

NOVEL CORONAVIRUS (2019-nCov) OUTBREAK

Operations update #1

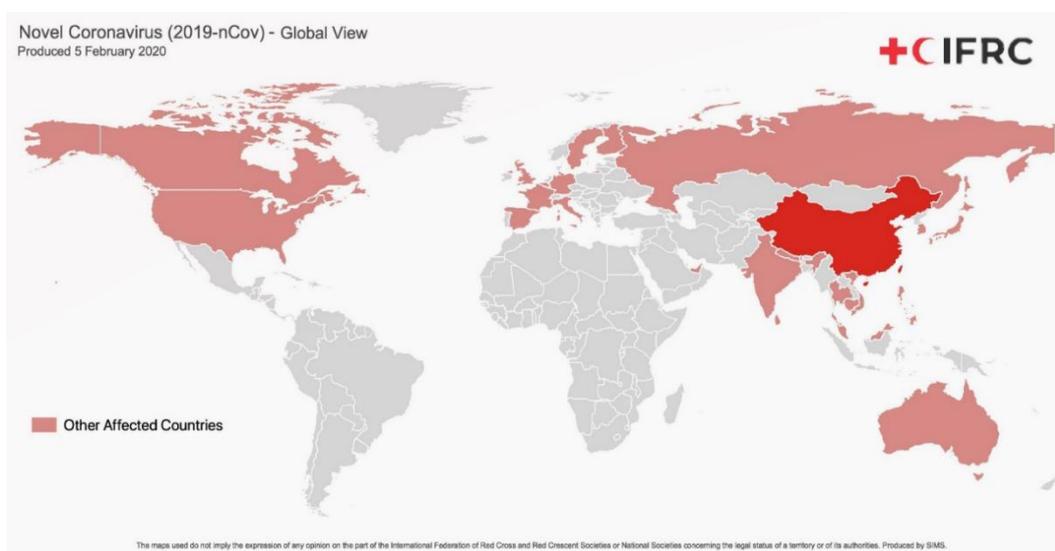
7 February 2020

Emergency appeal: MDR00005
GLIDE: [EP-2020-000012-CHN](#)
Operation timeframe: 31 January until 31 December 2020
Funding requirements: CHF 3,000,000
Funding gap: CHF 2,526,000

A. SITUATION UPDATE



31,211
confirmed
cases globally¹



DATE	EVENT
31 Jan 2020	CHF 1 million Swiss francs allocated from the IFRC's Disaster Relief Emergency Fund (DREF); IFRC issues Emergency Appeal for 3 million Swiss francs.
30 Jan 2020	The International Health Regulations Emergency Committee reconvenes and declares the 2019-nCoV outbreak a public health emergency of international concern.
23 Jan 2020	Emergency Committee of the WHO is convened under the International Health Regulations (2005), and determines that the event does not constitute a Public Health Emergency of International Concern (PHEIC)

¹ [WHO Situation Report #18 of 7 February 2020](#)

20 Jan 2020	835 cases reported in China (549 from Hubei province). Further cases reported from all but one province.
19 Jan 2020	First reports of infection in health-care workers caring for patients with 2019-nCov
16 Jan 2020	First case reported in Republic of Jore, two cases in Beijing and one case in Guandong
13 Jan 2020	First case reported in Japan
12 Jan 2020	Whole genome sequence shared with WHO and public; virus designated 2019-nCov
11 Jan 2020	First fatal case reported
7 Jan 2020	Novel coronavirus isolated
1 Jan 2020	Huanan Seafood Wholesale market closed
31 Dec 2019	Cluster of cases of pneumonia of unknown origin reported in Wuhan to China National Health Commission

B. OPERATIONAL UPDATE

Response by Red Cross Society of China and National Societies in East Asia

As of 6 February, 31,187 cases have been confirmed, primarily in Wuhan, Hubei Province in China, with 637 deaths. Outside mainland China, Taiwan province (16 confirmed cases), Special Administrative Regions of Macau (10 confirmed cases) and Hong Kong (24 confirmed cases and one death) reported and logically so, many individuals have carried the disease outside China. The number of suspected cases is growing fast in China, and as people get tested, also the number of confirmed cases is rising.



Across China, all the Red Cross Society of China's branches are activated. Red Cross volunteers are hard at work processing donations and support authorities with distribution, helping at temperature checkpoints, visiting homes of people in isolation

The work of Chinese Red Cross Society, staff and volunteers over the past weeks have been significantly high across the country. Major efforts are taken place not only in the Province of Hubei, but all over the country. A total of 1.8 million volunteers are fully activated to respond to the needs across the country.

As an auxiliary to the authorities in the response to this 2019-nCoV outbreak, Red Cross Society of China (RCSC) is supporting Chinese government to help meet the huge and sudden demand for medical items. Besides receiving cash donation, RCSC and its branches all across the country, including its city branch in the epicenter of Wuhan and the provincial branch of Hubei, are coordinating domestic and international offers of consumable medical equipment including gowns, masks and disinfectant etc., and assisting with transport in coordination with respective authorities.

Based on its large network of volunteers and staff in the country, RCSC is proactively engaged in dissemination of information on disease prevention and health education. Innovative ways of communication including social media are also utilized.

In order to curb the spread of the disease two professional disinfection and sterilization teams were engaged to carry out activities to improve environmental hygiene in Huanggang City and Yichang City, Wuhan Province. Huanggang City is the second most affected area in China.

Jiangsu RCSC sent staff to Nanjing Lukou Airport to work jointly with Nanjing Customs, Airport Customs and Sinotrans Yangtze River Co., Ltd. to provide services for the smooth customs clearance of overseas donated goods. RCSC Branches in Liuzhou, Wuzhou, Beihai and other cities in Guangxi Zhuang Autonomous Region have set up psychological counseling hotlines to provide psychological counseling and health care for the public. Huaibei RCSC Branch in Anhui Province cooperated with relevant departments to assist in epidemic prevention and control at bus stations and other monitoring points. On February 3, Beijing RCSC 999 Emergency Rescue Center dispatched 457 ambulance/times and transferred 29 patients with fever. From January 22 to February 3, 999 Emergency Rescue Centers have deployed 5,282 ambulance/times among which 347 are patients with fever.

Hong Kong Red Cross (HKRC) branch of RCSC activated its Local Emergency Response Plan and presently stands at Level 3 since 23 Jan 2020. KHRC shared personal hygiene and public health messages. 160,000 leaflets have been delivered to the residents of public estates in Tuen Mun and Shatin districts. 650 packs of hand sanitizers have been delivered to public together with health and hand hygiene messages at 2 public exhibitions. Furthermore, HKRC has provided relief materials to the government's quarantine camps according to their service agreement with Social Welfare Department.

Response by other Red Cross societies in East Asia

The IFRC CCST Beijing is supporting East Asian National Societies (EANS) in monitoring and assessing the situation and taking steps to help the EANS, including China, prepare for the outbreak and manage risks. The risk is heightened in East Asia, especially in countries that share a border with China or have frequent cross-border movement of people.

Acting within their capacities and mandates to respond as auxiliaries to the public authorities in the prevention and alleviation of human suffering, National Red Cross Societies in East Asia have an important role to play in controlling this outbreak, both at the country and East Asia levels, particularly by contributing to disseminating information about behaviors, facilitating understanding, and acceptance by the community of infection prevention and control measures, and helping to prevent misinformation, rumors and panic.

The IFRC CCST Beijing is supporting East Asian National Societies (EANS) in monitoring and assessing the situation and taking steps to help the EANS, including China, prepare for the outbreak and manage risks. The risk is heightened in East Asia, especially in countries that share a border with China or have frequent cross-border movement of people. China observes a significant intra and inter population movement due to trade, tourism, global presence and labour migration among others. Wuhan is one of the most populous cities in China (11 million people) and a significant transport and business hub that is vastly connected by air, train and road networks.

Japanese Red Cross reports their "infographic" on twitter and Facebook received five times more hits than usual.

Korean National Red Cross (KNRC) is facilitating donations from private sector for Wuhan mobilizing cash and in-kind contributions and coordinating with RCSC through CCST Beijing. KNRC has also distributed 2,000 relief kits (including masks, latex gloves and thermometer) for self-quarantined people at home in Korea.

The DPRK RCs in response to the request from the health department, has mobilised its 500 ECV trained (focused on 2019 nCoV) volunteers in 4 provinces close to Chinese border. These volunteers are working closely with the Household doctors, for house to house screening of people, health and personal hygiene promotion. The local branch staff is supporting these volunteers on regular basis. The RC volunteers are coordinating with local health staff and government departments for broad community engagement and visiting individual households who live remotely and can't be routinely reached out.

DPRK RCS activated the “volunteers on wheels initiative” by having the volunteers using about 700 bicycles, provided under this initiative, to reach the last mile of the remote areas and disseminate the nCoV awareness message.

DPRK RCS is also coordinating with local stakeholders while IFRC is responsible for coordinating with the other international organisations.

Mongolian Red Cross Society (MRCS) has been distributing distributed coronavirus awareness and situational update posters and videos through MRCS Facebook page on daily basis. (a link to the video can be found in <https://m.facebook.com/MongolianRedCrossSociety/>). With MRCS being an active member of state emergency commission meeting and as directed by the government in the state emergency commission meeting, MRCS Branches started organizing prevention and dissemination activities in their respective their regions. MRCS already distributed 70007,000 water-based sanitizers from its emergency stock to stakeholders including ministry of health, border protection agency, state agency of inspection, airport and railway authority.

At Japanese Red Cross Society (JRCS) a Task Force (Management level) meeting was held for the first time and President stated that the Japanese government might ask JRCS for cooperation more closely. Their 2019 nCoV“infographic” on twitter and Facebook record five times hit than usual.

Response by Red Cross Red Crescent regionally

[Detailed information on the situation is available on Go](#)

<p>ASIA PACIFIC</p>	<p>At the 10th Asia Pacific Regional Conference – which theme was ‘Engaging Local Humanitarian Action in a Fast-Changing World’ – held in Manila during November 2018, Asia Pacific National Societies committed individually and collectively to work in partnership with communities, their public authorities and other organizations to prepare, prevent and respond to outbreaks, epidemics and pandemics at the local level. In line with that commitment, preparedness for outbreaks, epidemics and pandemics was already a common component in all Operational Plans 2020 launched by IFRC to support National Societies in the region. As such, the RCSC and 37 other National Societies in the region intensified their preparedness measures as soon as the first case of 2019-nCoV was confirmed in China.</p> <p>Acting within their capacities and mandates to respond as auxiliaries to their respective public authorities in the prevention and alleviation of human suffering, National Red Cross and Red Crescent Societies are engaging people and communities – online and offline – to facilitate understanding and acceptance of infection prevention and control measures, to prevent misinformation, rumors and panic, and to promote behavior that will not propagate discrimination and stigmatization of those affected or perceived to be potentially infected based on their origin. Measures being undertaken by National Societies include disseminating accurate awareness messages about 2019-nCoV. Awareness messages provided by IFRC have been translated into to local languages and shared through various channels, especially via social media. In countries where cases have been confirmed, National Societies are coordinating with public and local authorities on how they can augment efforts aimed at addressing needs relating to the outbreak.</p> <p>IFRC offices across Asia Pacific are working actively to support and provide technical guidance to National Societies. The offices have also updated their business continuity plans to ensure that – in worst-case scenario – their ability to deliver services to and support National Societies continues. The Asia Pacific Regional Office (APRO) is providing guidance and coordination support to National Societies through five Country Cluster Support Teams (CCSTs) and eight Country Offices spread across East Asia, South Asia, Southeast Asia and the Pacific geographical areas. Thus far, the APRO has organized and facilitated a series of webinars to provide guidance</p>
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on the outbreak of 2019-nCoV to National Societies and IFRC offices, including a specific webinar for the leadership of all National Societies. In coordination with the head office in Geneva, APRO developed a guidance note on 2019-nCoV and provided it to National Societies for them to adapt and contextualize as per their needs.

To enable National Societies of countries that have recorded cases as well as those at high risk based on analysis of the Global Health Security Index (GHSI) and Infectious Disease Vulnerability Index (IDVI), IFRC has ensured that financial resources to support initial actions are available through an advance from the Disaster Relief Emergency Fund (DREF). With the financial resources advanced from DREF, National Societies are increasing their preparedness and response measures. IFRC is also supporting overall regional preparedness and response by actively engaging in inter-agency coordination mechanisms. In this regard, as co-chair of the Regional Emergency Preparedness Working Group (EPWG) in Bangkok, on 24 January IFRC hosted an initial ad hoc meeting of the EPWG, whose focus was 2019-nCoV preparedness and response. The second such meeting was held on 5 February, with participation of American Red Cross, OCHA, UNICEF, WHO, UNFPA, UNHCR, IOM, USAID/OFDA, ECHO, PLAN, MSF, AmCross and the Thailand Ministry of Health. Participants agreed to establish a time-bound Ad Hoc Working Group on 2019-nCoV that would meet regularly to facilitate information sharing and support across the wider Asia-Pacific region.

Several national Societies across the Asia Pacific region have been activated, few examples mentioned below:

Vietnam Red Cross has mobilized aid by providing PPE to essential staff and volunteers. VNRCs has set up core task forces of RC volunteers at community level and provide trainings for them on response to 2019-nCoV and conduct home based/community based awareness raising activities using network of resourced trained facilitators/trainers. They have worked closely with government at all levels and health sectors to advocate, communicate, transport people affected or suspected to be affected to health facilities.

VNRCs has a plan to pilot and test the establishment and application of community based surveillance-CBS to support health sectors using network of Red Cross volunteers and members on the ground level. A plan is in place to distribute soaps and/or masks for households in high risk areas and conduct trainings on how to use these.

Pakistan Red Crescent Society (PRCS) is currently planning for awareness raising campaign together with Ministry of Health in all Provincial branches. In addition to that training of volunteers and distribution of some PPE to volunteers and hospitals is planned to start in coming days.

Philippines Red Cross (PRC) has started procurement of 1,500 sets of Personal Protective Equipment (PPE) for NHQ and Chapters, 100 additional sets procured for frontline medical workers. Already starting last year (2019), PRC has prepositioned Personal Protective Equipment (PPE) to chapters with International Airports, Regional Warehouse, and chapters with high risk of Bird Flu in Central Luzon. PRC has released social media posting for information dissemination to the public and released Health Services Advisories to chapters on flu season.

PRC conducted Outbreak Preparedness Meeting on the Novel Coronavirus January 25, 2020. It was attended by 55 participants, representatives from more than 20 organizations/institutions including the WHO, DOH, and other health organizations. PRC has reached out to Philippine General Hospital and San Lazaro Hospital assuring them that PRC is ready to support them in case they will be needing medical tents as additional capacity to treat more patients. The PRC has notified branches through an administrative notice of the threat of novel coronavirus and the recommended actions expected of staff, volunteers and chapters including: Prevention: health & hygiene promotion incl. handwashing in PRC buildings and community-level, risk

communication, circulation of staff health guidelines. Preparedness: regular updates, Pre positioning of PPE, mapping high risk areas. Response Mechanisms: patient transportation, welfare desks, contact tracing, additional medical support (tents).

AFRICA

As of 6 February 2020 there were no cases confirmed in Africa region. Since the outbreak however, IFRC's Africa regional office have been monitoring the situation closely, considering the major shifts in travel and trade with China over the last few years (over 600% increase in the past decade). Specifically, there is a need to reinforce epidemic and pandemic preparedness and increase the Africa region's capacity to respond in the event of an outbreak of 2019-nCoV as African countries' capacity to contain any outbreak will be dependent on early detection and isolation, and the overall strength of the health systems.

The following countries are currently being prioritized for 2019-nCov preparedness initiatives:

	Country
1	South Africa, Mauritius, Ethiopia, Kenya, Uganda, Ghana, Nigeria, Zambia, Tanzania, Algeria, Angola, Côte d'Ivoire and Democratic Republic of Congo (DRC)
2	Rwanda, Madagascar, Guinea Conakry, Zimbabwe, Senegal, Seychelles, Equatorial Guinea, Gabon, Mauritania, and Mozambique
3	Remaining countries in Africa

The capacity for African countries to respond will be dependent on the surveillance and strength of the health systems. As part of Preparedness for Effective Response (PER), five African National Societies have progressed on Epidemic Preparedness, specifically Democratic Republic of the Congo (DRC), Mali, Uganda, Guinea and Sierra Leone.

To date, a regional task force has been established with the participation of Movement components present in the Africa region, including the International Committee of the Red Cross (ICRC). A regional coordination cell with health, risk communication and community engagement specialists is in the process of being created.

Based on an initial capacity analysis of the Red Cross Red Crescent Movement in the region on current programmes in health; water, sanitation and hygiene (WASH); and/or disaster risk reduction (DRR), IFRC is coordinating with partner national societies with in-country presence to support its membership, especially as several African National Societies have epidemic preparedness capacities. With assistance from the IFRC and/or bilateral support these National Societies may expand their preparedness actions to include actions around 2019-nCoV as appropriate. The IFRC is working with seven National Societies in the Community Epidemic and Pandemic Preparedness Programme (CP3). In the region, the Belgium Red Cross and Danish Red Cross have bilateral programmes in seven and 10 countries, respectively, for epidemic preparedness (Epi Prep). The Norwegian Red Cross maintains bilateral partnership on community-based surveillance in three countries. Similarly, as part of Preparedness for Effective Response (PER), five African National Societies have progressed on epidemic preparedness, specifically Democratic Republic of the Congo (DRC), Mali, Uganda, Guinea and Sierra Leone.

The following table provides an initial capacity analysis of the Red Cross Red Crescent Movement, based on current programmes in health, water, sanitation and hygiene (WASH), and/or disaster risk reduction (DRR):

	Countries with existing RCRC Programmes with Epidemic Preparedness component	Countries with no existing health programmes with Epidemic Preparedness component
1	Ethiopia (WASH/DRR) Kenya (CP3) Uganda (CP3/Epi Prep) Ghana (WASH) Zambia (WASH) Tanzania (Epi Prep)	South Africa Mauritius Angola Côte d'Ivoire
2	Rwanda (Epi prep/DRR) Guinea Conakry (CP3/Epi Prep) Zimbabwe (First Aid/DRR) Senegal (DRR) Mozambique (Epi Prep)	Madagascar Seychelles Equatorial Guinea Gabon Mauritania
3	Malawi (Epi Prep/DRR) Burundi (Epi Prep) Sierra Leone (CP3) Cameroon (CP3) Mali (CP3/DRR) South Sudan (DRR) Sudan (DRR)	

THE AMERICAS

On 21 January 2020, the first case of 2019-nCoV imported into the region of the Americas was identified in the United States of America. On 25 January, Canada reported their first confirmed case of 2019-nCoV. From 21 January to 6 February, there have been 17 confirmed cases of 2019-nCoV identified in the Americas region – 12 in the United States of America and five in Canada.²

The American Red Cross is closely monitoring the evolving situation regarding the outbreak of the 2019 Novel Coronavirus. Currently working with government agencies and state officials to determine what Red Cross support may be needed in the coming days and weeks. It has initiated a level 3, nationally led Disaster Relief Operation and issued an Operation Order detailing potential American Red Cross services. A SIMS request to support the Emergency Appeal for an Information Management coordinator has been received and is being filled by the American Red Cross.

The Canadian Red Cross is monitoring the situation and has activated its roster of trained personnel ready to be deployed if requested. It has also launched a national campaign through its media resources to raise funds to the Red Cross Society of China's response to the Novel-Coronavirus (2019-nCoV).³

Also, the Canadian Red Cross, at the request of the Government of Canada facilitated an in-kind donation of personal protective equipment by the Government of Canada to the Red Cross Society of China, and is supporting the return of Canadians from China who are staying in isolated interim lodging sites for a period of 14 days. At the interim lodging sites, the Canadian Red Cross is supporting the reception, registration, information and resources for those staying at the site. This includes the provision of:

- Meal delivery services, which includes special meal options for dietary restrictions;
- Safety and well-being support including access to age-appropriate leisure and recreational activities, wellness checks, referrals for mental health needs and feedback mechanisms;
- Clothing and laundry services on an as-needed basis;

² [WHO Dashboard for Novel coronavirus \(2019-nCoV\).](#)

³ [Canadian Red Cross National Campaign - China Novel-Coronavirus Response Appeal](#)

- Family reunification, which includes facilitating family connections and re-establishing contact with family members; and,
- Provision of personal items, such as hygiene kits and access to age-appropriate services like infant supplies, playpens, mobility aids and medical needs.

In the Americas, surveillance for Influenza and other respiratory illnesses is well established.⁴ IFRC will focus its actions to strengthen the regional capacities to support the coordination, deploying two health in emergency experts to support Disaster and Crisis and Health Departments. The Regional Health Unit team will provide technical advice and support to the National Societies, ensuring that all the health network, management team and technical teams are well informed about the evolution of the scenarios and potential actions to the response. IFRC will organize frequent conference calls with NS and IFRC staff in order to keep the organization updated, ensuring proper dissemination of guidelines in different languages such as French, English, Spanish, Portuguese and others.

The preparedness actions in the Region will include the development of a business continuity plans for the IFRC office to ensure the continuity of the programs, support services and coordination with the NS.

General actions:

- Risk communication material, and community engagement strategy, with focus on addressing rumours, misconceptions and misinformation through both online and offline through the volunteers network
- Development of a Regional business continuity plan
- Development of a Regional contingency plan
- Preposition of protective equipment for Red Cross personnel
- Roll-out contingency and response actions with priority National Societies
- Surge personnel to increase the Regional capacities
- Coordination at the Regional level

EUROPE

Europe region indicated that 15 NS to date are already involved in preparedness and/or response activities and linked with national coordination mechanisms.

Response by Red Cross Red Crescent globally



In support of 2019-nCoV outbreak response operations, a variety of profiles are being mobilized through the **Rapid Response mechanism** at both regional and global level. Profiles including communications, operations coordination, emergency health, medical logistics, general logistics, pandemic preparedness, psycho-social support, risk communication and community engagement are being deployed at country, regional and global level. With the evolving nature of the outbreak, a **coordination cell has been established at Geneva** level to ensure National Societies across all regions are supported in terms of preparedness and response. Coordination structures are also being established at regional level. The **Surge Information Management Support** network has been activated for this response for activity and

⁴ [PAHO. Coronavirus: Epidemiological alerts and updates. 27 January 2019.](#)

preparedness monitoring. The newly launched Rapid Response guidelines are being used for this response.

Risk communications and community engagement teams have been working closely, including with other agencies to share accurate, timely and trustworthy public health information with focus on translating biomedical content into actionable preventive information and addressing ramping misinformation. Social media assets has been now translated to over 30 languages and shared extensively by National Societies around the world. A [guidance note](#) is helping Red Cross Red Crescent to roll out effective risk communication and community engagement approaches adapted to their local context. More material and guidance will be made available to promote local dialogue and social cohesion with focus on addressing stigma and xenophobia. Anxiety and fear are fuelling harmful stereotypes and racism against people of Asian descent who are being accused of spreading the coronavirus. The IFRC is joining efforts with partners and media to address negative attitudes and promote acceptance and trust.

Reduce risk of coronavirus infection

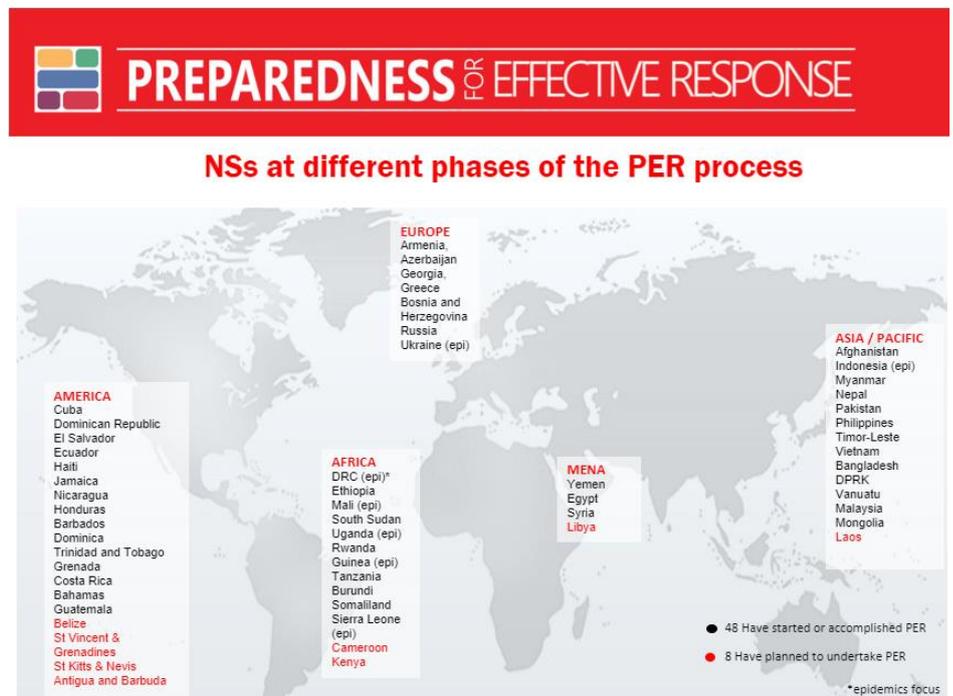
Frequently clean hands by using alcohol-based hand rub or soap and water

When coughing and sneezing cover mouth and nose with flexed elbow or tissue - throw tissue away immediately and wash hands

Avoid close contact with anyone that has fever and cough

Source: WHO

56 National Societies across the world have been participating in the **“Preparedness for Effective Response”** process, the network-wide initiative aiming to assess and strengthen local preparedness capacities to ensure timely and effective humanitarian assistance.



Guidelines to support National Society preparedness are be revised or developed for:

- Business continuity guidance
- Contingency planning guidance
- Guidance for volunteer management during an epidemic / pandemic
- Guidance on how to identify the NS role and mandate in a country response

IFRC Psychosocial Centre has developed [guidance on Mental Health and Psychosocial Support for Staff, Volunteers and Communities in an Outbreak of Novel Coronavirus](#).

Movement coordination

IFRC is coordinating with National Societies, especially those in China, Japan, Democratic People’s Republic of Korea, Republic of Korea and Mongolia, monitoring, issuing advisories, asking all offices to pre-position personal protective equipment, scenario planning and analysing risk, and taking other initial actions.

Coordination with external actors

WHO has developed a [global strategic preparedness and response plan](#) and a series of thematic/sectoral guidance (Preparedness and Response section of the [Situation report #16](#)), including an [online course](#) to provide

general introduction to emerging respiratory viruses. WHO, UNICEF and IFRC are coordinating on behaviour change approaches, community engagement actions, social science research and risk communication material.

C. FUNDING UPDATE

[*Donor response to the Appeal MDR00005*](#)

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