4223*
- *IFRC Communications  
Laura Ngo-Fontaine, Media and Advocacy Sr. Officer, laura.ngofontaine@ifrc.org +41 79 570 4418*
- *For In-Kind donations and Mobilization table support:  
Operational Logistics, Procurement & Supply Chain Management: Siokkun Jang, Regional Logistic Manager,  
SIOKKUN.JANG@ifrc.org +60 3 9207 5752*