Situation Update*

856,386 COVID-19 confirmed cases
205 Countries, territories and areas

Funding**

150,000,000 CHF Required

20% Hard pledges
9% Soft pledges
71% Funding gap

National Society Response

149/192 National Societies reporting. Engaged in...

119 Health
128 RCCE
124 Institutional Readiness

Number of National Societies engaged in selected activities:

Health:
56 Screening and contact tracing
60 Psychosocial Support
37 Clinical, paramedical, or homecare services
54 Emergency social services for quarantined individuals

Risk Communications & Community Engagement (RCCE):
87 Misinformation management
60 Community feedback mechanism
44 Stigma prevention messaging

Institutional Readiness:
75 Contingency Planning
47 Business Continuity Planning
94 Internal Risk Communications

Useful Links

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

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

Click here for the detailed up-to-date information on the situation and guidance documents on go.ifrc.org

The latest WHO sit-reps available here and visualization and case numbers here

*Number of cases and countries as reported by WHO 2 Apr 2020 00:00 (CET)
**Funding gap calculated after factoring-in soft pledges as well as hard pledges.
OPERATIONAL UPDATE

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

The Emergency Plans of Actions for COVID-19 operation are available here.

Red Cross and Red Crescent activities globally

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

Risk Communication and Community Engagement (RCCE)

IFRC in partnership with the RCCE Core Group (WHO, UNICEF) has finalized the RCCE Global Strategy and the Guidance for RCCE Country Plans. The first one provides an overview of how RCCE coordination mechanisms are set up at the global level with suggested technical resources and approaches to prevent the spread of COVID-19. The second one has been designed to support RCCE responders working with national health authorities, and other partners to ensure dialogue and participation of affected communities and at-risk groups during preparedness, readiness and response scenarios.

The Community Action Guidance has been finalized in coordination with WHO and UNICEF and it is now available in the CEA Hub in English and Portuguese. The guide contains tips for individuals and communities to take simple actions to support and protect people around them during the epidemic. Over the course of the week the RCCE team facilitated a brief session on the COVID19 GO Platform Resources giving a quick overview of existing tools and guidance targeting NSs, Branches volunteers and social mobilizers.

Based on the need to provide actionable and specific recommendations to volunteers on how to conduct new ways of distant social mobilization, a new guideline on Distant Social Mobilization is being developed in collaboration with Health, RCCE and DRL from the Africa Regional Office. Guideline will cover topics such as rational use of PPE during RCCE activities, alternatives to face-to-face and community-driven channels and how to provide access to volunteers during social mobilization.

Work continues towards developing a systematic feedback and rumour tracking platform based on the current online data collection work from the various countries and regional offices.

National Society preparedness (incl. Business Continuity Planning)
Business continuity planning is currently a priority for the IFRC’s at all levels (country, regional and global). Initial support looked at the potential impact of this pandemic on overall IFRC Secretariat and National Society operational capacities and offered a framework to ensure effective emergency response with reduced resources, including a mapping of the minimum structures needed to keep core business going. For this reason, IFRC secretariat has activated its Business continuity planning in almost every office worldwide. Constant monitoring of restrictions and border closures is carried out and since the declaration of the pandemic more than 15 diary bulletins have been produced and distributed through the worldwide network. 5 focal points have been identified for BCP and duty of care activities in all regional offices.
Jointly analysis is ongoing between BCP expert and security expert because in addition to the various government-implemented measures and health risks associated with COVID-19, a number of other risks, particularly related to civil unrest and xenophobia have arisen throughout the world.

To support the NSs worldwide the IFRC jointly with Global Disaster Preparedness centre has been launched project to establishing a “Business Continuity Help Desk” - Providing resources for National Society Business Continuity. The Help Desk will offer information and referral services to National Societies related to business continuity and pandemic preparedness.

Help Desk services will include:
- Comprehensive toolkit of multilingual guidance resources;
- Self-support via interactive FAQ;
- Direct technical guidance provided remotely;
- Learning webinars;
- Forums for good practice sharing.

**National Society Development in Emergencies**

Options for a RCRC Volunteer Solidarity Mechanism are being explored, which would provide solutions for National Societies to support their volunteers impacted by the COVID-19 pandemic, with the aim of better protecting and or compensating volunteers (and their families) who put their health and life at risk in delivering services. An options paper is being developed to identify the best way forward in terms of efficiency and feasibility. In this first phase the Solidarity Mechanism would focus on COVID-19 pandemic related volunteer cases, with the possibility of being extended in the future. The Policy, Strategy and Knowledge (PSK) Department in coordination with the Audit, Finance, Health and Legal Departments are exploring the most efficient mechanism that can be quickly rolled out to provide volunteers with immediate support should they need hospitalization or compensation to their families in unfortunate cases of death.

A global space for exchange of experiences among National Societies and volunteers is being established, expanding the capacity of an existing platform made available by the Americas region. IFRC is supporting the rapid inclusion of additional features to the [Volunteering Development Platform (VODPLA)](https://www.ifrc.org/vodpla), namely forums of discussion; a question button; the ability to put questions in different languages (immediate translation); links to the repository of existing validated IFRC documents (on other platforms like GO, Fednet); a space to share NS-developed approaches and products. Once the features are available, the number of forums of discussion can be widened according to needs, both in terms of new subjects and of specific sub-items.

In the current situation where face-to-face activities are restricted in number of countries as a way to prevent the spreading of the virus, National Societies are raising concern for its traditional Income Generating Activities which requires face-to-face engagement, such as commercial First Aid or community outreach programmes. Some work has started to scope for possible scenarios to monitor the situation and preparing for potential action. Additional information is available from the [HelpDesk](https://www.ifrc.org/vodpla).

**Global Rapid Response**

A total of 45 people are deployed or in the pipeline to be deployed. In the last 2 weeks, there has been an increase in remote support due to new and existing travel restrictions. In order to facilitate the remote support engagement of rapid response personnel and alignment of the requests several documents have been disseminated (and are currently available in [Go Platform](https://www.ifrc.org/)).

Results from the mappings indicate that that most of our collective health response capacities and logistics capacities are heavily involved in the domestic response. Regardless of that, National Societies expressed their interest to keep supporting although travel restrictions pose a significant challenge in that aspect.
**Communications**

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, especially this week during the launch of the coordinated Movement appeal. An op—ed by IFRC President Francesco Rocca appeared in USA Today and in many newspapers in Australia.

A new set of infographics reflects our call for action for people to learn, act and help, #StayHome and show solidarity. Social media highlights including: Twitter, TikTok videos, Facebook: Video from Italian Red Cross, Thank you to health workers. We need solidarity. Instagram: Help us and take care of yourself, We need solidarity not stigma. LinkedIn: RED Talks on COVID-19: Violence in the home. Additional resources include:

- Media statements on IFRC’s COVID-19 response are available in English, Arabic, French and Spanish.
- Virtual Press Conference on 27 March featuring IFRC President Francesco Rocca re: IFRC/ICRC Emergency Appeal
- Emergency Appeal Media Report attached (working document)
- Social media assets: collection of selfie videos from Italian Red Cross volunteers like this one, Live COVID-19 “RED Talk” series, Solidarity Not Stigma graphics, Step-by-step handwashing graphics

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

1. **Commission boost budget for rescEU stockpile and repatriation flights with €75 million:** This European Commission proposal will increase the total budget of the rescEU stockpile of medical equipment (ventilators, protective masks and essential medical gear) to €80 million (previously €40 million). More than 80 further repatriation flights are planned in the coming days. Read more here

2. **The Members of the European Council in their Joint Statement underlined the need to start to prepare measures necessary to get back to a normal functioning of the societies. According to them this will require a coordinated exit strategy, a comprehensive recovery plan and unprecedented investment and they invite the President of the Commission and the President of the European Council, in consultation with other institutions, to start work on a Roadmap accompanied by an Action Plan. Additionally, they are calling for a more ambitious and wide-ranging crisis management system within the EU and invite the Commission to make proposals in that respect.**

3. **After the extraordinary G20 video conference on COVID-20, the European Union welcomed the fact that the G20 asked the WHO, working closely together with relevant organizations, to come up quickly with a global initiative on pandemic preparedness and response, and in this context, the EU announced that they stand ready to set up an international online pledging event to ensure adequate funding to develop and deploy a vaccine against COVID-19.**

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**Supply Chain**

**Market situation update**

To tackle the problem of sub-standard and/or counterfeit products sent from China, China’s Ministry of Commerce, General Administration of Customs and National Medical Product Administration has issued a co-announcement to manage export medical products. Only products manufactured by suppliers duly registered with China FDA can export certain items such as Testing Kits, Ventilator, Medical protective mask and Surgical Mask, Coveralls and Infrared temperature guns.

- **At the moment, through the Humanitarian Procurement Centre** 300,000 surgical masks are ready for shipment.

- **Overall figures regarding PPEs:** more purchase orders will be placed this week, so more products should be in the pipeline soon, as per the table below.
Distribution Plan for next week

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

Red Cross and Red Crescent activities by region

**ASIA PACIFIC**

Regional Overview
The IFRC Asia Pacific Regional Office (APRO) continues to provide guidance and coordination support to National Societies through five CCSTs and eight COs, with regular communications and coordination at all levels and through the now-fortnightly Joint Task Force (JTF) 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 National Societies. A Daily Report continues to be published to track activities and statuses of Business Continuity Plans across the Asia Pacific region.

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

With growing concerns on the needs of frontline volunteers and staff, on 30 March, the IFRC Reference Centre for Psychosocial Support (PS Centre) published a circular on “MHPSS Considerations: Key actions for National Societies on Caring for Volunteers in COVID-19”. National Societies have also been exploring means of providing Psychological First Aid through hotlines. To assist National Societies in this aspect, the PS Centre has published the guide “Remote Psychological First Aid during the COVID-19 Outbreak Interim Guidance”.

**Community Engagement and Accountability (CEA)**

During the week, APRO has participated in the Myanmar RCCE Working Group together with MRCS and has collaborated with CCST Bangkok on integrating CEA into their response. A CEA session was also conducted on the regular WHO webinar – the recording of the presentation will be made available to National Societies. Contributions have also been made to the Community Action Guide and these have been published on the CEA Hub on 1 April. Surge support for rapid perception surveys have started and processes are ongoing to adapt the tool to the restricted movement context.

In the coming weeks, some of the planned activities include a regional call with CEA focal persons from both the Federation and National Societies, a CEA Webinar for the Global Camp Coordination and Camp Management (CCCM) Cluster, working on additions or updates to inclusion guidance with regional partners, and sharing translated guidance with the relevant National Societies, augmented with a short feedback guidance note.

**Livelihoods**

As part of the Appeal launched by the Afghanistan IFRC Country Office (CO), an approximate amount of CHF500,000 has be allocated to fund the livelihoods and food security assistance to support at least 3,000 households who are forecast to be quarantined and who will lose their livelihood or source of income due to the COVID-19 pandemic. This support has been planned to be in the form of Multipurpose Cash Grants (MPCG) amounting to CHF140 per household based on the calculated minimum expenditure basket (MEB). Assessments will be made to contract and deliver food items to those subjected to home quarantine orders. To date, the IFRC CO is working closely with the Afghan Red Crescent Society (ARCS) to finalize the contractual agreements of the Financial Service Provider intended for the MPCG mobile-money distribution.

The Philippines Red Cross (PRC) has also finalized the guidelines and modality for Household Livelihood Assistance, incorporating the guidelines set by the Government for the COVID-19 pandemic, in coordination with the Local Government Units (LGUs) to ensure the safety of all stakeholders.

**Cash and Voucher Assistance (CVA)**

To reinforce earlier circulations of guidelines by the IFRC, the CVA COVID-19 Guidance Note, covering minimum considerations, adaptation tips, strategies especially on cash and voucher distributions, and cash and market feasibility assessment response options analysis, was disseminated to National Society cash focal persons. The Guidance Note is developed by the Cash Learning Partnership Discussion Group (CaLP-DGroup), a set of forums for global discussion of cash-based responses and related work in emergencies.

The IFRC Global Cash team, along with Regional Coordinators, are meeting weekly to specifically discuss the ongoing and planned COVID-19 related response. There is an anticipation of an increase in the need for technical support for early recovery response that will rely heavily on CVA. Initial discussions and Terms of Reference (ToR) have been drafted by the team and are currently being discussed with Partnering National Societies (PNS) on creating a cash and markets dedicated service desk to support National Societies - the service desk is a team that will comprise mostly Household Economic Security (HES) experts to provide remote support to National Societies who are seeking advice and cash and markets technical support.
Rapid Response
With travel restrictions and mandated self-isolation measures being implemented in many countries across the globe, affecting surge deployments, the new approach is to plan along remote working modalities. In this aspect, the terms of reference for various roles are being revised to accommodate to this modality. Nevertheless, the following roles have started to support the operations remotely: Pandemic Preparedness, and Community Engagement and Accountability (CEA). Plans are underway to explore means to provide remote support for the roles of Logistics, Psychosocial Support, and Operations Coordination, with a view to deploying the delegates in the respective offices should the travel restrictions be lifted from affected countries.

Afghan Red Crescent Society (ARCS)
As of 24 March, a total of 23,276 people has been screened by ARCS Mobile Health Teams (MHTs), and a total of 93 suspect cases have been identified and referred to dedicated governmental health facilities. In support of the Ministry of Public Health (MoPH), five ARCS MHTs continue to provide screening support while two MHTs continue to conduct awareness-raising and risk communication activities in targeted provinces. ARCS has also revised its plans, with the intention to deploy its 138 MHTs, clinics, and a hospital (across 34 branches) in the capital as a response to the COVID-19 outbreak.

As of 31 March, a total of 470,000 people across 34 provinces have been reached by a total of 4,066 ARCS CBHFA volunteers with COVID-19 related awareness and risk communication messages. IEC materials on COVID-19 have also been distributed in targeted communities. These operations will continue for the coming months. Based on data compiled at the start of the month, there has been a total of 196 confirmed cases in-country.

Bangladesh Red Crescent Society (BDRCS)
Across BDRCS, emergency coordination meetings on the COVID-19 response take place at the BDRCS NHQ every day. Midwives from all 56 Mother and Child Health (MCH) centres have received training on the Bangladesh Government’s guidelines for pregnant and lactating mothers on COVID-19. The National Headquarters (NHQ), along with all 68 branch offices working on the COVID-19 response, have also been carrying out awareness raising activities while 49 of these branch offices include disinfection spraying activities. BDRCS is preparing to provide 75000 food parcels (7.5 kg rice, 1 kg pulse, 1ltr edible oil, 0.5 kg sugar, 0.5 kg salt, 0.5kg Suji) through NHQ and 68 branch offices.

To date, a total of 1,221 Red Cross Youth (RCY) volunteers (965 male and 256 female) have been supporting disinfection spraying operations at selected hospitals and important public places and have also taken part in the distribution of hygiene kits & leaflets throughout the country. As part of the isolation and quarantine policy, and to better carry out the planned operations, different groups have been formed to work on a rotation basis to reduce workload and stress.

The Cyclone Preparedness Program (CPP) has undertaken several initiatives to enable volunteers and staff to collaborate with the local government in all 13 coastal districts. Specific actions taken through the CPP in Cox’s Bazar include the following:
- Training of 1,761 CPP volunteers (camp & host working in camps) have been oriented on handwashing and COVID-19 key messages (planned target: 3,400 CPP volunteers).
- Distribution of 80,576 sheets of IEC materials on handwashing in the form of posters and leaflets have been distributed in camp settlements, and 40,500 sheets have been distributed amongst the host community.
- Distribution of 8,720 pieces of surgical masks and 400 hand sanitizers to PMO-BDRCS, Government and CPP staff working on COVID-19 in Cox’s Bazar.
- Orientation of medical staff, community health mobilizers, and community volunteers on COVID-19, and subsequent deployment to disseminate messages to communities.
- Orientation and training of WASH personnel and staff of PNS on COVID-19.

In its outreach efforts, BDRCS has reached more than 100,000 people with life-saving awareness messages through social and mass media outlets.

**Cambodian Red Cross (CRC)**

In close collaboration and coordination with local authorities and local health departments of all 25 capital-provinces, CRC and its 25 Red Cross branches have actively mobilized the Red Cross Volunteers and youths together with communities to take concrete actions on COVID-19 prevention and control. These include the promotion of COVID-19 prevention-related knowledge, inculcating positive behaviours and practices modification of respective communities, using the adapted printed IEC material from MoH (posters, leaflets, radio/TV spots), and the broad dissemination of key COVID-19 preventive messages by Red Cross staff, Volunteers, youths, and the public authorities at all levels through home-visits, mobile loudspeakers, and integrating with core activities across the 25 Red Cross Branches.

Additionally, the public announcements of COVID-19 situation, prevention and control measurements have been released by Ministry of Health via social media and different TV and radio channels as well. The data of infectious, death and recovered cases (globally and domestically) has been made on daily basis by the Health Department/CRC in order to keep up to date the information and overview of the emerging cases.

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

The RCSC medical expert teams deployed to Italy and Iran have completed their missions and returned to China on 26 March. The team to Italy carried out in-depth exchanges with Italian health authorities, the Italian Red Cross, hospitals, and scientific research institutions to discuss on effective prevention and treatment plans especially for the regions of Lombardy, Lazio and Veneto - the most affected areas. The team to Iran had communications with authorities of Iran and the WHO to share China's experience in combating the virus. The team to Iraq continues to provide consultations and advice to help with virus containment efforts. A polymerase chain reaction (PCR) laboratory supported by RCSC has been established and RCSC medical experts have provided training to Iraqi medical staff.

In mainland China, the Hubei Branch held a symposium and presented certificates of appreciation to the RCSC HQ working group, the ambulance transfer teams and relief teams from Beijing, Inner Mongolia, Jilin, Shanghai, Jiangsu, Guangxi, Sichuan, Yunnan, Qinghai and Anhui provinces. As of 29 March, 2,992 medical workers in 63 batches have been supported with funds dedicated to support medical workers who have been infected or have died in the line of duty.
Red Cross Society of the Democratic People’s Republic of Korea (DPRK RCS)

In response to the increasing risk of COVID-19 globally, the Ministry of Public Health (MoPH) is scaling up its health education and promotion activities and has recently published a general information booklet on COVID-19. This digital copy consists of Frequently Asked Questions (FAQs) on COVID-19 and gives simple and accurate information to the general public. The free access to this evidence-based information allows and helps people to have an informed understanding about COVID-19 and engage in anti-epidemic work.

DPRK RCS is escalating its efforts in risk communication and community engagement (RCCE) across the country. As of 27 March, the epidemiological data on DPRK shared by MoPH indicates the following:
- Number of incomers: 7,283 (foreigner: 194, local: 7,089),
- Number of quarantined: 2,287 (foreigner: 2, local: 2,285),
- Number of released from quarantine: 23,064 (foreigner: 380, local: 22,684),
- Number of fever cases: 353 (foreigner: 8, local: 345),
- Number of laboratory tests with specimen: 695 (foreigner: 11, local: 684),
- Number of confirmed cases: 0.

Voices of community and RC staff collected through field visit

Kim Yong Suk (female, 51 years old, community leader, Kwaksan county, North Phyongan Province) said, “Thanks to good community engagement, every individual and household in my community is now practicing correct prevention practices such as proper hand washing, coughing ethics, social distancing, wearing mask and disinfection. And this is much attributable to the constant and passionate work of our RC volunteers. Their daily work of delivering simple, clear and repetitive messages of COVID-19 to the individual families and co-operative farms located in the remote areas save lives and help protect people from getting sick through positive behaviour changes.”

Pak Myong Ho (male, 49 years old, Secretary of Kwaksan county RC branch, North Pyongan Province) said, “In the last three months of COVID-19 preparedness work, my local branch has produced several communication heroes. Their accurate and evidence-based information on COVID-19 are greatly appreciated by local people. I am proud of my communication heroes and eager to recognize them highly.”

In order to ensure quality service and strengthen institutional readiness, DPRK RCS is actively engaged in research and translation of thematic guidelines of COVID-19 developed by IFRC, UNICEF and WHO and trying to adapt them to the local context step-by-step. The DPRK RCS, in close collaboration with IFRC CO, is taking necessary measures to catch up with the delays in the delivery of essential items (RT-PCR, reagents, infrared thermometer, PPE kits for health care facilities) initially planned to take place at the end of March 2020 but hampered by a global shortfall.
**Indonesian Red Cross Society (PMI)**

PMI has continued to scale up its preparedness actions on Covid-19 to provincial and district levels to deliver assistance and provide risk communication, community engagement and basic services to vulnerable communities.

To ensure knowledge transfer and capacity building to all PMI provinces and districts in Indonesia, PMI has conducted several on-line training webinars with the various thematic areas of PMI emergency services, including ambulance, health promotion and surveillance, epidemic control, psychosocial support and home based care.

PMI Hospital has also strengthened its capacities as a satellite hospital of COVID-19 by setting up an additional isolation room, standardizing Infectious Disease Control (IPC) measures, and implementing stress management for its medical personnel. To date, PMI Hospital has been taking care of at least 72 people under investigation and is in close collaboration with the national referral hospital for COVID-19.

As of 1 April, health promotion activities carried out by PMI have reached 73,032 people, and 23,208 surgical masks have been distributed to the communities. While PMI continues to disseminate IEC materials and key health messages on COVID-19 prevention (social and physical distancing; handwashing with soap, self-isolation; maintaining a healthy lifestyle during the pandemic) through social and traditional media platforms, its COVID-19 hotline service has been accessed by 75 callers so far. In addition, health services have been provided to 2,144 people, and sanitizing and sterilizing of public spaces have been carried out in coordination with local authorities in 12,736 locations. PMI in Nunukan, East Kalimantan, also took part in COVID-19 surveillance at the harbour in anticipation of potential virus spread with the influx of returning migrants from the border.

PMI is currently in coordination with IFRC to revise its COVID-19 response plan. Two meetings to discuss the plan and budget have been conducted to accommodate IFRC funding. PMI PMER is consolidating PMI response plan of action to be endorsed, where the support from IFRC (appeal and WHO-USAID funding) will be mapped into the plan.

**Japanese Red Cross Society (JRCS)**

Over the course of the week, materials published and distributed by the JRCS MHPSS team have gained a lot of attention and popularity across various social media platforms like SNS, Facebook, and Twitter. This includes the JRCS picture story guide that explains the "Three Faces of COVID" and social stigma and how to reduce them, and other materials including the translated version of "Psychological Coping Guide" from the Hong Kong branch of the Red Cross Society of China, and the "Support Guide for Staff" augmented with video explanations. Other guides for those who have been quarantined have also been made available at the [JRCS website](#) and at the [IFRC Psychosocial Centre](#).

With the possible closure of Metropolitan high schools in Tokyo till early May, and with the possible declaration of emergency at a later time, the Japanese government will soon adopt emergency economic measures amounting to CHF 539 billion (60 trillion yen). While 30 JRCS hospitals have been providing care to patients of COVID-19 for more than a month, three hospital staff have been confirmed to have been...
infected. Preventive measures across the hospitals have been taken. A JRCS board meeting scheduled for April has also been cancelled.

**Korean Red Cross (KNRC)**
From 20 February to 24 March, Sangju and Yeongju RC hospitals have treated 338 patients and Tongyeong RC hospital has completed preparation to receive infectious patients who will be hospitalized soon. As the number of patients in S.Gyeongsang have decreased to low levels, the local authority of S.Gyeonsang released Tongyeong RC hospital as an exclusive hospital on 26 March.

At the request from the Ministry of Health, KNRC has dispatched 12 volunteers specialized in MHPSS to the centre daily from 28 February to 22 March. The other Chapters have also provided sets of advice and consultations to vulnerable groups and self-isolated people. As of 25 March, KNRC has reached 2,427 people with psychosocial support.

In close collaboration with the Support Centre for Foreign Workers, S.Gyeongsang RC chapter has supported foreign workers by providing 20,000 masks. In the coming week, KNRC HQ will deliver 200,000 masks to the Ministry of Justice to distribute to migrants and refugees. In addition, the Daegu RC chapter has provided hot meal services to over 100 ambulance team members of the National Emergency Management Agency (NEMA) for two weeks. The ambulance teams come from across the nation and have provided transport services to COVID-19 patients.

**Lao Red Cross (LRC)**
In the past week from 26-27 March, LRC has received bi-lateral funding from the Swiss Red Cross and has conducted a training focusing on COVID-10 prevention for LRC staff and Red Cross Volunteers in Vientaine. The Project Agreement between IFRC and LRC was signed on 27 March.

**Malaysian Red Crescent Society (MRCS)**
MRCS has been supporting the delivery of meals to vulnerable communities in specific areas. MRCS has handed over food donations for 100 people at the Malaysia Association for the Blind and has mobilized Youth100 volunteers to support the distribution of 300 meals donated by Cantin Restaurant of Paradigm Mal, to the residents of Projek Perumahan Rakyat Termiskin (PPRT) Lembah Subang. As part of the #responseMalaysia initiative led by MRCS, Top Glove Corporation Berhard donated 1,000 boxes of gloves to support the front-liners.

MRCS teams in Hospital Selayang continue providing screening and registration support of COVID-19 patients, and in the pandemic preparedness and control activities across all divisions of the Hospital. MRCS Kelantan Branch, in collaboration with the University of Malaysia Kelantan, started an initiative to produce DIY face shields. The project has been replicated throughout Malaysia, and as of 31 March more than 5,000 face shield have been distributed to hospitals, clinics and local agencies.

**Mongolian Red Cross Society (MRCS)**
As part of its enhancements to its training plans, the "Volunteer handbook – COVID 19" has been developed and 3,000 copies have been printed and are ready for distributions to all mid-level branches. MRCS’s training team is continuing its efforts in preparing and translating training materials for its volunteers to organize training sessions. Through its Youth Movement, MRCS has partnered with actors and singers and MRCS’s digital team to produce five different types of videos to encourage people to use face masks, support their immune systems, and to avoid misinformation.

**Myanmar Red Cross Society (MRCS)**
As of 1 April, the number of confirmed cases in Myanmar has risen to 15, with the latest case related to the International SOS clinic staff in Yangon. As requested by the Myanmar Authorities, both the SOS Clinic and the Samtivej Clinic at Parami have closed for an indefinite period of time. The clinics are collaborating with the Ministry of Health and Sports (MoHS) to keep patients, employees and community safe and taking extreme precautionary measures. During the shutdown of the International SOS clinic facility, members can still contact the 24/7 assistance centre helpline.
In the state of Rakhine, MRCS has established strong foundations for COVID-19 mitigation and response through its longer-term resilience programming involving WASH, health education, disaster preparedness, livelihood, as well as extensive experience in emergency response operations in Rakhine. Areas of critical capacity include skilled staff and volunteers and the ability to rapidly engage existing township and community linkages in responding to COVID-19. Currently, MRCS is in coordination with MoHS focuses on preventing the outbreak and blocking transmission of the virus. This includes reaching target villages and township locations with awareness raising and prevention messages. MRCS staff and volunteers in Rakhine State will continue to support pandemic prevention initiatives, in close cooperation with MoHS. MRCS has been implementing mobile health clinics and ambulance services in Rakhine State closely coordinating with MoHS as well.

Nepal Red Cross Society (NRCS)
As of 1 April 2020, there have been five confirmed cases of COVID-19 being imported into Nepal – of these, one has already recovered. A country-wide lockdown and suspension of flights have been extended until 7 April, and quarantine and isolation facilities have been established in all seven provinces by the local government units. The Government of Nepal is currently extending testing facilities in provinces and major hospitals outside Kathmandu valley, with the PBP memorial hospital in Province 1 having started operations for its testing facilities. The Government of Nepal has also imported PPE, testing kits and medical equipment form China through a chartered flight, and these PPE and testing kits are being sent to the district and provincial hospitals. Further procurement of PPE has been initiated but has been hampered by the global shortfall and quality assurance and control issues.

As part of actioning business continuity, the business continuity planning (BCP) strategic team is having skype meetings daily while non-essential staff from the IFRC, PNS, and most of the NRCS staff are working from home. NRCS has also started to orientate Red Cross Ambulance drivers through phone or Skype regarding the COVID-19 infection, prevention and control (IPC) protocol for ambulance safety. As of 1 April, 20 ambulance drivers from five districts have been oriented in IPC against COVID-19. All 77 district chapters of the NRCS are providing support to establish quarantine centres, providing items such as tarpaulins, blankets, buckets, and are also engaged in risk communication activities.

Palau Red Cross Society (PRCS)
With startup funds having been provided by the CCST Pacific office to assist the National Society during the early stages of their response, PRCS has developed a COVID 19 Business Continuity Plan and Contingency Plan which has been approved by the Governing Board, and support has been provided to the Ministry of Health to translate and print IEC materials for dissemination to the community. The PRCS Executive Director is an active member of the National Emergency Committee (NEC) which provides technical advice and coordinates all COVID 19 preparedness and prevention plans.

Solomon Islands Red Cross Society (SIRCS)
The SIRCS Emergency Operation Team (EOC) remains operational and has continued to work closely with the Government and Health Offices. While there are no confirmed cases, SIRCS volunteers providing support to the Ministry of Health in community health and hygiene messaging and tracking. With the coordination of the Honiara City Council (HCC), eight volunteers have been deployed in Honiara to carry out activities to promote community awareness of the COVID 19 pandemic. Startup funds have been provided by the CCST Pacific office to assist the National Society during the early stages of their response.
Thai Red Cross Society (TRCS)

In collaboration with the Bangkok Metropolitan (BMA), Thailand Post and Ministry of Public Health, and led by the Relief and Community Health Bureau (RCHB), TRCS will be distributing 10 million cloth masks to those in need, prioritizing vulnerable groups and people at risk across 76 provinces in the country. In addition, RC Provincial Chapters in these 76 provinces will be distributing relief items to those who are quarantined at home for 14 days so that they will have the necessary basic food and items to stay at their residence during that time. The Chapters will also support the hospitals in need with medical supplies and equipment - especially ventilators for COVID-19 patients.

To ensure that people living with HIV/AIDS receive medical attention during this time, the TRCS AIDS Research Centre ("Anonymous Clinic") has been equipped with preventive equipment, and has implemented preventive measures such as rescheduling the opening hours, and having a temporary cessation of some vaccination services, the PAP Test, and other services on a case-by-case basis.

While the RC Health Station No. 1 Surin distributed 610 relief kits (one kit per household) to those who are quarantined at home for 14 days in Buriram province, where three districts have been designated as disease control areas and movement across its boundaries is forbidden, staff from Health Station no. 5 Sawangkananivas conducted home visits for those under home quarantine in Samut Prakarn as a result of having returned from countries assessed as high risk.

The King Chulalongkorn Memorial Hospital (KCMH), under TRCS, is one of the hospitals in Thailand that can test and confirm COVID-19 infections. During the period 1 Feb - 31 Mar, there has been a total of 6,908 people screened at KCMH for COVID-19, 3,265 people transferred to Emerging Infectious Diseases (EID) clinic for further treatment, 49 hospitalized, and 136 confirmed cases of COVID-19. KCMH has advised visitors to the hospital on COVID-19 preventive measures, and TRCS has called for public donations to buy N95 masks, PPE suits and medical equipment for KCMH to combat the pandemic.

On 30 March, the Assistant Secretary General for Administrations convened a Management meeting to discuss about the COVID-19 response plan. On the same day, Narathiwas RC Chapter provided cloth masks to medical staff in two hospitals in Narathiwas and well as those working at the screening points.

Recent IEC materials produced by TRCS in the Thai language include “Social Distancing”, “Smoking and Severity of COVID-19”, “How to Behave to Reduce Spreading of COVID-19”, and “Aware with Consciousness”.

Layout of items within the relief kits handed out to households. (Photo: TRCS)
**Timor-Leste Red Cross Society (CVTL)**

Other than case management and laboratory work, CVTL has been supporting the Timor-Leste Ministry of Health pillars for COVID-19 response. A structure for COVID-19 response has been established, led by the CVTL Secretary General and assisted by the Health Coordinator. Contingency plans have been carried out in accordance with the 7 pillars of the Ministry of Health, and will focus their response in the following: Risk Communication and Community Engagement (RCCE); Entry point Surveillance and Infection Prevention Control; and supported with the activities of Planning, Coordination, Monitoring and Reports; Logistics, Human Resources and Finance.

Together with the government, CVTL is assisting on the establishment of three health facilities for quarantine purposes, and at the and installation of hand-washing facilities in the quarantine facilities and airport. Professional Health volunteers (8 medical doctors and 24 nurses) have been recruited to care for the quarantined people. Health Promotion activities have also reached more than 138 people (including youth leaders in villages) targeting people in public places in communities like schools, markets, parks, bus stations, etc.

Within CVTL, 23 personnel have also been briefed on safety and security at the workplace during COVID-19 operations; 13 branch coordinators have been briefed as well on CVTL’s plan of response, and 43 people have been briefed by WHO Timor Leste on COVID-19.

**Viet Nam Red Cross Society (VNRC)**

On 31 March, Vietnam’s Prime Minister Nguyen Xuan Phuc ordered a 15-day period of isolation nationwide beginning Wednesday, 1 April. Residents must stay at home and can only go outside for essential needs such as to purchase food, medicines, urgent medical services or to go to work at companies permitted by the government to remain open. VNRC has reviewed and revised its Contingency Plan on Pandemic Preparedness and Response as well as its BCP by allowing non-essential staff to work from home while the operational team is still working at the office.

VNRC leadership and technical departments have commissioned a meeting with the CCST management to discuss about the scaling plan of action. VNRC has also conducted a coordination meeting with the RCRC Movement partners on 1 April to update the situation and discuss about the proposed National Society interventions in the coming days and weeks, as well as early recovery in the future.

at 8,302 Newly update online posters on Covid-19 to share on social media. VNRC has been updating its online posters on COVID-19 to be shared on social media and is currently working with VN Post to organize information dissemination campaigns on COVID-19 in 700 post-offices across all 63 provinces, integrating with blood donation recruitment and collection events. From January
till date, a total of 47,061 soaps and handwash liquids and 30,000 masks have been distributed, and a total of 464,269 people reached through 8,302 dissemination sessions.

**Focus Story of the Week: Philippines Red Cross (PRC)**

The Philippine Red Cross (PRC) has developed a framework of four strategic pillars to respond to the COVID-19 pandemic.

**Pillar 1: Surveillance**

Living up to its tagline as the lifeline of the people, PRC has set up a COVID-19 helpline. Trained volunteers are handling the calls and providing information aligned with the messaging of the Department of Health (DOH) and the World Health Organization (WHO). A volunteer doctor is always on standby and ready to provide medical advice to callers.

PRC also recognizes the toll on mental health brought by the threat of the coronavirus hence volunteer social workers are ready to provide psychosocial support. Tracing and restoring family links associated with the COVID-19 is also part of the helpline’s services. The helpline is also PRC’s way to dispel misinformation, rumours, and myths about the virus as well as alleviate fears. It provides a filter to help decongest hospitals because people can call the helpline first to seek for medical advice whether hospital admission is necessary.

**Pillar 2: Support to Health Care Systems and Authorities**

PRC is setting up a COVID-19 testing laboratory (Level 2) with close coordination from the DOH and WHO. The laboratory aims to process up to 3,000 tests a day from three machines. This will be a great boost to the as the DOH plans to significantly scale up testing.

**Medical Tents with Welfare Desks:** The surge in the number of confirmed cases of COVID-19 have stretch the capacity of hospitals in the country. PRC has set up medical tents in Philippine General Hospital, National Kidney Transplant Institute and Lung Centre of the Philippines to augment the bed capacity of public referral hospitals. Three tents have also been set up in Quezon Institute to serve as a quarantine or isolation facility. The tents will be supported with aircon and beds, etc. Welfare desks are also established along with the tents to support the psychosocial needs because of the stress brought by the disease to patients and medical staff as well. PRC are also sourcing and supporting frontline responders with PPE.
Pillar 3: Community Action

**Hot Meals on Wheels:** The Philippine Red Cross is using its mobile kitchen to deliver hot meals to people most affected by the implementation of the enhanced community quarantine, including the homeless people that are disproportionately affected by the crisis brought by the coronavirus disease.

**Access to Handwashing Facility:** Advocating the value of proper handwashing is a way to fight COVID-19. For knowledge to turn into action, the PRC has deployed handwashing stations in areas without adequate access to water. Drums were converted to mobile handwashing facilities. Volunteers and the community painted the drum with messages to encourage people, especially the kids, to make proper handwashing a habit.

**2-in-1: Mobile Disinfection with Loudspeakers for Information Dissemination:** Taking social or physical distancing into consideration, the PRC has deployed mobile disinfection units together with a loudspeaker playing COVID-19 prevention tips so people could be reach by information without the need for person to person interaction.

**Information for everyone:** Information is crucial in the campaign against COVID-19. To ensure that no one is left behind without access to information, PRC has translated its messages using sign language. This way, persons with disability (PWD) are included and empowered to prevent and protect themselves against the dreaded disease.
**Virtual Volunteer:** PRC uses the virtual volunteer platform to reach Overseas Filipino Workers (OFW) with vital and reliable information about COVID-19 in their own language. PRC have also been supporting OFW’s at airports providing masks and information COVID-19 on the virtual volunteer.

**Pillar 4: Business Continuity**

PRC ensures business continuity of services and operations while adhering to COVID-19 prevention policies. COVID-19 is now being mainstreamed across all the existing emergency responses and health emergencies currently running in the Philippines. PRC are also working to ensure no disruption to essential services such as blood, dialysis, ambulance, emergency relief and psychosocial support.

PRC have developed innovative protocols to continue cash grant distributions to families previously affected by natural disasters that are made even more vulnerable by COVID-19. This is all in close coordination with local government units to ensure the quarantine procedures are followed. PRC ensures safety of volunteers and staff assisting in the operation by using adequate personal protective equipment.

Handwashing and hygiene promotion have been employed to keep the affected people safe from contracting the disease.

**AFRICA**

**Regional Overview**

A report from WHO Africa region stated that the region is witnessing a rapid rise in the number of reported confirmed COVID-19 cases, with a 25% daily increase over the last five days. On 27 March, 39 countries reported a total of 216 cases in the past 24 hours, this a significant increase from a month ago. Since the start of the outbreak, 42 countries have reported more than 3094 COVID-19 cases out of the 49 countries under Africa Region. South Africa reported the highest number- 1326, followed by Burkina Faso 246, Cote D’ivoire 169, Senegal 162, Ghana 152, Cameroon 139, Nigeria 131 and Mauritius 128. These 8 countries share the burden of 79% cases in Africa Region. Given the dramatic evolution of the COVID-19, African
Countries still have a rare window of opportunity in the next 2 weeks to implement critical actions while there is still time to prevent the outbreak in the region from overwhelming health services.

- The health team is participating in the WHO Partners online meetings on Surveillance, lab and point of Entry TWG and RCCE TWG, and other inter-agency taskforce and technical discussions.
- The Health team has been analyzing epidemiological trends and synthesizing technical guidance and sharing with the ANSs. The Health team is also reached out by the ANSs with questions and clarifications on technical issues like rational use of PPEs, dead body management and case tracing.
- Developed COVID19: Communications Strategy for Africa with the main goal of building of a compelling narrative about the urgency of the humanitarian situation in Africa, and the role played by RCRC across Africa. This will be achieved through highlighting, in a compelling manner, the devastating nature of primary and secondary impacts on the humanitarian situation in Africa, ensuring one voice: one Red Cross Red Crescent Movement Narrative and anticipate, mitigate and respond to any reputational risk in the public sphere.

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

- IFRC is co-leading the RCCE interagency technical working group with UNICEF and leading the sub-working group on community feedback.
- Development and input into regional and global of RCCE tools, translation of materials into French and systematic sharing of all RCCE materials with clusters and NS.
- The first community feedback report has been compiled and includes feedback from 24 African National Societies. Key feedback includes misinformation across the continent includes; 
  - Coronavirus does not affect black people (12 countries);
  - Coronavirus is a manmade disease (8 countries); 
  - Coronavirus does not spread in hot countries (6 countries); 
  - False prevention or treatments – eating garlic, washing in salt water or drinking alcohol will prevent or cure coronavirus (9 countries). 
  
  The RCRC as a trusted community partner is working on countering this misinformation and ensuring the correct information is shared.
- A factsheet to accompany the community feedback report has been produced. Called ‘Ask Dr Ben’ this factsheet provides facts to counter the main rumours, answer questions and address suggestions. The factsheet and the community feedback report have also been translated into French.
- RCCE rapid response support has been secured thanks to Norwegian Red Cross and ICRC, who have both provided staff members to support the IFRC COVID-19 RCCE response work.
- A briefing on RCCE activities within the COVID-19 response was provided to German Red Cross delegates working in Africa or on Africa programs, this included discussing how GRC could support in-country RCCE activities for COVID-19.
- Coaching on management, coding and analysis of community feedback data has started with Nigeria RC as well as the data management intern of the CP3 program.

**Logistics**

- Market study of basic PPEs- Gloves, Surgical Mask, Thermometers, Sanitizer hand wash and disinfection materials in the regional and local markets undertaken.
- The number of global suppliers is limited and mostly based in Western Europe hence leads time for procurement and delivery to the locations maybe unpredictable – attending meetings with local actors partners in identifying useable stocks regionally/locally (WHO / UN / MoH)
- Order placed for the PPE requirements to be sourced out from Geneva under the Appeal.
- Procurement of Staff Health home PPE kits and hibernation kits in progress.

**National Societies**

**Gambia Red Cross Society** had developed a COVID-19 response package which is funded by IFRC, ICRC, UNICEF and MoH. It is mobilizing 300 volunteers for sensitize about 70,000 people on the preventive measures to be taken. RCCE activities are also undertaken through TV and Radio program and outreach in 35 schools. Gambia has only 4 confirmed imported case and basically is in the preparedness phase. Over 1000 posters and fliers with key messages on COVID-19 has been distributed countrywide in addition to 60 Posters given to National Assembly of The Gambia. Gambia RC is also involved in Pre-hospital care
Ambulance Service to transfer of suspected and confirmed cases through the run by GRCS GPlus Emergency Response Services. In collaboration with the Kanifing Municipal Council (KMC), Banjul City Council The Gambia Ferry Services, The Gambia Transport Services Company, Wolverhampton Gambian Community (WGC), Media, Youth Groups and other Local authorities, over 200 hand washing facilities were installed and strengthened sensitization activities and practices of personal hygiene in the regions. The volunteers are also engaged in screening/temperatures measurement at the border of entry as well as disinfection of 315 passenger vehicles within the Greater Banjul Area.

Burkina Faso Society conducted training of 150 volunteers on contact tracing, ECV and RCCE in Hounde and Bobo Dioulasso regions. They are been engaged in mass communication, contact tracing, reception and sorting of calls from telephone numbers dedicated to COVID-19, and intra-domiciliary disinfection. As part of the auxiliary role of the NS, these activities are in response to the request from Burkini Faso Government and monitored by the management of BFRC. Contact tracing is being conducted by 100 BFRC volunteers covering more than 500 contacts per day. Installation of hand washing point in front of the different services and offices of the Red Cross HQ and in public places of the capital is taking place to encourage public to develop hand washing behaviour. From the prepositioned stocks of the Ebola response with the National Society, it had given access to 100 death body bags and 30 medical tents to set up a 2nd isolation site for suspected and confirmed patients that for use of the country. Weekly Movement coordination meeting between ICRC, BFRC and IFRC COVID focal person in Sahel is being held on Skype to discuss issues and coordinated response in country.

Senegal Red Cross: Community transmission was reported in Senegal on 31 March 2020 and the government closed all boarders, educational institutions, and prohibited public gatherings to increases the social distance. On the request of MoH, Sengal RC is engaged in the border screening in two point of entries. Apart from IFRC, the national society is in receiving support from the Belgium Red Cross, ICRC and MoH. After orientation of 150 volunteers, they are engaged in RCCE activities. Hygiene volunteers from the Senegal Red Cross Society who were trained on IPC and well equipped by MoH is involved in the disinfection of the COVID-19 treatment centre and to clean the tents of the treatment centre in Fann Hospital. The NS has been successful to mobilize 11 medical doctors and 48 volunteer nurses to support the MoH staff in Touba and Diamniadio treatment centers. It also mobilized 40 volunteer hygienists from the Rufisque RC, 20 volunteers from the Vélingara RC for temperature taking and awareness raising at the Kalifour point of entry.

Kenya Red Cross Society (KRCS): Kenya confirmed 81 cases of COVID-19 as at 1 April 2020, which is the second highest number of cases in the Eastern Africa region after Rwanda which has 82 confirmed cases. KRCS has initiated several actions which includes sensitization of 120 staff, 88 health workers, 33 psychosocial counsellors and 2,845 community members on COVID-19. KRCS adapted and reproduced the IFRC messaging (IEC materials) on COVID-19 which have been distributed to the regional and county branch offices. An Emergency Operations Centre (EOC) has also been set-up as a call centre with an aim to disseminate key messages as well as to provide psychosocial support to people calling in. On the ground, KRCS is prepared to support emergency evacuations through its ambulance fleet.

Nigerian Red Cross Society successfully completed the first set of activities funded under the Global Appeal. About 99,543 people has been reached through mass awareness campaigns in Lagos (86,886) and Ogun (12,657). A total of 1,235 feedbacks have been received (through WhatsApp, toll-free lines, FGDs, and social media), uploaded, analyzed and reported on IFRC Africa Community Feedback Report for COVID-19. The feedbacks have also informed operational decisions in terms of messaging and sharing with partners involved in risk communication. The 4 radio shows on COVID-19 aired through local FM radio
channels have been concluded and it is estimated that 60% of the radio target population have been reached by radio. Jingles on COVID developed in collaboration with NCDC in English, Pidgin and Yoruba have been aired for 68 times.

Cote D’Ivore Red Cross Society: As part of the preparation for response, the Cote D’Ivore NS organized an orientation session with key CRCI staff and volunteers on COVID-19. CRCI send out alert messages with information to 84 local branches to disseminate preventive messages on COVID-19 to the general public using megaphones, focus group discussion and house-to-house. In addition, they met with local authorities to explain the role of CRCI in fighting COVID-19 and to enable them to access communities. The CEA officer was part of a television program on COVID-19. Handwashing stations have been strategically placed in public places to promote handwashing. Radio shows have been initiated on Yopogou radio and Amitie as part of the risk communication program. These activities of the NS are funded by ICRC.

THE AMERICAS Regional Overview
The Americas Regional Office IFRC has activated its internal Emergency Operations Centre (EOC) as of 9 March 2020. Coordination meetings are being scheduled from 9 to 11 am daily. Internal coordination meetings are being held to give IFRC Staff Health Guidance. ARO IFRC Business Continuity Plan and Contingency Plan developed. Scenario Planning has been shared. Rapid Response Members deployed to Panama to support regional actions:
- Pandemic Preparedness
- Risk Communication
- Community Engagement and Accountability (CEA)
- Three rapid response Data visualization specialists

In addition:
- Disaster Managers are coordinating regional meetings with NSs per region.
- A global activity monitoring system has been developed. Information has been shared with NSs through official communication.
- A Rapid Response Preparation Alert for availability for potential deployment has been activated.
- ARO, through the Country Cluster Support Teams (CCSTs), is monitoring and assessing the situation and taking actions to help NSs prepare for the outbreak and manage risks.
- ARO has organized a coordination team, consisting of staff from the Disaster and Crisis Prevention Response, and Recovery Department (DCPRRR), Health and Water, and Sanitation, Logistics, Finance, Partnerships, and Resource Development, and Communication. The team has regular weekly meetings and teleconferences in English and Spanish to share updates on the epidemic with National Societies and IFRC groups.
- A group was opened in Teams Microsoft with content in Spanish and English, as well as a forum for National Societies to share questions and materials. You can request access to the group here.
- A template for Contingency planning has been shared with NSs and almost all NSs have developed their plans.
- A Guide on Protection, Gender, and Inclusion and COVID-key messages and groups in vulnerable situations has been prepared in Spanish, and briefings have been held for coaching and mapping with regional PGI focal points. A campaign is being developed with Communications on PGI and COVID-19.
A Mental Health and Psychosocial Support Strategy for the Care of IFRC Staff in ARO has been launched together with key messages and mental health recommendations.

Surge IM and Data Visualization (remote team) for COVID-19 response: Since travel and mobility restrictions and social distancing are now officially announced in almost all countries in the region, rapid response personnel cannot be deployed. The IM team, thanks to Rapid Response team initiatives, have conducted a remote support pilot, by recruiting three IM specialists from National Societies of Argentina, Chile, and El Salvador, specifically in Data Visualization, to support regional response (IFRC Regional Office) and global SIMS activation for the emergency. This is the first pilot related to remote support in the region.

American Red Cross (ARC)
American Red Cross (ARC) - National operations summary:
- Continuity of essential services (blood services and disaster response services).
- Health, safety, and preparedness messaging to the public
- Support for quarantined families.
- ARC has updated its domestic Evacuation Shelter Guidelines for COVID-19.
ARC supported government agencies to assist evacuees returning from China and providing relief items such as blankets, comfort kits, food, and children's toys to institutional partners managing quarantine facilities. ARC continues supplying blood products to hospitals and patients. ARC continues supporting the Global Appeal with two disaster response specialists: information management (IM) as SIMS coordinator and Communications and has offered additional support.

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

Mexican Red Cross (MRC)
The Mexican Red Cross (MRC) has equipped 98 ambulances with bio-contingency capsules to attend to suspected or severe cases and follow a protocol when it is detected symptoms of COVID-2019. MRC has installed 20 orientation modules to take the temperature of people with infrared thermometers, explain hygiene measures, and provide information on COVID-19 at metro stops and main squares in the country’s capital. MRC continues to conduct awareness campaigns in schools about prevention measures with hygiene promotion and sharing awareness material through social media. MRC continues to strengthen protection measures for doctors, nurses, and emergency medical technicians in the institution. MRCs permanently participates in the State’s Health Committee. MRC Ambulances are being equipped to respond with equipment for respiratory diseases and follow a protocol when it is detected symptoms of COVID-2019.

Costa Rica Red Cross (CRRC)
Costa Rica Red Cross (CRRC) has developed eight audios with key recommendations for people with different disabilities. These recommendations will be broadcasted throughout communities using megaphones at a national level. CRRC has opened an internal line of psychosocial support for staff and volunteers. CRRC has distributed drinking water to schools in coordination with the National Emergency Commission. Members of the CRRC National Intervention Teams have been called to support the National Emergency Operations Centre. Hygiene measures have been strengthened in the Migrant Care Centres.
(CATEM) in the South and North with the support of CRRC personnel. The Restoring Family Links (RFL) service has been activated by the National Directorate of Doctrine, Principles and Values, in coordination with the ICRC offices in Panama and Mexico. CRRC purchased phone cards for initial RFL actions. CRRC has attended 1,380 phone calls related to COVID-19. CRRC staff and volunteers in branches in all districts are receiving briefings on rumours and facts of the virus and patient care guidelines. Response protocol for patient care and pre-hospital services personnel updated. The National Directorate of Risk Management and Emergency Response (DINAGER) of the CRRC has distributed personal protective equipment (PPE) to the regions. The CRRC is planning the purchase of additional PPE, video production, and social media communication for the population as well as audio messages for staff and volunteers. The National Health Bureau is coordinating with the health structures that have responsibility for the initial approach, care, and transfer of suspected and confirmed patients (Costa Rican Red Cross- CRRC, the Costa Rican Social Security Fund- CCSS, and the Ministry of Health). 147 patients have been transferred by the CRRC. CRRC is working with the Ministry of Health, the CCSS, and the National Emergency Commission to track rumours and dissemination of information and prevention measures through mass and social media. The CRRC Emergency Operations Centre (EOC) was activated. Daily coordination meetings are held to coordinate preparedness and response actions. CRRC is an active member of the National Emergency Response Commission, providing crucial prehospital services.

**Salvadoran Red Cross Society (SRCS)**
The Salvadoran Red Cross Society (SRCS) donated 250 blankets, 205 hygiene kit, 50 mats to the quarantine centers implemented by the state and public dormitories. SRCS distributed drinking water in communities lacking access in Mejicanos, Cuscatancingo and San Marcos. SRCS participated in meetings with government authorities to provide guidelines to prevent the spread of the virus. A template for the collection of information was provided to departmental branches to systematize the actions carried out and joint activities with other institutions. SRCS staff and volunteers have been trained in disease prevention. SRCS continues to share prevention and hygiene promotion messages on social media. The SRCS donated 400 mats and 1,000 blankets to the 31 quarantine centers implemented by the State. SRCS is completing a proposal to provide psychosocial (PSS) services to the population in quarantine centers. SRCS, in coordination with civil protection, have shared prevention plans to municipal and departmental commissions. SRC printed hygiene promotion material (handwashing) and COVID19 facts in the migrant’s home. SRC will provide alcohol gel for communities with high internal displacement rates.

**Guatemalan Red Cross (GRC)**
The Guatemalan Red Cross (GRC) is aiding the return of migrants with the provision of medical care at the Casa Nuestras Raíces’ Shelter. This includes measuring vital signs and warning signs related to suspected cases of VOC 19. GRC has given talks on proper hand washing to children, teenagers and young adults and Casa Nuestras Raíces Shelter staff and provided them with visual information on hand washing. GRC continues with the delivery of hygiene kits to all children, adolescents and young people with the support of the Monarch Butterfly project. The GRC has set up an ambulance service at the international airport to transport potential cases to hospitals. Protocols have been established for the disinfection of ambulances transferring suspected cases. A tripartite Movement letter has been sent to the Presidency acknowledging the NS’s work and requesting legal guarantees for the NS to support the national response. The GRC continues to coordinate actions with the Ministry of Health and the National Coordination for Disaster Reduction (CONRED). GRC continues with its communication campaign in mass and social media. GRC staff and volunteers have been trained on hygiene promotion and prevention. GRC is giving educational talks for adults and children on the use of hygiene kits distributed at return and transit centres, as well as using banners on the handwashing steps in all humanitarian migrant service posts and branches providing services to migrants. GRC continues to share information and teaching preventive measures in schools and plans to roll out an awareness-raising campaign in target communities where the friendly neighbourhood approach is used. GRC volunteers engaged in work with the migrant population will receive PPE and cleaning equipment will be provided to target branches. The Guatemalan Red Cross is providing PPE kits for staff and volunteers and cleaning equipment will be provided to target branches.

**Honduran Red Cross (HRC)**
The Honduran Red Cross (HRC) is supporting the epidemiological fences established by the health authorities by screening people and disseminating prevention and hygiene promotion messages. HRC, in coordination with Civil Society and the Yoro United Group, is delivering food parcels to communities at risk. Members of the Movement in Honduras (IFRC, PNS, ICRC) met to unify efforts in the COVID-19 response. The Norwegian RC delegation in Honduras has made available staff on loan to support the IFRC's PMER office. HRC is participating in the Humanitarian Network (REDHUM). A tripartite Movement letter has been sent to the Presidency acknowledging the NS's work and requesting legal guarantees for the NS to support the national response. Peripheral campaigns with key messages about prevention have begun to be implemented by the NS in more than 500 priority communities in the Central District. 170 people from 50 of the 52 Departmental and Municipal Councils across the country have been trained (from 13 to 16 March). A group of 9 doctors and 10 psychologists have been selected and trained in the monitoring and the following up of cases at the institutional level. The HRC have set up hand washing facilities in 4 cities. The HRC has kicked off a massive communication campaign targeting 500 communities through the dissemination of key messages using megaphones. HRC updated its protocols for diagnosis, management, surveillance and quarantine of cases in coordination with Pan-American Health Organization (PAHO) and the government. HRC actively participates in the National Health Committee. 20 HRC technicians specialized in emergencies and monitoring protocol for suspected cases are available to support State actions in hospital transfers. 21 HRC Branches have been trained in hygiene promotion and prevention. 100 protection kits have been distributed among the HRC Branches. HRC plans to roll out an awareness-raising campaign in target communities where the friendly neighbourhood approach is used.

**Nicaraguan Red Cross (NRC)**

Prevention and hand-washing blankets and murals have been sent from the Nicaraguan Red Cross (NRC) headquarters to the branches at the national level. NRC protocol on prevention and protection measures has been socialized with staff at the central and branch offices. The NRC launched a communication campaign on protection measures directed at the general population. The NRC is providing pre-hospital care services, PPE for staff and volunteers, and support for institutional staff with suspected or confirmed cases. The NRC keeps monitoring the situation in close coordination with the Ministry of Health and prehospital services in place. NRC PSS focal points activated. Coordination is underway for the purchase of protection and hygiene kits for branches at border points. Simulations in case management carried out with the government. NRC is training of community networks in targeted municipalities and border entry points. NRC is giving educational talks in schools. 27 branches have been trained in prehospital services and 9 hospitals trained in case management and quarantine.
Red Cross Society of Panama (PRC)
The Panamanian Red Cross (PRC) supported the “Food Solidarity” campaign carried out by Banco de Alimentos of Panamá, in alliance with the Ponte en Algo group, an organization that promotes support for charitable causes in favour of the most vulnerable. PRC published a joint statement with the Movement addressed to the government of Panama and the Panamanian people. PRC donated 100 hygiene kits to the Ministry of Health staff. PRC is supporting the epidemiological fences established by the health authorities by disseminating prevention and hygiene promotion messages, supporting temperature measurement, and offering alcoholic gel. PRC branches are conducting community sessions on hand washing and public orientation on hygiene. PRC has started spreading of COVID-19 prevention and mitigation campaigns across social networks. The PRC has kicked off a massive communication campaign through the dissemination of messages of prevention and mitigation of COVID-19, requesting people to stay at home (in the provinces of Herrera; Veraguas; Coclé; Panamá Oeste; Panamá; Colón) using megaphones. At the request of the Ministry of Health, PRC volunteers are providing support at some of the control points of the epidemiological barriers (Colón; La Chorrera, Panama West; and Ocú, Herrera). PRC is an active participant in the National Action and national emergency operations centre. The PRC database of trained staff and volunteers was shared with the government for support, including planned quarantined areas in hospitals. PRC health personnel in contact with suspected cases were trained in the use of PPE and the handling of pre-hospital care material. The PRC with Emergency Appeal on Population Movement funds is providing:
- Primary health services with a team of doctors, nurses and breastfeeding technicians for the migrant population in La Peñita, Darién.
- Distribution of safe water, sanitation and hygiene promotion with key messages to the population and reinforcing handwashing messages.
- Distribution of hygiene kits, baby kits and materials.

Antigua and Barbuda Red Cross Society (ABRCS)
The National Emergency Operations Centre (NEOC) was activated on March 30, and the Government has established two hotels to house persons on quarantine and is doing contact tracing. The Antigua and Barbuda Red Cross Society (ABRCS) will be included on the list of the essential services with exceptions to the restriction of movement and will be issued passes. ABRCS was asked by the Government to ensure that all volunteers were activated to support the national response. ABRCS volunteers are planting seedlings that will eventually be distributed to community members for backyard gardening in collaboration with the Ministry of Agriculture to assist with food security and encourage isolation but providing activities to avoid loneliness. The ministry provided the seeds, and the soil and the NS assisted with volunteers for the planting. The volunteers planted 35,000 seeds with beans, ochro, and pumpkins. The Antigua and Barbuda Red Cross Society (ABRCS) Barbuda branch has set up handwashing stations using buckets. The ABRCS is planning a National Hand-Washing Day in partnership with the Ministry of Health. The ABRCS Society continues conducting school campaigns and distributing information through various businesses in the country. ABRCS continues sharing communication materials from the
IFRC website and related technical guidance. ABRCS continues conducting awareness-raising activities that include using the materials in electronic billboards and adapting it to prepare parents to speak to their children about COVID-19.

Bahamas Red Cross (BRC)
COVID-19 Messages in the form of leaflets, pamphlets, and posters were translated from English to Creole by the Bahamas Red Cross Society (BRCs). Social media was used to disseminate these messages to the Haitian population in the shelters and the broader community in New Providence and Islands. A chat group was set up by BRCs HR Manager to facilitate the free flow of communication between BRCs managers, staff, and volunteers. This forum is also used to provide PSS support. Individual counselling is available and offered as per request. The BRCs is sharing information through social media for prevention and social distancing. For French Creole-speaking communities, links have been set up with COVID-19 messages in Creole and have been shared with peer educators, community leaders, and other stakeholders. These key focal points share messages by WhatsApp within their communities. BRCs continues with monitoring, and maintenance of wash stations at shelters. Team leaders were identified among the evacuees to monitor the wash down stations every four hours and replenish water, soap, and hand towels as needed. BRCs published a hygiene promotion article in the Barbados Sunday Sun Newspaper. The BRCs received IFRC support to develop internal operating procedures for COVID-19. The BRCs attended government briefings/conferences of the situation. Ongoing coordination with MoH. Basic preventive measures were taken, and hand sanitizers, soaps were distributed to all IFRC teams working on the Hurricane Dorian response and BRCs premises. COVID-19 posters were printed and distributed within IFRC and BRCs. All regional and local meetings of more than five people have been cancelled, and teams are working remotely.

Barbados Red Cross Society
The Barbados Red Cross Society (BRCS) has prepared food distribution packages with donations and delivered it to vulnerable communities in coordination with the Government Disaster Emergency Office. The NS will use the drop points in their communities for food distribution to minimize volunteers’ risk. BRCS is engaging with the Government to provide PSS support to any affected group. BRCS has its Meals on Wheels programme active and has established supportive measures for its staff. The BRCS held a staff meeting to address concerns and had an open forum to share health and hygiene guidance, including the correct use of PPE. NS management will increase its supplies of soaps, paper towels, and hand sanitizers. The BRCS ramped up its community outreach by sharing materials with community groups. The Barbados Red Cross Society continues to work with the national response system to coordinate actions. The NS continue sharing information with its staff, volunteers, and reduced office administration hours and has instituted work from home.

Belize Red Cross Society
The Belize Red Cross Society (BRCS) has started a prevention and precautionary measures campaign to the public and distributed 900 posters and flyers with information in the virus in strategic points. The NS has also procured PPE for staff and Volunteers and held a series of training in the North, West, and central districts with facilitation done by the Ministry of Health (MOH). The trained personnel and volunteers will be assisting the authorities with the management of the isolation stations. The BRCS revised the Contingency plan to reflect the evolving needs in the country and made plans to commence with the procurement and distribution of additional PPE to the vulnerable communities, and quarantine stations as required. The NS is also looking to procure 50 sets of pillows, sheets, and pillow slip for the isolation and quarantine stations as requested by the MOH. The BRCS is distributing meals to vulnerable people who lost their jobs and is working with the authorities to provide shelter to people facing homelessness during the isolation and
quarantine period. The BRCS, jointly with the Ministry of Education and MOH, participated in the Open Your Eyes Morning TV Show to discuss hygiene and prevention measures. BRCS has started a handwashing campaign. BRCS is preparing hygiene kits (with liquid hand soap, paper towel, hypochlorite, anti-bacterial towels, and gloves) for general distribution to vulnerable communities and people in quarantine. The BRCS maintained liaison with donors to identify funding support and participated in coordination meetings with the Ministries of Health and Education; UNICEF, PAHO, and civil protection. BRCS has provided jerrycans to education facilities for storage and distribution of water. BRCS reprinted IFRC posters and shared them with partners and plans to produce TV spots. The BRCS held a meeting with Ministry of Health to plan trainings with volunteers to share information with the elderly. The NS is partnering with UNICEF for PSS for children

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

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

Guyana Red Cross Society
The Guyana Red Cross (GRC) continued sensitization through media, posters were also printed and distributed. The GRC provided PSS and Psychological First Aid (PFA) support to volunteers and staff and various persons migrating in and out of Guyana. The GRC has set up handwashing stations at the RC headquarter office and set up one at a children’s home. It has planned a hand washing demonstration in at risk community and with the Guyana Postal Service. The GRC has planned to conduct an Epidemic Control for Volunteers (ECV) refresher training in the Berbice region. GRC has developed messages focused on people with disabilities. GRC has set up handwashing stations at the RC headquarter office and will set up one at a children’s home. The GRC has its Meals on Wheels programme active, and staff is rotating shifts to provide daily meals to vulnerable groups. All GRC volunteers have been activated, trained, and are involved in the awareness-raising on prevention and are distributing risk communication material. The GRC holds information sessions with their volunteers, students, and the general public through social media. GRC is in direct contact with the Ministry of Public Health and has offered its support and volunteers to
support the response in Guyana. In the frame of the Emergency Appeal on Population Movement, the GRC will continue to distribute hygiene promotion and distribution of hygiene items.

**Jamaica Red Cross**
The Jamaican Red Cross (JRC) is circulating materials dispelling rumours on social media (Instagram, Facebook, Twitter, etc.). A video of the Ministry of Health and Wellness (MoHW) was shared on the JRC platforms encouraging persons to end the stigma against COVID-19. JRC held meetings with the Ministry of Labour and Social Security (MLSS) to discuss the use of ODK to collect data in the field and to establish protocols at the MLSS warehouse where packaging of food packages and care packages were put in place. JRC held meetings with the Ministry of Local Government and Community Development (MLGCD) to support the distribution of food parcels with volunteers. JRC participates in the packaging of food, care, and drink packages to quarantined communities and NEOC activities. JRC is participating in meetings with the Association of Certified Embalmers and Funeral Directors as ODPEM and the MoHW to support the dignified recovery and disposal of human remains. JRC was commended publicly by government authorities on the work done to assist the distribution of care packages to people in quarantine. JRC volunteers assisted with the delivery of over 500 food packages and 50 hygiene kits to members in a community that was recently quarantined following the death of a resident from COVID-19. The JRC has put on hold the production of care packages by the volunteers to establish measures to prevent the possible pilfering of items. The JRC continued sharing risk communication materials and activated its Emergency, Care, and Youth sections. JRC is attending planning meetings with the government and has prepared a proposal for the acquisition of hand sanitisers.

**Saint Kitts and Nevis Red Cross Society**
The St. Kitts and Nevis Red Cross (SKNRC) plans to provide PSS to affected people and those waiting out the incubation period along with those persons who need intervention because of the added stress associated with the impact of COVID-19. The NS is also updating the response plan to include Care Packages for persons affected by COVID-19 directly or indirectly with loss of earnings or employment. SKNRC is working with the authorities on prevention and hygiene promotion campaigns. The SKNRC attends stakeholder briefings on COVID-19 with the Ministry of Health, Chief Medical Officer, and the National Disaster Office to coordinate the response mechanism. The SKNRC trained its volunteers in prevention and hygiene measures. The SKNRC continues to seek PSS support and volunteers on community-based health and first aid (CBHFA) and epidemic control.

**Saint Lucia Red Cross**
The St. Lucia Red Cross (SLRC) printed coronavirus risk reduction infographic and adjusted it to make bookmarks for students and adults. Also, the NS has developed a set of infographics aimed at parents supporting their children during COVID-19. The “care for your child” is a series of five sharable graphics. The NS is also printing and circulating COVID-19 prevention messages. The SLRC planned a workshop on Epidemic Control for Volunteers (ECV). The SLRC is disseminating information and participates in meeting with NEMA and other stakeholders. The SLRC has planned to carry out the following activities:
- Distribution of soap and hygiene products to bus drivers and elderly homes.
- Completion of colouring and activity packages for children in quarantine centers to support PPS.
- Development of Public Service Announcement (PSA) in St Lucian creole on prevention.

**Saint Vincent and the Grenadines Red Cross**
St Vincent and Grenadines Red Cross (SVGRC) is carrying out a sensitisation campaign in North of island Sandy Bay. The Suriname Red Cross (SRC) has trained 30 people from organizations in the correct handwashing measures, is translating IFRC messages in Dutch, and sharing daily messages about CVODI-19 on social media. SVGRC is collaborating with local authorities and telecommunications providers to set up virtual crisis centre for PSS. The NS is in communication with MOH and attending briefings. The NS has trained volunteers in personal prevention measures such as proper handwashing. The SRC volunteers are assisting the National Disaster Office:
- The hotline service established by local authorities and the digitalization of information.
- Logistical and administrative activities.
- Making home visits to people in quarantine.
• On borders points: checking people temperature and carrying out prevention measures.
• Reception and accompany of repatriates to quarantine facilities.
• Identify and approve of quarantine facilities

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

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

**Netherlands Red Cross overseas territories (Aruba, Bonaire, Curaçao, Saba, Sint Eustatius, and Sint Maarten)**
COVID-19 specific activities by the Netherlands Red Cross overseas territories (Aruba, Bonaire, Curaçao, Saba, Sint Eustatius, and Sint Maarten):
- Risk communication and community engagement materials distribution (flyers, posters and radio/TV messages).
- Welfare and psychosocial support (including hotline/phone calls).
- Support to individual cases and groups in quarantine.
- Volunteers have been trained on the risks and prevention measures of COVID19.
- Distribution of food items (meals, food parcels and food vouchers).
- Distribution of hygiene kits.
- Special phone-lines opened for vulnerable elderly.
- New! Ambulances have been conditioned for transport of COVID-19 infected patients.
- Support to the authorities in the registration and screening of people returning to the islands.

Also, the following other actions are planned to be increased as part of the COVID19 response:
- Livelihoods and Basic Needs support
- Cash based assistance (e.g. unconditional cash, food vouchers or telephone credit)
- Human Resources
- Migrant support (e.g. rent assistance)

**PIRAC – French Red Cross on overseas territories (French Guiana, Martinique, Guadeloupe, St Martin, St Barthélemy)**
French Red Cross on overseas territories - PIRAC is supporting the reception in airports and transportation of patients and providing information and guidance. It also is supporting collective centers for the care of positive cases and providing caretaker services at home/accompaniment of confirmed cases (non-critical and non-hospitalized). Information on personnel and volunteers is being updated and collected to mobilize them if needed. PIRAC assisted in the disembarkation of cruise ship passengers and accompanied supported authorities in the transfer of passengers from buses to planes maintaining biosecurity measures. Attention was provided to people with limited mobility. Branches from French Guiana, Martinique, Guadeloupe set up a welcome area for passengers disembarking and between flights providing food and beverages, Wi-Fi, electric outlets to recharge cell phones, beds for rest, and provided emotional support for distressed passengers and served as liaisons between passengers, the Cruise Company and local authorities. From March 13 to 20, more than 4,800 people of 27 nationalities were evacuated from cruises to 14 countries in the European Union and around the world. The branches supported in the screening of
passengers to and from flights while ensuring appropriate distancing and infection control practices (distributed information pamphlets created by the local public health authority instructing of a 14-day isolation period). The Guadalupe branch set up a tent beside the airport medical centre to provide a triage area dedicated to symptomatic people. The Guadalupe branch received a request from the Local Government to participate in the supply of drinking water to the five communes of Guadeloupe. The branch plans to train municipal staff on the management of community water distribution points (especially on sanitation measures). The French Guiana branch, in coordination with partner associations, is conducting a dissemination campaign via megaphone and through a telephone line in vulnerable communities.

**Cuban Red Cross**

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

**Dominican Red Cross**

Dominican Red Cross (DRC) branches in the Metropolitan Area, Cibao, and South Region are providing temporary tents for patient transfer, are partnering with local organizations for communication campaigns, are training municipal leaders, and sharing information through social media. The DRC is in constant communication and shares messages with the national COE. The DRC is performing equipment hygiene controls in 120 ambulance units assisting at the national response. DRC is providing daily updates to staff and volunteers. Only essential staff are working at the headquarters and branches. The DRC is doing the follow-up and accompaniment by the Psychosocial Support team to the ambulance staff, and a hotline for PSS has been established to provide services. Virtual volunteering reporting focal points have been established in each branch, and volunteers are taking the Spanish Red Cross Virtual Volunteering course. The Dominican Red Cross continues strengthening its 911 ambulance service capacities through the implementation of protective measures for staff and public attended during interventions. Dominican Red Cross personnel continue to work in the Call Centre established in the Emergency Operations Centre (*462) providing attention to COVID-19. Specific COVID-19 protocols are being designed and implemented, in strong coordination with authorities and the Ministry of Health. DRC implements public awareness campaigns based on material made available by the Ministry of Health and the IFRC. Humanitarian diplomacy actions planned to support enhanced coordination between the Dominican Republic and Haiti.

**Haiti Red Cross Society**

Enhanced movement coordination to support the Haitian Red Cross (HRC) in strengthening and adapting its ambulance service to respond to surge the demands of a potential outbreak. The HRC is monitoring migration flows at unmonitored border points where there have been reports of mobilization of about 5,000 Haitians. A direct line of contact established between the President of the HRC and the Ministry of Health. The HRC created a working group/task force to enhance monitoring and preparedness. The task force is composed of HRC Senior staff and volunteers, as well as Movement partners. With the direct support of IFRC, the bi-national agreement has been activated to enhance support between Haiti and the Dominican Republic, through their respective National Societies. Activation of a humanitarian corridor to improve the procurement of items in the Dominican Republic.
**Argentine Red Cross**
The Argentine Red Cross (ARC), together with the Civil Defence, is carrying out health checks on people in quarantine and at entry points. The ARC launched a fundraising campaign in coordination with the National Ministry of Health to expand the capacity of intensive care requirements in different public and private hospitals in the country. The Government has asked to the ARC to provide support through a hotline and the 911 calls to orient the population at risk. The ARC shared through social network messages and recommendations for coping with stress during social isolation with children. The ARC continues to share prevention messages, focusing on recommendations to address isolation, including gender-based violence prevention issues. Due to government regulations on home isolation, the NS has established work from home for the population at risk and has also suspended regular volunteer activities and classes in institutions and first aid courses.

**Bolivian Red Cross**
The Bolivian Red Cross launched a communication campaign using social media for preventive and self-care messages, including handwashing measures for COVID-19. BRC is working in coordination with the Ministry of Health through the National EOC for the COVID-19 platform and is also disseminating prevention key messages. The Ministry of Health has requested support from the NS to reinforce the call service for COVID-19 and support on border points.

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

**Chilean Red Cross**
The Chilean Red Cross (ChRC) is putting together hygiene kits with corporate donations for distribution with affected communities. The ChRC launched a fundraising campaign with football players to bring humanitarian aid to affected communities. ChRC jointly with the Migration Cell developed a specific Contingency Plan to support people in a situation of human mobility. ChRC has been providing services during public demonstrations. The ChRC is coordinating with the Emergency Operation Centre, MoH working group and work plan. ChRC is reinforcing health systems, information, and preventive hygiene messages. Prevention measures and messages are being shared in border areas on IFRC material. ChRC is implementing TV spots and announcements on handwashing and hygiene promotion. Masks have been distributed to ChRC personnel and volunteers. Precautionary measures are being taken, and protocols developed for social mobilization. Regular activities in branches have been suspended to support quarantine actions.

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

**Ecuadorian Red Cross**
The Ecuadorian Red Cross is doing rumour tracking in communities and media and has developed key messages to clarify these myths. The distribution of food kits at the northern and southern border will continue under the Regional Emergency Appeal on Population Movement. Other activities have been suspended due to movement restrictions. The ERC is managing the voluntary home blood donation and supply of heme components to different parts of the country. This activity is being carried out in coordination with the Fire Department and the Armed Forces for transportation by land or air if necessary. The ERC is providing support and advice for the dignified management of dead bodies. The NS is carrying out water, sanitation, and hygiene activities by requests from other key actors and is sending two mobile fumigation machines to Guayaquil and Santo Domingo: and a motorized fumigation machine to Santa Elena. The ERC is delivering humanitarian aid in shelters for people living on the streets, and that is moving. The ERC has developed and socialized guidelines for psychosocial support for care and self-care to different age groups during the quarantine. Also, it has begun implementing PSS teleassistance to provide accompaniment and support to people who require it. The ERC is sharing prevention and outreach information with the population, staff and volunteers.

**Paraguayan Red Cross**
The Paraguayan Red Cross (PRC) is working with the Ministry of Education and Science to provide food bags for people in quarantine, taking care of health measures. The PRC is collaborating with sanitary controls for the prevention of routes of the country in coordination with sanitary entities. The NS has been supporting health care centres with the installation of tents for triage support and support at border posts; personal protection equipment has been provided for volunteers. The PRC has been providing resources and personal protection equipment to its Maternal and Child Hospital in Asunción. Due to the declaration of a health emergency and the isolation of the population, regular activities have been suspended, and the personnel has been working from their homes. A Surge member was mobilized to provide care under the DREF Dengue Outbreak response and is providing support.

**Peruvian Red Cross**
The Peruvian Red Cross has delivered cleaning supplies and protective equipment for some PRC branches. The PRC is providing PPS support for the staff and partners through a telephone line and skype. In less than two weeks, about 80 people have been attended. The PRC distributed safe water to UNHCR shelters in Tumbes (northern border). PRC, under the Migration Appeal, is providing humanitarian aid to the migrant community in quarantine in Peru. PRC jointly with the Migration Cell developed a specific Contingency Plan to support people in a situation of human mobility. PRC care posts have been reinforced with personal protective equipment. Border care services have been reduced, due to the decrease in demand. The humanitarian network has been activated, and the PRC is participating in the meetings and in meetings with the Movement. The PRC Whatsapp pilot has been launched to provide information on COVID-19. The PRC is conducting a social media campaign on the importance of hand washing, hygiene practices, and key preventative-promotional messages about COVID-19 in coordination with the Ministry of Health. Information has been provided to PRC health personnel working on migration, hygiene promotion, and self-care for personnel. PRC is participating in the inter-agency health committee, which is mapping of agency actions. Regular activities have been limited.

**Uruguayan Red Cross**

The Uruguayan Red Cross (URC) developed a child-friendly guide with information and key messages of COVID-19 that can be downloaded from their web page. URC is holding meetings with government authorities to support the national response with the risk population: elderly, homeless, and shelter. URC is sharing prevention materials with branches and through social media, including a communications campaign to respond to rumours. The assistance under the Regional Emergency Appeal for migrants is maintained.

**Venezuelan Red Cross**

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

**Regional Overview**

IFRC Europe regional COVID-19 response team continued to provide technical support to the National Societies of the region. In this period more than 40 NSs of the region actively respond and 26 requested financial or in-kind support for COVID-19 related actions: Funds for Armenia, Azerbaijan, Belarus, Georgia, Italy, Kazakhstan, Kyrgyzstan, Moldova, North Macedonia, Tajikistan, Turkmenistan, Ukraine and Uzbekistan as well as IFRC regional actions allocated within the Global Emergency Appeal. IFRC Europe received funds requests from the following NSs: Albania, Bosnia and Herzegovina, Czech Republic, Greece, Italy, MDA, Serbia, Poland, Romania, Turkey. IFRC Regional response team established close coordination with ICRC in COVID-19 response actions.

IFRC Regional Health and Care team organized and facilitated several thematic meetings, webinars and online-conferences. IFRC organized a webinar on Community Engagement and Accountability with participation of 16 NSs and the ICRC to exchange best practices, identify challenges and needs for support.
A video (EN and SP) about the need for continued blood donation was produced and made available, in cooperation with Norwegian Red Cross, on IFRC GO and Fednet.

IFRC Europe Regional COVID-19 Response Team, including its country and regional offices as well as Global Service Centre located in Budapest continued its distance work and take other safety measures.

**Country by country**

**Austria Red Cross (AutRC)**

On behalf of health authorities, more than 7,000 Covid-19 tests are being taken through 94 mobile teams and 25 fixed drive-ins, each day - complemented by 300+ high infectious diseases transports. Additionally, two studies are being conducted to 1) analyse the number of unreported cases (dark figure) in the total population, as well as 2) a prevalence study, to identify the unreported cases in certain target groups (employees of supermarkets, hospitals, etc.)

The AutRC PSS staff and volunteers are supporting all responders and other stakeholders and expert staff is in permanent contact with IFRC and neighbouring NSs to exchange knowledge. The Austrian Red Cross, on behalf of the Austrian government, is the leading organization for the country wide and international procurement of personal protective equipment. Every day more than 2,000 AutRC staff are directly and all 90,000 staff and volunteers are indirectly supporting the COVID-19 response. Among these activities are awareness raising campaigns, provision of testing teams, infectious transport services, coordination of spontaneous volunteers (“Team Austria”), ensuring blood donation service operations and PSS.

Additionally, bilateral support to partner NSs is in preparation. A separate rapid emergency fund is in preparation (mainly for RCCE and PPE). Furthermore, AutRC ERU WASH expertise, with a focus on hygiene promotion and community engagement, can be requested for remote support.

**Red Cross Society of Bosnia and Herzegovina**

National society have initiated “Viber community” to spread information with public about COVID-19 but also to inform about activities. Awareness material have been shared trough social networks. Red Cross of Republic of Srpska have distributed field beds and blankets to 23 local communities for preparation and setting up of quarantine together with local authorities. Given that oldest residents are banned from moving government is seeking modalities for the distribution of pensions and possibly for a limited period of time they will be allowed to go to the banks, it will be necessary to protect them. For that purpose, President of Republic of Srpska donated 100,000 KM for purchase of masks for pensioners that will be distributed by Red Cross of Republic of Srpska local branches. Prime Minister also earmarked 49,000 KM from budgetary reserves for the procurement of basic food for preparing meals in public kitchens. That money has been paid to the Red Cross of Republika Srpska, which will send the funds to the local Red Cross offices.

Red Cross of Una-Sana canton is setting up the quarantine tents in Temporary reception centre “Miral” in Velika Kladuša. Camp is operated by IOM. Beside PSS phone number in Federation of Bosnia and Herzegovina this entity organisation has set up line for deaf-mute persons where they can send text messages. Red Cross of Brčko district continues their activities of transportation of Brčko residents that are arriving back to Bosna at International airport or at land borders. They have brought back 10 students that returned from Italy. Brčko Red Cross is conducting disinfection of buildings where COVID-19 cases have been confirmed.

**Croatian Red Cross (CRC)**
CRC has prepared and disseminated the following IEM: leaflet “Washing hands Guide” into Croatian/English/Arabic languages and distributed via social media and press. The IFRC info graphic with COVID-19 recommendations has been translated into Croatian language.

CRC manual on First Aid was gratis published in very popular daily newspaper in edition of 20,000 copies. The 13 public kitchens (by local RC branches) are opened, providing essential food for the people in need. Soaps and “Handwashing guide” posters have been distributed to the Roma community.

RC staff and volunteers are providing every day assistance to 10,000 beneficiaries over the whole country, delivering daily meals and providing home assistance to meet their urgent needs.

The CRC also provide support to the people who are under official health surveillance supervision (in quarantine or in self-isolation). A phone line has been opened for the most vulnerable people, open 24/7, for information, clarification of COVID-19 and PSS support. The phone line is also available for beneficiaries with hearing impairment.

A great cooperation with IKEA company in the RoC has been finished by the end of March with a donation of mattresses, pillows and bed linens.

**Finnish Red Cross (FinRC)**

FinRC has continued health and safety messaging to the public both directly by volunteers and through social media and online. In support to national and local authorities, volunteers have shared leaflets at the airport, harbours and in communities as well as participated in corona virus call centres, PSS Hotlines and Youth meeting points/chat online. FinRC own HelpCall was opened on April 1st.

Practical assistance (such as distribution of medicaments and basic groceries) and guidance for people in need (e.g. elderly, homeless and paperless people) has been scaled up nationwide. In some branches work is done jointly with other actors. Friend volunteer and youth activities have continued online or from the distance.

Support to health services has included ongoing blood supply to hospitals. The Finnish Red Cross Blood Service is the nationwide blood service provider in Finland. So far, blood supply has been at adequate level.

A triage unit (number 4) was provided and set-up at Aland hospital.

**French Red Cross (FRC)**

- Since the beginning of the crisis, the French Red Cross implemented task forces (strategical, operational and steering) at the headquarters.
- Protection of the volunteers and staff (protective equipment, home office, no intervention of most fragile volunteers, closing of RC nurseries, RC training centers, and all facilities welcoming children).
- Dissemination of hygiene measures and barrier gestures to our volunteers and to the population.
- Continuity of our essential activities towards vulnerable people (first aid, marauds, food assistance, etc.)
- New activity: implementation and management of containing centers.
- New Activity: Solidarity delivery (food and drugs) “Croix-Rouge chez vous” for isolated people.
- Psychological support: strengthening of our call centre “Croix-Rouge écoute”
• Government/Heath authorities supporting activities (strengthening of call centers, containing centers, centers for homeless people with COVID-19, transportation of people, patients welcoming and triage, etc.)
• Recruiting of new volunteers
• Launching of Emergency Appeal “Urgence COVID-19”
• International activities: Continuity of our activities, monitoring of epidemiological situation and security, mapping of NSs needs, special health team mobilized at the headquarters to support our delegations and the NSs, Containing Preparedness and Adaptation measures, involving of the FRC in the response to the COVID-19 in Congo-BZV, project of a solidarity delivery in DRC, etc.

**German Red Cross (GRC)**

GRC is further scaling up its COVID-19 response and has launched a social media and fundraising campaign (#füreinander, [https://www.drk.de/coronavirus/](https://www.drk.de/coronavirus/)) reaching up to one million people each week.

The national response is coordinated by a task force which provides central services such as PPE procurement and guidance/technical support for the activities of regional/local branches. Most GRC branches have activated their emergency operation centers and provide essential health and care services for the general public, support repatriated German citizens and their families and assist in transporting COVID-19 patients to Germany. Related activities include: set up and operation of quarantine stations, testing stations, triage facilities and outpatient fever clinics; support of the public emergency medical service, mobile care services, hygiene promotion and risk communication campaigns, home quarantine services and the expansion of bed capacity in hospitals; support services for stranded travellers; emergency care services in the event of day-care centre and school closures; psychosocial support; assistance for vulnerable population groups (shopping service, telephone counselling, etc.); distribution of PPE to health care facilities;

**Georgian Red Cross**

GRC is conducting large scale awareness raising activities nationwide, including ethnic minorities, to prevent the spread of COVID-19

More than 15,000 lonely elderly (age - 70 plus) are reached through essential humanitarian relief items provision nationwide including food, personal hygiene parcels, and medicines;

More than 900 volunteers are mobilized and trained in accordance with the Georgia Red Cross COVID-19 training module, More than 1000 people are reached through psychological first aid service provided by the trained volunteers to overcome panic and stress via the Georgia Red Cross hotline service.

Additionally, GRC plans to establish Psychosocial Support Coordination Platform and activation of additional Psychosocial Support service for medical staff and people in quarantine and self-isolation 500 quarantined people in Adjara Autonomous Republic are under the monitoring (body temperature) by the Red Cross Volunteers For those who wants to join the Georgia Red Cross Society as a volunteer in the Coronavirus Response Group, the official webpage was created. It consists of educational part in accordance with the Georgia Red Cross COVID-19 training module and the test. After the successful pass of the test registered volunteers will be contacted by the Georgia Red Cross representative.
Hungarian Red Cross

- Hungarian RC has been invited to the National Humanitarian Coordination Council, along with four NGOs.
- Hungarian RC Branches cooperate with the County Defense Committees.
- During the waiting time while the ambulance vehicles are disinfected complementary food and drinks are provided to the ambulance staff to replenish energy.
- A joint hotline is operated for the members of Charity Council (6 leading charities of Hungary) to collect funds. All other own collection lines are suspended.
- Protective equipment is hardly available in the country; however, the RC stock and has been distributed to staff in the field doing care work.
- Blood donation is ongoing with special measures on safety of blood. Internal procedures: risk communication plan developed for colleagues, internal recommendation and business continuity plan are in place.
- Risk communication plan and key messages for the media are available.
- A network of Regional Emergency coordinators was set up to coordinate the activities of branches and to report their activities to the DM Operational Team.
- Hygiene promotion and health promotion materials are published and distributed, as well as information is disseminated via their social media platforms. Positive messages and information about rumours and misbeliefs are also shared on the same channels.
- A short video on how to use personal protective equipment prepared by the Hungarian RC has been launched.
- The Hungarian RC Komarom County Branch supplies with 250 portions of hot meals for local needy people in cooperation with the Municipality.

Kyrgyzstan Red Crescent Society (RCSK)

Red Crescent Society of Kyrgyzstan continue to implement COVID-19 response actions in the framework of national response mechanism. RC Volunteers with support of local donors provide food and non-food support to more than 2000 state workers on duty: health workers, lab specialists, militaries, and police servants that provide their support in quarantine measures. RC volunteers provided food and non-food items to support 1200 older people living alone.

Red Crescent of Kazakhstan
In response to COVID-19 in the country Red Crescent of Kazakhstan mobilizing its own resources to support the most affected people. Since the introduction of the state of emergency, RC volunteers have made about 151 trips to the capital city - Almaty to deliver food baskets to those most in need. Among them are single pensioners, large and poor mothers, people with disabilities who need urgent support. Other regions: Taraz, Taldykorgan, also started to mobilize its resources, attracting corporate sector to support the most affected people, in asks were started and 10 families received packages of essential goods.

In total, 300 families received food baskets in the territory of the Republic of Kazakhstan. Three regional branches of Atyrusky, Pavlodarsky and Jambylski have launched the production of medical reusable masks, which are distributed to the population on a free basis. To date, about 1000 masks have been manufactured and distributed. IFRC recommended IEM translated into Kazakh language.

**Magen David Adom (MDA)**

MDA is continuing its COVID-19 call service together with the Ministry of Health. In the call centre, 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, during the last days, MDA operations centers are dealing with more than 30,000 calls per day above the 6,000 daily calls

MDA personnel are taking samples at suspected cases homes, and transferring them to the reference labs. In order to avoid suspected cases from traveling to health care facilities, after the decision to take a test is taken by the district public health authority, MDA member (with PPE) is sent to the suspected case home to take the swabs, then to be transferred to the laboratory. Drive through COVID-19 testing facilities are up and running in Tel Aviv, Haifa, Beer Sheva and Jerusalem.

Since March 31st, MDA operates another fourmobile go-through centers that move between different cities based on the Ministry of Health instructions, where the most vulnerable communities are (currently in Modi’in, Rahat, Ashdod and Bnei-Brak). 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. MDA is also transporting the patients who tested positive to the hospitals, and those who are discharged from the hospital to the quarantine hotel.

**Monaco Red Cross**

Support to the Monaco Home Monitoring Centre, including:

- Red Cross 7/7 covid-19 call centre with medical and psychosocial specific support helplines
- Red Cross home visits to proven Covid-19 cases, contact cases, untested symptomatic cases, with medical and psychosocial support and “home bags” for symptomatic people.
- social assistance
• Deliveries of food and non-food items (i.e. pharmaceutical products) and other services (dogwalking etc.)
• Distribution and delivery of personal protective equipment to the Princess Grace Hospital Centre, medical establishments, laboratories, general practitioners, pharmacies, ambulance drivers, fire brigades, etc. The distribution is done either directly at the headquarters in the outdoor garage or drive-thru.

**Netherlands Red Cross (NLRC)**

The NLRC helpline has received 986 requests for support so far. Almost half of those were to support people who could not leave their home for grocery shopping. More than half of the request for support are from people 60 years and older.

Red Cross volunteers are helping health centers with screening visitors at the door: making sure they wash their hands, show no signs of fever and wear masks when entering the health centre. More than 125,000 masks, 36,000 protective glasses and 500 litres disinfectants have been donated to the Red Cross, which are being quality checked and distributed to health facilities all over the country.

Additionally, web-care team has posted more than 1100 posts on social media related to the COVID-19 outbreak, and from Monday 13 April until Saturday 18 April the national radio station 3FM will be running a fundraising campaign “Serious Request: Never Walk Alone” for the Red Cross. The Netherlands Red Cross is also responding on our overseas branches in the Caribbean with risk communication, food assistance and PSS.

**North Macedonian Red Cross (NMRC)**

- Service for distribution of food, hygiene and medicines for vulnerable groups and in isolation
- Telephone service for psychosocial support
- Distribution of assistance to homeless and vulnerable groups from stocks with local government and with the support of organizations and companies
- Activation of WASH disinfection teams for our facilities and possible assistance to the Public Health sector
- Coordination with local self-government mobile teams for visiting elderly
- Meetings and coordination with local government and other institutions as well as meetings with the private sector to channel support to contain the spread of COVID-19.

**Serbia Red Cross**

Since the start of the Red Cross of Serbia COVID-19 response more than 61,000 persons have been supported. 154 branches have ongoing activities related to response (out of 183 total). The activities that the Red Cross of Serbia volunteers are engaged include:
- Distribution of food and hygiene parcels, particularly to older persons as well as other vulnerable groups. Additionally, the National Society still provides food security services through soup kitchens to the vulnerable population.
• There is a telephone-based information centre at the Red Cross of Serbia providing COVID-19 guidance. In the coming period the National Society will be opening another four telephone helplines: one will providing psychosocial support to older persons, the other will be Commissioner for Protection of Equality providing legal counsel to older persons, the third will be a social worker providing counsel on accessing social welfare services during the state of emergency and the fourth will be providing English language psychosocial support to foreign citizens in Serbia.

• Voluntary blood donation programme is ongoing, now with increased safety measures

• National Society is preparing a help to helpers’ activity - 43 psychologists from the Serbian Psychological Society are willing to support. There already is a Viber-based platform to provide psychosocial support and help to volunteers, currently provided by four psychologists.

• From next week the Serbian basketball team will be volunteering for the National Society, they will record videos with messages to the population about the importance of self-protection, hygiene and following doctors’ recommendations.

Slovenian Red Cross (SRC)

SRC activities performed in the reporting week:

• IFRC “Handwashing Guide” translated into additional 5 languages (Slovenian, Croatian, Italian, Hungarian, German) and made available on all SRC web and social media platforms;

• Translation into Slovene and dissemination of the IFRC, UNICEF, WHO “Social stigma guide” available on all SRC web, social media platforms and also forwarded to all important stakeholders for free of charge distribution;

• FRC infographics on how to cope with stress were during COVID-19 outbreak were translated and redesigned for social media and web platforms for free of charge distribution;

• Home delivery of food and non-food items to the elderly and other vulnerable groups with no financial or other means of provision;

• Provision of transportation for vulnerable groups to the doctor check-ups and other urgent appointments;

• Open phone lines offering PSS, COVID-19 information and support requests from the public;

• Taking temperature and reminding visitors of necessary safety measures at medical, public and other institutions;

• Providing assistance at care homes for elderly;

• Supporting undocumented migrants with providing medical check-up, PPE and item relief (sleeping bags, blankets);

• Home delivery of food parcels, hygiene kits and/or hot meals to families with low financial means;

• Providing at home child care services for parents performing urgent public services.

Swedish Red Cross (SRC)

The overall operational objective of the Swedish Red Cross response is to contribute to reduce morbidity, mortality and social impacts of the COVID-19 outbreak in Sweden by preventing or slowing transmission and helping to ensure communities affected by the outbreak maintain access to basic social services and can support themselves in dignity.

The Swedish Red Cross Response plan focuses on three key lines of action: 1. Phoneline for concerned citizens, 2. National coordination to support elderly 3. Support to the National Board of Health and Welfare (Socialstyrelsen) The Swedish Red Cross is also promoting good hand washing practices on all our social media platforms, in different languages, conducting fundraising campaigns to the COVID-19 operations both nationally and internationally as well as providing support to the global appeal.

Swiss Red Cross (SRC)

The Swiss Red Cross with its 24 cantonal branches and 4 rescue organizations coordinates its response with the national and cantonal authorities taking its full responsibility as auxiliary to the state. SRC provides
surge support to government response in hospitals in some cantons (St. Gallen, Lucerne, Schaffhausen. Members of the Red Cross Service (Rotkreuzdienst) were called upon by the army to provide support in army hospitals that have been dispatched to cantons in support of the local health system.

Additionally, Swiss RC actively promotes to widely distribute COVID-19 prevention messaging distributed by the Ministry of Health (social distancing, hand washing, etc). SRC has produced information videos with SRC celebrity ambassadors Through its Website ‘migesplus’, which has been launched in collaboration with the Federal Ministry of Health.

SRC is also providing services to vulnerable people in quarantine in several cantons, i.e. Basel, Uri, Zurich. SRC volunteers are supporting elderly people who have to stay at home with grocery shopping and home delivery. Home delivery is also coordinated in collaboration with one of Switzerland’s largest supermarket chains and SRC core partner COOP. The SRC child care service is confronted with a very high demand after closure of schools.

SRC is also providing support for test centers. SRC has been tasked to assist national and cantonal authorities to provide first aid volunteer teams and seconding qualified staff to test people in newly established test centers (drive thru and walk-in facilities). The project team is working hard to recruit, equip, and train volunteers. This includes the procurement of personal protective equipment, producing videos as training material, setting up web-based databases, coordinating with the authorities, and providing support for the procurement of test kits.

The Swiss RC supported the outline of the global COVID19 appeals launched in March 2020 and will support the globally concerted activities with further financial contributions in coordination with the Swiss Government.

**Red Crescent Society Tajikistan**

Red Crescent Society of Tajikistan as a part of national COVID-19 preparedness and response mechanism implement country-wide Risk Communication and community based awareness campaign. UNICEF office in Tajikistan donated “COVID-19 Prevention” IEC materials (booklets and posters) in Tajik and other local languages in amount of 30,000 pcs to be distributed among target districts at earliest possible through RCST branches. RCST staff and volunteers are distributing these IEC to local population and school students while doing awareness works. Trained Red Crescent volunteers conduct community-based sessions at urban and remote rural areas in Badakhshan region - high mountain area of the country in the border with China and Afghanistan, Sugd and Khatlon regions of the country. RCST provided 150 blankets and 200 quilts to people in quarantine zones.

**Red Crescent Society of Uzbekistan (URCS)**

Together with authorized state bodies and in accordance with the Charter goals and objectives of the Uzbekistan Red Crescent Society, active work is being carried out among the population to prevent the spread of coronavirus infection (COVID-19) and mitigate its effects, in particular:

1. In crowded places - in markets, public transport, car parks, enterprises and mahallas (local communities), URCS employees and volunteers carry out health education and personal hygiene discussions, distribute medical masks and information materials (received from the IFRC, ICRC, WHO and the Ministry of Health of the Republic of Uzbekistan)), total, by the republic:
- organized actions (events) - 1620;
- the covered population is 56,755 people;
- distributed medical masks - 43,972 pcs.;
- distributed sanitary and hygiene products were – 20,423 pcs;
- distributed information materials - 21,901 pcs.;
- the number of publications in the media - 105

2. The care for the wards and socially vulnerable groups of the population, in particular, the lonely, the elderly, the disabled and others, is intensifying, total, by the republic:
- rendered medical, social and domestic services for 7,883 people;
- persons, who received financial or food assistance - 3,038 people.

3. To implement the above tasks:
- total funds spent- 202.1 million Uzbek soums;
- 1038 people are involved, of which: 221 employees and 817 volunteers of the Society.

The above activities continue taking into account the quarantine measures introduced in the country.

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**MENA Regional Overview**

Middle East and Africa Region has reported that 16 out of 17 countries (only Yemen has no case detected yet) have been affected by COVID-19 outbreaks. A total number of lab-confirmed cases is 48,670 and 2,958 associated deaths. Iran is still a leading country with more than 40,000 confirmed cases and 2,757 deaths. A number of lab-confirm cases has been increased almost double since Ops Update #8 was issued. NSs’ operational statuses and modalities have been significantly changed due to limited global and national access and movement due to the lockdown and curfew, increasing cases, scaling up response and government and other stakeholders’ demands and pressure. So far, 12 NSs developed and revised their preparedness and contingency plans and fundraising activities are ongoing in each country, regional and global level.

**DCPRR:**

- Continue to provide support and coordinate with MENA national societies to revise and update their contingency & response plans to meet the increased needs of affected communities. The objective is to ensure an overarching plan of the host national society which can be support movement partners among others.
- PPEs demand mapping exercise is ongoing. Based on available resources, essential core PPEs materials will be shipped to high risk countries and based on the information provided by national societies. there is still a funding gap under the PPEs across the region and partners are encouraged to support national societies ensuring the quality and standards of the materials delivered.
- Initial support under the emergency appeal was allocated to national societies who have finalized plans.
- Together with the health and care unit and other technical units, weekly technical call is now in place with MMEA NSs focal points assigned by the NSs for the COVID-19 response, the call aims to share and discuss technical matters and to share best practices.
- Business continuity planning at regional and country levels is ongoing including the support to the host national societies.
- 4Ws tools covering COVID-19 response is now ready and will be published this week on the Go platform.
- Long-term and secondary impact analysis of the COVID-19 on livelihoods in MENA region will commence with the focus on how to support livelihoods options analysis by national societies and to provide technical tools and support to that.
- Following the initiation of the Business Continuity Plans (BCP) as per IFRC standards with technical guidance from global levels. As of today, six Country Offices have fully updated its BCP and five are on the final process which aims to be completed within the period of this operational update. In MENA, most of the country level structures consider the epidemic situation as Extraordinary, with only Yemen as particular (no cases recorded yet) and Iran being considered as extreme. Following the security situation in MENA, is noticeable the closure of all borders in countries where our
structures are based, being the majority of these structures on essential staff only schemes. DCPRR is providing a regular follow up and support to its CO and CCO structures and having particular focus on conflict scenarios where the current COVID-19 pandemic situation may have larger impact given the fragile context and with conflict scenarios such as Syria, Iraq, Libya or Yemen.

**Health & Care:**
- Arabic translation and proof-reading support have been organized and provided by MENARO Health & Care in order to disseminate standard information and materials to all Arabic speaking NSs.
- Joint technical support and remote learning with Libya RC by IFRC MENA Community Health, MHPSS and CEA staff.
- Working with Iraqi RC for initiating the e-learning around community health and supporting by tools and infographics to facilitate health messages development.
- CBHFA-COVID19 volunteer guide and tools have been translated and proofread into Arabic by MENARO team and proofreading committee from MENA NSs and shared with GVA and MENA NSs.
- A follow up meeting with MENA MHPSS Network with hosting of IFRC PS reference centre and PNSs and ICRC. PRCS / Lebanon and Yemen RC had joined the MENA MHPSS Network.
- A continue coordination with ICRC and IFRC PS reference centre took place to keep updated on COVID-19 tools.
- MENARO H & C is part of WHO technical working group on Fragile settings COVID-19 response and contributing technical and experience exchanges.
- The Health & WASH forum (via Teams) took place on 30 March for sharing NSs good practices on COVID-19 response, especially on WASH, RCCE and Quarantine. 31 partisans from 8 MENA NSs, 6 PNSs and ICRC attended and exchanged practical discussions at the meeting. Sub working groups on WASH, Emergency Health and RCCE/CEA will be established for a peer to peer support mechanism on COVID-19.

**WASH:**
- Discussion with SARC and Lebanese RC with regards to WASH activities implemented related to COVID19. These 2 NSs presented their work during the last MENA Health and WASH forum.
- Mapping of COVID19 WASH activities by MENA NSs
- Sanitation and Water for All Partnership (SWA) Special Webinar on COVID-19 and WASH Featuring UNICEF, WHO and Governments.
- MENA countries are now included in global Nestle COVID-19 partnership and mapping of cash requests and in-kind requests can now be made directly between MENA NSs and Nestle at country level.

**Communications & RCCE/CEA:**
- In March, IFRC MENA communications team together with WHO, BBC Media Action and Internews held a webinar on the role of media in reporting about COVID-19. A recording of that joint webinar is now available to watch online in Arabic, English and French: [https://event.voiceboxer.com/playback/7jzcqc](https://event.voiceboxer.com/playback/7jzcqc).
- MENA Comms and CEA are translating and sharing IFRC messages, infographics and other resources daily through regional communications and social media channels. MENA team is also producing social media content in Arabic related to especially mental health during COVID-19 outbreak, such as: [https://twitter.com/IFRC_MENA/status/1243113045104168961](https://twitter.com/IFRC_MENA/status/1243113045104168961). The team is working closely with National Societies, supporting them in adapting and using these resources in their public communications as well as in their risk communication and community outreach.
- A Risk communication guide was finalized the past week in both Arabic and English, consolidating all key messages in one document for easier reference and use; the National Societies will then adapt the message based on context and integrate it in the chosen communication channel (video, poster, online session etc.).
- A call between UNICEF and IFRC was organized to initiate focused discussions on RCCE. In fact it was agreed to establish a technical working group for RCCE at the regional level to work together
on Regional Framework ensuring alignment and standardized approaches between agencies in the region.

Country by country

**Bahrain Red Crescent Society (BRCS)**
BRCS is still under the preparedness, more than 50 persons was trained on Epidemics, 30 staff and volunteers are involved in the response activities such as Risk Communication, for the awareness BRCS also produced short films to be disseminated to large audience. BRCS trained 20 volunteers about how to deal with corona patient, training for more than 30 volunteers about coronavirus (COVID-19) and how it spread. In addition, 700 volunteers from other agencies who will be supporting the government on dealing cases.

**Egyptian Red Crescent Society (ERCS)**
The ERCS continues to conduct Risk communication and documents to address the migrants from Africa where also included in key messages using the Omro language.

**Iranian Red Crescent Society (IRCS)**
620,635 people, 38,972 volunteers, 14,195 staff and 6,350 trainers passed the online training 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 57,515 volunteers are taking part of that to aforesaid operation. By 29th March, 6,072,453 people and passenger were screened out of that 13,574 referred to clinical centre for further examination. RCCE included brochures, posters, info graphic (922 pages in Persian and other languages), Movie, clip, and motion graphic (286 programs have been produced particularly for different walks of life and people with special needs) Also, 8 educational documentation videos have been produced. Information sharing and publication of training contexts include: 48,760,000 people Visiting social webs, 18,308,000 people Visiting training site as [www.coronavirus.ir](http://www.coronavirus.ir), 10,015,000 people Attended Corona test at “test.Corona.ir” and 26,410,000 people reached through sending SMS. In addition, IRCS also took the responsibility of supporting with medical shelters in seven provinces with capacity of 2,600 bed. The IRCS with participation of NGOs and its volunteers selected 460 of the vulnerable and deprived districts in the country and implemented health programs to help people to be prevented from coronavirus. Moreover, 50,000 food parcels and 93,827 hygiene kits have been distributed among the most vulnerable and pregnant women.
Iraqi Red Crescent Society (IRCS)
More than 4 million people are reached by Awareness campaign (659,072 people) and (3.5 million people) reached through Social media using video and TV broadcast in 18 governorates (Erbil, Sulimaniah, Kirkuk, Diyala, Baghdad, Anbar, Wasit, Babil, Najaf, Kerbalaa, Muthana, Misan, Thiqar, Basrah, Dohuk, erbil and ninevah). Main target populations are local community, school students and Internal displaces people (DPs). 11,000 facilities (e.g. institutions, houses, stores, buildings and holly shrines) are sanitized, 100,000 brochures distributed, 900 -1000 staff and volunteers are participated and managed these mentioned activities.

The Danish Red Cross supported the Iraqi Red Crescent Society by printing HIV awareness poster. The Chinese Red Cross supports the Iraqi Red Crescent Society with the virus detection equipment and 50,000 kit used to diagnose the disease and number 2 sonar devices, personal protecting equipment (PPEs) and various medical devices used to diagnose the condition and analysis are safe for the Iraqi Ministry of Health to increase its ability to respond to the disease.

Lebanese Red Cross (LRC)
More than 4000 volunteers trained on COVID-19 and 760 EMT trained on transportation on COVID-19 patients. 520 Volunteers trained on delivery of Awareness sessions. 31 EMS stations are fully equipped for COVID-19 response. 42 PHC Nurses are trained. In addition, e-learning platform for awareness is published. 468 suspected cases were transported by LRC EMS, 2,168 awareness sessions were provided.

All LRC Partners and since the start of the Coronavirus are being updated daily on the situation via the daily bulletin report. In addition, awareness sessions were provided to the partners in order to mitigate the risk of disease transmission.

Libya Red Crescent Society (LRCS)
LRCs is currently responding in 2 areas in Tripoli and 6 areas in Misrata with 2,322 staff and volunteers. Needs assessment about Social knowledge and people knowledge about COVID-19 has been implemented. 26,6525 people have been benefitted by awareness and risk communication promotion in terms of physical distance using infographics and video.

Palestine Red Crescent Society (PRCS)
PRCS has mandates and responsibilities on communications messaging and distributing medical consumables to local community health facilities in Gaza, West Bank and branches in Lebanon and Syria. 500 PRCS active volunteers are trained on epidemics, and 1,500 staff and volunteer are involved in the COVID-19 response. Approx. 5,000 people have been benefitted from PRCS raising awareness sessions, home visits, Primary health centers, mobile clinics, PSS, telephone help line and triage tents for hospital in Hebron. For coordination, PRCS is organizing the regular Movement coordination meeting with IFRC, ICRC and PNSs and participating in OCHA coordination meeting, Health Cluster meetings and maintain a regular coordination with MOH, municipalities, community organizations and Military Medical Services. In addition, PRCS is part of the Inter-agency COVID-19 Response Plan.

Five radio programmes in the West Bank were broadcasted about PSS - how to deal with a crisis and release stress. Organizing weekly supervision meetings with the PSP team in PRCS West Bank, Gaza and diaspora
branches in Lebanon and Syria. Participating in 4 meetings for the IFRC MENA PSS Network; Organizing 3 supervision meetings with the local PS organizations in the West Bank.

**Qatar Red Crescent Society (QRCS)**

15,844 QRCS staff and volunteers are trained on epidemics in general, and 1,679 volunteers are trained on social services and 2,129 volunteers are trained on PSS and health awareness. QRCS has targeted the vulnerable and affected communities in the Industrial areas. 438 staff and volunteer have been providing services. Coordination on treatment, psychosocial support, shelter, medical training and ambulance services are taking place.

**Yemen Red Crescent Society (YRCS)**

While there are no cases reported from Yemen, YRCS is continue its preparedness work, to-date 80 volunteers and 6 staff trained on ECV. YRCS conducting daily taskforce meeting with movement partners in Yemen. In addition, 45 volunteers participated in activities related to COVID-19 response and 7,913 beneficiaries reached. YRCS also distributed 1,583 Hygiene Kits, 800 Mattress, 3,525 Blankets, 44 tent 483 Mosquito net, 13 water tanks, 2m014 Sanitizers and 200 kitchen items among 22 quarantine points which was identified by the government.

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**FUNDING UPDATE**

**Donor response to the Appeal MDR00005**

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

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- **IFRC Resource Mobilization and Pledges support**:  

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>Operational Update 3</td>
<td>21 February 2020</td>
</tr>
<tr>
<td>Operational Update 2</td>
<td>14 February 2020</td>
</tr>
<tr>
<td>Operational Update 1</td>
<td>07 February 2020</td>
</tr>
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