COVID-19 OUTBREAK
Operations update #5
06 March 2020

Emergency appeal: MDR00005
GLIDE: EP-2020-000012-CHN
Operation timeframe: 31 Jan - 31 Dec 2020
Funding requirements: CHF 32,000,000
Funding gap¹: CHF 19,100,000

A. SITUATION UPDATE

98,202 cases globally²

88 countries reporting confirmed cases (11 new countries since last update); 15,908 new cases since last update

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

Click here FOR THE DETAILED UP-TO-DATE INFORMATION ON THE SITUATION AND GUIDANCE DOCUMENTS ON GO.IFRC.org

B. USEFUL INFORMATION & GUIDANCE

Health
- Outbreak guidance for IFRC and National Societies (version 4, 28 Feb) on the GO platform.
- There are critical shortages of PPE globally. In order to ensure PPE are available to front-line healthcare workers who cannot reduce their risk of exposure in other ways, National Societies are requested to analyse their PPE needs based on exposure risk; guidance for the rational use of PPE by Red Cross Red Crescent personnel (version 1, 2 March) is available on the GO platform.

Risk Communication and Community Engagement
- Key tips and discussion points for community workers, volunteers and community networks (23 February 2020). - EN SP

¹ Funding gap calculated after factoring-in soft pledges as well as hard pledges.
² WHO Situation Update dashboard, as of 6 March, 17:00 CET
Communication

- Media statements the COVID-19 response are available [here](#).
- Social media highlights:
  - Twitter (click latest)
  - Medium piece showcasing RCRC global response
  - How advice and design tackle the coronavirus
  - LinkedIn – a live Q&A with IFRC Director of Health
  - Facebook and Instagram: National Society COVID-19 response
  - Our TikTok videos on coronavirus have over 100 million views

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

C. OPERATIONAL UPDATE

Global Overview and Highlights

- Travel advice has been issued by the IFRC, ICRC and some National Societies, discouraging non essential travel. Where possible, conferences, workshop or trainings will be done remotely or postponed. Working from home is encouraged by some.
- Some countries are still hesitant to discuss COVID-19 which hinders National Societies early risk communications and community engagement efforts. There is a continuous need to address stigma and encourage transparent information sharing and community engagement.

Red Cross and Red Crescent activities globally

Communications

Communications on COVID-19 is focused on promoting Red Cross Red Crescent response, supporting National Societies communications, and addressing misinformation and stigma. Media statements the 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 4 languages by IFRC, WHO, BBC Media Action and Internews to answer journalists’ questions and share online resources to keep people safe and informed. More than 170 journalists across the globe participated. Recordings are available here:

- Session 1 in English, français, and العربية
- Session 2 in English and español

Cross media assets for all National Societies have been created and are communicated across all IFRC social platforms to help our audiences understand ways to protect themselves and their loved ones, as well as showing the different aspects of the Red Cross Red Crescent response. A new set of infographics reflect our call for action for people to learn, act and help.

Health

The IFRC, in close collaboration with global and local health partners, is providing continual risk assessment and guidance to support National Societies to implement high-quality, effective and appropriate epidemic response, social support and epidemic impact mitigation activities.

Risk Communication and Community Engagement (RCCE)

The IFRC, in close collaboration with WHO and UNICEF, has developed an RCCE strategy template and guidance with recommendations for each phase of the epidemic (preparedness, containment and mitigation). The strategy highlights the changes in individual behaviours and social norms that are needed in each phase. It guides Red Cross Red Crescent
membership in the community engagement approach as many countries move to a more aggressive containment strategy. Key to the success of this strategy will be community action and ownership. The Red Cross Red Crescent network has a leading role to play in this.

The stigma guide developed by IFRC in collaboration with UNICEF and WHO is being widely used to inform social media approaches and guide dialogue with media outlets across the three organisations and the wider media and NGOs network. The IFRC is leading the development of rapid operational assessment tools to gather people’s perceptions and understanding of the epidemic and track feedback and rumours that can inform a stronger epidemic preparedness and response approach.

**Business Continuity Plans**
Due to the increase of cases in Switzerland, business continuity process at Geneva HQ level has been scaled up and a dedicated team has been established. The team is covering plans for Geneva, Regional Offices, Country Cluster Support Teams and National Societies. In the coming days a cross analysis between the country epidemiological risk analysis and ongoing Red Cross Red Crescent operations will take place to ensure adequate and relevant business continuity planning.

**Coordination**
IFRC is supporting coordination structures at the global and local level, to ensure National Societies’ epidemic preparedness and response activities are appropriate and fill gaps in the global and local response. Effective strategic and operational coordination with partners such as national Ministries of Health, Unicef, WHO and other response partners is ongoing and will continue to be invested in to ensure operational coherence.

**Red Cross and Red Crescent activities by region**

| ASIA PACIFIC | The IFRC Asia Pacific Regional Office (APRO) continues to provide guidance and coordination support to National Societies through five Country Cluster Support Teams (CCSTs) and eight Country Offices, with regular communications and coordination at all levels and 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 of developments through various webinars on topics like Staff Health, Mental Health and Psychosocial Support (MHPSS) and on including migrants and displaced people in preparedness and response activities. An internal 4-page guidance note for National Societies on including migrants and displaced people in preparedness and response activities has also been published. In Asia Pacific, IFRC is co-leading with OCHA and WHO the risk communication and community engagement (RCCE) regional work. In particular, IFRC is working on regional rumour tracking with Bangladesh, Nepal, Indonesia and the Philippines. First sample reports from Indonesia and Nepal will be ready this week. IFRC and Translators Without Borders are partnering to translate and roll out widely in the region the stigma prevention guide and a field guide for volunteers and field staff on RCCE. The material will be available in traditional Chinese, Simplified Chinese, Thai, Vietnamese, Bahasa Indonesian, Tagalog, Korean, Japanese, Malay, Myanmar, Hindi, Bangla. IFRC is also coordinating with BBC Media Action and Internews to support humanitarian organisations in the COVID-19 response in terms of producing information material, rumour tracking, media education and translation/language support.

IFRC APRO is also in the final stages of completing its Business Continuity Plans (BCP), and is implementing measures to ensure operations and its services to the various offices are maintained. To ensure preparedness and responsiveness of National Societies, resources are also being allocated to where they are needed most. This includes the successful appeal for waivers of UN sanctions for medical consumables and equipment to be sent into the Democratic People’s Republic of Korea (DPRK). The Logistics, Procurement & Supply Chain Management department (LPSCM) in Geneva is taking lead on the sourcing and procurement of these PPE for DPRK. Other logistical coordination efforts continue at APRO and with the global network, in view of the global shortage of Personal Protective Equipment |
(PPE) and challenges in freight arrangements due to COVID-19 influenced border restrictions and controls.

**Red Cross Society of China (RCSC)**
The RCSC working group has been coordinating and promoting plasma donation related work, designing and distributing posters, leaflets and other publicity materials, and mobilized 30 donation coordinators from seven medical institutions in Wuhan to participate in promoting plasma donation with recovered patients for the treatment of patients in severe and critical conditions, in support of Chinese Ministry of Health.

Red Cross organizations across Hubei province have mobilized Red Cross volunteers to reach communities, disseminate scientific knowledge on prevention and control, and assist in the prevention and control of the epidemic. A total of 52,900 volunteers have been mobilized, serving 161,600 hours, and reaching out to 3.66 million people.

On 29 February, a volunteer expert team from RCSC arrived in Tehran with a batch of testing kits to support Iranian Red Crescent in the prevention and control of COVID-19 in Iran. Since 3 March a combined RCSC – WHO experts team is collaborating with the Iranian Ministry of Health to address the current situation and see where the experts might be able to support the work of the Iranian MoH.

**Bangladesh Red Crescent Society (BDRCS)**
As part of its preparedness efforts, BDRCS conducted two trainings on COVID-19 Epidemic and Pandemic Preparedness with 60 Red Cross Youth (RCY) volunteers from Dhaka City and Dhaka District Unit. In addition, with the support of the BDRCS Health department and funding by the Danish Red Cross, the Holy Family Red Crescent Hospital will be purchasing 200 sets of Personal Protective Equipment (PPE). A scenario planning exercise has also been conducted with the IFRC, analyzing and drafting possible responses for the Population Movement Operation (PMO) in Bangladesh’s Cox’s Bazar.

**Red Cross Society of the Democratic People’s Republic of Korea (DPRK RCS)**
DPRK RCS is in regular communication with the Ministry of Public Health and other emergency anti-epidemic authorities regarding COVID-19 and has recently trained another 275 Red Cross volunteers on COVID-19 preparedness activities. In total, 775 RC volunteers have been trained in understanding the risks, symptoms, transmission routes and simple preventive measures of COVID-19; conducting health promotion activities with communities, focusing on vulnerable populations including the elderly, people with chronic diseases, and people living in remote areas far from health institutions. Communications are also being stepped up with regular updating of DPRK RCS homepage. To reach a wide population, the DPRK government is using mass media, including DPRK RCS platforms, in promoting knowledge on COVID-19, including anti-epidemic guidelines for elderly people and children.

**Myanmar Red Cross Society (MRCS)**
Currently implementing activities such as information-sharing, health surveillance at border areas, training of volunteers and psychosocial support. MRCS has distributed 2,000 WHO information pamphlets to at least 17 branches. So far, two runs of the Training of Trainers (ToT) for Epidemic Control for Volunteers (ECV) have been conducted for a total of 56 volunteers. Trained volunteers will replicate the training in their respective state branches and regions. Most of the activities conducted by MRCS have been continually uploaded to the MRCS Facebook Page.
Nepal Red Cross Society (NRCS)
Focusing on preparedness activities through awareness creation and promotion, NRCS has been disseminating information through their social media channels on a regular basis, reaching more than 470,000 people so far. All 77 district chapters (through their sub-chapters) received awareness raising materials about COVID-19 to be used with communities and at schools and volunteers have been mobilized to support activities. As of 3 March 2020, NRCS’ hotline-1130 has received 67 calls regarding COVID-19. Finally, PPE was prepositioned, and logistical gaps have been identified.

IFRC and NRCS have been coordinating with United Nations Humanitarian Coordination Teams (HCT) as well as UN agencies on a regular basis. HCT meeting held on 24 February has agreed to develop an Emergency Response Plan (ERP) for COVID-19. IFRC and NRCS have jointly reviewed the ERP developed by cluster leads and the United Nations Resident Coordinator Office (UNRCO) and included activities that NRCS has been conducting in-country.

Pakistan Red Crescent Society (PRCS)
Since confirmation of COVID-19 cases of citizens returning from Iran earlier in the week, PRCS has been supporting screenings along the Pakistan-Iran border in Baluchistan, providing staff, volunteers, ambulances and isolation facilities for suspect cases. Further, PRCS has deployed health teams and ambulance services on the Pakistan-Afghanistan border, where screenings are ongoing for Afghan nationals entering Pakistan.

A quarantine facility has been established at the border with six fully equipped containers, including a generator, water, and sanitation facilities. Six PRCS ambulances with first-aiders and volunteers have been deployed to Lahore, Quetta and Islamabad International Airports and at the National Institute of Health (NIH) Islamabad for transportation of confirmed or suspected cases. Regular meetings with NIH are taking place, attended by WHO, PRCS and other key stakeholders, to receive updates in the situation across the country. Coordination is ongoing with NIH Islamabad for establishing a quarantine facility at PRCS Hospital Rawalpindi.

PRCS volunteers and drivers have been trained by the NIH on the proper use of masks and gloves and on other preventive measures, and will run a mass awareness campaign in the country regarding COVID-19 prevention and safety.

Palang Merah Indonesia (PMI)
With the confirmation of two COVID-19 cases in Indonesia, PMI has activated its business continuity plan. To date, eight PMI provinces have continued with risk communication campaigns. PMI continues to be actively involved in the national taskforce for risk communication and community engagement together with UNICEF and other humanitarian country team members.

Japan Red Cross Society (JPCS)
Since the disembarkation of all guests onboard the Diamond Princess completed on 27 February, JRCS doctors, nurses, and pharmacists have been transferred to government quarantine facility for at-risk ship passengers who have not tested positive for the virus but are within the incubation period. About 20 JRCS hospitals are treating COVID-19 patients, and occupancy rates have been increasing rapidly. One of JRCS’ hospitals accommodates confirmed positive but asymptomatic patients and JRCS teams regularly monitor their conditions. JRCS supports the Canadian Red Cross members, who continue supporting Canadian citizens hospitalized in Japan, with translation services.

JRCS is facilitating blood donations but has experienced difficulties due to the cancellation of blood donation campaigns by the private sector and donors fearing infection. JRCS is continuing to appeal to the public through messaging and through the media.

Korean Red Cross (KNRC)
From the onset, KNRC hospitals have been playing crucial roles in the triage and treatment of infected people. Six Red Cross hospitals nationwide were categorized as triage centres for COVID-19. Two Red Cross hospitals in Sangju and Yeongju have been re-designated as Exclusive Hospitals for the treatment of COVID-19 patients from Daegu and N. Gyeongsang province. As of 3 March, 125 confirmed patients from Daegu have been transferred to Red Cross hospitals that can accommodate up to 344 patients.

Responding to the call for the need of medical personnel in Daegu, KNRC hospitals have dispatched three doctors and 15 nurses to hospitals in Daegu. Four HQ staff were mobilized to the Daegu Red Cross Chapter to coordinate the operation. In alignment with the HQ’s response plan, 15 district Chapters have scaled up surveillance and containment activities in close cooperation with local authorities and have prepositioned relief items. As of 3 March, KNRC has distributed 1,762 prevention kits, 5,236 meal kits, 63,100 masks, 11,894 hand sanitizers and 997 relief items to 20,152 of people in need.

The Daegu Red Cross Chapter has received cash and in-kind contributions from individuals, groups and corporate sectors as it was a designated official channel for public donations. So far, in close coordination with the Daegu Metropolitan city, the Daegu Red Cross Chapter has provided relief kits to 9,951 people under self-isolation in Daegu city. Further, the Chapter mobilized volunteers to support disinfection activities in some hospitals and public areas. The Chapter is now in process of distributing disease prevention kits and emergency relief kits and is providing meal services to 9,951 people (those self-quarantined, evacuees from Wuhan, and other vulnerable people). Since 28 February, KNRC has mobilized 12 psychosocial support consultants to the hotline center operated by the Ministry of Health to provide telephone counseling to people in Daegu.

**Singapore Red Cross Society (SRCS)**

Through a partnership with the Migrant Workers’ Centre, SRCS is providing support to a migrant worker who is a contact of an infected person, and is also distributing awareness materials on reducing the risk of COVID-19 in languages commonly spoken by migrant groups in Singapore. Together with the Centre for Domestic Workers, SRC is disseminating information on how migrant domestic workers can protect themselves and the households in which they are living and working.

**Thai Red Cross Society (TRCS)**

As part of prevention and preparedness efforts, TRCS has been enforcing preventive measures and precautions for TRCS staff, patients, blood donors and visitors, and at patient screening areas within TRCS hospitals. Through publications and online communication, TRCS has been continuing to provide advice to the general public on how to protect themselves from COVID-19. IFRC’s guidance and tools have been shared, including the Community-Based Health and First Aid (CBHFA), Epidemic Control for Volunteers (ECV) adaptation and use for COVID-19, Psychological First Aid (PFA) in epidemics, risk communications, and community messaging, and guidance on including migrants and displaced people in preparedness and response activities.

TRCS has supported Red Cross Society of China (RCSC) with a donation of USD 50,000 and has started receiving public donations on behalf of RCSC under “Humanitarian and Medical Support for Chinese people against the spread of COVID-19 Pneumonia in Wuhan, Hubei province and other areas of the People’s Republic of China.” TRCS has also attended a Rapid Response Center Meeting with the Ministry of Foreign Affairs, Ministry of Public Health, and other related organizations to draft a response plan for Thais at-risk from aboard (i.e. from Wuhan; Republic of Korea; or from the Diamond Princess cruise ship).

**Cruz Vermelha de Timor Leste (CVTL)**
With the Support of the Ministry of Health, CVTL is producing IEC material for COVID-19 and has organised a meeting with the WHO and the Ministry of Health on COVID-19 operations in mid-March. The operations seek to target 13 districts in Timor Leste. In the meantime, CVTL has continued to be actively involved in national health cluster meetings for COVID-19, as the government prepares two referral health facilities for isolation sites.

### Viet Nam Red Cross Society (VNRC)

Currently, VNRC is developing an action plan and guidelines for COVID-19 prevention, control, and response activities throughout the Red Cross system, targeting up to nine provinces and cities that have been assessed as high risks and that are densely populated. Continuing to attend the thrice-weekly National Steering Committee for COVID-19 prevention and control meetings chaired by the Deputy Prime Minister, VNRC has been collaborating with the Ministry of Health for the development of materials, publications and dissemination, and has called out for support from partners in the Red Cross Red Crescent Movement and other stakeholders, including the private sector.

Information dissemination campaigns have been launched at VNRC National HQ and provincial chapters. These include the use of social media and other platforms. VNRC has provided masks, soaps and disinfectants to people and volunteers working with infected cases or suspected cases. VNRC has also supported RCSC with 100,000 masks, with local chapters of VNRC on the border with China on standby to provide direct support to RCSC.

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<th>AFRICA</th>
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<td>• The last week has seen an increase in the number of countries reporting COVID-19 cases in Africa. The IFRC Emergency Appeal is already supporting Nigeria with activities such as contact tracing, risk communication and community engagement (RCCE) and health education. Similar support will be extended to Senegal and South Africa.</td>
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<td>• Meetings with Partner National Societies (PNS) working in the Sahel Cluster and West Africa cluster took place in the last week. The objectives were to brief them on COVID-19 preparedness activities coordinated by IFRC to support African National Societies, and to elicit support through existing pandemic preparedness, health and Disaster Management programmes. The Sahel Call was attended by the Netherlands, British, Swiss, Italian and Belgium National Societies, while the West Africa Call by Norwegian, Netherlands, Belgium and Australian. Follow up meetings with the Norwegian Red Cross and Belgian Red Cross will be held to work on details.</td>
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<td>• The African Regional Office activated the Business Continuity Planning team and organized a briefing meeting for the Heads of Units on 28 February. Tasks were assigned and the team is working on developing the plan.</td>
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<td>• Technical support was provided to 22 National Societies in the development of their contingency plans. As of 4 March, Seychelles Red Cross and Tanzania Red Cross have drafted one.</td>
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<td>• A COVID-19 Risk Communication and Community Engagement (RCCE) strategy for African National Societies has been developed and reviewed. The RCCE Surge has led the development of data collection tools, planning for the use of radio and mobile cinema, and the development of tips on handling social media.</td>
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<th>THE AMERICAS</th>
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<td>As of March 5, there are 11 countries in the Americas region with confirmed COVID-19 cases, including Argentina, Brazil, Canada, Chile, Dominican Republic, Ecuador, French Guiana, Mexico, Saint Barthelemy, Saint Martin, and United States. 216 cases have been confirmed across the region, with 11 deaths, all in the United States.</td>
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The IFRC Regional Office continues to focus on preparedness actions in the region and has developed a business continuity plan and a contingency plan in the process of approval. An scenario exercise will take place and will feed into the contingency plan.

Global Disaster Preparedness Center (GDPC)
The Global Disaster Preparedness Centre (GDPC) is hosted by American Red Cross in partnership with the IFRC. The GDPC has developed a suite of tools and services for small and medium sized businesses, much of which is relevant to small not for profit organizations and transferable to Red Cross and Red Crescent societies. As an initial response, the GDPC has included COVID-19 messages and guidance within its first aid and business preparedness mobile applications, which have a user base of 5 million people.

The Colombian Red Cross
The National Society has formulated a Contingency Plan and an Action Plan for an eventual situation of Coronavirus in the country, which is being implemented with the support of the Strategic Partners, and according to the guidelines of the Ministry of Health.

National Societies across the region continue to develop preparedness activities and coordinate with government authorities. For more information see the previous Operational Update.

EUROPE AND CENTRAL ASIA

As of 5 March, there are 4,263 confirmed cases in 39 European region countries and 113 deaths (107 in Italy, 4 in France, 1 in Spain, 1 in San Marino).

National Societies across Europe continue to be involved in preparedness and/or response activities, and in the national as well as the regional coordination mechanisms. Some National Societies are participating in activities such as thermal screening at airports and ports and information distribution. A Pandemic Preparedness Delegate is now in post to support National Societies with technical guidance as necessary and a systematic information exchange between IFRC Europe Regional Office and National Societies has been established.

Estonian Red Cross (ERC)
Last week the Estonian Government requested ERC to mobilize volunteers for two seaports and for one airport. National Societies volunteers advise people arriving about COVID-19 risks and measure temperature (after thermocamera control) if needed.

French Red Cross (FRC)
FRC is continuously working with the French Government to ensure the logistics of the reception centre for French nationals repatriated from Hubei currently affected by COVID-19.

Georgian Red Cross (GRCS)
25 February, the GRCS was approached by the Emergency Situations Coordination and Urgent Medical Assistance Centre (LEPL) of the MoH of Georgia, requesting GRCS volunteers’ support in thermo-screening process at the 14-border check-points of Georgia. The GRCS has a human resource capacity (through Red Cross volunteers) to provide support at 9 check-points.

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

Italian Red Cross (ItRC)
As the number of cases is rising in Italy, Italian Red Cross is continuing activities such as conducting body temperature checks of passengers arriving in Italy (3,000 activations per month in 25 airports), training on bio-containment, and medical transport for suspected cases. ItRC requested assistance in providing personal protective equipment for total amount of 50,000 sets. Necessary advice from logistics for procurement was provided. ItRC are continuing to take calls through their “CRI per le
A "person" call center 24 hours a day, responding to queries, with medical staff available to support specific medical queries.

**Russian Red Cross (RRC)**

Russian Red Cross regional branches are in close contacts with the regional and local authorities, especially the regions bordering with China. Currently, RRC and its regional branches provide support in dissemination of the prevention information among the population.

**Ukrainian Red Cross Society (URCS)**

Ukrainian Red Cross provides information about COVID-19 and has released a video regarding personal hygiene. The video has been translated in English for broader use. URCS has also launched a comprehensive communication campaign to promote information in various media channels.

**MENA**

As of 5 March, a total of 3,120 COVID-19 cases have been confirmed in 13 out of 17 countries in the MENA region, including 93 associated deaths. Iran has become an epicenter of COVID-19 outbreak in the region and has confirmed 2,922 cases with 92 associated deaths. Morocco, Jordan, Tunis and Saudi Arabia have reported their first cases in the past few days.

**Iranian Red Crescent Society (the IRCS)**

The IRCS has activated EOCs and established necessary the coordination mechanism with the Ministry of Health (MoH) and is part of the MoH COVID-19 task force. Awareness sessions (e.g. campaigns and online courses) have been implemented. Trained relief and health workers have been conducting widespread screenings in close collaboration with the MoH and the National Disaster Management Organization, for early detection and referral. Personal Protective Equipment (PPE) for the IRCS Treatment personnel and Health teams have been prepositioned. In addition, IRCS’ health specialist volunteers such as physicians and nurses have been mobilized nationwide to assist the MoH in a number of hospitals and with COVID-19 related calls received to the Helpline.

**Lebanese Red Cross (LRC)**

LRCS Emergency Medical Services (Ambulances) have transported 42 cases to the Rafic Hariri University Hospital, assigned by the Ministry of Public Health (MoPH). Regarding the preparedness, 144 EMTs are trained and 10 EMS stations are equipped for COVID-19 response. 390 community volunteers are trained for community awareness sessions and 1,335 people have trained including medical students at 4 universities. LRC is working on risk communication, community engagement and accountability (RCCE and CEA) activities in collaboration with Unicef and MoPH.

**Iraq RC, Egyptian RC, Morocco RC, Algeria RC, Palestine RC** including Lebanon branch and Tunisian RC are implementing community awareness sessions with IEC materials and social media.

**Libya Red Cross** will train Community Based Health and First Aid volunteers from March 19 on the new rapid training package for COVID-19 community response (Arabic version feedback planned).

**IFRC response**

LRC has created COVID-19 response teams and trained and equipped its volunteers to handle these cases. Photo: LRC
The MENA Emergency Plan of Action (EPoA) for COVID-19 was published, the including proposed activities to support National Societies in their response to COVID-19.

IFRC country offices business continuity plans are being finalized.

Preparedness mapping from seven National Societies was received and analysis is ongoing, looking at capacity to respond to COVID-19.

A contingency and response plan template was shared with National Societies, based on the IFRC guidelines for contingency planning and the technical guideline for COVID-19. National Societies are working on their respective plans.

To support the National Societies and IFRC Country Offices information needs for COVID-19 response, a shared drive was established with information and technical documents in Arabic, English and French.

COVID-19 activity monitoring form was shared with Country offices and National Societies based on the technical guidelines for COVID-19 and MENA EPoA activities.

Communication and coordination: Information from WHO Regional Office for the Eastern Mediterranean. NS encouraged to attend MoH or other national authorities’ meetings for information sharing and coordination. NS feel risk of being tasked too much in light of weak public health systems in the region.

MENA regional network for MHPSS with 11 NS participating has technical committee which developed and adapted PSS materials for COVID19 for the region. Feedback on the message materials in process from 4 NS ongoing.

C. FUNDING UPDATE

Donor response to the Appeal MDR00005

D. CONTACTS

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

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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.

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<td>21 February 2020</td>
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