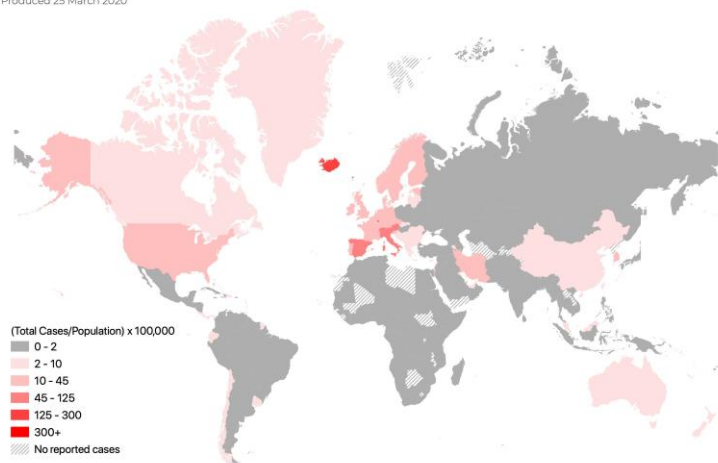


Situation Update*

416,686 COVID-19 confirmed cases
196 Countries, territories and areas

COVID-19 Global View
Produced 25 March 2020



This map does not imply the expression of any opinion on the part of the International Federation of the Red Cross and Red Crescent Societies or National Societies concerning the legal status of a territory or of its authorities. Produced by GIS (2020).

Funding**

150,000,000 CHF Required

22% **8%** **70%**

■ Hard pledges ■ Soft pledges ■ Funding gap



*Number of cases and countries as reported by WHO 25 March 18:00 (GMT+1)

**Funding gap calculated after factoring-in soft pledges as well as hard pledges.

National Society Response

118/192 National Societies reporting. Engaged in...

92

Health

93

RCCE

87

Institutional
Readiness

Number of National Societies engaged in selected activities:

Health:

- 41** Screening and contact tracing
- 54** Psychosocial Support
- 39** Clinical, paramedical, or homecare services
- 38** Emergency social services for quarantined individuals

Risk Communications & Community Engagement (RCCE):

- 58** Misinformation management
- 38** Community feedback mechanism
- 40** Stigma prevention messaging

Institutional Readiness:

- 52** Contingency Planning
- 32** Business Continuity Planning
- 64** Internal Risk Communications

Useful Links

Health

- Technical guidance available on [GO](#)
- New Mental Health and Psychosocial Support (MHPSS) guidance available [here](#)

Risk Communication and Community Engagement (RCCE)

- Guidance and tools available in multiple languages on the [GO Platform](#) and [Community Engagement Hub](#)
- [Key Messages and Actions for COVID-19 Prevention and Control in Schools](#) by IFRC, WHO and UNICEF

[Click here](#) for the detailed up-to-date information on the situation and guidance documents on [go.ifrc.org](#).

The latest WHO sit-reps available [here](#) and visualization and case numbers [here](#)

OPERATIONAL UPDATE

The Revised Emergency Appeal (26 March 2020) is available [here](#).

The Emergency Plans of Actions for COVID-19 operation are available [here](#).

Red Cross and Red Crescent activities globally

Health and Care

The IFRC, in close collaboration with global and local health partners, continues to provide risk assessment and guidance to support National Societies to implement high-quality, effective and appropriate epidemic response; mental health and psychosocial support; clinical and paramedical services in support of COVID-19 cases; social support to people affected by epidemic containment measures; and activities to maintain access to essential health services at the community level. IFRC is engaging with humanitarian partners to further develop strategies for the most vulnerable communities, including those in fragile and complex settings. Together with National Societies and Reference Centres, including the PSS Reference Centre, it is also integrating new approaches that can address both direct and indirect secondary negative impacts on the health and wellbeing of affected communities, such as supporting health systems, where Red Cross Red Crescent volunteers play a critical role as health extension workers, health promoters, and provide referrals for critical services. IFRC keeps coordination various internal thematic groups which allow regions and National Societies to share experiences, discuss challenges and share resources.

Risk Communication and Community Engagement (RCCE)

Over the course of this week, IFRC, in coordination with the RCCE Core Group (WHO, UNICEF) has finalized the COVID19-[Global RCCE response](#) strategy and currently in preparations for official launching.

A new [Tips for Using Social Media guidance](#) has been produced and updated to the RCCE resources document. The guide contains quick recommendations for NSs on how to listen, track and respond to audiences about COVID-19 using social media channels.

IFRC work continues towards ensuring communities can uptake individual responsibility and social solidarity to stop the spread of the epidemic. A Community Action Guidance is being finalized in collaboration with WHO and UNICEF to provide individual and collective actions to slow down the epidemic and alleviate stretched health systems.

IFRC is currently designing an RCCE Rapid training package targeting NSs, Branches staff and volunteers and will be rolled up under both a face-to-face and online modality. The package contains a 1-day succinct overview on RCCE during COVID19 and an additional battery of deep-dive modules on other RCCE core topics.

All COVID-19 guidance material for National Societies is on GO Platform or FedNet COVID-19 page <https://fednet.ifrc.org/en/resources/health/coronavirus-covid-19/> All finalized RCCE material is on the Community Engagement Hub <https://www.communityengagementhub.org/what-we-do/novel-coronavirus/page/1/>

National Society preparedness (incl. Business Continuity Planning)

Follow up calls with all 5 regions took place to establish a regular dialogue on National Society preparedness, and to capture feedback on existing guidance, including the COVID-19 outbreak Guidance note for National Societies [EN](#), the Preparedness for Effective Response considerations for epidemics [EN](#), business continuity and contingency planning, [country profiles](#) linking available information about risk and capacity in each country and the "global footprint survey" monitoring NS activities.

Work on setting up a support Hotline for Business continuity planning jointly with the IFRC Global Disaster preparedness center (GDPC - hosted by American RC), has taken up to be ready to launch it by 28 March. A dedicated landing site with FAQ and support materials will support National Societies to ensure the ability the continuation of essential humanitarian services in their national and local context.

Guidance was developed for National Societies to discuss legal questions to facilitate their humanitarian access for preparedness and response to COVID-19 with their national authorities.

Global Rapid Response

A total of 39 people are deployed or in the pipeline to be deployed. In the last 2 weeks, there has been an increase in remote support due to new and existing travel restrictions. In order to facilitate the remote support engagement of rapid response personnel and alignment of the requests several documents have been disseminated (and are currently available in [Go Platform](#)):

1. The Remote Rapid Response Guidelines, with basic principles on how the IFRC will request, select and manage this type of support, as well as a checklist to guide the decision-making process between a remote activation or an in-country deployment.
2. Remote Working Best practices: with general concepts and tools that can make the experience more successful.
3. A remote Team Coordination Checklist, adapted from SIMS colleagues who are experienced in providing remote support.

With regards to the Global rapid response network, initial steps have been taken to ensure continuity of the services. These have been:

- Initial ERU capacity mapping.
- Rapid response capacity mapping with the sending National Societies.
- Request for availability to the HEOps certified pool.
- Request to the IFRC Regions to map their capacities including the NS in their Regions.

Results from the mappings indicate that that most of our collective health response capacities and logistics capacities are heavily involved in the domestic response. Regardless of that, all National Societies are still open to provide support as needed, yet travel restrictions pose a significant challenge in that aspect.

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 IFRC's COVID-19 response are available [here](#).

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* was hosted in Arabic and French by IFRC MENA region, WHO, BBC Media Action and Internews to answer journalists' questions and share online resources to keep people safe and informed. More than 75 journalists from the MENA region participated.

Cross media assets for all National Societies have been created and are communicated across all IFRC social platforms, as part of the collective risk communication effort, 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. A new set of infographics reflect our call for action for people to learn, act and help and #StayHome. Social media highlights including: [Twitter](#), [TikTok videos](#), [USA Today opinion piece with IFRC President](#), [Facebook: National Societies activities around the world](#), [Be KIND](#), [Terrible news of the death of Italian Red Cross volunteer](#), [Instagram: News of the death of the Italian Red Cross volunteer](#), [LinkedIn Be KIND](#)

Update from COVID-19 actions in the European Union (EU) through the Red Cross EU Office in Brussels

- 1. Joint procurement of personal protective equipment for the EU proves successful:** In total 25 EU Member States have taken part in the joint procurement of personal protective equipment. Producers have made offers covering and, in some cases, even exceeding the quantities requested by the EU Member States that take part in the procurement, for every single item requested. The **joint procurement covers masks type 2 and 3, gloves, goggles, face-shields, surgical masks and overalls**. The offers are being evaluated and contracts are expected to be signed in the following days. The equipment should be **available two weeks after the Member States sign the contracts** with the bidders, which they are expected to do very rapidly. Read more [here](#)
- 2. Practical guidance to ensure continuous flow of goods across Europe:** The Commission issued today new advice how to implement its [guidelines for border-management](#). Member States are requested to Member States are requested to designate, without delay, all the [relevant internal border-crossing points on the trans-European transport network \(TEN-T\)](#) as 'green lane' border crossings. The green lane border crossings should be open to all freight vehicles, whatever goods they are carrying. The Commission encourages Member States to set up safe passage transit corridors to allow private drivers and their passengers, such as [health and transport workers](#), as well as EU citizens being repatriated, regardless of their nationality, to directly pass with priority through the country in each necessary direction. More information [here](#).

Supply Chain

The market on Personal Protective Equipment (PPE) is still under strain, as demand is much higher to what can be produced at volume. IFRC logistics and supply chain specialists keep monitoring possibilities, assessing approaches and engaging stakeholders to source needed items. At the moment, one purchase order for around 3 million Swiss francs for National Societies in Asia-Pacific and MENA regions is in place, for basic PPE. And support is being provided to the rest of the regions as possible. However, the situation is fluid to the level that immediate action is needed whenever stock becomes available. To fulfil National Society needs, the team has put in place a two-fold approach:

- (a) on one hand, the simplification of administrative processes to allow access to goods on the market;
- (b) while ensuring quality through the work of a medical logistics expert who ensures all necessary quality standards are met.

An additional challenge is ensuring transport at volume for sourced material from many suppliers, and its efficient consolidation before arrival. The team is developing transport strategies working together with IFRC regions and logistics hubs (e.g.: Kuala Lumpur, Nairobi and Dubai) in KL Dubai, and actively looking for alternative tactics.

Disaster law

The IFRC has raised its concerns that many NSs are not mentioned in national emergency decrees and other measures adopted by national governments in recent days and are therefore not being granted exceptions to quarantines, curfews, or other movement restrictions. The IFRC secretariat Disaster Law program team is supporting NSs to request their governments for exception to the restrictions on movement. There will be joint statement by the IFRC-ICRC Presidents to request governments to maintain RCRC humanitarian access for essential life-saving work; asking for exceptions to the travel restrictions and lockdown measures in connection with humanitarian relief and assistance to vulnerable populations.

Civil and Military Relations

IFRC and ICRC established a guidance on the potential engagement of Military bodies in the current COVID 19 crisis; based on previous experiences, lessons learnt and reference documents (mainly the Draft RCRC Handbook for CMR) two documents have been prepared to guide the whole Red Cross Red Crescent Movement on Civil and Military Relations – CMR. These document are available upon request. The movement

also engages with the IASC on how the humanitarian community will be engaged with armed forces in the COVID 19.

Inter-agency coordination, COVID-19 and humanitarian operations

IFRC is working with the IASC (EDG & Principals) to support a collective approach to the COVID-19 crisis. IFRC is engaged in the WHO-led coordinated effort for a health response, and also an IASC plan which is looking at mitigating the impact of COVID-19 on already vulnerable populations in countries where there are on-going humanitarian operations. IFRC is actively engaged with the IASC community to ensure inter-agency plans are principled, complement the IFRC appeal document, and reflect operational modalities that are operationally effective: ensuring national and local actors are at the core of humanitarian operations and are engaged as equal partners, in particular paying attention to duty of care to all staff, consultants, and partners in the response. IFRC has also helped to structure the IASC plan around community engagement, feedback from communities on their needs, and ensuring operations relate to, and respond to the needs of crisis-affected and COVID-affected communities. IFRC's revised Emergency Appeal complements the IASC plan for the impact of COVID on existing humanitarian operations, and the WHO Strategic Preparedness and Response Plan for COVID operations.

Coordination

The first of a series of National Society membership interactions took place with over 60 Movement partners (in six languages). Chinese, Italian and Iranian National Societies updated on key lessons so far and peer-to-peer support between partners and the need for a unified movement approach. Key topics were: availability of PPE, equipment and weakness in the global supply chain; safety of volunteers & staff; (limited) availability of the RCRC rapid response system; Impact on non-COVID-19 programmes and activities and secondary impact during and after the pandemic including funding for humanitarian work that will require solidarity, support, coordination and cooperation and working jointly to avoid competition, duplication and fragmentation.

IFRC also keeps constant coordination with major international organizations across all levels, since the start of the outbreak. This includes WHO, UNICEF, IOM and members of the Global Outbreak Alert and Response Network (GOARN), and other institutions and humanitarian partners. A liaison focal point keeps close contact with WHO at the global level, to ensure clear information flow between the two organizations, to position the IFRC in WHO decision-making and to collaborate on all aspects of the response, including co-developing critical health guidance, and addressing procurement and supply challenges.

Through the last week, the Emergency Appeal was revised upward to 150 million Swiss francs, accounting for the secondary health and socio-economic needs that COVID-19 might bring forward. In this process, IFRC has engaged internal and external Movement partners worldwide. The revised Emergency Appeal is complementary to the UN Global Humanitarian Response Plan COVID-19 and it is linked to the Strategic Preparedness and Response (SPR) Appeal of the WHO, launched early February to support countries improve prevention and response; as well to the separate, but coordinated appeal to be launched by ICRC covering COVID-19 response activities and providing additional support to National Societies in conflict affected areas.

Red Cross and Red Crescent activities by region

ASIA PACIFIC	Regional Overview The IFRC Asia Pacific Regional Office (APRO) continues to provide guidance and coordination support to National Societies through five CCSTs and eight COs, with regular communications and coordination at all levels and through the weekly joint task force calls with the global headquarters in Geneva. APRO has been constantly monitoring the evolving situation in Asia and the Pacific and is actively keeping the region informed through the weekly meetings with COs and CCSTs. In the same manner, CCSTs and COs have been constantly updating the APRO on the progresses in-country for preparedness measures, trends in the
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number of confirmed cases, governmental actions, and activities being implemented or planned by National Societies. A Daily Report has also been implemented to track activities and statuses of Business Continuity Plans across the Asia Pacific region.

Logistics

With the successful sourcing of some Personal Protective Equipment (PPE) from suppliers, orders are being placed and processes are underway to ensure appropriate allocation to National Societies, consolidation, and delivery of the items. Specifically and in close collaboration with the Global logistics team,, for the Democratic Republic of Korea (DPR Korea), sourcing and procurement process are ongoing, and the items are expected to be ready by end of April 2020. However, such efforts are still being impeded by the global shortage of supplies and limitation of freight options for some countries, dissuading suppliers from committing to delivery schedules.

Livelihoods

With more countries enforcing home quarantine orders and with non-essential services being ordered to shut down, explorations are underway to assess the impact on the prolonged pandemic having an effect especially for the daily wage earners or ambulant vendors or labourers who have lost their jobs and have expended their savings to procure items for emergency needs. Provision of assistance by supporting livelihoods through building up the capacities of the communities and on enhancing their employable skills are being explored.

Migration

The IFRC APRO Regional offices continues to provide guidance and support to National Societies across the region on integrating the needs of migrants (including undocumented migrants), refugees and IDPS into COVID-19 preparedness and response. This includes:

- Ongoing regional migration and displacement trend and situation analysis, focusing on the specific needs and risks faced by migrants (especially irregular/undocumented migrants), refugees, stateless migrants and others on the move, including those in camp and camp-like settings (e.g. population movement operations and contexts).
- Guidance, support, communication and coordination with National Societies across the region – including through the migration focal points of the Asia Pacific Migration Network (APMN) platform.
- Developing and disseminating the IFRC Asia Pacific guidance on migration and displacement COVID-19 preparedness and response available [here](#) (second edition).
- On 5 March, hosting an AP Regional Webinar on migration and displacement with National Societies, Partner National Societies, IFRC and ICRC across the region.
- Sharing the new IASC Interim Guidance on COVID-19 Readiness and Response for Populations in Camps and Camp like Settings available [here](#). This guidance was jointly developed by IFRC, UNHCR, IOM and WHO.
- Promoting an integrated approach to migration and displacement, with relevant sectors including PGI, CEA, MHPSS and humanitarian diplomacy.
- Support for National Society country and community level preparedness and response actions – including migration and displacement analysis and assessments, integrating migrants into existing activities, implementing targeted activities and promoting coordination with relevant authorities, with a particular focus during this period on supporting Thai Red Cross Society in developing a response plan for migrants, and also supporting the Cox's Bazar PMO Scenario and Response Plan for COVID-19.
- Regular communication and coordination with Geneva Secretariat (migration team and Humanitarian Diplomacy team), IFRC technical sectors at the regional level, COs and CCSTs, including an IFRC global migration and displacement teleconference on 17 March, and IFRC global Humanitarian Diplomacy teleconference on migration and COVID-19 on 24 March.
- Promote cooperation between National Societies to enable sharing of best practices and lessons in real time, including scaling up of good practices, including ongoing documenting and sharing best practices across National Societies, with a view to further analysis and development of case studies.
- Coordination and liaison with communications colleagues to ensure that good practices of AP National Societies are promoted and shared to an external audience, including online media.

- Engage in key regional inter-agency cooperation and coordination mechanisms, including meetings of the Asia Pacific inter-agency group on Migration and COVID-19 (hosted by IOM).
- Movement coordination and cooperation at the regional level (with the ICRC Regional Migration Advisor) and at the CCST and CO level, especially on mutual areas including RFL, Immigration Detention and aspects of protection.

Afghan Red Crescent Society (ARCS)

With 79 confirmed COVID-19 cases in the country, the Ministry of Public Health (MoPH), with the support of WHO, has upgraded the capacity of its regional laboratory in Herat for the diagnosis of COVID-19. For the past few weeks, ARCS has continued to attend coordination meetings at various levels of governance and continues to conduct risk communications activities in targeted communities across all 34 provinces, including health promotion through household visits in the provinces of Panjshir and Herat. ARCS has also maintained the deployment of five mobile health teams (MHTs) for screening activities in the provinces of Nimroz, Balkh, Parwan, Paktika, and Kunduz, and is currently in discussions with MoPH and the ICRC to focus at hard-to-reach areas.

Bangladesh Red Crescent Society (BDRCS)

In support to the Directorate General of Health Services (DGHS) and the Health Ministry, BDRCS has deployed ten RCY volunteers from 23-24 March to disinfect mass gathering areas within seven hospitals in Dhaka city, provided support to risk communication efforts, and has augmented DGHS response services by providing an ambulance and driver for their operations. BDRCS and Red Cross Society of China (RCSC) have also agreed on collaborating efforts to tackle the COVID-19 pandemic through sharing of experiences and medical protocol, and through sharing these with the Directorate General of Health Services (DGHS) and Health Ministry. In total, the Health department has organized a total of nine COVID-19 awareness sessions with mid-wives and approximately 400 staff and volunteers. BDRCS has also installed six handwashing stations at NHQ for staffs and volunteers.

On 21 March, BDRCS distributed some food and household items to 44 people at the institutional quarantine facility in Gazipur and to three people in Dhaka hajj camp. The youth and volunteer department of BDRCS have distributed 500,000 leaflets on hygiene messages (hand washing practice and cough etiquette) through all 68 units of BDRCS, with the RCY volunteer teams distributing 3,000 leaflets daily at major bus and launch terminals including those at Mohakhali, Sayedabad, Sadarghat, Kamalapur, and Kurmitola (one of the major hospitals for official quarantine). The Holy Family Red Crescent Medical College Hospital (HFRCMH) has also completed its preparations for an isolation unit for RCY volunteers who will work in COVID-19 response. Holy Family Red Crescent Medical College Hospital (HFRCMH) is being supported to prepare one isolation unit for COVID-19 patients.

A number of initiatives have been undertaken in Cox's Bazar through Population Movement Operation (PMO) to reduce the risk of coronavirus. Actions and plans of the Health and WASH sectors include the training of Community Volunteers (CVs), deploying CVs to disseminate messages through door-to-door knocks in the camp area, and providing health facilities with PPE and hygiene items.

BDRCS has also been providing life-saving awareness messages through social media, with more than 210,000 followers on its Facebook page. On 22 March 2020, a Facebook live show was organized by BDRCS to spread COVID-19 awareness through key messages as well as a live question and answer session. By 24 March, more than 22,000 viewers have been reached.

Bhutan Red Cross Society (BRCS)



RCY volunteers conducting disinfection of public areas within hospitals in Dhaka city.

(Photo: BDRCS)

Since 15 February, BRCS has deployed 941 volunteers in intervals to support health screening conducted at the border gates, and on advocacy for preventive and healthy habits. BRCS has produced and disseminated IEC materials and engaged the general population through social media posts, have collected used dispensers for the refilling and free distribution of hand sanitizers, and are being part of advocacy programs and the distribution of PPEs in public areas, numbering 10,000 surgical facemask and 500 bottles of 50ml hand sanitizers.

Red Cross Society of China (RCSC)

As of 23 March, staff and volunteers from the Zhuzhou Branch of RCSC in Hunan Province have carried out epidemic prevention and disinfection in communities, covering an area of 1.8 million square meters. This is in addition to ongoing activities and services that include the continued operations of the Beijing Red Cross Emergency Response Center (999) emergency ambulance services, RCSC patient transport services, blood plasma donation, provision of psychosocial support to Red Cross branches in Hubei Province, and provision of specialist support and advice to the the Italian Red Cross, Iranian Red Crescent, and Iraqi Red Crescent.

Hong Kong branch of RCSC (HKRC)

As of 20 March, about 36,000 infection control kits have been distributed together with dissemination of health messages in collaboration with 250 community partners. These are estimated to benefit 45,000 vulnerable people by mid-April. Since January 2020, the HKRC has disseminated health and hygiene knowledge and provided psychological support to more than 2.6 million people, distributed more than 600,000 masks, provided more than 30,000 relief materials to quarantine centres, provided emergency support to more than 200 people under quarantine, and set up 24-hour access to psychological support services.

Cruz Vermelha de Timor-Leste (CVTL)

CVTL has signed the Memorandum of Understanding (MoU) with the Ministry of Health (MoH) in Timor Leste for COVID-19 operations in the country, has supported MoH in preparing quarantine sites at the Community Health Center in Vera Cruz Dili and isolation shelter at Tibar outside Dili, and has also been supporting the government in establishing quarantine tents at Mota-Ain bordering the area of Timor Leste and Nusa Tenggara Timur, Indonesia. An initial mobilization of 65 volunteers has been activated and they have been oriented on COVID-19 prevention and control measures. An outreach to schools has been planned.

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

DPRK RCS, in close collaboration with its key partners including the Emergency Anti-Epidemic Command, Ministry of Public Health and IFRC, has continued its collaborations to ensure the safe and swift delivery of medical items such as the reverse transcription polymerase chain reaction (RT-PCR) equipment, testing kits and reagent, infrared thermometer and PPE for health care facilities, considered crucial for the prevention of COVID-19. In response to the increasing risk of COVID-19 globally, the DPRK RCS, together with IFRC CO, are working hard to expand and scale up its current activities.



A DPRK RCS volunteer collecting community feedback through a household visit in Jangsan ri, Sinyang county, South Phyongan Province. **(Photo: DPRK RCS)**

Accordingly, the expansion and the revision of the current emergency plan of action (EPoA) is under discussion and the DPRK RCS will make sure that the key and crucial activities such as health, risk communication and community engagement (RCCE) and institutional readiness are strengthened in terms of quality and quantity, contributing to life-saving humanitarian and development work of the Red Cross. The procurement of the RT-PCR and its testing kits/reagents professional PPE kits has been delayed due to supply issues but will be shipped to DPRK once the procurement is completed.

Fiji Red Cross Society (FRCS)

As of 25 March, four COVID-positive cases have been detected; three in Lautoka, and one in Suva. With these, non-essential local and international travel have been discouraged, and mass gatherings of more than 20 people have been prohibited. The current focus of FRCS is on public health and hygiene messaging through social media, with planned mass media coverage to reach 72 per cent of the population, approximately 800,000 people to be reached through radio, television and print media. FRCS continues to be involved in coordination meetings with the Fijian Government and the Ministry of Health to identify areas of focus and has activated all 14 branches of FRCS.

Indian Red Cross Society (IRCS)

IRCS National Headquarters issued a letter to all State (28) and Union Territory (nine) Branches in India to form COVID-19 Response Teams of 50 trained volunteers in each unit. A list of 3,000 volunteers from the shortlisted high priority states was submitted to the Ministry of Health and Family Welfare Government of India as a back-up team is being readied to be mobilized - subject to the need by the Health Department in respective States. COVID-19 volunteer groups have been active in all states and union territories and IRCS has been coordinating the response regularly, including the raising of awareness, dissemination of hygiene messages, disinfection activities, health surveillance, and providing essential materials to the quarantine centre in close coordination with the Ministry of Health and Family Welfare Government of India.



Volunteers from the Tamil Nadu Branch of IRCS putting up a Corona Help Desk. **(Photo: IRCS)**

Japanese Red Cross Society (JRCS)

Due to the COVID-19 pandemic and after consultations with the International Olympic Committee (IOC), the Tokyo 2020 Olympics Games have been postponed till latest by the summer of 2021. In Japan, the government has indicated that a city-wide lockdown may become "the only option left" if various measures fail to slow down the rapid rise in the number of people infected with COVID-19. Faced with this possibility, JRCS is in the process of revising its Business Continuity Plans, and will activate the processes if needed.

For the JRCS, around 30 hospitals designated to specifically treat COVID-19 patients have continued their operations, and measures are continually being undertaken to prevent staff infections (one medical staff was infected with COVID-19). The JRCS has also initiated the MHPSS Task Force and has developed and distributed a picture-story guide concerning PSS and stigma to the general public.

The aim of this guide is to spread awareness of the other "infections" that COVID-19 brings: "disease", "Anxiety", and "stigma". The guide also explains the negative spiral of these "infections" and offers some recommendations for preventive measures. This guide will be uploaded on the JRCS web-site soon.

Malaysian Red Crescent Society (MRCS)

The Malaysian Red Crescent Society continues supporting the Ministry of Health by providing ambulance services in some regions of Malaysia with the deployment of one ambulance crew consisting of paramedics and volunteers to Selayang Hospital in Selangor to support the screening of patients, and one ambulance crew placed on standby to support screening operations at the National Audit Academy and Higher Education Leadership Academy at Bandar Enstek, Seremban in Negeri Sembilan.

With the support of the Ministry of Finance, Malaysian red Crescent Society has launched its #responsMALAYSIA initiative that aims to drive a nation-wide effort to optimize and distribute critical equipment/supplies to those who really need it in the fastest possible way through a [one-stop platform](#) for corporations and individuals to contribute towards the procurement of medical equipment & supplies to front-line personnel, and towards community outreach focusing on vulnerable groups.



Field deployment of MRCS for COVID-19 operations.
(Photo: MRCS).

Maldivian Red Crescent (MRC)

As a member of the Disaster Management Steering Committee, MRC has provided technical support to the National Emergency Operations Center (NEOC) with volunteers provided upon request as support to Contact Tracing Cluster of the NEOC and is leading the Planning and Multi Agency Coordination Cluster. MRC has also provided technical support in developing Male' City Response Plan, the Atoll Response Plan, and is supporting the Communication Cluster formed by the President's Office. MRC has also set up a Psychosocial Support Center providing PSS support to those in isolation and quarantine facilities, with a total of 36 volunteers reporting to the PSS center and ten fixed lines in operation. So far, PSS support has been provided to 470 people. Psychosocial First Aid (PFA) trainings have been conducted to build the capacity of volunteers and to increase the volunteer pool, and PFA trainings have also been conducted for the Rapid Response Teams deployed to collect samples, using online meeting platforms (Zoom). A total of 23 MRC Volunteers are also providing administrative support such as managing queue, registration and interpretation during consultations in Hdh Branch and Addu Branch in flu clinics.

MRC branches have also started information dissemination activities focused on migrants - this includes putting up posters in businesses (shops/offices/terminals) as well as the training of 68 volunteers and deployment of 19 migrant volunteers for information sharing at public spaces. Door to door awareness campaign was implemented till the first positive case was detected on 7 March. MRC worked with the President's Office and Health Protection Agency to finalize the outreach messages on COVID19 and ten volunteers of MRC were trained by the Health Protection Agency as facilitators to conduct awareness sessions on COVID19 focusing on migrant workers. So far, a total of 1,393 migrants have been reached through information sessions, and a total of 7,866 migrants have been reached through the outreach activities. These have been augmented by the use of vehicles with attached sound systems to give out awareness messages on COVID19 - the vehicles go around the city in the evening and night, broadcasting messages in Bengali, Hindi, Nepali, Dhivehi and English.

Micronesia Red Cross Society (MRCS)

Represented in the National Emergency Taskforce, the MRCS head office and state offices in the states of Chuuk, Kosrae and Yap have been actively engaged in community health and hygiene messaging. Activities that have been implemented to date include the installation of handwashing stations in public areas by the Yap and Kosrae chapters, distribution by the Pohnpei HQ of hygiene kits to the first quarantine case, and briefing by the HQ and State chapters for active volunteers on key messages and IEC materials to be distributed.

Myanmar Red Cross Society (MRCS)

With the confirmation of a positive case in the morning of 25 March, the total number of confirmed cases in Myanmar has increased to three – all were assessed to have been imported and not locally transmitted. In the past week, MRCS staff and volunteers continue to prepare communities through health education, information distribution, training on epidemic control for volunteers, psychosocial support, and distribution of hand sanitizers. MRCS's upcoming activities will reflect the latest development with newly confirmed cases and potential humanitarian needs that may arise, in close coordination with its partners.



MRCS volunteers advocating proper handwashing techniques. **(Photo: MRCS)**

MRCS is also supporting the Ministry of Health and Sports in carrying out surveillance, screening, contact tracing capability, support to quarantine or self-isolation, and home-based care, while MRCS branches are collaborating with local units of the MoHS. The ongoing activities also include health education, information distribution, training on epidemic control for volunteers, psychosocial support, distribution of hand sanitizers, and others. More information can be found [here](#). IFRC Myanmar Country Office is also working with MRCS to produce weekly updates on MRCS activities for humanitarian communities in Myanmar and globally. The updates can be found [here](#).

Nepal Red Cross Society (NRCS)

With the Government of Nepal sealing all borders with India and China and with a nation-wide lockdown imposed from 24 March onwards. NRCS has mobilized its volunteers and established help desks with thermal scanners at border points with India across all 21 districts. NRCS has also developed a technical working group for COVID-19 response and prevention with representatives from NRCS, IFRC and Partnering National Societies (PNS).

The IFRC Country Office, in consultation with in-country PNSs, has developed its Business Continuity Plan and is now facilitating in developing a BCP for the NRCS. As a precautionary measure, mandatory handwashing and thermal screening of all staffs, volunteers and visitors before entering Red Cross headquarter office has been implemented since 20 March. The need for social distancing has also led to NRCS starting orientation sessions for district level volunteers from 14 districts, advocating remote learning through online platforms like Skype. All 77 district chapters of NRCS have mobilized volunteers to conduct community level awareness raising events, with some district chapters having installed hand washing facilities (water tank with soap) in public places.



NRCS has also maintained an active presence online and in mass media – a Facebook post related to COVID-19 in the NRCS Facebook page reached a total of 124,000 people and received 5,100 reactions and 700 shares. Through its COVID-19 hotline, 201 calls were received for queries related to the corona virus. Eight episodes of NRCS radio programme on coronavirus have been produced and aired through different FM radio channels.

NRCS volunteers manning a Help Desk at a border point. **(Photo: NRCS)**

Pakistan Red Crescent Society (PRCS)

On request of Health Department Baluchistan, PRCS Health team along with ambulance service were deployed at the Chaman Border, where 30,000 people were screened before the border was sealed. Similarly, on request of the Government of Khyber Paktunkhwa, Health department teams with volunteers

were deployed at two railway stations in Peshawar, screening more than 500 people. In the meantime, the PRCS Corona Crisis Management Unit is being established at NHQ, Islamabad, and the PRCS Virtual Call Center established at NHQ will be operational from 25 March onward with support of Ufone, providing COVID-related guidance to the public through a toll-free Helpline.

The National Institute of Health has also carried out sessions to train PRCS volunteers and drivers on the proper use of face masks, gloves and the Corona prevention kit, and PPE was distributed to staff operating from the PRCS Hospital in Hyderabad. Soaps were also distributed amongst the public in Quetta while hygiene kits were distributed to people in Gilgit.

Philippines Red Cross (PRC)

On 21 March, in response to the increasing number of COVID-19 cases and to act on the request from the National Kidney and Transplant Institute, PRC have setup a medical field tent outside the hospital. The medical tent can accommodate 10 people who are suspected to be affected by the virus. There are other requests under review. PRC is planning to mobilize other batches of medical tents to hospitals based on DOH requests for additional support.

On 24 March, Senate Bill 1418, entitled "Bayanihan to Heal As One Act of 2020" was approved, authorizing the President to "engage the services of the Philippine Red Cross as the primary humanitarian agency that is auxiliary to the government in giving aid to the people, subject to reimbursement, in the distribution of goods and services in the fight against COVID-19."



PRC distributing surgical masks to various hospitals in Metro Manila. **(Photo: PRC)**

So far, PRC has provided 20,000 surgical masks and 2,000 sets of Personal Protective Equipment (PPE) to the Philippine General Hospital (PGH), in addition to an earlier donation of 5,000 surgical masks. These supplies are expected to sustain projected consumption rates of up to 36 days, and will be distributed to doctors, nurses, medical technicians, sanitary technicians, interns and all other front-liners. In total, 74,500 surgical masks have been distributed across 11 hospitals in Metro Manila. PRC continues to have an emergency procurement of PPE from the local market. PRC also given masks to front-liners in the DFA-Office of Consular Affairs, Bureau of Customs, LGU hospitals in NCR (Manila Hospital, Tondo, Sampaloc, Gat Andres, Jose Abad Santos) and in Sorsogon. PRC also sent masks to local chapters in the Red Cross nationwide. In addition, PRC distributed face masks and information regarding COVID-19 to Overseas Foreign Workers (OFWs) leaving for Hong Kong and Macau, reaching 5,539 individuals.

PRC local chapters have also started supporting their respective local government units during their localized community quarantine. PRC Compostella Valley Chapter has assisted passengers and crew of the bus that was not allowed to enter their destination in Davao Region because of the quarantine. They set up tents with foam and mattresses, ensured water supply, and helped with medical needs of the affected passengers and crew. Hand washing stations with hygiene promotion visuals have also been put up in Cebu and in Misamis Oriental Chapters. Cagayan Chapter assisted in the manning of checkpoints by checking temperature of motorists and distributing mask to frontlines. PRC also distributed hot meals to the people currently sheltered in the Dela Salle University.

PRC continues to mainstream COVID-19 competency throughout HQ and its 104 Chapters reaching out to staff and volunteers. PRC is using all opportunities in its emergency operations to inform and train chapters across the country on COVID-19 awareness raising and prevention. For PRC Business Continuity Plan, PRC has established a COVID19 management team. A guideline has been developed around the workplace set up for staff, ensuring that PRC maintains a minimum operating workforce, and that relocation plans have been considered.

In terms of ambulance services, PRC are built into the protocols for the Department of Health ambulance call out – PRC have set up dedicated ambulances to transport positive or potentially positive cases – front line PPE, etc. PRC is supporting patients who have recovered to leave hospital. Most of the COVID-19 cases are walk-ins patients. But due to the quarantine and lack of public transportation, an increased frequency of calls is expected. PRC is upgrading its ambulance fleet to provide negative pressure systems to transport COVID-19 patients. In support of and using the same algorithms as the DOH, PRC has also set up a call center hotline specifically for addressing concerns towards COVID-19 concern. Red Cross Youth and Volunteers were trained as call takers and a volunteer doctor is rostered to support these operations.

Papua New Guinea Red Cross Society (PNG RCS)

While there has been only one confirmed case reported so far, as of 23 March, there is a total of 6,222 persons of interest (travelling from major infected areas), of which 1,684 have yet to complete 14 days of quarantine. Out of 32 persons under investigation, 18 have tested negative, one tested positive (Lae patient) and the rest are in progress. PNG RCS has procured handwash solutions, sanitizers, soaps, masks etc. for staff and volunteers to be involved in awareness/preparedness training. Printing of IEC materials translated in local language is in progress. Due to the declaration of a state of emergency and lockdown, delays in various activities are expected. Staff and volunteers will be briefed on 28 March on the essentials of communicating awareness/preparedness messages in the capital city and other provinces of priority.

Samoa Red Cross Society (SRCS)

Represented in the Disaster Advisory Committee (DAC) that provides advice to the cabinet on COVID-19 preparedness and response actions, SRCS has been focusing on health and hygiene messaging through social media. With a ban on all international nationals except for returning citizens with a mandatory five-day medical clearance before entering the country, and with the cessation of public gatherings of five or more people, SRCS is supporting the wider Samoan community to set up “quarantine space or room” in their homes to isolate suspected cases and referral process through the health and community sector.

Solomon Islands Red Cross Society (SIRCS)

The SIRCS Emergency Operation Team (EOC) and all branches of the SIRCS have been activated and are working closely with the Government and Health Offices. COVID-19 preparedness and response training were facilitated by IFRC Health delegate for staff and 16 volunteers of SIRCS, and SIRCS volunteers are providing support to the Ministry of Health in community health and hygiene messaging and tracking.

Sri Lanka Red Cross Society (SLRCS)

Misinformation has reportedly been circulating in the country that medical masks are essential to the prevention of COVID-19, hence SLRCS has coordinated with the Ministry of Health (MoH) to initiate a national level medical masks campaign that highlighted who needs to wear masks, proper mask-wearing techniques and their proper disposal. These are augmented by the continued implementation of community awareness-raising programs by volunteers in the distribution of IEC materials such as posters, tri-folds and bus stickers; and establishing washing points at critical locations.

Internally to assuage concerns for staff care, online psychosocial support has been ensured via emails and phone calls, daily reminders and messages sent on essential panic management, self-care, stress management, along with maintaining social links while keeping the physical distance. These are also complimented with daily security updates prepared by SLRCS and are being disseminated to all headquarters and branch staff with WhatsApp groups formed to disseminate emergency information sharing. The remote work environment has also led to some changes, like the establishment of online PFA training via distance learning, referring to the IFRC reference centre for PSS guidelines and materials, and First-Aiders have been informed on changes to triaging due to the COVID-19 concerns.



Community awareness campaign via distribution of IEC materials prepared by IFRC translated to local languages.

SLRCS has also remained active in its social media campaign for COVID-19, sharing SLRCS activities on the ground and information regarding proper use of face masks, how to act when the curfew is lifted, daily updates of COVID-19 cases in Sri Lanka, and stay-at-home messages in all three languages.

Thai Red Cross Society (TRCS)

King Chulalongkorn Memorial Hospital (KCMH), under TRCS, is one of the hospitals in Thailand that can test or confirm cases of COVID-19. During the period from 1 February to 23 March, there has been a total of 5,318 people screened at KCMH, 2,427 people transferred to Emerging Infectious Diseases (EID) clinic for further treatment, 257 persons under investigation (PUI), and 71 confirmed cases of COVID-19. KCMH has been collaborating with a nearby hotel to be used as an "isolation unit" for COVID-19 convalescent patients in order to prevent further infection and reduce congestion within the hospital. Some non-medical services (i.e. Snake Farm, Red Cross Museum and Archive) have been closed, and a "Work From Home" scheme for non-medical staff has been implemented as a preventive measure to reduce risks of virus transmissions. KCMH has also called for public donation of N95 masks for medical personnel as the stock is getting critically low, and KCMH has provided health insurance specifically for COVID-19 for all staff at all levels for one year. Collaborations with private companies like Line have also been formed to raise funds for operations.

On 20 March, the Provincial Red Cross Chapter of Yala distributed masks to the patients going to Yala hospital as a preventive measure. On 24 March, Health Station No. 1 Surin together with medical staff from Surin Hospital provided information on COVID-19, proper handwashing techniques, and proper use of face masks to those working at Surin Town Hall, together with temperature screening and alcohol gel distribution at the entrance of the meeting room. TRCS has been disseminating information on preventive measures and COVID-19 produced by TRCS, MoPH and other organizations on their social media, spanning topics from how to take care of the elderly, what social distancing means, self-evaluation on risks of contracting COVID-19, and what people living with HIV need to know about COVID-19.

Due to the COVID-19 situation in Thailand, the number of blood donors across the country has continued to decline, and some mobile blood donation units in certain areas have been cancelled for safety reasons, leading to severe blood shortage in the National Blood Centre. TRCS has been advocating the public to donate blood by all means, and has been implementing preventive measures inside the building to ensure safety for blood donors, re-scheduling the mobile blood donation units, and inviting the general public on social media and mass media. TRCS Red Cross Youth Volunteers have also released a music video on COVID-19 called "[Aware But No Scare](#)" explaining how to protect yourself from COVID-19. TRCS has released a [video](#) on COVID-19 and on the "Phonpai" application, developed by TRCS in collaboration with several government agencies, with support from IFRC and USAID-OFDA, and used to locate people at risk.

Tuvalu Red Cross Society (TRCS)

The TRC Secretary General is part of the Government COVID-19 Task Force that advises cabinet. With a State of Emergency having been declared by the Tuvalu government, all returning nationals will be quarantined in a health facility for 14 days. Currently, all volunteers interested in taking part in the COVID-19 response have been briefed, and an awareness session and refresher training on Epidemic Control for Volunteers (ECV) and WASH have been conducted for staff and volunteers.

Focus Story of the Week: Korean Red Cross (KNRC)

When the Republic of Korea (RoK) was reaching the stage of community transmission of the COVID-19, disinfection activities of facilities and communities (more vulnerable of exposure to the virus) were required to be done in wider areas, but a safer way to do so had to be developed.



Drone Disinfection of Open Areas



Faced with a challenging situation of having to disinfect large areas while still being mindful of the high transmissibility of COVID-19, an innovative approach in using drones not only accomplished the task more effortlessly and in lesser time, but broadened KNRC's perspectives on future applications of drones in humanitarian response operations. **(Photo: KNRC)**

After brainstorming on this predicament, Korean Red Cross volunteers who were involved in disinfection activities through the community-based WASH programs as part of the COVID-19 containment efforts, came up with an innovative way of delivering the disinfectants. Considering the specific nature of infectious diseases - hard to identify contaminated spots and the high transmissibility of COVID-19 - the volunteers in Daegu Chapter used a drone to carry out remote disinfection over some areas. It was found that this distancing operation of the disinfection allowed operators to reach a wider range of infected areas with the same time spent previously.

While this practice can currently only be applied in open areas and cannot be conveniently employed in the inside of buildings or facilities yet, the experience yielded more possibilities and potentials in attempting this new approach of using a drone as a practical tool for responses to COVID-19.

The COVID-19 pandemic is seen as one of the most contagious viruses that has ever been experienced globally. Even so, RoK has had many lessons learnt from the MERS outbreak in 2015 for the government, private sectors (biotech industry in particular) and the civil society. As such, based on these past experiences and findings during the MERS outbreak, KNRC initiated a psychosocial support intervention to those under self-quarantine and also distributed relief goods including Personal Protective Equipment (PPE) to them.



During the MERS outbreak operation, KNRC did not have any relief items customized for infectious diseases or self-isolated people. Learning from this past experience, KNRC was able to prepare items specifically for those affected by the infectious disease.

KNRC volunteers packing relief items in a systematic and efficient manner. **(Photo: KNRC)**



KNRC volunteer delivering relief items to affected people. **(Photo: KNRC)**

COVID-19 created another opportunity for KNRC to partner with relevant government authorities and demonstrated the ability to play a strong auxiliary role to the government by using KNRC's global and local networks.

Locally, six Red Cross hospitals have been operating as triage centers from the beginning to take samples from those who showed COVID-19 symptoms and are considered suspected cases. In addition, three Red Cross hospitals were also re-designated as exclusive hospitals to treat infected patients equipped with low pressure rooms.

KNRC volunteers, trained in the packing and delivery of relief items to people affected, were mobilized immediately after receiving the requests from the government.

As KNRC is seen as one of the most trusted partners working with the government and local authorities, KNRC was designated as an official channel for receiving public donations domestically and internationally. As the Ministry of Foreign Affairs requested the KNRC HQ to coordinate all incoming goods from abroad, the humanitarian goods were allowed to be distributed to the people, facilities and hospitals through the fastest channels in terms of tax exemptions and custom clearances. The Daegu Metropolitan City has also requested the Daegu Chapter to manage all incoming donations on their behalf and Daegu Chapter is currently preparing an integrated plan for the use of funds in close coordination with the city.



Designated as the official channel for receiving in-kind donations, KNRC has been managing the logistical process and distribution activities, and is coordinating with city officials on future plans. **(Photo: KNRC)**

AFRICA

Regional Overview

WHO reports 1,297 confirmed cases in AfRO on 25 March 2020, which is a 81% increase from 23 March. South Africa reported the most number of cases at 554, followed by Burkini Faso at 114, Senegal at 86, Cameroon at 66, Cote D'Ivoire at 73 and Ghana at 53. These 6 countries account for 73% of the infection in the AfRO. Deaths have been reported in Burkini Faso, Ghana, DRC, and Gabon. Analysis from the Africa CDC shows that the trajectory of the epidemic in Africa has surpassed that seen in Europe in the first 30 days. WHO is emphasizing that all actors need to scale up interventions (early detection, contact tracing, isolation and quarantine, risk communication and community engagement) to change this trajectory by seizing the little window of opportunity left to prevent getting into a sustained community transmission phase that could lead to an imminent catastrophe.

Some of the key activities undertaken at the Regional level includes:

- All African NS's requesting funds from first round of funding for Africa from the global appeal have been prepared by NSs under the guidance of CCST Focal Persons and in close cooperation with the RO Nairobi.
- NS activities in first round of funds focus primarily on RCCE and health/hygiene promotion activities, especially awareness raising on modes and methods of transmission and in some

countries contact tracing, depending on needs and in coordination with national government response.

- Overall funding envelope from first round of funds for Africa under the global appeal approved on basis of NS submissions; some countries have begun implementing activities (eg. South Africa)
- Over 1 Million CHF have been granted to 43 countries, especially least developed countries. :
- Finalization of Country Plans and release of funds to majority of countries to taking place beginning this week.
- Rapid Response Surge personnel have been integrated to the operation at Regional and Cluster levels to assure operational coordination with CCST. This includes Business Continuity Planning focal point, who is working with NS's and CCSTs to develop and implement business continuity plans.
- Mapping of comprehensive NS capacities and Movement external coordination structures is in progress.
- Weekly movement coordination meetings taking place involving ICRC, IFRC, National Societies and Partner National Societies active in Africa, to coordinate Movement responses and emphasize need to build on existing programs and capacities of NS's, not introduction of new skills areas.

Risk Communication and Community Engagement (RCCE)

National Societies across Africa have scaled up risk communication and community engagement efforts to help their country prepare for and prevent the spread of COVID-19. National Societies have been training volunteers, using social mobilization, radio shows, social media, journalist briefings, distributing posters, collecting community feedback and holding information sessions in schools and public places

IFRC Africa Region has shared a matrix of all available RCCE resources for COVID-19 for National Societies, including guidance for volunteers, guidance for running focus group discussions with communities and volunteers, tips for using social media, a radio show running order and RCCE Strategy for Africa that National Societies can use to help them plan. This document includes links to download all materials in multiple languages and will be updated regularly. Click here for the [English version & French version](#)

The first community feedback report has been compiled and includes feedback from 24 African National Societies.

IFRC is co-chairing the East and Southern Africa Interagency Technical Working Group for Risk Communication and Community Engagement with UNICEF, including leading the sub-working group looking at how feedback collected by different agencies across different countries can be collated, analysed and acted upon at the regional level. The Africa CEA team weekly COVID-19 coordination meeting took place and included a presentation on lessons learned on RCCE in DRC during the Ebola outbreak.

Contingency Plans and Business Continuity Plans: With the guidance from AfRO, many of the NSs are in the process of updating its COVID-19 Contingency Plans and BCP. The following 17 NSs have already activated their CPs; South Africa, Zambia, Malawi, Zimbabwe, Botswana and Lesotho, Tanzania, Uganda, Kenya, Seychelles, Mauritius, Madagascar, Angola, Botswana, Malawi, Zambia and Zimbabwe.

National level cooperation with UNICEF is reported from Malawi, for preparedness activities and in Cameroon for RCCE and social mobilisation.

Red Cross of Mozambique developed a COVID-19 Contingency Plan focusing its actions in three main areas- technical health support, RCCE and psychosocial support in all 11 provinces of the country. As of March 25, approximately 140 volunteers have been trained in partnership with IFRC (100) and ICRC (40) on prevention and control of COVID-19 in the remote communities of the country and bordering communities with South Africa. In close partnership with MoH and the Mozambican government's Media Department, the Red Cross of Mozambique has been intensifying its advocacy work on health promotion in public spaces, providing technical advice to different channels of communication and collecting community feedbacks as the numbers of confirmed cases are increasing in the country.

Niger Red Cross Society is responding to COVID-19 in line with the Ministry of Health preparedness and response plan. The NS deployed 10 volunteers at the Hamani Diori international Airport to screen incoming passengers, carry out sensitization on risk communication as well as providing hydro-alcoholic gel for hand disinfection. Further, 26 volunteers are deployed in the quarantine areas to regularly monitor the temperature of people who were in contact with confirmed cases. According to the MoH, Niger there are 55 people confined in quarantine in a hotel and 582 people in self-confinement in their respective residences.

South Africa Red Cross Society: With a six-fold increase of confirmed cases in week of 23 March, **SARCS** intensified the mass media driven awareness program on several TV and radio interviews. The Minister of Health acknowledged the contribution of SARCS in the fight against COVID-19 and her engagement with local authorities. With new hotspots emerging, 100 more volunteers were trained and engaged in Freestate and KwaZulu-Natal provinces. The SARCS, in collaboration with conducted awareness campaigns for the defense forces.

Zimbabwe Red Cross Society is conducting, in preparation for Covid-19, risk communication and community engagement trainings nationwide under the national disaster preparedness and management plan

The intervention in **Democratic Republic of Congo**, is an instance of mainstreaming COVID-19 into the existing IFRC of Epidemic Preparedness (CP3). The CP3 project supported the printing and distribution of COVID-19 IEC materials, capacity building of the existing CPs staff and volunteers (330) to integrate COVID-19 in the package of key messages delivered by volunteers. In the month of February 2020, the volunteers were able to reach out to 59,266 people in the CP3 targeted areas in DRC. Development of a rumours tracking system through WhatsApp of CP3 team members. The NS in DRC responded to a request from the government to conduct a Safe and Dignified Burial (SDB) to a COVID-19 death. Since there was not WHO guidelines on dead body management available at the time of death, the NS followed the Safe and Dignified Burials guidelines for Ebola. Once the WHO guidance was available on 24 March, guidance on dead body management is revised across the NS in Africa.

Cameroon Red Cross Society: A strategic movement coordination unit is meeting twice a week in Cameroon to discuss strategic issues and actions around COVID-19. Cameroon Red Cross Society printed 4000 posters and 20,000 flyers to support RCCE activities in the Far-Northern region with the financial support of IFRC- Swedish Red Cross. These activities are focusing on the IDPs.

THE AMERICAS

Regional Overview

The Americas Regional Office IFRC has activated its internal Emergency Operations Center (EOC) as of 9 March 2020. Coordination meetings are being scheduled from 9 to 11 am daily. Internal coordination meetings are being held to give IFRC Staff Health Guidance.

ARO IFRC Business Continuity Plan and Contingency Plan developed. Scenario Planning has been shared. Rapid Response Members deployed to Panama to support regional actions:

- Pandemic Preparedness
- Risk Communication
- Community Engagement and Accountability (CEA)
- Three rapid response Data visualization specialists

In addition:

- Disaster Managers are coordinating regional meetings with NSs per region.
- A global activity monitoring system has been developed. Information has been shared with NSs through official communication.
- A Rapid Response Preparation Alert for availability for potential deployment has been activated.
- ARO, through the Country Cluster Support Teams (CCSTs), is monitoring and assessing the situation and taking actions to help NSs prepare for the outbreak and manage risks.
- ARO has organized a coordination team, consisting of staff from the Disaster and Crisis Prevention Response, and Recovery Department (DCPRR), Health and Water, and Sanitation, Logistics, Finance,

Partnerships, and Resource Development, and Communication. The team has regular weekly meetings and teleconferences in English and Spanish to share updates on the epidemic with National Societies and IFRC groups.

- A group was opened in Teams Microsoft with content in Spanish and English, as well as a forum for National Societies to share questions and materials. You can request access to the group [here](#).
- A template for Contingency planning has been shared with NS and almost all NS have developed their plans.
- To this moment 24 National Societies have developed a contingency plan, 3 Partner National Societies are supporting COVID-19 response in the Americas across 4 countries and ICRC is also supporting 4 countries
- [Americas Region: COVID-19 Outbreak - Red Cross Movement Mapping and Funding Dashboard](#) developed by IM (link attached). The information is being updated continuously.
- The R4V Coordination Platform for refugees and migrants from Venezuela has shared [the "IFRC Guidance for National Societies working with migrants and displaced people – Americas"](#) produced by the Migration cell for the COVID-19 response.
- A Guide on Protection, Gender, and Inclusion and COVID-key messages and groups in vulnerable situations has been prepared in Spanish, and briefings have been held for coaching and mapping with regional PGI focal points. A campaign is being developed with Communications on PGI and COVID-19.

American Red Cross (ARC)

American Red Cross (ARC) - National operations summary:

- Continuity of essential services (blood services and disaster response services).
- Health, safety, and preparedness messaging to the public
- Support for quarantined families.

ARC supported government agencies to assist evacuees returning from China and providing relief items such as blankets, comfort kits, food, and children's toys to institutional partners managing quarantine facilities. ARC continues supplying blood products to hospitals and patients. ARC continues supporting the Global Appeal with two disaster response specialists: information management (IM) as SIMS coordinator and Communications and has offered additional support.

Canadian Red Cross (CRC)

The Canadian Red Cross (CRC) is supporting the Public Health Agency of Canada (PHAC) in the quarantine operations in for Canadian's evacuated from Wuhan and Japan Diamond Cruise Line ship. The PHAC requested support from the CRC of non-urgent clinical services on-site at the quarantine area in Trenton, Ontario and the CRC is mobilizing a customized Emergency Response Unit (ERU) mini-clinic for 14 days for a new group of Canadians that are being repatriated from the Grand Princess cruise ship. The ERU clinic will be demobilized between March 24th and 27th. The CRC, at the request of the Government of Canada, sent a team of 9 people to Japan to support Canadians being treated for COVID-19 in Japanese hospitals for the Princess Diamond Cruise ship. The remaining delegates returned to Canada on 17 March. At the request of the Government of Canada, CRC facilitated an in-kind donation of personal protective equipment (PPE) by the Government of Canada to the Red Cross Society of China and is supporting the return of Canadians from China. CRC launched a [national campaign](#) through its media resources to raise funds for the Red Cross Society of China's response to COVID-19.

Mexican Red Cross (MRC)

Mexican Red Cross (MRC) continues to conduct awareness campaigns in schools about prevention measures with hygiene promotion and sharing awareness material through social media. MRC continues to strengthen protection measures for doctors, nurses, and emergency medical technicians in the institution. MRCS permanently participates in the State's Health Committee. MRC Ambulances are being equipped to respond with equipment for respiratory diseases and follow a protocol when it is detected symptoms of COVID-2019.

Costa Rica Red Cross (CRRC)

Costa Rica Red Cross (CRRC) staff and volunteers in branches in all districts are receiving briefings on rumours and facts of the virus and patient care guidelines. Response protocol for patient care and pre-hospital services personnel updated. The National Directorate of Risk Management and Emergency Response (DINAGER) of the CRRC has distributed personal protective equipment (PPE) to the regions. The

CRRC is planning the purchase of additional PPE, video production, and social media communication for the population as well as audio messages for staff and volunteers. The National Health Bureau is coordinating with the health structures that have responsibility for the initial approach, care, and transfer of suspected and confirmed patients (Costa Rican Red Cross- CRRC, the Costa Rican Social Security Fund- CCSS, and the Ministry of Health). CRRC is working with the Ministry of Health, the CCSS, and the National Emergency Commission to track rumours and dissemination of information and prevention measures through mass and social media. The CRRC Emergency Operations Centre (EOC) was activated. Daily coordination meetings are held to coordinate preparedness and response actions. CRRC is an active member of the National Emergency Response Commission, providing crucial prehospital services.

Salvadorean Red Cross Society (SRCS)

The Salvadorean Red Cross Society (SRCS) participated in meetings with government authorities to provide guidelines to prevent the spread of the virus. A template for the collection of information was provided to departmental branches to systematize the actions carried out and joint activities with other institutions. SRCS staff and volunteers have been trained in disease prevention. SRCS continues to share prevention and hygiene promotion messages on social media. The SRCS donated 400 mats and 1,000 blankets to the 31 quarantine centers implemented by the State. SRCS is completing a proposal to provide psychosocial (PSS) services to the population in quarantine centers. SRCS, in coordination with civil protection, have shared prevention plans to municipal and departmental commissions. SRC printed hygiene promotion material (handwashing) and COVID19 facts in the migrant's home. SRC will provide alcohol gel for communities with high internal displacement rates.

Guatemalan Red Cross (GRC)

The GRC has set up an ambulance service at the international airport to transport potential cases to hospitals. Protocols have been established for the disinfection of ambulances transferring suspected cases. A tripartite Movement letter has been sent to the Presidency acknowledging the NS's work and requesting legal guarantees for the NS to support the national response. The GRC continues to coordinate actions with the Ministry of Health and the National Coordination for Disaster Reduction (CONRED). GRC continues with its communication campaign in mass and social media. GRC staff and volunteers have been trained on hygiene promotion and prevention. GRC is giving educational talks for adults and children on the use of hygiene kits distributed at return and transit centres, as well as using banners on the handwashing steps in all humanitarian migrant service posts and branches providing services to migrants. GRC continues to share information and teaching preventive measures in schools and plans to roll out an awareness-raising campaign in target communities where the friendly neighbourhood approach is used. GRC volunteers engaged in work with the migrant population will receive PPE and cleaning equipment will be provided to target branches. The Guatemalan Red Cross is providing PPE kits for staff and volunteers and cleaning equipment will be provided to target branches.

Honduran Red Cross (HRC)

The Honduran Red Cross (HRC) is participating in the Humanitarian Network (REDHUM). A tripartite Movement letter has been sent to the Presidency acknowledging the NS's work and requesting legal guarantees for the NS to support the national response. Peripheral campaigns with key messages about prevention have begun to be implemented by the NS in more than 500 priority communities in the Central District. 170 people from 50 of the 52 Departmental and Municipal Councils across the country have been trained (from 13 to 16 March). A group of 9 doctors and 10 psychologists have been selected and trained in the monitoring and the following up of cases at the institutional level. The HRC have set up hand washing facilitates in 4 cities. The HRC has kicked off a massive communication campaign targeting 500 communities through the dissemination of key messages using megaphones. HRC updated its protocols for diagnosis, management, surveillance and quarantine of cases in coordination with Pan-American Health Organization (PAHO) and the government. HRC actively participates in the National Health Committee. 20 HRC technicians specialized in emergencies and monitoring protocol for suspected cases are available to support State actions in hospital transfers. 21 HRC Branches have been trained in hygiene promotion and prevention. 100 protection kits have been distributed among the HRC Branches. HRC plans to roll out an awareness-raising campaign in target communities where the friendly neighborhood approach is used

Nicaraguan Red Cross (NRC)

The Nicaraguan Red Cross (NRC) protocol on prevention and protection measures has been socialized with staff at the central and branch offices. The NRC launched a communication campaign on protection measures directed at the general population. The NRC is providing pre-hospital care services, PPE for staff and volunteers, and support for institutional staff with suspected or confirmed cases. The NRC keeps monitoring the situation in close coordination with the Ministry of Health and prehospital services in place. NRC PSS focal points activated. Coordination is underway for the purchase of protection and hygiene kits for branches at border points. Simulations in case management carried out with the government. NRC is training of community networks in targeted municipalities and border entry points. NRC is giving educational talks in schools. 27 branches have been trained in prehospital services and 9 hospitals trained in case management and quarantine.

Red Cross Society of Panama (PRC)

The Red Cross Society of Panama (PRC) has started spreading of COVID-19 prevention and mitigation campaigns across social networks. The PRC has kicked off a massive communication campaign through the dissemination of messages of prevention and mitigation of COVID-19, requesting people to stay at home (in the provinces of Herrera; Veraguas; Coclé; Panamá Oeste; Panamá; Colón) using megaphones. At the request of the Ministry of Health, PRC volunteers are providing support at some of the control points of the epidemiological barriers (Colon; La Chorrera, Panama West; and Ocu, Herrera). PRC is an active participant in the National Action and national emergency operations centre. The PRC database of trained staff and volunteers was shared with the government for support, including planned quarantined areas in hospitals. PRC health personnel in contact with suspected cases were trained in the use of PPE and the handling of pre-hospital care material. The PRC with Emergency Appeal on Population Movement funds is providing:

- Primary health services with a team of doctors, nurses and breastfeeding technicians for the migrant population in La Peñita, Darién.
- Distribution of safe water, sanitation and hygiene promotion with key messages to the population and reinforcing handwashing messages.
- Distribution of hygiene kits, baby kits and materials.

Antigua and Barbuda Red Cross Society (ABRCS)

The Antigua and Barbuda Red Cross Society (ABRCS) Barbuda branch has set up handwashing stations using buckets. The ABRCS is planning a National Hand-Washing Day in partnership with the Ministry of Health. The ABRCS Society continues conducting school campaigns and distributing information through various businesses in the country. ABRCS continues sharing communication materials from the IFRC website and related technical guidance. ABRCS continues conducting awareness-raising activities that include using the materials in electronic billboards and adapting it to prepare parents to speak to their children about COVID-19.

Bahamas Red Cross (BRCS)

The Bahamas Red Cross Society (BRCS) published a hygiene promotion article in the Barbados Sunday Sun Newspaper. The BRCS received IFRC support to develop internal operating procedures for COVID-19. The BRCS attended government briefings/conferences of the situation. Ongoing coordination with MoH. Basic preventive measures were taken, and hand sanitizers, soaps were distributed to all IFRC teams working on the Hurricane Dorian response and BRCS premises. COVID-19 posters were printed and distributed within IFRC and BRCS. All regional and local meetings of more than five people have been cancelled, and teams are working remotely

Barbados Red Cross Society

The Barbados Red Cross Society (BRCS) has its Meals on Wheels programme active and has established supportive measures for its staff. The BRCS held a staff meeting to address concerns and had an open forum to share health and hygiene guidance, including the correct use of PPE. NS management will increase its supplies of soaps, paper towels, and hand sanitizers. The BRCS ramped up its community outreach by sharing materials with community groups. The Barbados Red Cross Society continues to work with the national response system to coordinate actions. The NS continue sharing information with its staff, volunteers, and reduced office administration hours and has instituted work from home.

Belize Red Cross Society

The Belize Red Cross has started a handwashing campaign. BRCS is preparing hygiene kits (with liquid hand soap, paper towel, hypochlorite, anti-bacterial towels, and gloves) for general distribution to vulnerable communities and people in quarantine. The BRCS maintained liaison with donors to identify funding support and participated in coordination meetings with the Ministries of Health and Education; UNICEF, PAHO, and civil protection. BRCS has provided jerrycans to education facilities for storage and distribution of water. BRCS reprinted IFRC posters and shared them with partners and plans to produce TV spots. The BRCS held a meeting with Ministry of Health to plan trainings with volunteers to share information with the elderly. The NS is partnering with UNICEF for PSS for children



Belize Red Cross (BRC) handwashing campaign. Source: BRC, March 2020.

Dominica Red Cross

The government solicited the assistance of the Dominica Red Cross (DRC) for the screening of people visiting the Dominica China Friendship Hospital. A shift system has been established to provide 24-Hour service, focus on the prevention of the spread of the virus from people admitted at the hospital. The DRC partnered with IsraAID to produce risk communication materials and to carry out community engagement/community activities. 987 posters have been printed, including some in Haitian Creole targeting residents of Dominica. All eight DRC branches were provided with posters for community engagement. The Government established a health hotline for COVID-19, providing the public with trusted information and taking reports on possible exposure to COVID-19. The DRC staff is providing support to government hotlines and distributing communication material at the Health Hotline Call Centre. Community outreach and CEA activities were carried out last week by the DRC in Roseau, Environs, and Portsmouth (Town). DRC awareness-raising session for volunteers and staff being facilitated by the Ministry of Health officials has been rescheduled due to the reported cases for this week. The session will be facilitated by an epidemiologist and an infection control nurse from the MOH. Dominica Red Cross continues working on educational awareness with informational posters placed in public areas and schools.

Grenada Red Cross Society (GRCS)

The Grenada Red Cross Society (GRCS) is attending the meetings of the Health Service Committee to plan the national response. GRCS has developed a guideline for staff and volunteers, based on IFRC guidance. The National Society continues to source PPE (face masks and hand sanitizers).

Guyana Red Cross Society

The Guyana Red Cross (GRC) has developed messages focused on people with disabilities. GRC has set up handwashing stations at the RC headquarter office and will set up one at a children's home. The GRC has its Meals on Wheels programme active, and staff is rotating shifts to provide daily meals to vulnerable groups. All GRC volunteers have been activated, trained, and are involved in the awareness-raising on prevention and are distributing risk communication material. The GRC holds information sessions with their volunteers, students, and the general public through social media. GRC is in direct contact with the Ministry of Public Health and has offered its support and volunteers to support the response in Guyana. In the frame of the Emergency Appeal on Population Movement, the GRC will continue to distribute hygiene promotion and distribution of hygiene items.

Jamaica Red Cross

The Jamaican Red Cross (JRC) was commended publicly by government authorities on the work done to assist the distribution of care packages to people in quarantine. JRC volunteers assisted with the delivery of over 500 food packages and 50 hygiene kits to members in a community that was recently quarantined following the death of a resident from COVID-19. The JRC has put on hold the production of care packages by the volunteers to establish measures to prevent the possible pilfering of items. The JRC continued sharing risk communication materials and activated its Emergency, Care, and Youth sections. JRC is attending planning meetings with the government and has prepared a proposal for the acquisition of hand sanitisers.

Saint Kitts and Nevis Red Cross Society

The St. Kitts and Nevis Red Cross (SKNRC) is working with the authorities on prevention and hygiene promotion campaigns. The SKNRC attends stakeholder briefings on COVID-19 with the Ministry of Health, Chief Medical Officer, and the National Disaster Office to coordinate the response mechanism. The SKNRC trained its volunteers in prevention and hygiene measures. The SKNRC continues to seek PSS support and volunteers on community-based health and first aid (CBHFA) and epidemic control.

Saint Lucia Red Cross

The St. Lucia Red Cross (SLRC) printed coronavirus risk reduction infographic and adjusted it to make bookmarks for students and adults. The SLRC planned a workshop on Epidemic Control for Volunteers (ECV). The SLRC is disseminating information and participates in meeting with NEMA and other stakeholders.

Saint Vincent and the Grenadines Red Cross

The St Vincent and Grenadines Red Cross (SVGRC) is collaborating with local authorities and telecommunications providers to set up virtual crisis centre for PSS. The NS is in communication with MOH and attending briefings. The NS has trained volunteers in personal prevention measures such as proper handwashing.

Suriname Red Cross

The Suriname Red Cross (SRC) volunteers are on standby to work with local authorities for logistical and administrative activities. The SRC volunteers assisted with the hotline service established by local authorities and the digitalization of information. Awareness sessions done for volunteers and staff.

Trinidad and Tobago Red Cross Society

The Trinidad & Tobago Red Cross Society (TTRCS) distributed 75 care packages to quarantined persons, and volunteers were available to provide PSS. TTRCS has launched its hotline service to provide PSS support. In the frame of the EA on Population Movement, the TTRC continues with health clinic services, procurement of health supplies, and equipment. There are discussions to include the distribution of hygiene kits and Cash and Vouchers Assistance (CVA) and to launch a virtual line to respond to the information needs of migrants. The TTRCS is sharing messages with sourcing updates in Spanish for migrant population as well as working on a colouring book for children on preventative actions and other information about the virus. The TTRCS president presented on a national TV station a reminder to the population on handwashing and practices of social distancing. The TTRCS is preparing care and PSS packages to distribute in the activities carried out.

Trinidad and Tobago Red Cross has launched a psychosocial support hotline to support people during the outbreak of COVID-19



Netherlands Red Cross overseas territories (Aruba, Bonaire, Curaçao, Saba, Sint Eustatius, and Sint Maarten)

COVID-19 specific activities by the Netherlands Red Cross overseas territories (Aruba, Bonaire, Curaçao, Saba, Sint Eustatius, and Sint Maarten):

- Risk communication and community engagement (development of flyers and radio/TV messages)
- Welfare and psychosocial support (including hotline/phone calls)

- Support to individual cases and groups in quarantine

Also, the following other actions are planned to be increased as part of the COVID19 response:

- Livelihoods and Basic Needs support
 - Distribution of food items
 - Distribution of non-food items (e.g. hygiene kits, jerrycans)
 - Cash based assistance (e.g. unconditional cash, food vouchers or telephone credit)
- Ensure effective disaster management and response
 - Staff and volunteer care (training, food and PSS for staff and volunteers)
- Human Resources
 - Migrant support (e.g. rent assistance)

PIRAC – French Red Cross on overseas territories (French Guiana, Martinique, Guadeloupe, St Martin, St Barthélemy)

French Red Cross on overseas territories - PIRAC is supporting the reception in airports and transportation of patients and providing information and guidance. It also is supporting collective centers for the care of positive cases and providing caretaker services at home/accompaniment of confirmed cases (non-critical and non-hospitalized). Information on personnel and volunteers is being updated and collected to mobilize them if needed.

Cuban Red Cross

Movement coordination is maintained for enhanced support to Cuban Red Cross (CRC) in its role for this response. The CRC initial preparedness and response plan has been designed to support the Cuban Red Cross considering the scarcity of goods available on the island based on past emergency response experiences. The Cuban RC continues to coordinate the response of the authorities at the community, municipal and provincial levels. Hygiene promotion, prevention, symptomatology and case referral messages are being shared with the population and in student centres. Ten members of Cuban RC operations and relief were mobilized to support community actions. CRC plans to provide PPE for the team, and the printing of handling material.

Dominican Red Cross

The Dominican Red Cross (DRC) is providing daily updates to staff and volunteers. Only essential staff are working at the headquarters and branches. The DRC is doing the follow-up and accompaniment by the Psychosocial Support team to the ambulance staff, and a hotline for PSS has been established to provide services. Virtual volunteering reporting focal points have been established in each branch, and volunteers are taking the Spanish Red Cross Virtual Volunteering course. The Dominican Red Cross continues strengthening its 911 ambulance service capacities through the implementation of protective measures for staff and public attended during interventions. Dominican Red Cross personnel continue to work in the Call Center established in the Emergency Operations Center (*462) providing attention to COVID-19. Specific COVID-19 protocols are being designed and implemented, in strong coordination with authorities and the Ministry of Health. DRC implements public awareness campaigns based on material made available by the Ministry of Health and the IFRC. Humanitarian diplomacy actions planned to support enhanced coordination between the Dominican Republic and Haiti.

Haiti Red Cross Society

Enhanced movement coordination to support the Haitian Red Cross (HRC) in strengthening and adapting its ambulance service to respond to surge the demands of a potential outbreak. The HRC is monitoring migration flows at unmonitored border points where there have been reports of mobilization of about 5,000 Haitians. A direct line of contact established between the President of the HRC and the Ministry of Health. The HRC created a working group/task force to enhance monitoring and preparedness. The task force is composed of HRC Senior staff and volunteers, as well as Movement partners. With the direct support of IFRC, the bi-national agreement has been activated to enhance support between Haiti and the Dominican Republic, through their respective National Societies. Activation of a humanitarian corridor to improve the procurement of items in the Dominican Republic.

Argentine Red Cross

The Government has asked the Argentine Red Cross (ARC) to provide support through a hotline and the 911 calls to orient the population at risk. The ARC shared through social network messages and recommendations for coping with stress during social isolation with children. The ARC continues to share prevention messages, focusing on recommendations to address isolation, including gender-based violence prevention issues. Due to government regulations on home isolation, the NS has established work from home for the population at risk and has also suspended regular volunteer activities and classes in institutions and first aid courses.

Bolivian Red Cross

BRC is working in coordination with the Ministry of Health through the National EOC for the COVID-19 platform and is also disseminating prevention key messages. The Ministry of Health has requested support from the NS to reinforce the call service for COVID-19 and support on border points.

Brazilian Red Cross

The Brazilian Red Cross (BRC) developed a Dashboard to provide to the Red Cross Movement and Brazilian public authorities with real-time monitoring of the overall panorama of the pandemic in Brazil, the number of volunteers mobilized nationally by SN, partners and financial resources raised and structure and resources materials available for NS's response to the pandemic. The BRC is working with the Ministry of Health on joint activities and dissemination of IFRC material in the media. The BRC and the International Committee of the Red Cross (ICRC) migration project has purchased 350 hygiene kits for the migrant population at risk of COVID-19.

Chilean Red Cross

The Chilean Red Cross (ChRC) jointly with the Migration Cell developed a specific Contingency Plan to support people in a situation of human mobility. ChRC has been providing services during public demonstrations. The ChRC is coordinating with the Emergency Operation Center, MoH working group and work plan. ChRC is reinforcing health systems, information, and preventive hygiene messages. Prevention measures and messages are being shared in border areas on IFRC material. ChRC is implementing TV spots and announcements on handwashing and hygiene promotion.

Masks have been distributed to ChRC personnel and volunteers. Precautionary measures are being taken, and protocols developed for social mobilization. Regular activities in branches have been suspended to support quarantine actions.

Colombian Red Cross Society

The Colombian Red Cross (CRC) Active lines for medical attention for advice and active lines for psychosocial support for volunteers and affected people. Through the virtual campus of the CRC, Basic First Aid and Basic Training COVID-19 courses have been created for staff, volunteers, and the general population. The following courses are being worked to strengthen the capacities of the volunteers and personnel: Safer Access, Medical Mission, and International Humanitarian Law. The CRC has developed Guidelines on the receipt of in-kind donations for the COVID19 situation. The CRC has activated a psychosocial helpline for the accompaniment and self-care of volunteers. The CRC has guided the branches on referral information because of the probable increase in cases of domestic violence and gender-based violence on COVID 19, and educational tools have been developed with a protection and prevention approach. CRC supported repatriation actions of Colombians abroad. Dissemination workshops have been held for 1,100 volunteers and staff, branch health directors and directives. Protective and preventive measures have been taken. Protective material purchased. CRC has a communications strategy in place, is strengthening handwashing measures, hygiene habits, and stigma reduction.

Ecuadorian Red Cross

The distribution of food kits at the northern and southern border will continue under the Regional Emergency Appeal on Population Movement. Other activities have been suspended due to movement restrictions. The ERC is managing the voluntary home blood donation and supply of heme components to different parts of the country. This activity is being carried out in coordination with the Fire Department and the Armed Forces for transportation by land or air if necessary. The ERC is providing support and advice for

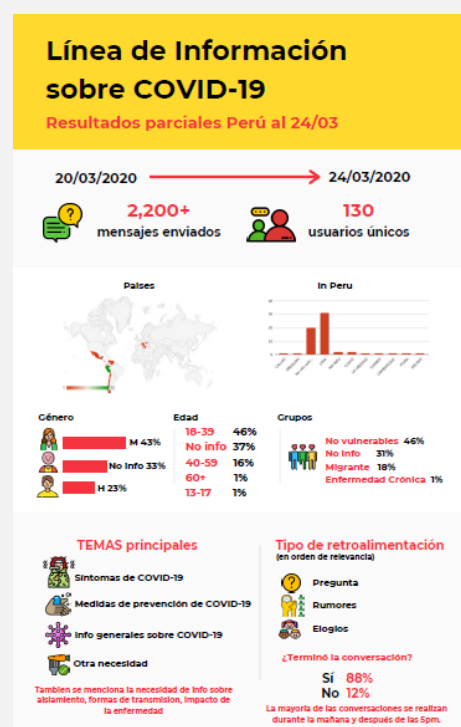
the dignified management of dead bodies. The NS is carrying out water, sanitation, and hygiene activities by requests from other key actors and is sending two mobile fumigation machines to Guayaquil and Santo Domingo; and a motorized fumigation machine to Santa Elena. The ERC is delivering humanitarian aid in shelters for people living on the streets, and that is moving. The ERC has developed and socialized guidelines for psychosocial support for care and self-care to different age groups during the quarantine. Also, it has begun implementing PSS teleassistance to provide accompaniment and support to people who require it. The ERC is sharing prevention and outreach information with the population, staff and volunteers.

Paraguayan Red Cross

The NS has been supporting health care centres with the installation of tents for triage support and support at border posts; personal protection equipment has been provided for volunteers. The Paraguayan Red Cross has been providing resources and personal protection equipment to its Maternal and Child Hospital in Asunción. Due to the declaration of a health emergency and the isolation of the population, regular activities have been suspended, and the personnel has been working from their homes. A Surge member was mobilized to provide care under the DREF Dengue Outbreak response and is providing support.

Peruvian Red Cross

The Peruvian Red Cross (PRC) jointly with the Migration Cell developed a specific Contingency Plan to support people in a situation of human mobility. PRC care posts have been reinforced with personal protective equipment. Border care services have been reduced, due to the decrease in demand. The humanitarian network has been activated, and the PRC is participating in the meetings and in meetings with the Movement. The PRC Whatsapp pilot has been launched to provide information on COVID-19. The PRC is conducting a social media campaign on the importance of hand washing, hygiene practices, and key preventative-promotional messages about COVID-19 in coordination with the Ministry of Health. Information has been provided to PRC health personnel working on migration, hygiene promotion, and self-care for personnel. PRC is participating in the inter-agency health committee, which is mapping of agency actions. Regular activities have been limited.



Uruguayan Red Cross

The Uruguayan Red Cross (URC) is holding meetings with government authorities to support the national response with the risk population: elderly, homeless, and shelter. URC is sharing prevention materials with branches and through social media, including a communications campaign to respond to rumours. The assistance under the Regional Emergency Appeal for migrants is maintained.

Venezuelan Red Cross

The Venezuelan Red Cross (VRC) distributed PPE to 15 branches, volunteers, and essential personnel. The NS is sharing information and hygiene promotion material and tracking rumours. Radio spots with national coverage are being produced. Current programmes and projects are including prevention information and sharing hygiene practices. With the declaration of emergency, emergency services are being continued at the level of the VRC's network of hospitals and health centres. Plan of Action developed including pillars of psychosocial support, communications, health care, and epidemiological surveillance. Promotion of key messages through social networks. Active participation in national meetings of health and WASH clusters. Building key messages for managing anxiety and preventing collective panic (PSS).

Regional Overview

IFRC Europe regional COVID-19 response team continued to provide technical support to the National Societies of the region. In this period 37 NSs of the region actively respond to COVID-19 related actions: Albania, Armenia, Austria, Azerbaijan, Belarus, Belgium, Bosnia and Herzegovina, Croatia, Denmark, Czech

Republic, France, Finland, Georgia, Germany, Greece, Iceland, Hungary, Italy, Kazakhstan, Kyrgyzstan, Luxemburg, MDA of Israel, Moldova, Netherlands, North Macedonia, Poland, Romania, Russia, Serbia, Slovenia, Spain, Sweden, Switzerland, Tajikistan, Turkmenistan, Turkey, Ukraine and Uzbekistan. Funds for Armenia, Azerbaijan, Belarus, Georgia, Italy, Kyrgyzstan, Moldova, North Macedonia and Ukraine as well as IFRC regional actions, have been allocated within the Global Emergency Appeal. IFRC Europe received funds requests for initial or additional support from the following NSs: Bosnia and Hercegovina, Czech Republic, Italy, Serbia, Poland, Romania and Turkey

IFRC Regional Health and Care/CEA team continued to organize and facilitate several thematic meetings: Risk communication and Community Engagement Call for more than 22 NSs, EMS online meeting and webinar on MDA experience on COVID response was organized and facilitated by MDA, Israel. Updated list of guidelines, materials and other COVID-19 materials distributed to all NSs in Europe. National Societies actively work in social media, sharing trustworthy and accurate information about the disease as well as reduce panic and misinformation related to COVID-19. Constant and regular communication with WHO at Europe Regional and countries level is ensured. Movement coordination with ICRC and other Movement partners has been established and maintained.

IFRC Europe Regional Team, including its country and regional offices as well as Global Service Center located in Budapest considered necessary actions on Business Continuity Plans, fully moved to distance work and other safety measures based on GVA team recommendations and measures introduced by Government of Hungary.

Country by country

Austrian Red Cross (AutRC)

On behalf of health authorities, more than 2,000 Covid-19 tests are being taken by AutRC mobile teams each day. 13 "Drive-Ins" and fixed screening stations have been established in the recent days, to deal with the growing number of needed tests. More than 4,500+ calls are managed on the public health telephone helpline in average on daily basis.

The duration for active civil servants was prolonged for 3 months and additional 1,400 former civil servants have been recruited on voluntary basis to support the EMS and other critical services for most vulnerable in the coming months.

AutRC created and started its online training for people who care for others and activated its streaming radio, started a neighborhood support initiative and is finalizing its new app called stop-corona-app to trace, inform, diagnose and interrupt the infection chain through a digital handshake procedure. AutRC, jointly with the MoH, is the leading organization for the country wide and international procurement of personal protective equipment.



Austria Red Cross volunteers provide EMS support. Photo: AutRC Facebook page

Bosnia and Herzegovina Red Cross

Organisations within Red Cross structure in Bosnia and Herzegovina have been involved in COVID-19 response at different levels by providing public awareness and working closely with their respective local authorities on preparedness activities. Red cross of Federation of Bosnia and Herzegovina have opened

phone line for PSS for affected population. Red cross of Brčko district is providing ambulance transportation from borders and airports for residents of Brčko district that returned from abroad. This transportation can also be applied for other cases, when the institutions are overwhelmed. Generally, there is an increasing need to provide support for isolated population.

Croatian Red Cross (HCK)

More than 100 Croatian Red Cross volunteers are providing urgent assistance and shelter for people on the streets of Zagreb, after a powerful earthquake of 5.4 magnitude struck the Croatian capital early March 22. The earthquake was the strongest in Croatia in more than 140 years and many buildings were badly damaged. HCK teams distributed water and blankets for patients who were displaced from a central city maternity hospital. Red Cross volunteers have set up six tents around hospitals in Zagreb and a tent city, which can accommodate up to 500 people. All measures to help prevent the spread of COVID-19 are being observed in the tent city.

Additionally, HCK is continuing its efforts in providing PSS support and deliveries of household supplies to people in self-isolation or quarantine as well as doing awareness raising and continuing voluntary blood donation activities. An additional 100 Red Cross volunteers are visiting the elderly and those in self-isolation for COVID-19.

Czech Red Cross (CRC)

- Infographics on Czech Red Cross website and social media – preventing corona virus spreading including collaboration with one of the biggest Czech TV channel.
- Basic supplies for people temporarily quarantined as suspected COVID-19 cases.
- Crisis telephone line for elderly people and people at risk (people with weakened immunity, isolated people and people in need) with a focus on psychosocial support.
- Grocery, pharmacy and hygiene products shopping for elderly people and people at risk.
- Assistance at hospitals and public building entrances including temperature measurement, medical history, hand sanitizing.
- Ensuring continuing assistance for homeless people.

Finnish Red Cross (FRC)

FRC has been supporting municipalities and health authorities at the national level and in districts. Volunteers have been involved in various activities such as municipal home care (e.g. grocery shopping and medicine delivery from pharmacies) as well as corona virus call centres and PSS hotlines (led by authorities). Traditional voluntary activities like friendship service are also affected by situation and have changed their modality from one to one meetings more to phone- and online support. Preparedness group of psychologists has produced 9 videos (Finnish, Swedish, English) incl. psycho-educative messages. FRC Logistics centre has supported three regional hospitals with providing triage units; more requests received (the current capacity is 9 units).



Finnish Red Cross volunteers setting up a triage unit. Photo: Finnish Red Cross website

French RC

Social Delivery Service (Conciergerie solidaire) supports isolated people in country and provides solutions against psychological risks linked to the fear of shortages of food or medications as well as exclusion of certain populations who cannot use the digital solutions to obtain supplies. T psychological support 24-hour helpline as well as delivery of basic necessities (food), medications and hygiene & cleaning products.

Kyrgyzstan Red Crescent Society (RCSK)

RCSK has provided personal protective equipment and disinfectants to sanitary checkpoints and has also been spreading prevention information on COVID-19 using RCSK cars with loudspeakers.

In addition, Jalal-Abad branch staff and volunteers are involved in disinfection measures of public places in such as bus stations and markets. RCSK volunteers from all branches are continuing awareness-raising campaign among local communities. Short messages on state and official languages will be provided through mosques within the achieved agreement between RCSK and Muslim Religious Agency in Kyrgyzstan.

Magen David Adom (MDA)

- Transportation of quarantined people to home and hospital
- Special call center receiving more than 30,000 calls a day to provide information and support
- Taking lab tests (more than 6,000 so far) from people at home, so they don't have to go out
- Setting up a drive-through testing center to increase testing capacity



MDA piloting drive-through testing method. Photo: IFRC Europe Twitter

Netherlands Red Cross (NLRC)

Volunteers of The Netherlands Red Cross support the communities with food (supporting foodbanks and grocery shopping); provide medical support (transportation of people, collecting and distribution of materials, supporting health centers); have PSS activities such as helpline and shelter activities such as supporting temporary shelter facilities. NLRC Helpline has received

11,873 calls with questions on prevention, health and practical issues.

The NLRC 510 data team is supporting the operation with giving insights on the vulnerable population (elderly, chronic illness, disabilities) and vulnerable groups (homeless, asylum seekers, undocumented migrants).

Red Cross of Serbia

The volunteers of the Red Cross of Serbia are supporting older persons and other persons who are confined to their homes (persons with chronic health conditions etc.) in their needs: purchase of food, medication, walking their dogs. Red Cross of Serbia headquarters has several telephone helplines to provide support, mostly psychological first aid, to older persons. Soup kitchens are still open since they provide essential food security service to a very vulnerable part of the population, however, for older persons who are their beneficiaries, safe home deliveries are being organized. The National Society keeps promoting society-wide solidarity in every aspect of the daily life. The Red Cross of Serbia so far produced materials – based on IFRC, WHO and other materials - that provide recommendation for general population, Red Cross branches but also older persons who are in isolation. Part of the recommendations have to do with social distancing and hygiene in order to decrease the risk of transmission and part of the recommendations are related to alleviating psychological burden of isolation for persons of different age. English versions of these recommendations are available on the Red Cross of Serbia website:

Slovak Red Cross

- Promotion of prevention messages via leaflets, website, social media
- Ensuring the continuity of the social centres for elderly, mothers with children and homeless people – following very strict measures related to COVID - 19
- Distribution of hot meal to elderly and isolated population – efforts to scale-up the services in the branches where the Slovak RC runs canteens
- Distribution of medicaments and basic groceries to elderly

- Volunteers mobilisation and recruitment to create back-up if increased no. of people will need assistance
- Slovak RC provided several RC tents to Slovak hospitals – to create a screening point before entering a hospital
- Cooperation with ministries, self-governing regions, municipalities, crisis management

Slovenian Red Cross (SRC)

SRC and Administration of Civil protection of Slovenian Republic have established EMT I (Mobilni stacionarij) with the capacity for 120 persons. The locations of the EMT is military base Edvarda Peperke Ljubljana – Moste. SRC issued a national appeal for young volunteers to apply for providing support to their local communities and residents. 500 active volunteers are in the field (mobile first aid (FA) units at the border, FA units and logistics at local and branch level in support of health and elderly care units, coordination of needs/food and non-food items, including distribution; Mobile hospital - support to Civil protection with manpower). 1000 volunteers on stand-by for FA, food and NFIs distribution, PSS and other support. FA units had measured body temperature of 10,000 persons.



Slovenian Red Cross volunteer distributing food to people in need. Photo: Slovenian RC Facebook page

Spanish Red Cross (SRC)

In SRC auxiliary role to public authorities and considering the decentralization of health, social and emergency services, SRC regional branches are being part of emergency coordination services in different levels. In all regions with higher number of cases, branches have been fully integrated in the coordination mechanisms.



Spanish Red Cross volunteers keeping their spirits up while delivering aid to people in need. Photo: IFRC Europe Twitter

- 1.087 kits distributed to vulnerable people in confinement or isolation in exceptional circumstances. (only reporting services registered in data bases, number will increase in coming days as registration is more updated).
- 4 psychosocial teams activated at the request of authorities.
- 409 ambulance services, 258 ambulances available to support public health system in collaboration with 15 emergency coordination rooms and telephones.
- 2 temporary additional health facilities established in collaboration with the health authorities.
- 31 Shelters for homeless people for confinement. Almost 2.500 places available.
- 101.201 people reached through contacts (agendas) to disseminate prevention and contention measures, adapting messages to specific vulnerable groups and identifying needs. Of which: - 23.569 with Elderly People - 2.505 with women affected by gender-based violence. Social Emergency Units: 3.148 interventions 684 units available
- 8.194 volunteers have been mobilized in response to COVID-19 including 600 new volunteers.
- Campaign to mobilize mutual and neighbors support in a safely manner is ongoing in collaboration with the Civil Protection and Emergencies Direction General of Home Affairs Ministry

Turkish Red Crescent (TRC)

TRC's Crisis Management Center is working on 24/7 basis to ensure coordination and coherent response across all sections. Online and face-to-face trainings have been organized on protection methods for the office staff and field staff. Since 19 March 2020, TRC has provided 3 meals per day to around 10.000 individuals in 21 Quarantine Observation Facilities from 12 cities. This service will continue in line with the informed needs.

Additionally, TRC as part of nation-wide initiative is supporting self-isolated, particularly older people by providing household deliveries, hygiene promotion and social support. TRC has conducted a public awareness campaign on the protection from COVID 19 through face-to face dissemination, social media and printed material distribution. 137 Volunteers in Ankara and İstanbul are conducting dissemination to household, working place visits, and distribution of booklets. The temperature screening activities are conducted regularly for host community and migrants visiting our community centers and other service locations.



Turkish Red Crescent providing meals for quarantined people. Photo: IFRC Europe Twitter

MENA

Regional Overview

As of 24 March, Middle East and Africa region has reported a total of 26,4242 confirmed cases and 1,886 associated deaths in 15 countries (<https://www.worldometers.info/coronavirus/>) that is within a week. Most of MENA countries have announced the public health emergency and a lockdown including the airport shutdown to contain the COVID-19 pandemic. MENA RO has started a work from home modality for non-essential staff since 23 March and been constantly monitoring the evolving situation in MENA region and actively keeping the region informed through emails and virtual meetings with HNSs, movement partners and external stakeholders.

Disaster and Crisis prevention, response and recovery unit continues to lead on the operational coordination and planning regionally and with country offices and national societies. additional contingency and response plans from HNSs were reviewed and technical feedback was provided. This was followed with confirming start-up financial resources toward the finalized plans. Some initiatives include:

- Business continuity plan actioning is ongoing at regional level as well as the support to country offices in their planning exercises. DCPRR unit has requested surge support and the alert was shared, Rapid Response is under process.
- A draft regional dashboard is under development to capture the NSs' response to the COVID-19 pandemic. This dashboard will be published later this week on the Go platform. 4Ws tool was also developed to capture the partners' support to the host national societies.
- A revised version of IFRC MENA guidance on migration and COVID-19 preparedness and response was finalized and published.

Health & Care unit has been sharing information and coordinating with WHO EMRO a weekly basis and IFRC MENA RO Health & Care unit will be part of a sub-working group for the fragile settings. In addition, Health & Care unit has established a process-oriented partnership with UNICEF in terms of COVID-19 response, with a focus on enhancing the collaboration RCCE at the regional and countries level . MENA MHPSS Network has been working actively to develop materials and be adapted to the MENA context to support sister NSs. MENA MHPSS network meeting took place on 23 March with 7 MENA NSs, 2 PNSs, CIRC

and PS Reference center to agree to create a video fight against Stigma for COVID-19 patients during their quarantine and after recovery. Moreover, MHPSS focal person supported Iraqi RC MHPSS material translation and took part of the learning webinar for Libya RC. Health & WASH teams have continued providing technical inputs to all NSS' plan and response as well as contributing a translation of IFRC materials into Arabic. WASH team has engaged with Global WASH cluster to formulate Global COVID-19 response and guidance. In addition, the 10 million grants with Nestle for COVID-19 including MENA region was finalized and confirmed.

IFRC MENA Risk Comms and CEA is translating and sharing IFRC messages, infographics and other resources daily through regional communications and social media channels. IFRC MENA team is also producing social media content in Arabic related to especially mental health during COVID-19 outbreak, such as: https://twitter.com/IFRC_MENA/status/1242397026517745666 The team is working closely with National Societies, supporting them in adapting and using these resources in their public communications as well as in their risk communication and community outreach.

Together with WHO, BBC Media Action and Internews, IFRC MENA communications team held webinar on the role of media in COVID-19 on 19 March, mainly aimed at media and journalists working in the Middle East and North Africa region. Approximately 75 participants from different media outlets, organisations and NSSs in the region participated in the webinar.

As for capacity building, a webinar was conducted on March 19 with the Libyan Red Crescent as part of the rapid training on COVID-19. This rapid training will be a series of two-hour webinars arranged by the IFRC Country Office for Libya with technical support from IFRC Regional Office. The virtual modality or e-learning was chosen due to movement restrictions inside and outside Libya, and the approach of reducing gatherings to decrease risk of infection. The objective of the first session was pilot the e-learning approach and to introduce the training package, its main components and discuss specific needs of the staff and volunteers of LRCS to inform the next sessions.

Country by country

Egyptian Red Crescent (ERC)

ERC volunteer management has announced to recruit more volunteers for COVID-19 response. ERC is going to start the awareness session with online platform and adapted to people with special needs in the communities. Govt. Egypt has assigned ERC as a leading agency in each governorate on COVID-19 response and local NGOs need to align with ERC branches items. MoH and ERC has set up and announced the Hotline "105" and Social Media for PSS support and only triage for referral and quarantine. Coordination with National Social Solidarity on PPEs and training have been ongoing.

Iraqi Red Crescent Society (IRCS)

2,710,304 people reached through risk communication using both awareness sessions and social media to reach large audience by key messages on COVID-19 including distribution of posters and leaflets. Supported by movement partners. IRCS is active member of the crisis cell established by the authorities to respond to COVID-19 pandemic and continue to coordinate with stakeholders both national and international actors.

Iranian Red Crescent Society (IRCS)

IRCS is increasing its capacity in Noor Afshar hospital with 200 beds for the COVID-19 patients, and 45 beds are occupied. The 4 Medical Shelters are to operate in Qom, Ishfran, Golestan and Qzvin and planning to have medical shelters in Tehran, Gilan, and Mazandaran provinces. For screening, around 8,678,808 people and passengers of 2,888,392 cars have been screened for their temperature and 6,464 were referred to clinical centers for further examinations. The fever screen in different places specifically at the entrance of the cities in 32 provinces. Disinfection of public places are continuing in streets, avenues, prisons, mosques, etc. 661 MHPSS teams are active to provide services to the affected population.

To support Home care setting, IRCS distributed 50,000 food parcels to the most vulnerable families and pregnant women as well as COVID- 19 family hygiene kit (gloves, masks, disinfection, soap).

For increasing capacity and raising awareness using Epidemic Control for Volunteer (ECV) tool, 6,283 staff and 24,953 volunteers have been trained and actively taking part in the COVID-19 operation. Through online/ virtual awareness and training sessions, more than 40 million people have visited the training site (www.coronavirus.ir), more than 18 million people have attended Corona test session (test. Corona.ir) and more than 8 million people received COVID-19 message via SMS. In addition, 420,252 people, 8,926 volunteers, 2,821 staff and 1,319 trainers have passed the online course of corona virus.

Coordination with the movement partners, IFRC and ICRC, on the operation and fundraising, has continued regularly, and Japanese Government through IFRC has confirmed USD 993,736 for the COVID-19 response in Iran for 6 months. Chinese Red Cross has provided an in-kind donation of medical equipment and technical support based on their experiences in China. Lastly, IRCS has coordinated with MoH, WHO and WFP on PPEs.

Jordan National Red Crescent Society (JRCS)

Jordan Red Crescent as a member of the social affairs task force one of the governmental crisis cells responding to COVID-19 in the country and based on his mandate in Jordan, was officially requested to support the Governmental effort in distributing food parcels to vulnerable Jordanians in the whole kingdom. The Ministry of Social Affairs through the minister announced that 350,000 households would benefit from the governmental support on cash assistance and food parcel distribution. Jordan Red Crescent takes part in the in-kind assistance distribution, relief teams from the HQ and 9 branches with more than 250 staff and volunteers participates at the planned distribution in whole kingdom starting from Tuesday 24 March. Distribution details are based on a request from the social affairs ministry and the beneficiaries of the distribution initial phase are from the most vulnerable Jordanian population with special focus on elderly and disabled who are not registered in any governmental assistance Programmes. The distributed items (food parcels) are delivered directly to the household door to door.

250 staff and volunteers are trained on COVID-19 health topics and risk communication, social media risk communication plan and Relief items distribution to most vulnerable Jordanian. 10,000 people are reached by JRCS assistance.

Lebanese Red Cross (LRC)

327 suspected cases were transported to the designated hospitals by LRC EMST. EMS is expanding its capacity and now 24 stations are fully equipped for COVID-19 response and transfer cases. 482 were trained as EMTs and 520 volunteers were trained for delivering COVID-19 awareness sessions. More than 4,000 volunteers are trained on COVID-19 and trained volunteers have reached 36,608 people through COVID-19 awareness sessions.

For coordination, all LRC movement and external partners have been updated daily on the situation via the daily bulletin report since the start of the Coronavirus outbreak. LRC is supporting the committee in issuing recommendations for the ministers' cabinet to ensure proper response to COVID-19. Moreover, LRC is supporting Disaster Risk Management Unit at the Presidency of the Council of Ministers in the development and implementation of the national response plan. Technical Coordination Meeting In order to ensure proper communication a collaboration with all the key stakeholders that responding to COVID-19 in Lebanon and in order to maintain a coordinated response, LRC is holding regular technical coordination meeting including representatives from MOPH, Lebanese Armed Forces, General Security, Internal Security Forces, World Health Organization, Rafic Hariri University Hospital and Disaster Risk Management Unit at the Presidency of the Council of Ministers. Epidemics Committee Based on the request of the Director of the Ministry of Public Health, the Lebanese Red Cross is participating actively in the meetings of the national epidemics committee at MOPH Ministries and UN agencies LRC is also ensuring continuous coordination and collaboration with MEHE, MOPH, UNICEF, WHO and other concerned organizations In addition, awareness sessions were provided to the partners in order to mitigate the risk of disease transmission.

Libya Red Crescent Society (LRCS)

LRCS is continuing to respond to COVID-19 through awareness sessions and risk communication, 246,576 people reached through social media, targeted by distribution of leaflets and safe distance programme. LRCS is working closely with other actors on the ground, the prepare their response plan for COVID-19 and share among partners while on the other hand, they are coordinating with stakeholder available in country both National and international.



LRCS team awareness raising about COVID-19 to IDPs and migrants.
Photo: LRCS

Palestine Red Crescent Society (PRCS)

PRCS has cover all population especially people with special needs in the communities and its hygiene promotion video was prepared with sign language.



Palestine: Palestine Red Crescent's hygiene promotion and COVID-19 videos for children also include sign language.
Photo: PRCS

Syria Arab Red Crescent Society (SARC)

SARC continue to work on risk communication to the population through different channels, using social media and awareness session using posters in the street. Also, SARC is coordinating with the various actors on the ground both national and international. IPC training for 25 health and care workers delivered by WHO.

Yemen Red Crescent Society (YRCS)

1488 Hygiene Kits, 650 Mattress and 3115 Blankets, 44 tents and 3 Mosquito net were distributed by YRCS among isolated individuals at 11 entry points across the country which was identified by the authorities. YRCS continues to coordinate with authorities and various actors on the ground both National and international.



YRCS distributing aid to people in the quarantine centres.

FUNDING UPDATE

[Donor response to the Appeal MDR00005: COVID-19 Outbreak](#)

New Funding Requirements Summary as per [Revised Emergency Appeal published today](#)

Budget by Area of Intervention	Needs in CHF
Disaster Risk Reduction	1,000,000
Shelter – Urban Settlements	9,000,000

Livelihoods and Basic Needs	30,000,000
Health	91,000,000
Protection, Gender and Inclusion	1,000,000
Migration	500,000
Strengthen National Societies	10,000,000
Effective International Disaster Management	4,000,000
Influence others as leading strategic partners	1,200,000
Ensure a strong IFRC	2,300,000
TOTAL FUNDING REQUIREMENTS	150,000,000

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The Operations Update covers new information from the last reporting period. Please see previous updates for more information on how National Societies and IFRC have been responding to COVID-19 since the start of the Emergency Appeal.

Operational Update Link	Published
Operational Update 7	20 March 2020
Operational Update 6	13 March 2020
Operational Update 5	06 March 2020
Operational Update 4	28 February 2020
Operational Update 3	21 February 2020
Operational Update 2	14 February 2020
Operational Update 1	07 February 2020