**Situation Update**

132,000 COVID-19 cases
118 Countries, territories, & areas

**Funding**

32,000,000 CHF required
19,000,000 Funding gap

16% Hard pledges
25% Soft pledges
59% Funding gap

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**National Society Response**

68 National Societies engaged in...

68 Health
37 RCCE
42 Institutional Readiness

**Number of National Societies engaged in selected activities:**

**Health:**
- 18 Screening & contract tracing
- 18 Psychosocial support
- 11 Clinical, paramedical, or homecare services
- 12 Emergency social services for quarantined individuals

**Risk Communications & Community Engagement (RCCE):**
- 20 Misinformation management
- 10 Community feedback mechanism
- 8 Stigma prevention messaging

**Institutional Readiness:**
- 20 Contingency planning
- 7 Business Continuity planning
- 17 Internal Risk Communications

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**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

**Communication**
- Media statements on the COVID-19 response available here

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

**Red Cross and Red Crescent activities globally**

**Health**

The IFRC, in close collaboration with global and local health partners, is continuing to provide risk assessment and guidance to support National Societies to implement high-quality, effective and appropriate epidemic response, social support and epidemic impact mitigation activities. In the last week, along with various National Societies and external partners, IFRC attended a webinar which focused on sharing experiences between countries and organizations working in prehospital and intensive care service provision. IFRC is coordinating various internal thematic groups (e.g. Quarantine and emergency medical services (EMS)) which allow regions and National Societies to share experiences, discuss challenges and share resources. In addition, IFRC Geneva is working with regions to map out clinical and prehospital services currently being provided by National Societies.

**Mental Health and Psychosocial Support (MHPSS)**

With the guidance from the IFRC Reference Centre for Psychosocial Support, which is co-chairing the Inter-Agency Standing Committee (IASC) Reference Group of MHPSS, several guidelines and information, education and cations (IEC) materials were developed to guide National Societies in responding to COVID-19. Special attention was brought to support people under quarantine, health care and first responders, elderly, and people with chronic illnesses. MHPSS specific webinars were also held, addressing MHPSS measures at the various phases of a response.

New Mental Health and Psychosocial Support (MHPSS) guidance and information materials on COVID-19 have been developed by the IFRC Psychosocial Support Reference Centre and the IASC on MHPSS, available [here](#).

**Risk Communication and Community Engagement (RCCE)**

The IFRC continues to co-lead RCCE work with the WHO and UNICEF globally and regionally, providing strategic guidance and support to its membership and partners, with a focus on community-centred approaches and tools. The three agencies have developed an RCCE strategy with guidance on approaches and activities for the three phases of response: preparedness, containment and mitigation. The stigma guide, developed by the three, is informing social media strategies and is being used for local media training and audio-visual materials. Additional materials are being developed, including a guide on the inclusion of vulnerable and marginalized groups in RCCE (led by the Asia Working Group including UN Women, Translators without Borders, WHO, UNOCHA and IFRC); social media guide and an RCCE training pack.

Guidance and tools available in multiple languages on the [GO Platform](#) and [Community Engagement HUB](#), including:

- RCCE implementation guideline; a regional RCCE strategy for Africa (which will serve as a template for all regions);
- Preventing and addressing social stigma (soon available in Traditional Chinese, Simplified Chinese, Thai, Vietnamese, Bahasa Indonesian, Tagalog, Korean, Japanese, Malay, Myanmar, Hindi, Bangla) – IFRC, UNICEF, WHO
- Community guidance for social mobilizers, frontline workers and volunteers (soon to be available in Traditional Chinese, Simplified Chinese, Thai, Vietnamese, Bahasa Indonesian, Tagalog, Korean, Japanese, Malay, Myanmar, Hindi, Bangla), developed by the IFRC, UNICEF and WHO.
- Community feedback Kit (simple templates for collecting feedback and analyzing feedback)

New tools and guidance include:

- [Rapid survey](#) and [Focus Group Discussion](#) (FGD) guides for volunteers and communities
- [Radio-show guide](#)
- [UNICEF, WHO and IFRC](#) launched the [Key Messages and Actions for COVID-19 Prevention and Control in Schools](#)
Coordination
IFRC is continuing to support 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 to ensure operational coherence.

Business Continuity Plans
The health and safety of staff and volunteers remains a top priority. Globally, IFRC is working to reduce the risk of workplace transmission while protecting communities from exposure. Specific measures include timely communication with staff and volunteers, scaling up resources to provide effective remote working, providing access to psychosocial support, sharing hygiene messages, and limiting face to face meetings, events and gatherings. Specific guidance is given to staff and volunteers in community facing positions who might be working closely with ill people (e.g. through screening efforts or in quarantines). Non-essential travel has been suspended until further review.

Global Rapid Response
Over 35 rapid response personnel have been deployed to five regions and Geneva HQ. The Surge team is working to ensure business continuity for COVID-19 and other disasters and crisis. Discussions with IFRC regional offices and National Societies who provide surge support normally are taking place in order to better understand current and future capacity to respond.

Communications
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. Social media highlights including: Twitter, Medium, LinkedIn, Facebook and Instagram, TikTok videos and WEF Interview with IFRC Director of Health.

Supply Chain
Logistics activities aim to effectively manage the supply chain, including procurement, customs clearance, fleet, storage and transport to distribution sites in accordance with the operation’s requirements and aligned to IFRC’s logistics standards, processes and procedures. The Logistics Procurement Supply Chain Management (LPSCM) team in Geneva has been coordinating the global supply chain internally and with National Society logistics counterparts, ICRC, WHO and the Pandemic Supply Chain Network (PSCN). With support of a surge medical logistics coordinator and a surge supply chain coordinator, LPSCM Geneva will continue leading the global supply chain coordination with external stakeholders, to ensure consistency and potential reallocation of supplies, as well as supporting preparedness activities among the logistics hubs and Operational LPSCM units.

Red Cross and Red Crescent activities by region

<table>
<thead>
<tr>
<th>ASIA PACIFIC</th>
<th>Regional Overview</th>
</tr>
</thead>
<tbody>
<tr>
<td>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 (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 number of confirmed cases, governmental actions, and activities being implemented or planned by the National Society.</td>
<td></td>
</tr>
</tbody>
</table>

As the situation evolves, with cases detected in new countries, reallocation of resources and ramping up preparedness measures and responses is expected. Revisions of the Emergency Plan of Action (EPoA) are done at the country and regional levels, in coordination with National Societies, guided by the APRO.
Bilateral support from the Australian Red Cross and New Zealand Red Cross is provided to several Pacific National Societies for pandemic preparedness activities.

**Risk Communication and Community Engagement (RCCE)**

IFRC APRO is co-chairing the RCCE working group together with UNOCHA and WHO. The group has developed a 4W which UNOCHA has turned into an interactive dashboard that tracks RCCE activities and languages used. Additionally, the group is finalising a guide on including vulnerable and marginalised groups in RCCE. The IFRC is also leading the development of a 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. IFRC APRO has been working closely with National Societies to adapt the IFRC feedback starter kit as a tool to collect community questions, rumours and misinformation on COVID-19. A first sample report showcasing community data from Nepal Red Cross Society and Indonesian Red Cross Society has been shared. Further, a webinar on Risk Communication & CEA with support of health and psychosocial support (PSS) colleagues will be held on 16 March, mainly aimed at National Societies in Asia Pacific.

**Business Continuity Plans**

IFRC APRO is testing its business continuity plans with staff now working from home, while COs and CCSTs across Asia Pacific are in their final stages of drafting business continuity plans for their offices. A Revised travel guidance, aligned with the Travel and Risk Management Tool developed by IFRC HQ in Geneva, has also been disseminated to all staff in APRO, in addition to Staff Health Guidance in the form of Frequently Asked Questions (FAQs). Feedback is being collected to ensure process and procedures are fit for purpose.

**Logistics**

To ensure preparedness and responsiveness of National Societies, resources are also being allocated to where they are needed most. Following the exemption from the UN sanctions committee, the sourcing and procurement of Personal Protective Equipment (PPE) for the Democratic People’s Republic of Korea (DPRK) has been activated, with support from the Logistics, Procurement & Supply Chain Management department (LPSCM) in Geneva, Kuala Lumpur and Beijing. This is done in close coordination with the IFRC DPRK and DPRK RC offices. The Health and OLPSM teams, in coordination with the CCSTs/COs are working on the PPE mapping for the National Societies in the region as part of the COVID-19 preparedness plan initiative. This exercise will provide the overall PPE needs in the countries and support the mapping of the supply chain for PPE globally.

**Rapid Response Personnel**

To date, a total of nine Rapid Response members have been deployed at CCST Beijing and the Asia Pacific Regional Office (APRO) to provide support in logistics, communication, emergency health, pandemic preparedness, PSS, planning monitoring evaluation and reporting (PMER), partnerships and resource development and operations coordination. Rapid Response members are being identified for deployments in the second rotation of support.

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

On 9 March, with the assistance of the Chinese Embassy in Iraq, the RCSC expert team to Iraq held meetings with the Iraqi Ministry of Health and Environment and relevant departments to exchange experiences on the prevention and control of the COVID-19 in Baghdad. RCSC has also sent an expert team of seven to Italy to support the Italian Red Cross COVID-19 response. The team is led by a deputy head of the RCSC and includes an expert from the Chinese Communicable Diseases Centre (CDC), three other experts, an interpreter, and a coordinator official assigned from Sichuan Province.

**Taiwan Red Cross Organization (TRCO)**

Upon the outbreak of COVID-19, TRCO immediately contributed 200,000 RMB (CHF 27,075) to the Red Cross Society of China (RCSC) to purchase equipment that help to control and prevent the spread of the epidemic. TRCO has also made in-kind donations by delivering 600,000 disposable medical face masks, 10,000 isolation gowns, 20,000 safety goggles, and 160,000 nitrile exam gloves to RCSC.
To advocate for frequent hand washing habits, TRC has procured 60,000 soaps to deliver to disadvantaged families across Taiwan. At the same time, TRC has also hosted two discussion forums on topics concerning COVID-19. On 5 March 2020, TRC invited the former Health Minister, Dr. Ching-Chuan Yeh, to talk about the “Prevention and Quarantine of Infectious Disease,” enhancing participants’ awareness on proper COVID-19 precautionary measures. On 6 March 2020, TRC invited Ms. Huei-Wen Lee, former Director of Department of Psychiatry, Taipei City Hospital Heping Fuyou Branch, to talk about “Crisis? Chance? Lessons Learned from COVID-19,” with a focus on the mental health and psychosocial aspects concerning the outbreak of COVID-19.

Currently, TRC is working on procuring powder-free nitrile gloves, protective apparels, disposable medical face masks, N95 masks, disposable medical face shields, and reusable face shields. These items will be delivered to local fire departments and hospitals and distributed to frontline paramedics and healthcare workers.

**Bhutan Red Cross Society (BRCS)**

BRCS Secretary General sits on the Health Emergency Operation Committee (HEOC) chaired by the Prime Minister. Having conducted advocacy programs on COVID-19 since the beginning of the outbreak, BRCS volunteers continue to support health screening conducted at the border gates, have continued producing and disseminating IEC materials, and have continued sharing messages through social media posts. BRCS has also supported efforts in collecting used dispensers for refilling and has procured and distributed hand sanitizers and masks to the general public, advocating preventive health and hygiene habits.

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

DPRK RCS is strengthening its cooperation and coordination with its stakeholders, including the Ministry of Public Health, Emergency Anti-Epidemic Command, and IFRC Country Office. As of 6 March, 6,225 more Red Cross volunteers were trained in COVID-19 epidemic control activities, bringing the total to 1,000 volunteers trained on risks, symptoms, transmission routes and simple preventive measures, and who are better prepared to respond to health in emergencies.

On a daily basis, these trained RC volunteers have been assisting household doctors in the early detection of those with symptoms (fever and acute respiratory infection) in the remote areas and have been assisting those quarantined and their families. With the best use of the local network of information dissemination, RC branches at all levels are encouraging their volunteers to learn and be updated on the latest technical information on COVID-19, and to continue playing a key role in health promotion. In the emergency preparedness against COVID-19, the DPRK RCS is strengthening its communication work including regular coverage of RC homepage & local mass media.

**Japan Red Cross Society (JRCS)**

While around 30 hospitals designated to specified infectious diseases have been treating COVID-19 patients, a dwindling number of blood donors has led to JRCS collaborating with NHK (news media) and others on broadcasting a public appeal through more than 200 different media (including newspapers, web news, and television), explaining the current situation and advocating the importance of blood donation. At the same time, Canadian Red Cross experts continue to provide psychosocial support (PSS) and logistics services to Canadian citizens warded in local hospitals, augmented by a translator from JRCS.

JRCS has also finalized the “COVID-19 Staff Support Guide” and distributed it to all Japanese facilities. The purpose of the guide is to understand the anxiety and stigma which can be found particularly during the infectious period, to understand how this affects the staff/caregiver, and to mutually support the staff involved in COVID-19 responses through colleagues, family members or supervisors, and from the management level.
Korean Red Cross (KNRC)

So far, RC hospitals in Sangju and Yeongju have treated 318 infected patients – of these, 36 patients have fully recovered and have been discharged from the hospitals. KNRC has also conducted tests for 1,505 nurses working at blood centers. The results of the tests will be announced on 16 March. The Ministry of Interior and Safety (MoIS) held a stakeholder’s meeting on 6 March with key stakeholders (including Daegu City, N.Gyeongsang province, KNRC and major fundraising organizations) to formulate a comprehensive plan of action. Daegu and N.Gyeongsang shared its priorities of needs and requested in-kind contributions of hygiene kits and masks for the people under isolation or treatment. KNRC and fundraising organizations shared their funding situation and initial plans of action - cooperation and coordination mechanisms will be strengthened to conduct comprehensive response operations especially in the areas of Daegu and N.Gyeongsang.

Jack Ma Foundation and Alibaba Foundation have also contributed one million masks, and these have been distributed to COVID-19 patients, medical personnel, and vulnerable groups in close cooperation with government and local authorities.

KNRC is currently preparing the overall distribution plan for the in-kind contributions from overseas.

Maldivian Red Crescent (MRC)

Since 7 March confirmation of two COVID-19 cases, the Maldivian Red Crescent has been working closely with and providing technical support to the COVID-19 National Emergency Operations Center (NEOC), set up by the Health Protection Agency and the National Disaster Management Authority. MRCS is engaging in information dissemination activities, especially hygiene promotion (mostly through virtual/digital platforms), and is supporting and coordinating psychosocial support activities.

Myanmar Red Cross Society (MRCS)

Myanmar Red Cross Society (MRCS), in close coordination with the Ministry of Health and Sports (MoHS), has mobilized a large number of Red Cross volunteers to support the MoHS activities to prevent COVID-19. MRCS’s activities focus on awareness raising, information sharing, health education, risk communications, and psychosocial support at the community level. Additionally, MRCS has been supporting MoHS in screening people in migration entry & exit points as well as in community-based surveillance measures. MRCS also distributed sanitizers, as well as procured personal protective equipment (PPE) to be well prepared for possible outbreaks and its impact to its frontline health volunteers working in communities. MRCS continues to lead the Red Cross & Red Crescent Movement Task Force which convenes regularly to effectively and timely prepare for the fast-evolving situation.

Nepal Red Cross Society (NRCS)

In collaboration with the Government of Nepal, WHO, and the IFRC, NRCS has been developing various IEC materials, including print materials, flyers and social media posts, on a regular basis. NRCS has also

Many doctors and nurses skip meals because they are working round the clock to treat COVID-19 patients. KNRC has been providing them with bread to show support and appreciation. *(Photo: IFRC/KNRC)*

A Red Cross volunteer for the past 37 years, Daw was in Yangon for a Training of Trainers (ToT) by the MRCS on risk communication, community engagement, and psychosocial support. *(Photo: MRCS)*
continued running its NRCS Hotline. As of 12 March, 90 calls were received in the NRCS hotline, among whom 22 callers were female and 68 callers were male. In addition, five episodes of NRCS radio programme on COVID-19 have been produced by NRCS radio and aired through different FM stations.

As part of plans to scale up activities, NRCS organized a planning meeting on 8 March that focused on discussions to expand community outreach activities in all districts. NRCS has developed a scaled-up plan for the next 3-4 months that will need additional resources, and are collaborating with the IFRC CO in updating the Emergency Plan of Action (EPoA). At the same time, IFRC and NRCS have been regularly coordinating with UNRCO/HCT and participating in HCT contingency planning for COVID-19.

In Nepal, all 77 district chapters of NRCS are being equally engaged at the local level to create COVID-19 awareness through the sub-chapters. They have been mobilizing volunteers in communities and schools for awareness raising activities. The IFRC CO has also started procurement processes for 3,000 pcs of surgical mask, 3,000 pairs of gloves, 1,000 pcs of hand sanitizer (50 ml) and 1,000 pcs of hand washing soap, with technical support from APRO. It is expected that delivery of items will be completed within 2 weeks.

**Pakistan Red Crescent Society (PRCS)**

In support of the Health Department of Baluchistan, screening teams and ambulance services have been deployed at the Chaman Border, and ambulances with First Aiders have been deployed at Islamabad, Lahore and Quetta Airport. PRCS has also augmented the quarantine facility established at Taftan Border with the logistical provision of six pods used for the transfer of patients with infectious diseases, and has also supported the quarantine facility with the provision of a Water and Sanitation (WATSAN) plant to provide safe drinking water.

Upon the request of Health Directorate - Merged Areas Secretariat, PRCS has deployed ambulances to the Torkham Border for any response and referral cases. PRCS is also coordinating with NIH Islamabad in establishing a quarantine facility at PRCS hospital in Rawalpindi.

As part of its efforts in raising COVID-19 awareness, informative brochures and banners with key messages on coronavirus preventive measures have been distributed, along with IEC material distribution in public areas and at the airport. PRCS volunteers are also being trained with skills to facilitate COVID-19 preventive measures by the Government of Pakistan.

**Thai Red Cross Society (TRCS)**

According to the Thai Ministry of Public Health (MoPH), the country is in Phase 2 – “limited local transmission”. As of 12 March, there has been a total of 70 confirmed cases with one death reported. TRCS joined a conference with the Ministry of Foreign Affairs (MoFA), MoPH, and related organizations to draft response plans to repatriate Thai citizens in Italy and Iran back to the country.

The two TRCS hospitals have set up a special quarantine zone for COVID-19 patients – there has been no cases confirmed at this time. Through its Provincial Chapters, TRCS has also supported local communities to make cloth masks for distribution to vulnerable groups, and the TRCS Volunteer bureau has also set up a project to manage the safe disposal of masks.

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

As an auxiliary to the government, CVTL has been requested by the Ministry of Health (MoH) to assist in the installation of wash basins at points of entry like airports and harbours. CVTL has also invited WHO officers to disseminate COVID-19 information and everyday preventive actions to staff and volunteers at the HQ level. Although no confirmed cases have been reported, the Timorese government has started to implement preparedness and prevention measures.

**AFRICA Regional Overview**

As of 12 March 2020, 20 cases have been recorded in Africa, in Nigeria (2), Senegal (4), South Africa (7), Cameroon (2), Togo (1), Burkina Faso (2), Côte d’Ivoire (1) and the Democratic Republic of Congo (1). All
cases have been imported and to date community transmission has not been reported. Response actions have been initiated in Nigeria, Senegal, South Africa and Togo, while Cameroon and Cote d’Ivoire are about to commence activities.

**Risk Communication and Community Engagement (RCCE)**

IFRC senior staff participated in the Regional Partnership meeting on COVID-19 organized by the WHO in Nairobi and the Sahel. The capacity of the Red Cross Red Crescent National Societies in being trusted partners in community health, risk communication and community engagement was reinforced in the meeting. The partners agreed that IFRC and UNICEF will co-facilitate RCCE work along with UNICEF and WHO. The virtual meeting of the first interagency coordination working group on RCCE for COVID-19 was held on 12 March. The following guidance documents are prepared and shared with National Societies:

- **RCCE strategy for Africa** - The RCCE strategy and action plan will provide guidance to National Societies in developing preparedness and response plans.
- **Focus Group Discussion (FGD) guide** to collect feedback from volunteers
- **Focus Group Discussion guide** to collect feedback from communities
- **Radio show guide and running order**

Translation to French of the above documents is in process, as well as of the stigma guide and discussion points for social mobilizers.

**Business Continuity Plans**

The African Regional Office along with East Africa CCST and Somalia Country Office (all based in the same premise in Nairobi) have prepared their business continuity plan for COVID-19. The CCST and COs are in the process of preparation of the BCP, with the South Africa CCST on the forefront with the Surge support. A team A/ team B working from home modality is being tested from this week in the office.

**Contingency Plan**

The Regional Office developed a template for COVID-19 Contingency Plan and the development process is supported by surge personnel. Many NSs including South Africa, Zimbabwe Red Cross, Zambia Red Cross, Mozambique Red Cross, Seychelle Red Cross, Tanzania Red Cross, and Uganda has already developed Contingency plans.

**Nigerian Red Cross Society (NRCS)** is responding to COVID-19 in two states, Lagos and Ogun, where the index case had made probable contacts with other people. The approach for risk communication is done through radio shows, jingles, and mass awareness raising activities. NRCS has integrated COVID-19 information into the ongoing Lassa Fever operation in Nigeria. Information materials were co-developed with the Nigerian Centre for Disease Control (NCDC) and good collaboration with them has been established.

**Senegal and South Africa** National Societies have initiated the implementation of the response number of COVID-19 cases are increasing. Senegal Red Cross is supporting contact tracing following request from the MoH. The community bases surveillance project supported by the Belgium Red Cross. The Community Based Surveillance programme in Senegal, supported by the Norwegian Red Cross is integrating COVID-19 messages as well.
Liberian National Red Cross Society (LNRC) has integrated COVID-19 messaging into existing WASH interventions in schools and community in programmes supported by the Swedish government. LNRC is also part of the multi-stakeholder coordination committee coordinated by National Public Health Institute of Liberia.

Kenya Red Cross Society is continuing to train branch volunteers on COVID-19 preparedness activities.

### THE AMERICAS

#### Regional Overview

In the Americas cases have been confirmed in 17 countries and four French Overseas Territories. Other countries in the region have been conducting tests on suspicious cases and governments are allocating funds to prevent the advance of the outbreak.

The Americas Regional Office (ARO) 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 document in progress. Rapid Response Members deployed to Panama to support regional actions:

- Pandemic Preparedness
- Risk Communication/Community Engagement and Accountability (CEA)

Disaster Managers are coordinating regional meetings with NSs per region. A Rapid Response Preparation Alert for availability for potential deployment has been activated.

#### North America

<table>
<thead>
<tr>
<th>National Society</th>
<th>Preparedness, mitigation and contentment actions</th>
</tr>
</thead>
</table>
| **American Red Cross** | • Supporting government agencies to assist evacuees returning from China. Providing relief items such as blankets, comfort kits, food and children’s toys to partners managing quarantine facilities.  
• Supply blood products to hospitals and patients.  
• Activated two disaster response specialists: an information management (IM) as SIMS coordinator and Communications.  
• Contributing to the IFRC emergency appeal to assist the IFRC as it coordinates the global Red Cross Red Crescent response to the outbreak.  
• Supporting public health agencies to help communities to prepare. |
| **Canadian Red Cross** | • The CRC has been supporting the Public Health Agency of Canada (PHAC) in the quarantine operations in for Canadian’s evacuated from Wuhan and Japan Diamond Cruise Line.  
• The PHAC has 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 ERU mini-clinic for 14 days for a new group of Canadians that are being repatriated from the Grand Princess cruise  
• The CRC, at the request of the Government of Canada, has sent a team to Japan to support Canadians being treated for COVID-19 in Japanese hospitals for the Princess Diamond Cruise Ship  
• At the request of the Government of Canada, it 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.  
• It has also launched a national campaign through its media resources to raise funds for the Red Cross Society of China’s response to the Coronavirus (COVID-19). |
| **CRUZ ROJA MEXICANA** | • Awareness campaign in schools about prevention measures for hygiene promotion.  
• Sharing awareness material through social media. |
### Central America

<table>
<thead>
<tr>
<th>National Society</th>
<th>Preparedness, mitigation and contentment actions</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Central America National Society</strong></td>
<td><strong>Preparedness, mitigation and contentment actions</strong></td>
</tr>
<tr>
<td>• The National Sectoral 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, the Costa Rican Social Security Fund [CCSS], and the Ministry of Health).</td>
<td>• Protocols are being reviewed for this outbreak and other influenza-type diseases and providing training to health personnel. Response protocol for patient care and pre-hospital services personnel updated.</td>
</tr>
<tr>
<td>• Protocols are being reviewed for this outbreak and other influenza-type diseases and providing training to health personnel. Response protocol for patient care and pre-hospital services personnel updated.</td>
<td>• CCRS is working with the Ministry of Health, the CCSS, and the National Emergency Commission tracking rumors and dissemination information and prevention measures through Media and Social Media.</td>
</tr>
<tr>
<td>• NS Contingency plan developed and shared with IFRC</td>
<td>• Coordinating with the Ministry of Health for the development of Operational Plans for the Protection of Health Services.</td>
</tr>
<tr>
<td>• Coordinating with the Ministry of Health for the development of Operational Plans for the Protection of Health Services.</td>
<td>• Active yellow alert and socialization of prevention plans to Municipal and Departmental Commissions in conjunction with Civil Protection.</td>
</tr>
<tr>
<td>• Protocols for diagnosis, management, surveillance and quarantining of cases are being worked on in coordination with PAHO and the Government.</td>
<td>• Staff and volunteers are being trained in disease prevention.</td>
</tr>
<tr>
<td>• The Guatemalan Red Cross has carried out preparedness and response actions in coordination with local authorities.</td>
<td>• Sharing prevention and hygiene promotion messages through Social Media.</td>
</tr>
<tr>
<td>• The Guatemalan Red Cross has carried out preparedness and response actions in coordination with local authorities.</td>
<td>• The Guatemalan Red Cross has carried out preparedness and response actions in coordination with local authorities.</td>
</tr>
<tr>
<td>• Communication campaigns are being carried out in the press and social networks.</td>
<td>• Training for GRC staff and volunteers is underway.</td>
</tr>
<tr>
<td>• Training for GRC staff and volunteers is underway.</td>
<td>• Dissemination of information and training for branches.</td>
</tr>
<tr>
<td>• Dissemination of information and training for branches.</td>
<td>• A contingency plan is being developed.</td>
</tr>
<tr>
<td>• Protocols for diagnosis, management, surveillance and quarantine of cases are being worked on in coordination with PAHO and the Government.</td>
<td>• The NRC Emergency Operations Center has been activated. Institutional green alert active. There are no cases in country, so preparedness actions are being carried out.</td>
</tr>
<tr>
<td>• The National Health Committee has been activated and weekly meetings are being held, in which HRC participates.</td>
<td>• Training of community networks is being carried out through municipalities and border entry points.</td>
</tr>
<tr>
<td>• HRC has activated the steering committee. 20 technicians trained in technical emergencies and monitoring protocol for suspicious cases have been made available to the government for hospital transfers.</td>
<td>• 19 Hospitals already trained in case management and quarantine.</td>
</tr>
<tr>
<td>• Protocols for diagnosis, management, surveillance and quarantine of cases are being worked on in coordination with PAHO and the Government.</td>
<td>• Strengthening of prevention and hygiene promotion actions.</td>
</tr>
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<td>• Protocols for diagnosis, management, surveillance and quarantine of cases are being worked on in coordination with PAHO and the Government.</td>
<td>• Protocols and contingency plan have been updated.</td>
</tr>
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<td>• The National Sectoral 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, the Costa Rican Social Security Fund [CCSS], and the Ministry of Health).</td>
<td>• Activation of PSS focal points.</td>
</tr>
<tr>
<td>• Protocols are being reviewed for this outbreak and other influenza-type diseases and providing training to health personnel. Response protocol for patient care and pre-hospital services personnel updated.</td>
<td>• Protocol for branches already approved and shared.</td>
</tr>
<tr>
<td>• Protocols are being reviewed for this outbreak and other influenza-type diseases and providing training to health personnel. Response protocol for patient care and pre-hospital services personnel updated.</td>
<td>• Coordination is underway for the purchase of protection and hygiene kits for branches at border points.</td>
</tr>
<tr>
<td>• Protocols are being reviewed for this outbreak and other influenza-type diseases and providing training to health personnel. Response protocol for patient care and pre-hospital services personnel updated.</td>
<td>• Simulations have been made with the government, in case management.</td>
</tr>
<tr>
<td>• Protocols are being reviewed for this outbreak and other influenza-type diseases and providing training to health personnel. Response protocol for patient care and pre-hospital services personnel updated.</td>
<td>• Educational talks are taking place and material is being shared through social media.</td>
</tr>
</tbody>
</table>
- A National Action Plan has been developed. NS is part of the national emergency operations centre.
- Health personnel in contact with suspected cases were trained in the use of personal protective equipment and handling of pre-hospital care material.
- Hospital quarantine zones are being planned. The database of Panamanian RC staff and volunteers trained was shared with the government in case support is needed.

### English and Dutch Caribbean

<table>
<thead>
<tr>
<th>National Society</th>
<th>Preparedness, mitigation and contentment actions</th>
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</thead>
</table>
| **Grenada Red Cross** | • GRCS is monitoring the development of the virus and is working closely with the Ministry of Health to support public awareness and education initiatives  
 • GRCS attended the meeting of the Health Service Committee to plan the national approach to COVID-19  
 • GRCS is developing a guideline for staff and volunteers for Covid19 based on IFRC guidance  
 • The National Society is currently trying to source PPE; face masks and hand sanitizers. |
| **Guyana Red Cross** | • The NS has been conducting information session with their volunteers, students and the general public through social media  
 • The NS is preparing to conduct an epidemic control training with volunteers  
 • The NS is in direct contact with the Ministry of Public Health and have indicated their support and the availability of volunteers in the event of an outbreak in Guyana  
 • The NS has started to conduct sensitization on prevention and have developed and distributed risk communication material |
| **Trinidad & Tobago Red Cross Society** | • The NS is in the process of scheduling a meeting with the Ministry of Health to discuss coordination.  
 • The NS is also assessing the capacity of their stock, PPE, masks for internal and external distribution when required.  
 • The NS is in the process of procuring hand sanitizers and disinfectant for staff and volunteers and sensitizing all on preventive measures. Also held a sensitization with the staff of the airport about preparedness measures. |
| **Jamaica Red Cross** | • The NS has been sharing risk communication materials, has activated its Emergency, Care and Youth sections.  
 • The NS is attending planning meetings with Govt and is preparing a proposal for the purchase of hand sanitizers |
| **Saint Vincent & The Grenadines Red Cross** | • The NS is in communication with MOH and attending briefings.  
 • The NS has sensitized volunteers about the COVID-19 situation and have trained them in personal prevention measures such as proper handwashing. |
| **St Kitts & Nevis Red Cross** | • The NS has attended stakeholder briefing on COVID-19 with Ministry of Health, Chief Medical Officer and the National Disaster Office to discuss the current status in the country and the response mechanism.  
 • The Health Team at the NS is also sensitizing the community on proper hygiene measures as a part of their overall health programme. |
• The NS has begun educational awareness with posters on information for covid-19 being placed in public areas and schools.

• The NS will also be hosting a sensitization session for volunteers and staff being facilitated by the Ministry of Health officials. The session will be facilitated by the Epidemiologist and the infection control nurse from the MOH.

• French Red Cross on overseas territories - PIRAC (French Guiana, Martinique, Guadeloupe, St Martin, St Barthélémy) is supporting the reception in airports and transportation of patients and providing information and guidance.

• 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 of personnel and volunteers is being updated and collected in case that it is necessary to mobilize them.

**Latin Caribbean**

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<tr>
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<tbody>
<tr>
<td><strong>Cruz Roja Dominicana</strong></td>
<td>• The Dominican Red Cross is strengthening its 911 ambulance service capacities through the implementation of protective measures for staff and public attended during interventions. Specific COVID-19 protocols are being designed and implemented, in strong coordination with authorities and the Ministry of Health.</td>
</tr>
<tr>
<td></td>
<td>• DRC will implement public awareness campaigns based on material made available by the Ministry of Health and the IFRC.</td>
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<td>• Humanitarian diplomacy actions are being planned to support enhanced coordination between the Dominican Republic and Haiti.</td>
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<td></td>
<td>• Business continuity plans and preparedness measures have been taken for all Dominican Red Cross activities; including the blood bank and the 911 ambulance service.</td>
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<tr>
<td></td>
<td>• A contingency plan is being designed for response to a potential COVID-19 outbreak in the Dominican Republic.</td>
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<td></td>
<td>• A GO Platform message has been published by the National Society</td>
</tr>
</tbody>
</table>

| **Croix-Rouge Haïtienne** | • A direct line of contact is established between the President of the HRC and the Ministry of Health. |
|                          | • HRC has created a working group/taskforce; designed to enhance monitoring and preparedness. The taskforce is composed of HRC Senior staff and volunteers, as well as Movement partners. |
|                          | • HRC is implementing staff and volunteer health and safety framework made available by the IFRC. |
|                          | • HRC has designed a preparedness and response plan based on their existing capacities and support from the IFRC. |
|                          | • The HRC is strengthening and adapting their ambulance service in order to better attend a potential surge of demands due to a possible outbreak. |
|                          | • With the direct support of IFRC, the bi-national agreement is activated to enhance support between Haiti and the Dominican Republic, through their respective National Societies. Activation of humanitarian corridor to enhance procurement of items in the Dominican Republic. |

**South America**

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<td><strong>Cruz Roja Chilena</strong></td>
<td>• The NS has begun educational awareness with posters on information for covid-19 being placed in public areas and schools.</td>
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<td>• The NS will also be hosting a sensitization session for volunteers and staff being facilitated by the Ministry of Health officials. The session will be facilitated by the Epidemiologist and the infection control nurse from the MOH.</td>
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<td>• French Red Cross on overseas territories - PIRAC (French Guiana, Martinique, Guadeloupe, St Martin, St Barthélémy) is supporting the reception in airports and transportation of patients and providing information and guidance.</td>
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<td>• 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).</td>
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<td>• Information of personnel and volunteers is being updated and collected in case that it is necessary to mobilize them.</td>
</tr>
<tr>
<td><strong>CRUZ ROJA ARGENTINA</strong></td>
<td>• The Argentine Red Cross has been disseminating key prevention messages.</td>
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</tbody>
</table>
| **CRUZ VERMELHA BRASILEIRA** | • The National Society has been involved in coordination with the Ministry of Health and has been disseminating key prevention messages to the population.  
• It issued a GO alert for the first cases reported 10/03. |
| **CRUZ ROJA CHILENA** | • The Ministry of Health is working on hygiene promotion and has carried out a vaccination campaign against influenza and measles.  
• Brazilian RC is working with the secretary of the municipality carrying out joint activities and disseminating IFRC material in the media.  
• Institutional contingency plan under development. |
| **Cruz Roja Colombiana** | • Coordination with the Emergency Operation Center, working table and work plan of the Ministry of Health.  
• Reinforcement of health systems, information and preventive hygiene messages are being carried out.  
• Prevention measures are being taken in border areas.  
• Sharing and dissemination of information on IFRC material.  
• TV spots and announcements on hand washing and hygiene promotion are being carried out.  
• Masks have been distributed to personnel and volunteers.  
• Precautionary measures are being taken and protocols developed for social mobilization.  
• Coordinating with Health to develop the institutional contingency plan. |
| **Cruz Roja Enatoriiana** | • 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.  
• Support has been given to actions for the repatriation of nationals.  
• Information dissemination workshops have been held for volunteers and staff with branches.  
• Protective and preventive measures have been taken.  
• Protective material has been purchased. |
| **Cruz Roja Paraguaya** | • Contingency plans have been activated.  
• Sharing prevention and outreach information with staff and volunteers.  
• Sharing messages on social networks and with the Ministry of Health with IFRC’s shared materials. |
| **Cruz Roja Peruana** | • Information messages for hygiene promotion and prevention were shared.  
• Weekly situation reports in coordination with the Ministry of Health shared.  
• Contingency plan is in place but needs to be updated.  
• Information has been provided to Health personnel working on Migration, hygiene promotion and care of personnel and guides.  
• Participation in the inter-agency health committee. A mapping of agency actions and information sharing is pending.  
• PAHO coordination and technical support. Case monitoring and information sharing. |
| **Cruz Roja Uruguaya** | • Prevention materials are being shared with branches and information is being shared through social media. |
| • Contingency plan developed.  
• Sharing of information and hygiene promotion material.  
• Action plan developed in case of cases.  
• Identification of rumors.  
• Radio spots with national coverage are being made. |
Regional Overview

As of 12 March, there are 22,747 confirmed cases in 49 European region countries and 944 deaths (829 in Italy, 48 in France, 47 in Spain, 6 in UK, 5 in Netherlands 4 in Switzerland, 3 in Germany, 2 in San Marino).

National Societies (NSs) across Europe continue to be involved in preparedness and/or response activities, and in the national as well as the regional coordination mechanisms. More than 25 National Societies are participating in response activities such as thermal screening at airports and ports, information distribution, home care and prehospital care. A Risk Communication/CEA 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. Europe Region COVID-19 Task Force has been established to consider following issues: travel regulations, business continuity plan, staff health.

IFRC Europe Regional Office continues to coordinate and facilitate support and information sharing with the NSs. Webinar for Russian speaking NSs with participation of 10 NSs was organized. Jointly with Global Procurement Unit facilitating the issue of PPE delivery to Italian RC. Jointly with Geneva Health and PRD (Partnership and Resource Development) teams negotiated with USAID to attract funding for five NSs of Central Asia (through Global Health Bureau) and for three countries of South Caucasus (through Office for Foreign Disaster Assistance).

Ukrainian Red Cross Society (URCS)

URCS has launched an awareness raising campaign around the country on prevention rules (videos, posters, pocket notes) and is participating in temporary Anti-epidemic Commissions at Regional State Administrations. URCS is also coordinating with the Ombudsperson of the President of Ukraine on Volunteering and is procuring what is needed for the people in observation and transmitting necessary items to the Medical Center of the National Guard of Ukraine “Novi Sanzhary”.

Red Cross of The Republic of North Macedonia (RCNM)

Government of the Republic of North Macedonia announced state of emergency on 10th of March, universities, schools and kindergartens will be closed in the next 14 days, vulnerable groups (older people, people with chronic disease, pregnant women) are released from work. RCNM volunteers upon request of the Ministry of Health are placed at the borders with Albania, Serbia, Bulgaria, Greece working together with border police and conduct screening and disseminating an IEM with COVID 19 prevention measures on the entry passengers crossing the border.

Slovenian Red Cross (SRC)

On March 11, 2020, SRC was activated at national/HQ level (as auxiliary to government). First aid team members are helping on six entry points on border with Italy, measuring body temperature and checking signs and symptoms of COVID-19. Local branches are supporting local authorities in various activities aimed at ensuring of basic needs to vulnerable population (distribution of livelihoods, first aid education; education on prevention measures, etc.).

Magen David Adom (MDA)

MDA together with the Ministry of Health and the primary health care providers opened a dedicated call center (as part of MDA system, under the Emergency number of 101). In the call center, MDA personnel conducts a preliminary triage, followed by an interview conducted by a primary health physician. Further instructions are provided to the callers based on the interview. On average MDA operations centers are dealing with more than 20’000 calls per day (compared to previous 5’000 daily calls). All MDA operations centers are reinforced with personnel to ensure efficient response to the calls, and a special dedicated call center to answer COVID-19 related issues opened.
MDA personnel is also taking samples of suspected cases at people’s homes and transfers the samples to reference laboratories. Up to date, MDA teams have taken over 3'500 tests. MDA teams are treating and transporting patients that are under home quarantine and have a situation that requires medical assistance, or exacerbation of their condition, or become symptomatic and are tested positive for COVID-19.

**Red Crescent of Kazakhstan**

Red Crescent Society distributing information leaflets at public sites and in social media.

**Finnish Red Cross (FRC)**

FRC does not have official COVID-19 operation in the current situation, but they have activated national HQ task force for information sharing and heightened preparedness and are following the situation in-country closely. FRC has ongoing discussion with the Ministry of Social Affairs and Health and is supporting national hotline service for COVID-19 with a group of trained volunteers. Ministry of Social Affairs and Health is in charge of the hotline.

**Luxembourg Red Cross (LRC)**

LRC is finalizing their Business Continuity Plan for the critical activities. They face some difficulties to get the material needed (hydro-alcoholic gel, masks, gloves, etc.), but coordinate the stock in a centralized manner to be able to deliver the material where the needs are the most severe. Additionally, LRC created a coordination cell to answer the questions regarding precautions, etc. This cell is likely to also coordinate human resources if those get limited (an important part of their health-personal comes from the countries around Luxembourg).

For the Health Department services (including home-care services, Rehabilitation Center, Home for elderly, Blood-Transfusion center): Work on preparedness and managing the stocks. One volunteer is currently waiting for the COVID-19 test results. Additionally, discussion with the Ministry of Health are ongoing evaluating the situation and human resources mobilization capacities.

**Tajikistan Red Crescent Society (TRCS)**

Tajikistan Red Crescent Society is engaging in ongoing discussions with the Ministry of Health, representatives of UN agencies in-country (including WHO) as well as with representatives of organizations of the International Movement of Red Cross and Red Crescent (German RC, IFRC, ICRC, RCST). There is concern about country’s testing capacity as there are two reference laboratories at the capital level that meet WHO standards, which will not be enough the meet the needs if the situation escalates. Additionally, there is an acute shortage of personal protective equipment in medical institutions and medical institutions conducting control at border crossings (airports and railway stations).

**Monaco Red Cross (MRC)**

MRC participated to the IFRC global appeal (70.000€) and launched an appeal for donations in Monaco. Volunteers have started to attend the special COVID-19 National hotline first aid helpers are now trained and equipped to be protected when transporting people with symptoms.

**Austrian Red Cross (AutRC)**

AutRC has activated its national task force (crisis management mechanism), as well as the task forces on the province level. They are supporting state crisis management structures on an operational and strategic level, including the Ministries of Health and Interior. AutRC emergency medical team (EMT) mobile teams are conducting COVID-19 pre-tests on behalf of federal authorities. EMTs are also conducting infectious diseases transports on behalf of federal authorities. Through its whole structure - including Youth RC - AutRC is engaged with community engagement and communication activities on a national and province level.
**Italian Red Cross**

ItRC continues its broad activities such as medical transport of suspected cases. A radio show targeted for migrants is sharing messages and information and podcasts on COVID-19.

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**MENA Regional Overview**

- For epidemiology, as of 12 March, the MENA region has 14 affected countries out of 17 with COVID-19 outbreak (except Syria, Yemen and Libya) with a total number of 9,930 lab-confirmed cases and 369 associated death.
- The Regional Office has worked so far with eight National Societies on their contingency and response plans. Financial resources were allocated to three National Societies as a start-up support.
- IFRC MENA Regional Office has finalized its business continuity plan (BCP) and shared that with regional heads of the partner National Societies based in Lebanon as well with all IFRC country offices. BCP will be tested out by next week. As a part of BCP implementation, a joint COVID-19 BCP meeting and Q&A sessions was conducted for all IFRC staff, country and cluster teams and Movement partners. Following the evolving situation in the MENA and across the different counties IFRC RO started to activate the mitigation measures as stated in the BCP.
- In addition, Health & Community Engagement and Accountability staff members are in discussions with UNICEF in terms of cooperation and collaboration on COVID-19 as well as long-term partnership.
- A RCCE mapping was conducted to identify available material and guidance and highlight gaps and needs based on the scope of work in the region. Accordingly, priorities were identified, and the next steps are clear in terms of further development of risk messages and the needed tools for community engagement specially when it comes to rapid assessment and rumour tracking.
- As the National Societies were submitting the draft of the emergency response and the technical support required for National Societies in the region.

**Iranian Red Crescent Society (IRCS)**

More than 8,000 volunteers were trained on COVID-19 through the online courses and information sharing. A fever screening system at the entrance of the cities is set up in 470 locations and more than 3,000 volunteers and staff are taking part of it. The volunteers Organization affiliated to the IRCS has started distribution of sanitizing packs in high risk and suburban region with 25,000 families.

IRCS staff and volunteers who are trained on preventive methods, disinfection of the environment, the usage of PPE, discharge of the garbage, the way to deal with suspected cases and disinfection of the operations vehicles, have been directly involved in the COVID-19 operation.

In terms of preparedness – the IRCS is focusing on public awareness campaigns. In addition to the use of pamphlets, footage and banners, different virtual networks are used to spread information. For example, online courses on COVID-19 were launched, aiming to increase the knowledge of the population on the virus and necessary preventions. More than 5 million people have enrolled to date. Special attention was given to the most vulnerable population such as people living with disabilities and migrants and specific educational materials were developed.

As for containment, IRCS is engaged in screening the population at the entrance of cities (e.g bus terminals and airports) and referring suspected cases to the hospital via emergency medical transport operated by
the MoH. In view of IRCS’ function as a provider of first-aid for road traffic accidents, volunteers and staff working in both mobile and permanent first aid centers are now also screening people for the virus.

In terms of mitigation, IRCS volunteers with medical background provide public services in identifying hospitals for patients and specialized advice via the telephone hotline. IRCS Youths are engaged in providing psychosocial relief and entertainment for children.

Chinese Red Cross has donated medical supplies to IRCS which were handed over to MoH for COVID-19 treatment.

**Iraqi Red Crescent Society (IRCS)**
IRCS has mobilized its employees and volunteers and divided them into teams to carry out awareness-raising activities to contain the disease. Targets are teachers, students, National Society staff and volunteers, Governmental offices, Local NGOs, Local Community, Syrian refugees, Military forces in Erbil, Sulimaniah, Kirkuk, Kiyala, Anbar, Baghdad, Thiqar, Babil, Muthana, Najef, Misan and Basreh. IRCS is part of Crisis Management Cell in the Iraq State and recognized as a support agency for the emergency operation. The national society has reached so far more than 600,000 people with risk communication activities.

**Lebanese Red Cross (LRC)**
Lebanese Red Cross is the only entity in Lebanon mandated by MoPH to transfer suspected/confirmed cases in Lebanon. Currently 19 EMS stations are fully equipped and are ready to response. The number of emergency medical services (EMS) stations involved in COVID-19 response has been increased from 12 to 19 and additional 300 EMTs have been trained due to the increase in cases and high demand. LRC EMS has transferred 88 suspected cases to the designated hospital, Rafic Hariri University Hospital. 512 volunteers been trained on awareness raising approaches and community awareness sessions have been implemented including targeting informal Tented settlements of Syria refugees.

**Palestine Red Crescent Society (PRCS) including Lebanon Branch**
PRCS has provided training to its staff and volunteers, has disseminated public health messages and issued its EMS staff with PPE. There has been ongoing coordination between PRCS, local and national authorities, including governorates and municipalities, UN agencies as well as within the Red Cross Red Crescent Movement. PRCS, International Committee of the Red Cross (ICRC) and IFRC work together to consolidate their various methods for assistance and to avoid overlapping. The PRCS had bilateral meetings with its partners and has established coordination mechanisms among headquarters and branches for needs assessment and response.

To date, PRCS has trained 80 staff, 150 volunteers and 500 community members through 200 community health sessions. 1,000 PPE for EMS staff are stocked for response.

**Jordan Red Crescent Society (JRCS)**
JRCS held a coordination meeting with Red Cross Red Crescent Movement partners on the development of a COVID-19 plan for Jordan. To date, JRCS conducted five health awareness sessions on COVID-19 for 500 students (350 girls and 150 boys) across governorates.

**Libya Red Crescent Society (LRCS)**
LRCS has established different activities for LRCS volunteers for the three response phases (Preparedness, Localized and multi-localized). For ensuring coordination, LRCS had a series of meetings with IFRC, MoH and WHO. Awareness campaigns on COVID-19 have been implemented by Community based Health and First Aid (CBHFA) teams in five areas in the country.
Yemen Red Crescent Society (YRCS)
YRCS has trained 120 volunteers from six branches on Epidemic control. Coordination with the Ministry of Public Health & Population and WHO is ongoing and YRCS is preparing for setting up Task Force committee. YRCS is also preparing information materials for community sensitization.

FUNDING UPDATE

Donor response to the Appeal MDR00005

CONTACTS

For further information, specifically related to this operation please contact the Global Coordination Cell:

<table>
<thead>
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<th>Position</th>
<th>Contact Information</th>
</tr>
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<tbody>
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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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