Situation Update

1,395,136 confirmed cases globally as reported by WHO as at 2:00am CEST, 9 Apr 2020

COVID-19 Global View map now shows new cases per population.

National Society Response

153/192 National Societies reporting. Engaged in...

124 134 129
Health RCCE Institutional Readiness

Number of National Societies engaged in selected activities:

Health:

- 60 Screening and contact tracing
- 66 Psychosocial Support
- 41 Clinical, paramedical, or homecare services
- 56 Emergency social services for quarantined individuals

Risk Communications & Community Engagement (RCCE):

- 94 Misinformation management
- 66 Community feedback mechanism
- 48 Stigma prevention messaging

Institutional Readiness:

- 80 Contingency Planning
- 54 Business Continuity Planning
- 99 Internal Risk Communications

Funding**

150,000,000 CHF Required

21% 53% 26%

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

Useful Links

Health

- New guidance on the use of reusable cloth face masks by the general public, including minimum technical specifications, instructions for use, and a high-level review of existing evidence
- A revised and simplified health guidance note highlights potential NS roles in clinical and public health in each phase of pandemic response, and supports decision-making before scaling up clinical interventions

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 are here
OPERATIONAL UPDATE

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

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

**Red Cross and Red Crescent activities globally**

**Health and Care**

IFRC emergency health has developed evidence-based guidance for best practices and minimum standards for the use of reusable cloth face masks by the general public. This approach aims to reduce potential harm caused by cloth masks without minimum standards, and to increase their potential public health impact as barriers that may contribute to reducing the spread of the virus. Together with MDA, IFRC emergency health presented a webinar “From Prehospital Care to a Global Response” for WADEMs (World Association of Disaster and Emergency Medicine), on April 2nd with 96 participants. In collaboration with BCP and surge colleagues, IFRC Geneva has created a draft concept note for a Health Help Desk, with the ambition to launch this service next week.

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

The face-to-face version of the 1-day RCCE training package has been finished targeting NSs, branch staff and volunteers of those countries that still can gather volunteers. Training provides basic knowledge on what is RCCE, how to effectively set up community engagement activities during COVID19 and how to collect and respond to feedback and rumours using new social distancing approaches. An Online version of the training is being finalized in cooperation with Learning Platform.

An agreement with Translators Without Borders will enable the translation of RCCE related products into 27 languages based on priority languages requested by the regions for the next 3 months.

Based on the need to provide actionable and specific recommendations to volunteers on how to conduct new ways of distant social mobilization, the Safe Social Mobilization guideline is being developed in collaboration with the Health department and Africa Regional Office.

Work continues towards cooperating with IM and external stakeholders to develop a feedback data collection platform which facilitates data analysis and visualization which can be operationalized.

**National Society preparedness**

To support the NSs worldwide the “Business Continuity Help Desk”, operated jointly by the Global Disaster Preparedness centre and the IFRC, has become operational. Promotion and dissemination on the availability of the new online resource has been taken place through various outreach activities.

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

The resources for National society BCP also include topics like financial sustainability and volunteer management. Conversations are ongoing to expand the service of the help desk to include several technical areas such shelter, CBI, health - with special focus on emergency medical services. Further support has been provided to National Societies’ contingency planning efforts by developing and disseminating guidance, and to support the analytical work on scenario development. This work has been closely coordinated with various reference centres on NS preparedness and is closely linked to the well-aligned efforts on the IFRC approach on Preparedness for Effective Response (PER).

**Business Continuity Planning and Security within IFRC Secretariat**

IFRC Secretariat has activated its business continuity planning in all offices worldwide. New working modalities have been established worldwide, tailored to the measures required by the various governments. Restrictions and border closures are monitored constantly, and since the declaration of the pandemic 28 daily bulletins were produced and
distributed through the worldwide network. From HQ level there are daily contacts with regional focal points for a constant analysis of regional situations and possible changes at BCP level.

Measures imposed by governments or taken by the IFRC to protect staff and the recipients of their services have not stopped operations. While operations are affected almost everywhere, they largely continue. Joint analysis is ongoing between BCP and security experts, as in some countries there is a backlash against the staff of humanitarian organisations. Globally we have tracked some 30 COVID-19 security incidents directly affecting humanitarian staff, COVID-19 medical response team, health workers, ambulances, hospital/health clinics or patients.

There are ongoing conversations with different partners with the aim of creating concrete alternatives in case of full suspension of commercial services, so as to increase our capacities to deploy people in case of sudden disaster, our relocation capacities and also for medical evacuation.

National Society Development in Emergencies

- **Financial Sustainability:** A Guidance document and toolkit for “NS Financial Sustainability in response to COVID-19 and its economic impact” has been drafted and is in the pipeline for distribution. The document is intended to assist National Societies to reflect on their short-term and long-term Financial Sustainability as a result of economic impact caused by COVID-19. Another Guidance for Emergency Fundraising is also in its drafting stage in close coordination with partnership and resource mobilization, and will be shared with NSs as part of the above-mentioned toolkit. Upon release of the document, webinars shall be organized. A checklist supporting NS in assessing their current financial sustainability has been drafted and will be shared for review and finalization.

- **Business Continuity Planning:** The Help Desk for NS Business Continuity Planning (BCP) has been launched, and is expected to incorporate support for NSs to reflect their Financial Sustainability concerns as part of their BCP development process. Detailed arrangements are coordinated together with GDPC.

- **Volunteer Solidarity Mechanism:** More extensive work has been undertaken to advance the plan of a RCRC Volunteer Solidarity Mechanism to support volunteers impacted by the COVID-19 pandemic, with the aim of better protecting and/or compensating volunteers who put their health and life at risk in delivering services. Several options are presently in a final discussion phase, including discussion with the ICRC on using the French Fund Maurice de Madre (FFMM) as part of the planned mechanism.

- **Sokoni – Exchange Platform for Volunteers:** The new platform for exchange of experiences amongst NS volunteers, which is based on the Volunteering Development Platform (VODPLA) developed in the Americas, has been named “Sokoni” – the Swahili word for marketplace. It will be launched on Tuesday 14 April, and includes discussion forums; a question button; the ability to input 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.

- **Knowledge and Learning:** An e-learning COVID-19 Guide for CBHFA volunteers was developed in coordination with the Health Department and recently launched. A webinar for volunteers and staff on COVID-19 IFRC official resources and tools was hosted.

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 on the Go Platform).

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. A new set of infographics reflects our call for action for people to learn, act and help, #StayHome and show solidarity. New infographics have also been developed representing over 100 emojis of Red Cross Red Crescent volunteers.
Social media highlights include: Twitter, TikTok videos, Facebook and Instagram: Our volunteers and staff around the world stay at work for you. Please #StayHome for them.

Two Red Talks were hosted on LinkedIn: 1) violence in the home and 2) Italian Red Cross volunteers who give an inside look at being a first line responder in the COVID-19 outbreak

Additional resources include:
- An opinion piece by IFRC Secretary General, Jagan Chapagain appeared in The New Humanitarian on how a local response is key to halt this global crisis.
- An opinion piece by IFRC Regional Director for Africa, Simon Missiri appeared in Thompson Reuters Foundation News on reasons for worry and hope in the fight against COVID-19 in Africa

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

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<td>1.</td>
<td><strong>Commission encourages and facilitates cross-border treatment of patients and deployment of medical staff:</strong> in order to support and encourage cross-border healthcare cooperation between national, regional and local authorities, the Commission issued on Friday a <a href="#">practical guidance</a> to Member States. The guidelines set out a more coordinated approach to cross-border cooperation on emergency healthcare. The guidelines also outline additional support and assistance to be provided by the Commission to Member States health authorities. Read more <a href="#">here</a></td>
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<td>2.</td>
<td><strong>EU Medical Teams deployed to Italy:</strong> A team of European doctors and nurses from Romania and Norway, deployed through the Union Civil Protection Mechanism, is being immediately dispatched to Milan and Bergamo to help Italian medical staff working to battle the coronavirus. Austria has also offered over 3,000 litres of disinfectant to Italy via the Mechanism. The Commission will coordinate and co-finance this European assistance. Read more <a href="#">here</a></td>
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<td>3.</td>
<td><strong>Commission mobilises all of its resources to protect lives and livelihoods:</strong> the Commission is further increasing its response by proposing to set up a €100 billion solidarity instrument to help workers keep their incomes and help businesses stay afloat, called SURE. €3 billion will be put into the Emergency Support Instrument, of which €300 million will be allocated to rescEU to support the common stockpile of equipment. Read more <a href="#">here</a></td>
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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, Ventilators, Medical protective masks and Surgical Masks, Coveralls and Infrared temperature guns.

**Inter-agency coordination, COVID-19 and humanitarian operations**
IFRC is working with the IASC (EDG & Principals) to support a collective approach to the COVID-19 crisis. IFRC is engaged in the WHO-led coordinated effort for a health response, and also an IASC plan which is looking at mitigating the impact of COVID-19 on already vulnerable populations in countries where there are on-going humanitarian operations. IFRC is actively engaged with the IASC community to ensure inter-agency plans are principled, complement the IFRC appeal document, and reflect operational modalities that are operationally effective: ensuring national and local actors are at the core of humanitarian operations and are engaged as equal partners, in particular paying attention to duty of care to all staff, consultants, and partners in the response. IFRC has also helped to structure the IASC plan around community engagement, feedback from communities on their needs, and ensuring operations relate to, and respond to, the needs of crisis-affected and COVID-affected communities.
Review of ongoing non-COVID-19 operations and adjustments.
The COVID-19 crisis is, or can, potentially severely affect ongoing NON-COVID-19 operations. Many federation members are analysing what the impact is or will be and how to adjust, either by adding COVID-19 related activities, putting on hold planned activities or re-purposing existing resources to support the COVID-19 response both multilateral as well as bilateral. This to expand the support to the COVID-19 outbreak response as well as manage donor expectation for ongoing operations.
Any initiative on this is welcomed and facilitated by the IFRC secretariat and will aim at a review of the existing Human Resources available in countries to be co-opted into new or adjusted activities as well as the repurposing of financial resources. Moreover, any adjustment to non-COVID-19 operations will be reflected in operations updates of these operations as well as in the potential revision of planning.
It is vital to understand how disruptive the current outbreak is and therefore how important is to be flexible in the allocation and repurposing of all resources available to ramp up a strong country level response.

Red Cross and Red Crescent activities by region

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<th>ASIA PACIFIC</th>
<th>Regional Overview</th>
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<td>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 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.</td>
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Migration
The IFRC Asia Pacific Migration and Displacement team has been providing coordination, guidance and support at the regional and national levels on reaching migrants, refugees and IDPs as part of COVID-19 activities, including an ongoing analysis of regional migration and displacement trends and developments related to migrants, refugees and IDPs. Technical support for National Society Country Plans has also been given, with a focus this week on detailed support for the following:
- Thai Red Cross Society: developing a response plan for migrants.
- Myanmar Red Cross Society (MRCS): integrating migrants, Internally Displaced Persons (IDPs) and refugees into MRCS plans and priorities.
- Documenting and sharing good practices across National Societies, with a view to further analysis and development of case studies.
- Communications: hosting a special edition of the ‘Red Talk on COVID-19’ on migrants and refugees with a focus on refugees/displaced communities in Cox’s Bazar and migrant workers in the Maldives. The Red Talk LIVE is available here: Facebook; LinkedIn; Twitter; YouTube.
- Ongoing Movement coordination and cooperation at the regional level (with the ICRC Regional Migration Advisor) and at the CCST and CO levels, especially on mutual areas including Restoring Family Links (RFL), Immigration, Detention, and aspects of Protection.
- Engaging in regional inter-agency cooperation, especially the Asia Pacific Thematic Working Group on COVID-19, Migrants and Refugees (hosted by IOM).

Logistics
While global PPE sourcing and procurement efforts are still on-going, freight availability remains limited due to movement restrictions, lockdowns, and closure of airports in many countries, and has also made the management of consolidated shipments difficult due to export bans being imposed on PPE in many countries (Legal is now assisting the team with these issues). This has also had a repercussion for logistical support for non-COVID operations in the Pacific Islands, where Tropical Cyclone Harold has been tracking through that region as a Category 4 (on the Saffir-Simpson scale) cyclone. Notwithstanding these challenges, the possibility of remote assistance has facilitated logistical coordination and management. With the support of the team in CCST Beijing, the Surge Logistics delegate is supporting the operations remotely and is also
assisting in collecting information on logistics solutions in China. Another delegate from the British Red Cross, an interim Logistics Manager based in Kuala Lumpur, is also supporting the KL-OLPSCM on the management and coordination of the logistics information and updates related to COVID-19 for the Asia Pacific region. At this time, procurement and transport arrangement for the DPRK shipment is in progress, with a tentative arrival date at the DPRK border by end April 2020 - subject to freight availability, customs clearances, etc.

Livelihoods
In the current revision of Country Plans for COVID-19 operations, core components of Food Security and Livelihoods assistance and provisioning are being drafted into the plans of Afghanistan, with plans to provide food packages to at least 50,000 households (equivalent to 350,000 individuals) and multipurpose cash grants to 15,000 households (equivalent to 105,000 individuals). The target populations under both activities will be the COVID-19 affected households (e.g. households in quarantine, households under treatment, and households that will lose their main income sources due to this pandemic). The recruitment of a Financial Service Provider for the distribution of multipurpose cash grants is currently ongoing.

Other countries that have planned for livelihoods assistance and provision include Indonesia, Mongolia, Republic of Korea, Bangladesh, and China. In the Daegu chapter of the Korean Red Cross (KNRC), processes are ongoing for distributing disease prevention kits and emergency relief kits and providing meal services to 9,951 people under self-isolation in Daegu city. Volunteers from 15 district chapters, numbering 8,137 volunteers, have also distributed masks, information materials, meal kits and relief items for 138,568 vulnerable people and self-isolated people at home. In China, support has been provided through the Bytedance Humanitarian Fund for Medical Workers to medical personnel and healthcare professionals who have been infected or have died in the line of duty.

Afghan Red Crescent Society (ARCS)
ARCS has submitted a Health emergency plan that has been endorsed. Active resource mobilization efforts are ongoing to mobilize the necessary supplies and bring this response to scale, and to continue current operations at the hospital, 138 health facilities and risk communication activities with 6,400 volunteers. ARCS has assisted in the installation of 150 tents at the Afghan-Pak border for quarantine of Afghan returnees from Pakistan. Screening operations continue to be conducted by seven Mobile Health Teams (MHTs) in different provinces, and ARCS volunteers continue to fumigate areas in different provinces and targeted areas.

Bangladesh Red Crescent Society (BDRCS)
In coordination with the local government of specific districts, BDRCS has been implementing activities across the country through its 68 Branches - all Unit Liaison Officers (ULOs) and selected Red Cross Youth (RCY) volunteers have been working as frontline responders throughout the country.

On 7 April, a Movement coordination teleconference took place with the participation of the Secretary General, Deputy Secretary General and selected Directors of BDRCS along with all in-country partners, IFRC and ICRC representatives. Another Movement coordination teleconference is scheduled to take place on 16 April 2020.

BDRCS is working to establish a 25-bed isolation unit in BDRCS’ Holy Family Red Crescent Medical College Hospital in Dhaka, and has established the Psychosocial Support (PSS) call centre in its NHQ to provide mental support to the distress people who are suffering from anxiety. A MoU was signed between BDRCS and Shastho Batayon regarding this cell. A donation agreement of CHF 500,000 (approximately 42 million BDT) has also been signed by BDRCS and ICRC for the COVID-19 emergency response. Revisions to the BDRCS Country Plan have been developed for the next six months.
RCY volunteer teams have been working all over the country (59 units and NHQ) to spray disinfectants at selected hospitals and important public places. This week, a Facebook live program was organized from BDRCS to share basic knowledge on disinfection activities and disinfection solutions. An expert from Bangladesh University of Engineering and Technology (BUET) attended and shared necessary information about disinfection activities and solutions as well as facilitated a live question and answer session.

A letter was also issued to World Food Program (WFP) for getting food support for people-in-need and those in distress. Out of the planned 75,000 food packages, 41,000 packets are being procured and may be available by mid-April for distribution. An additional 10,000 food parcels will be distributed at different project areas with support from concerned partners like the Swiss Red Cross (3,000 parcels), American Red Cross (2,000 parcels) and the British Red Cross (5,000 parcels).

With tropical cyclones being expected between March and July and utilizing available resources, the Cyclone Preparedness Program (CPP) has been working in 41 sub-districts where on an average 50 CPP volunteers per sub-district, totalling 2,050 volunteers, are working closely with the local government and security forces to disseminate awareness messages. To date, 60,000 leaflets have already been distributed across the country through BDRCS’s 68 branches.

*Population Movement Operation (PMO) in Cox’s Bazar*

Army and security forces are tightening the movement in the camp areas – agencies are working on strengthening the Civil-Military coordination efforts. BDRCS and its Red Cross and Red Crescent partners are supporting two COVID-19 isolation establishments in camp areas (30 beds in Camp 2E; 50 beds in Camp 7). BDRCS and its partners are also supporting a Government health facility in Ramu for the establishment of a 50-bedded isolation unit.

*Brunei Darussalam Red Crescent Society (BRC)*

Appointed by the Ministry of Health (MoH) to coordinate the organization of all volunteers and logistics, BRC has been at the frontline of operations, deploying volunteers to respective hospitals and health centres to organize the distribution of donations and meals at the isolation centre. Numbering 250 people at this time, volunteers from the public have presented themselves to BRC and they have been trained before being deployed. With the supervision of hospital staff, BRC volunteers are also providing basic First Aid and assisting in the screening process, taking temperatures of visitors and accompanying Bruneian returnees to the isolation centre. During this time, IFRC APRO has been sharing materials, tools, and guidance notes to BRC, including rapid training materials for volunteers and branch staff, and checklists for National Society preparedness.

*Cambodian Red Cross (CRC)*

In close collaboration and coordination with the local authorities and local health departments of all 25 municipality-provinces, CRC and its 25 Red Cross branches have actively mobilized staffs, Red Cross Volunteers (RCVs), Red Cross Youths (RCYs) together with communities to take immediate concrete actions on COVID-19 prevention and control measures.

On 26 March, in response to the needs of all 25 RC Branches, CRC distributed the following materials and equipment to all 25 Red Cross Branches to facilitate their response activities at their respect communities: 5,800 litres of alcohol-based sanitizers; 7,500 sets of face masks; 17,000 sheets of COVID-19 prevention posters; and 20,000 pieces of soap. In the past week, after restocking supplies and reprinting MoH-adapted IEC materials, the following have been planned for immediate distribution to all 25 RC Branches: 25,000 posters on handwashing; 42,000 flyers on handwashing.
and COVID-19 prevention measures; 28,000 pieces of soap; and 1,000,000 face masks, donated by the HODO Group in China.

In collaboration with the public authorities at all levels, all 25 RC Branches have been continuously disseminating the COVID-19 preventive measures through the distribution of IEC materials, household visits, loudspeakers, and mainstreaming these preventive measures into all core activities. With close monitoring and coordination with the IFRC Cambodia Country Office and IFRC CCST Office in Bangkok, the IFRC has provided its first round of global emergency funding support amounting to CHF 28,800 for implementing its prevention activities in seven RC Branches. The ICRC Phnom Penh Office has also provided funding support amounting to CHF 38,700 (USD 40,000), and the Singapore Red Cross is providing 40,000 sets of Surgical-Masks to CRC.

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

In close collaboration with household doctors, DPRK RCS volunteers have continued health promotion activities and dissemination of key messages on COVID-19 prevention and hygiene promotion in the communities during group sessions and door to door visits, and at First Aid (FA) posts. So far, another 6,225 Red Cross Volunteers have been trained in COVID-19 epidemic control activities and in recognizing the risks, symptoms, transmission routes and simple preventive measures. After the training these volunteers are better prepared to respond to health in emergencies and epidemic control. Daily, these trained RC volunteers are assisting household doctors in the early detection of those with symptoms (fever and acute respiratory infection) in the remote areas and have been assisting those quarantined and their families with FA and psychological first aid (PFA).

With the best use of the local network of information dissemination, RC branches at all levels are encouraging their volunteers to learn and be updated on the latest technical information on COVID-19, and to continue playing a key role in health promotion. In the emergency preparedness against COVID-19, the DPRK RCS is strengthening its communication work including regular coverage of RC homepage & local mass media. On “World Water Day-2020”, the provincial and county-level Red Cross branches mobilized their volunteers to carry out hygiene promotion activities at household levels with special focus on personal and environment hygiene, public place disinfection and water source protection in line with this year’s theme “Water and climate change” and “COVID-19 prevention”.

Coordination meetings continue to be held with key partners including the Emergency Anti-Epidemic Command and the Ministry of Public Health at both the national and provincial levels. In coordination with the IFRC CO, DPRK RCS has finalized revisions of its COVID-19 Country Plan and is synchronising it with the Annual Plan 2020. The local procurement processes have been started to procure volunteer PPE and printing of IEC material. Updated information on port of entry for the shipment of international procurement is shared with the IFRC logistics team - these items are expected to arrive by the end of April subject to 10 days quarantine in Sinuiju, DPR Korea. DPRK RCS has also secured reassurance from the authorities that COVID-19 response materials will be given priority to cross from Dandong, China to Sinuiju, DPRK.

As of 3 April 2020, epidemiological data on DPRK shared by MoPH is as follows:
- Number of incomers: 7,283 (foreigner: 194, local: 7,089)
- Number of new quarantined: 509 (foreigner: 2, local: 507)
- Number of released from quarantine: 24,842 (foreigner: 380, local: 24,462)
- Number of fever cases: 361 (foreigner: 8, local: 353)
Number of laboratory tests with specimen: 709 (foreigner: 11, local: 698)
Number of confirmed cases: 0

**Indonesian Red Cross Society (PMI)**
PMI has been implementing activities through 28 PMI chapters and 189 PMI branches, mobilizing more than 2,360 staff and volunteers, engaging in the spraying of disinfectant at 21,204 points spread across 28 provinces, providing health services and reaching 19,523 people to date, dispatching ambulance referral services, distributing more than 1.26 million masks to provinces and districts, and equipping province offices with the necessary Personal Protective Equipment (PPE) and disinfectant sprayer units.

PMI has also continued its efforts in risk communication and in managing community feedback through the hotline and social media, with 78 callers having contacted the PMI hotline services for COVID-19 to date. While PMI has ramped up its institutional preparedness with the establishment of the emergency logistics warehouse and establishment of a field post, plans are underway for health education and promotion via social media and implementation through social media like Instagram, Facebook, and Twitter. IEC material for COVID-19 information, tutorials for the proper wearing of masks, handwashing, and etiquettes of coughing and sneezing have also been disseminated.

**Japanese Red Cross Society (JRCS)**
On 7 April, the Japanese Government declared a State of Emergency for one month, targeting seven prefectures: Tokyo; Chiba; Saitama; Kangawa; Osaka; Hyogo; and Fukuoka. This declaration is based on a law originally developed for flu outbreaks that has since been revised in March 2020 to include COVID-19. Taking effect on 8 April, the declaration enables prefectural governors to take stronger preventive measures by restricting certain mass participation activities from taking place, requesting certain facilities or event organizers to cease operations, and to allow for the use of land or buildings for building medical facilities without consent from the land or building owners.

As of 6 April, in some prefectures, Japanese Red Cross community volunteer corps have made cloth masks meant for distribution and use at day care centres, nursing homes, and schools, as the global shortage of surgical masks remains. Care was taken to ensure that there were proper sanitation and ventilation measures in place while volunteers were making the cloth masks.

**Korean Red Cross (KNRC)**
With the arrival on 1-2 April of two chartered flights with 514 evacuees from Italy, KNRC has been supporting their two weeks quarantine with the provision of comfort kits, books and stretching bands. In line with the increased number of evacuees from abroad, KNRC is working in close coordination with the Ministry of Foreign Affairs and the Ministry of the Interior and Safety. As there is an increasing number of confirmed cases in Seoul, Local Authority of Seoul City designated Seoul RC hospital as the exclusive hospital from 6 April. Seoul RC hospital is preparing to transfer non-COVID-19 inpatients to other hospitals and to set up the necessary equipment such as negative pressure devices.

KNRC has started the process of procuring 150,000 thermometers for different types of schools in Daegu City and three special disaster areas in N.Gyeonsang Province. Upon requests from IFRC and other National Societies, KNRC is acquiring information on diagnostic reagent kits and is contacting potential manufacturers for more details.
Lao Red Cross (LRC)
For the period 2–10 April, funded by the Swiss Red Cross (SRC), LRC is raising public awareness on COVID-19 prevention in public areas such as the market, temporary shelters for quarantined people, and at check points with traffic police.

Mongolian Red Cross Society (MRCS)
As of 8 April, there have been 16 confirmed cases of COVID-19 importation in Mongolia. Of these 16 confirmed cases, one is a French citizen, three are Turkish citizens and twelve are Mongolian citizens. Mongolian citizens were earlier repatriated and arrived on special chartered flights from Seoul, Istanbul and Berlin–Moscow. In total, 48 Red Cross staff and volunteers have been mobilized to support monitoring of the people who are in self-isolation at home by means of an observation sheet that was developed for volunteers for this purpose. The training team developed five different types of video training materials for its volunteers and staffs and together with the National Emergency Management Agency and National Center for Mental Health, five different types of posters were developed on stress management and recommendations specifically for children and older persons.

Myanmar Red Cross Society (MRCS)
MRCS Volunteers continue to be involved in risk communication and community engagement (RCCE), temperature screening (entry points at borders and specific community areas), psychosocial support (PSS), handwashing campaigns, and fumigation at community levels. MRCS is also distributing key messages through social media (MRCS Twitter and Facebook accounts) with an innovative “Corona Go Away” campaign song that is receiving a lot of interest, and has been performed in various areas like the following: IDP camp in Kachin state; Community quarantine facility in Southern Shan state; for children and parents; and, for general online followers. Other weekly MRCS updates can be assessed here.

MRCS’s COVID-19 intervention in Rakhine state continues with a focus on RCCE, including pamphlet distribution, billboards in key township locations to support the Ministry of Health and Sports (MoHS) messaging, and the use of loudspeakers. MRCS Volunteers have also been supporting efforts with fumigation, fever screening at checkpoints as well as with quarantine assistance for people returning to their villages from outside of Rakhine state – established networks with village leaders and an ongoing programme presence in many of these townships has facilitated this work. In Shan, Mon and Kayin States, where migrant labor returnee influx had been high in past weeks, specific focus has been set for disease prevention and RCCE.

Nepal Red Cross Society (NRCS)
The Government of Nepal has extended the ongoing nationwide lockdown until 15 April 2020 as a drastic measure to contain the COVID-19 pandemic. As of 7 April, nine positive cases of COVID-19 have been identified out of which one has already recovered and one was deemed as a local transmission without a travel history. Since the first confirmed case of local transmission, the Government has declared that Nepal has entered the second stage of Pandemic and as a result, the council of ministers meeting held on 5 April decided to implement the restriction of movement strictly to make the lockdown more effective. In addition,
the government will start mass-testing in the districts of Kailai, Kanchanpur and Baglung where more than one positive case of COVID-19 has been identified.

ICRC has also supported 22 people to reunite with their family members in Kailali district who were returnees from India. As a preparedness measure in the event that the pandemic escalates, NRCS has handed over 50 dead body bags to the Nepal Army hospital and upon request by the Nepal Police Disaster Management Committee, NRCS has also prepared 150 dead body bags for rapid employment.

**Pakistan Red Crescent Society (PRCS)**

The PRCS Corona Crisis Management Unit has been established at NHQ and all seven PHQs, providing round-the-clock services. PRCS Muhaﬁz Force, a nation-wide group of 5,000 volunteers, has been launched to provide COVID-19 awareness to communities and to provide food to the doorsteps of families-in-need while practicing preventive measures like donning of gloves and masks, and observing social distancing. To date, food distribution has been carried out by PRCS teams in District Khairpur, Sindh. Various call centers have also become operationalized over the course of the past weeks. The PRCS Virtual Call Center at NHQ has been made operational through the establishment of a toll-free helpline for guidance to public regarding COVID-19 matters - the service includes sending text messages from PRCS to 24 million people nationwide on Corona Care. PRCS “COVID-19 AAGAHI Medical Helpline for Corona Call Center” has also been established and is operational around-the-clock at PHQ Karachi to guide communities. PRCS Tele-Medicine Centers are also operational at Merged Areas HQ.

An inauguration is expected soon for a 10-bedded and ventilator-equipped Intensive Care Unit (ICU) being established at PRCS Corona Care Hospital in Rawalpindi. PRCS has established a 10-bedded Isolation Ward in PRCS Hospital Gawader while the establishment of a 100-bedded Isolation Facility at PRCS Corona Care Hospital in Rawalpindi is also in process. PRCS has also launched a blood collection drive for Thalassemia patients who are currently facing difﬁculties owing to low blood donations due to lockdowns. PRCS is providing logistical and human resources support to governmental quarantine facilities in Balochistan, Khyber Pakhtunkhwa and Sindh.

A public awareness campaign is being carried out on electronic and social media channels, and information brochures have been sent to PHQs for dissemination. PRCS has mobilized medical response units, ambulances, and medical staff at prominent locations in large cities of the country. A Hygiene Campaign was also launched, focusing on the following activities: spraying of disinfectant in public spaces in Gilgit, Karachi, Rawalpindi; distribution of soap in Quetta through PRCS FAR teams; distribution of Hygiene Kits in Gilgit through PRCS First Aid Responder (FAR) teams; distribution of hand sanitizers in District Peshawar. During these operations, PPE was provided for all field activities, and PPE were also dispatched to PRCS Hospital Hyderabad staff & PRCS staff at District Mirpur Khas, Larkana.

**Philippines Red Cross (PRC)**

With the Government of Philippines ramping up its testing capabilities in the coming weeks, the number of confirmed cases is expected to rise from the current 7 April tally of 3,764 confirmed cases and 177 deaths. Front line staff are facing significant challenges and 19 doctors have passed away due to COVID-19. Hospital staff who may have been potentially exposed to the virus are reporting as persons under investigation, leading to a 14-day quarantine. Several major public places like large sports complexes have since been
prepared as community quarantine and isolation facilities. On 7 April, the Government of Philippines extended the Luzon-wide quarantine to 30 April.

The enhanced community quarantine over Luzon is expected to reduce employment further and will significantly affect the poor who work in the informal sector. For residents of poor communities, the quarantine may eradicate all income, especially those who are relying on self-employment and household enterprises. Due to the quarantine measures, a bus with 32 passengers traveling from Manila to Davao City was not permitted to enter and was flagged down in Davao de Oro - the passengers, along with the bus crew, were considered as persons under monitoring (PUM). The PRC Compostela Valley Chapter with the LGU immediately responded to the needs of the passengers and crew. Volunteers and staff quickly set up tents in Pasian Eco Park Monkayo, Davao De Oro to serve as temporary shelters and quarantine facility for 14 days. PRC Compostela also provided sleeping kits, a tank for water source and storage, and a welfare desk for psychosocial support. Medical needs of the affected passengers are also being attended to.

PRC has continued to scale up its response to COVID-19 through its wide network of chapters and volunteers. PRC continues to support the healthcare system and authorities by providing surgical masks and PPE to hospitals and government offices. To date, PRC has distributed 283,409 surgical masks, 3,285 sets of PPE, and set up 20 medical tents in 13 hospitals - these tents are used as medical units for overflow from the COVID-19 hospitals and also for the quarantine centers being set up.

Over the course of the week, PRC has sped up its preparation processes to set up the COVID-19 molecular (testing) laboratory so that it can be operational soon. From the inception of the laboratory, PRC has worked closely with the Department of Health (DOH) and World Health Organization (WHO) to ensure that the laboratory follows stringent accreditation and licensing requirements.

The PRC help desk is also fully operational with 30 volunteers on the phones and a doctor on call for referrals. The pandemic has exposed the staff and volunteers to high stress, experiencing anxiety due to the fear of contracting the virus. To mitigate these stresses, the Welfare team at NHQ has conducted their first batch of psychosocial support to NHQ staff to support their mental well-being.

**Timor-Leste Red Cross Society (CVTL)**

CVTL volunteers and staff have established an Operational Management Structure for COVID-19 response and together with support from a medical doctor, has developed its contingency plan as requested by the government. While considerations are being made to develop a business continuity plan, for the purpose of staff and volunteer safety and security, CVTL has created the Kitchen team which is responsible for meals for staff and volunteers during the workday in the office, with lunch cooked by the kitchen team.

The Risk Communication and Community Engagement (RCCE) team has conducted five socializing sessions with the megaphone, focusing on infection prevention, definitions for quarantine and isolation, and distributing 400 posters centering on the prevention of COVID-19 during the campaign. An additional 5,600
copies are being printed. CVTL continues to support 14 quarantine sites and an isolation facility in Dili, and has established 11 handwashing stations at the airport, land border, clinics and quarantine sites. Basic sanitation facilities such as water installation and water tanks, soap for hand washing are provided to all quarantine sites in Dili including at the Presidente Nicolau Lobato Airport. CVTL has also provided non-technical support for the cleaning up of the isolation site at Caicoli and transferring medical equipment from the Community Health Centre in Vera-Cruz to the Community Health Centre in Formosa. As part of efforts to mainstream COVID-19 preventive measures, 12 Branches have coordinated with directors of health on the response to COVID-19 in municipalities, integrating with health for campaigns in municipalities on Infection Prevention Control activities.

**Focus Story of the Week: Thai Red Cross Society (TRCS)**

*‘Phonphai’ App for COVID-19: Delivering assistance to those in need in all corners of Thailand!*

The Thai Red Cross Society (TRCS) is responding to the COVID-19 pandemic through a mobile application called “Phonphai” that was developed in partnership with the United States Agency for International Development (USAID) and IFRC. This real-time disaster management tool enables users to report the locations of people at risk of contracting COVID-19, and those in need of assistance.

The **Phonphai app** was developed as part of a project on “Enhancing Disaster Risk Reduction Capacity in Thailand” funded by [USAID](https://www.usaid.gov) and the Office of U.S. Foreign Disaster Assistance (OFDA) and is being used by all 76 Provincial Chapters and 13 Health Stations of TRCS across the country.

The intended purpose was to allow users to report disasters and emergencies and to serve as a tool for disaster response. Now, it has been modified to help locate people who need assistance for COVID-19, such as those who are quarantined and cannot go out to buy food or other necessary items, or those who are ill or have difficulty in moving around and need assistance.

When the app is opened, the user can pin the location of the person requiring assistance and fill up a simple form to provide inputs. Alternatively, when village health volunteers conduct home visits for people in quarantine, they assess their needs and input the details in the Phonphai app - the request is verified and processed by the local RC chapter. Once the processing is completed, special relief kits for COVID-19 are delivered by Makro (a supermarket chain in Thailand) to the destination province within 24 hours (except for the three southernmost provinces which require 48 hours). By the first week of April 2020, 34,149 relief kits for COVID-19 have been requested and processed from 23 provinces using the Phonphai app. The special relief kit is for one person for 14 days and consists of:

- 5kg of rice
- 30 packs of instant noodle
- 12 canned fish
- 2 canned egg with chicken
- 2 tuna chili paste
- 12 garbage bags
- 1 soap
- 1 shampoo
- 1 detergent

Staff of Health Station no. 1 Surin is using web-based Phonphai to track the incoming request for assistance while others are packing relief kits for people in quarantine. *(Photo: TRCS)*

Staff from Health Station no. 1 Surin are helping each other to bring relief kits to those affected by COVID-19 who are in quarantine at home and need assistance. *(Photo: TRCS)*
‘Pinto’ - the Robot and Telepresence System that enhances Safety and Care in Hospitals with COVID-19 affected persons

“Pinto”, a Quarantine Delivery Robot, is currently assisting health workers in the Emergency Room at the King Chulalongkorn Memorial Hospital (KCMH), managed by TRCS.

Developed by the Faculty of Engineering at Chulalongkorn University in collaboration with HG Robotics and Obodroid company under the project of “CU-RoboCovid”, these robot systems have been available since 3rd April 2020 and have helped to reduce the risk of the medical team contracting COVID-19 while interacting with patients.

Pinto helps to take care of the patients and maneuvers around the patient’s bed to deliver food and medicine. The robot is equipped with a telepresence system which helps doctors and patients communicate with each other from a distance via tablets. Pinto is operated by a remote control. This enables the medical staff in maintaining physical distance while providing timely care, thus enhancing their protection from the virus.

Pinto also helps by cutting down on the amount of Personal Protective Equipment(PPE) used which is in severe shortage all over the country. It also saves the time spent by medical staff in wearing/removing PPE several times, thus saving their time to care for more patients.
Currently, there are 31 patients under investigation for COVID-19 at KMCH. Pinto can easily be cleaned and disinfected, so the medical staff can use it any time.

These robots are presently assisting the medical teams in four hospitals including KCMH. More than 50 hospitals have requested for the robot and the company plans to produce 103 robots for hospitals all over Thailand.

**Innovation for enhancing protection from COVID-19: Negative pressure cabinets for specimen collection**

KCMH is currently using eight negative pressure cabinets to ensure protection of its medical staff while increasing the number of specimens collected daily. Developed by the Faculty of Medicine at Chulalongkorn University, these “mobile negative pressure cabinets for COVID-19 specimen collection” protect the medical staff from contracting the virus by contamination from fluid or droplets from the person being tested.

Conventionally, hospitals only have one negative pressure room with a ventilation that generates “negative pressure” (pressure lower than of the surroundings) to allow air to flow into the isolation room but not escape from the room, as air will naturally flow from areas with higher pressure to areas with lower pressure, thereby preventing contaminated air from escaping the room. This technique is used to isolate patients with airborne contagious diseases such as SARS-CoV, MERS-CoV, Influenza and Corona Virus. Building a negative pressure room is expensive and unaffordable for every hospital in the country. The negative pressure cabinets, however, cost much lesser while delivering the same efficiency.
t can contain the spread of virus inside, is mobile, transparent, and is convenient to use. The cabinet was manufactured based on the medical standards for specimen collection. It is made of 15-millimetre thick acrylic which is resistant to disinfecting liquids and has wheels.

It is transparent and has an air vacuum inside with a High-Efficiency Particulate Air (HEPA) filter which can filter 99.995% of particles as small as viruses. It is also installed with UV-C light which offers additional protection against the virus. These features make the negative pressure cabinet many times more efficient than N95 masks in preventing cross contamination, thus offering better protection for medical personnel and persons seeking testing. With the rapid increase in the number of persons seeking testing for COVID-19, these negative pressure cabinets will facilitate faster and safer sample collection points.

**Seeking Plasma Donations for treating Severely Affected**

Given that the vaccine for Corona virus is still a long way in development, **Dr. Dootchai Chaiwanichsiri, MD.**, Associate Professor and Director of the National Blood Centre (NBC), TRCS, is promoting the use of plasma from people who have recovered from COVID-19 to treat those who have severe symptoms. The NBC, which is already collecting plasma to cure other diseases, is now inviting those who have recovered from COVID-19 to donate their plasma. Donors need to have fully recovered, display no symptoms and should have completed the 14-day self-quarantine.

**COVID-19 patients**

**Prof. Dr. Yong Poovorawan**, Head of the Centre of Excellence in Clinical Virology at the Faculty of Medicine, Chulalongkorn University, and an advisor of the NBC, TRCS, explains that the plasma from those who have recovered from COVID-19 will be very useful to treat severely ill patients. The virus antibody, which is mostly generated during the 2nd and 4th week, is like the serum which can cure illness. In severely affected patients, it can prevent COVID-19 from damaging lungs that leads to pneumonia and further complications.
AFRICA

Regional Overview

The COVID-19 infection continues to spread in Africa with 52 out of 55 countries in the continent. As of 8 March 2020, 10,692 cases are reported with 535 deaths. In the last 8 days, the number of cases had doubled, and the number of deaths has tripled. Countries have intensified prevention measures to contain the spread of the virus and the NS in their role as auxiliary to the government. Given the weak disease surveillance and poor health systems, Africa is highly challenged with the risks of spread of COVID-19.

The health unit is supporting National Society to supplement government efforts in:

- Screening, contact tracing and other services related to surveillance and case detection, in support of government activities.
- Infection prevention and control and other health-system interventions to improve care or access to care.
- Clinical, paramedical or homecare service to supplement health systems in cases where capacity will be exceeded.
- Psychosocial support to affected populations and quarantined persons.
- Development of proposals for resource mobilization with partners to support expanded testing, and support to PPEs and COVID-19 specific WASH components.

The challenges the national societies are facing is to comprehend the scientific information of a new disease, tackling various myths and fears about COVID-19 and devise alternate means of service delivery in the context of social distancing and lock down of many high infected areas. The regional health team is synthesizing the global information, resource and tools into the African context and relevant to the RCRC scope of intervention like contact tracing, community-based surveillance, screening at point of entry, appropriate use of PPEs and testing.

From the Global Emergency Appeal for COVID-19, the first allocation of operating budget for Africa has been distributed in line with the Africa Intervention Approach, to 43 African NS for preparedness and response activities. The Africa COVID-19 team is fully operational across the African continent despite restrictions on surge deployments, the movement of personnel, and funding constraints. The Africa organigramme is aligned to the global coordination structure and approach to coordination and management. Current funding challenges will inhibit the launch of long-term HR positions for the response. Planning ongoing with HR and the Operations team to overcome this challenge and begin long-term recruitment.

As the foundation of the response in Africa, Heads of Country Cluster Support Teams (CCST) have been empowered to make operational and financial decisions that are most relevant to them in their respective field locations. To support this, a Regional coordination structure and information flow process has been established with COVID focal points assigned in every CCST and Country Office across Africa. These focal points are supported by sub-regional Health Coordinators responsible for technical oversight of preparedness and response plans in their respective areas of responsibility and who have close and established links with Health, RCCE, and DCPRR at the Africa regional level. This information flow is designed to facilitate the rapid review and validation of country plans, ensuring alignment to global standards and sound technical strategy, and coordinate support to the CCST and country operations.

The Africa Region has established a Movement Operations Group, which meets weekly to coordinate the Movement response across the African Continent. Through this a 4W tool has been developed to map the Movement Partners’ activities across Africa for COVID-19 and which will inform the global Movement footprint.

Risk Communication and Community Engagement

- Internal and external coordination is ongoing, with regular calls with the Africa CEA team and the global CEA team. IFRC is also co-leading the RCCE interagency technical working group with UNICEF and leading the sub-working group on community feedback.
- The process of the development of NS’ EPoAs for COVID-19 was supported and all submitted plans reviewed.
• Development and input into regional and global RCCE tools, translation of materials into French and systematic sharing of all RCCE materials with clusters and NS. Input into the global RCCE training package for COVID-19 was provided and the one-day training finalized.
• The first ‘Ask Dr. Ben’ video addressing the common rumour of Africans not being affected by COVID-19 was produced and shared widely via social media. These kinds of videos will be shared on a weekly basis and are addressing most common community feedback collected and shared by African National Societies.
• A process of sharing, analysing and discussing community feedback priorities shared by members of the community feedback sub-working group was developed and agreed upon.
• A twitter poll on the perceptions of COVID-19 was conducted.
• Coaching on management, coding and analysis of community feedback data with CEA cluster colleagues, African National Societies, as well as the data management intern of the CP3 programme, is ongoing.

Logistics
The logistics team is actively supporting the COVID-19 through mapping, sourcing and procuring items as well as putting in place logistics to support operations across Africa. Ongoing activities include:
• Arica Region mapping of PPE kits and equipment available through the current Ebola responses in DRC, South Sudan, Burundi, Rwanda and Uganda;
• actively looking for regional and local sources of required basic PPE like Gloves, surgical masks, thermometers, sanitisers, hand wash and disinfection materials.
• With the current global slow-down in activities across different sectors, including, manufacturing and transport which are key in procurement and logistics, coupled with the increase demand for COVID-19 related items, the logistics team is facing the following main challenges.
• Transport systems and supply chains are beginning to slow down due to closure of international borders, curfews and lockdowns.
• The number of global suppliers is limited and mostly based in Western Europe hence leads time for procurement and delivery to the locations maybe erratic. The Logistics unit is currently coordinating with local partners to identify useable stocks regionally/locally with WHO, UN and MoH.
• A meeting has been planned with Africa Health to finalise PPE requirements for EA 01.04.20202 for the ANS conducting COVID-19 activities.
• There is no Global Framework Agreement for PPE kits and equipment. GVA will expedite on this process and lead on PPE supplier selection and quality assurances.

Planning, Monitoring, Evaluation, and Reporting (PMER)
The PMER team is working closely with the global PMER team, Africa Operations teams, IM, Health and CEA team to put in place the needed Monitoring and Evaluation plan that will consolidate the all pieces of data and lessons gained during this operation. PMER is also closely collaborating with IM, PRD, Communications, PSK and Operations to define the reporting needs for this operation and to systematize the reporting process by consolidating data requests (internal and external) and developing templates that different stakeholders will use to provide inputs to reports.

Communications
In line with establishment of a common RC narrative on COVID-19, the Comms Unit is focusing on more aggressive external communications in order to capture the media space and position the Red Cross as a lead in this operation. As such, an Africa Communications Strategy for COVID-19 is drafted and under final review, with an expected release next week. To provide additional support to the Communications unit, a communications delegate has been brought onboard as the Communications focal point for COVID-19.

Information Management
Developed and shared 4W matrix template with PNS and briefed on its usage and purpose in the weekly coordination meeting. Worked with the Netherlands Red Cross society on a proposed package for data and digital capacity to support several national societies in Africa. Worked with several potential partner organizations, including a research institution who is working with an epidemiology team to create a scenario forecast. Potential use and grounding of this work need be developed next week with the regional and global
teams. Worked bilaterally with several national societies. This was both to understand current IM/data response and capacity, as well as give input on specific tasks, e.g. vulnerability & capacity mapping.

**Updates from National Societies**

Thirty-four (34) Africa National Societies have so far responded to the weekly Activity Monitoring survey, with:

- 93% of them being part of their respective country’s COVID-19 National Strategy plan
- 90% are working closely with MoH in COVID-19 related activities
- 65% are conducting RCCE related activities and
- 50% conducting health related activities.
- 50% have trained their Staff and Volunteers in RCCE.

**Mozambican Red Cross Society:** With 10 cases confirmed in country by April 6, the Mozambican government declared a state of emergency by increasing surveillance and implementation of some restrictive measures to combat COVID-19. In this scenario, the Red Cross of Mozambique trained and mobilised 350 volunteers in Health, RCCE and PSS modules actively engaging with communities around the country with key messages and actions oriented on COVID-19. A Communication Task Force between CVM, IFRC, ICRC and PNS has been established to strengthen the reach of life-saving messages in radio and social media programs. Activities such as sanitation of public transport, implementation of strategic points for hand washing, distribution of information posters and collection of community feedbacks have been undertaken by CVM volunteers as part of the response in partnership with Mozambique’s MoH.

**Gabon Red Cross Society:**

The Gabon NS was engaged 50 volunteers in door-to-door sensitization reaching out to 3463 people (Akanda- 732, Owendo- 594 and Libreville- 2137). The MoH has suspended all outreach activities on 22 March due to the increase in the number of cases and due to the reinforcement of the barrier measures decreed by the Gabonese government. Eleven volunteers have been trained by WHO on the use of the Go data and have joined the contact tracing teams to support active contact tracing. The RC volunteers are monitoring the cases placed in residential confinement/self-isolation on any symptoms of COVID-19. They are also ensuring that the contacts are aware of the modes of transmission, practicing proper hygiene measures and social distancing for the safety of their loved ones. A rotation of 9 volunteers for contact tracing activities, working 2 days for each rotation. The NS is also participating regularly in coordination meeting at different levels.

**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 is working on the Regional revision of the Plan of Action. Operational Budget allocation with current funding for NS is in progress, and bank transfers started last week. So far, 11 NS have received the funds.

Rapid Response Members deployed to Panama to support regional actions:
- Pandemic Preparedness
- Risk Communication
- Community Engagement and Accountability (CEA)
- Three rapid response Data visualization specialists

In addition:
- Disaster Managers are coordinating regional meetings with NSs per region.
- A global activity monitoring system has been developed. Information has been shared with NSs through official communication.
- A Rapid Response Preparation Alert for availability for potential deployment has been activated.
- ARO, through the Country Cluster Support Teams (CCSTs), is monitoring and assessing the situation
and taking actions to help NSs prepare for the outbreak and manage risks.

- ARO has organized a coordination team, consisting of staff from the Disaster and Crisis Prevention Response, and Recovery Department (DCPRR), Health and Water, and Sanitation, Logistics, Finance, Partnerships, and Resource Development, and Communication. The team has regular weekly meetings and teleconferences in English and Spanish to share updates on the epidemic with National Societies and IFRC groups.
- A group was opened in Teams Microsoft with content in Spanish and English, as well as a forum for National Societies to share questions and materials. You can request access to the group here.
- A template for Contingency planning has been shared with NS and almost all NS have developed their plans.
- 32 National Societies have developed a contingency plan, 3 Partner National Societies are supporting COVID-19 response in the Americas across 4 countries and ICRC is also supporting 4 countries
- Americas Region: COVID-19 Outbreak - Red Cross Movement Mapping and Funding Dashboard developed by IM (link attached). The information is being updated continuously.
- The R4V Coordination Platform for refugees and migrants from Venezuela has shared the “IFRC Guidance for National Societies working with migrants and displaced people – Americas” produced by the Migration cell for the COVID-19 response.
- A Guide on Protection, Gender, and Inclusion and COVID-key messages and groups in vulnerable situations has been prepared in Spanish, and briefings have been held for coaching and mapping with regional PGI focal points. A campaign is being developed with Communications on PGI and COVID-19.
- 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)
The American Red Cross (ARC) has developed newly information and distributed to support individuals and families with hygiene and social distancing measures, the experience of sheltering-at-home, and amplifying critical updates from the Centers for Disease Control and Prevention (CDC) and other partner agencies. Virtual home-based preparedness opportunities, primarily for children and families, are currently being provided in multiple regions. ARC is supporting community-based feeding efforts for vulnerable populations, those directly impacted by the pandemic, and medical personnel surge in profoundly impacted areas. Current efforts primarily focused on school-age children. ARC is providing technical support to partners and providing virtual delivery of Psychologic First Aid and other mental health resources. ARC is carrying out virtual condolence visits, including mental health and health services, to families of all COVID-19 fatalities. It has coordinated provision of referrals and community connections for additional resources and provided communication support for families (end of life reconnection). ARC has updated its operational structure and strategy on how to respond to disaster events with a large percentage of virtual workers. 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)
At the request of the Public Health Agency of Canada (PHAC), the Canadian Red Cross (CRC) is providing care and comfort services designated to travelers who, upon arrival, declare
sign/symptoms of COVID-19. Travelers will remain ‘quarantined’ in hotels until their isolation period is completed. Also, at the request of PHAC, CRC is providing virtual relief support to asymptomatic returning Canadians who cannot complete the self-isolation period in their home. This support will be provided virtually utilizing local Personal Disaster Assistance (PDA) teams within each province. Referrals will be received from Canada Border Services Agencies (CBSA) in coordination with PHAC.

At the request of the British Columbia Ministry of Health, the CRC is providing components of their emergency field hospital, along with a team of seven (7) technical personnel to assist people in the Vancouver Coastal Health region in response to the COVID-19 pandemic. The Canadian Red Cross emergency field hospital equipment will be used to augment existing health infrastructure in downtown Vancouver in response to the COVID-19 outbreak. Vancouver Coastal Health will provide all clinical health services. In Quebec, CRC is increasing efforts to reach isolated individuals and seniors through its Telephone Assurance program. This program helps decrease a sense of isolation by providing a friendly and regular phone call. On behalf of the Government of Quebec, New Brunswick, the Canadian Red Cross is assisting with the registration and distribution of funds for eligible residents of Quebec whose income has been impacted by COVID-19. This includes self-employed individuals, international students, individuals who have lost their job due to COVID-19 and others who are otherwise not eligible for employment insurance and unable to work or continue with studies as a result of the impact of COVID-19. At the request of the Provincial Governments, the Canadian Red Cross is also providing virtual support for people isolated due to COVID-19. Red Cross personnel are available over the phone to provide information and referrals, and safety and wellbeing to support individuals and families through their isolation period.

CRC Panama office is facilitating a Canadian government contribution of 20,000 Canadian dollars to Panamanian RC for COVID19. CRC is supporting all over the world in its bilateral project initiatives to address COVID19 preparedness and response and lobbying with its donors to such initiatives. So far, CRC is engaged in COVID-19 initiatives in 17 countries. CRC is providing additional support with PPE equipment to the Cuban RC. A second batch is under procurement. CRC launched a public COVID-19 global appeal to support the global response to the outbreak. In response to the IFRC Rapid Response alerts, CRC is supporting the deployment of Canadian Rapid Response personnel in Africa, MENA, and the Americas region.

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-19. 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. MRC is 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-19.

Costa Rica Red Cross (CRRC)
Costa Rica Red Cross (CRRC) has attended 2,383 phone calls related to COVID-19. The National Health Bureau is coordinating with the health structures 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). 221 patients have been transferred by the CRRC. CRRC has launched a video campaign of Psychosocial Support (PSS) for Red Cross staff and a campaign promoting water conservation and hygienic habits to the general population, both through social media. CRRC has produced
informative materials about COVID-19 and Psychosocial Support in Portuguese, Spanish, English and French for the two Temporary Attention Centers for Migrants - CATEM. CCRC has coordinated through the National Directorate of Doctrine and ICRC, for the purchase of personal hygiene and general cleaning supplies for migrants in CATEM South and North. CCRC has carried out virtual training through MS Teams, Zoom, and our virtual training platform of the NS on topics such as Management of Emergency Operations Centers, Characteristics of the COVID 19 Pandemic, among others, with a maximum of 260 people per event. (CATEM) in the South and North with the support of CCRC 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 400 blankets, 248 hygiene kit, 600 mats, water and two wheelchairs to the quarantine centers implemented by the state and public dormitories. SRCS has provided 4160 services at the emergency clinic and 331 pre-hospital care services. SRCS keeps distributing drinking water in communities lacking access. Sanitation spaces have been adapted in the facilities of the SRCS. Personal Protection Equipment (PPE) has been delivered to SRCS to branches. SCRS has delivered 92 personal hygiene kits to migrants of Nicaraguan nationality (housed in the department of La Unión) under the Monarch Project. SRCS set up a telephone line to provide services for Resting Family Links (RFL). SCRS launched a telephone line and a Facebook account to receive calls and requests for assistance from the citizens. SRCS volunteers gave talks on handwashing to people who came to the banks for financial assistance, and educational posters were placed in public areas in the municipalities of Rosario and Juayua.

**Guatemalan Red Cross (GRC)**

The Guatemalan Red Cross (GRC) updated its Plan of Action in the components of health, humanitarian aid, risk management and Management and Development of Volunteers and communications. The staff of the National Unit of Attention to Chronic Renal Disease, participated in an informative and sensitizing session about the COVID-19, developed by GRC. GRC headquarters staff (including administrative, project, audit and training staff) participated in information and awareness sessions on COVID-19. GRC developed response procedures for cleaning and disinfecting surfaces. Delivery of 18 strengthening kits, with personal protection equipment, supplies, material for cleaning and disinfection to GRC branches. GRC created an area for decontamination of personnel and vehicles (cleaning and disinfection of vehicles, handling of bio-infectious waste, personal hygiene, registration). GRC set up 17 tents in Assistance Centers to strengthen the response in support of the Ministry of Health. Information has been provided on proper handwashing, pre-hospital care and initial approach, psychosocial support, mention of key messages, return orientation, in GRC branches. Constant communication has been established with the delegations to follow up on the evolution processes in the care of all migration modalities by the GRC teams. GRC continues with its communication campaign in mass and social media. More than 100 materials have been produced for the communication campaign. Eight GRC branches have implemented RFL actions at the national level. GRC keeps socializing
key messages and actions for the protection of volunteers of 16 branches through teleconferencing. GRC volunteers are being given identification cards by email. Information has been received from 8 branches. A specific component of the Management and Development of Volunteers has been integrated into the Plan of Action to ensure that the GRC fulfills its responsibility to create an operating environment that is as safe as possible, complying with its humanitarian mandate while protecting its staff and volunteers and promoting their overall well-being.

**Honduran Red Cross (HRC)**

Honduran Red Cross (HRC) branches in the areas most affected by COVID-19, carried out a campaign to collect food to deliver it to the most vulnerable groups. The HRC COVID-19 Single Plan of Action Emergency Response is constantly being updated. HRC has made biosecurity arrangements for response personnel, including protocols and care for branches. Monitoring and follow-up of HRC personnel on COVID-19 symptoms through medical personnel. And psychological care is provided for affected and serving HRC staff. HRC launched a telephone line for psychological care for those affected by COVID-19. developed and shared a guide for grief management in COVID-19 contexts in Honduras and an online approach session for the COVID-19 for HRC health personnel. HRC launched a COVID-19 prevention campaign at the community level, through virtual channels and is producing videos for the blood collection and key messages for the home care of the COVID-19 patient. HRC is supporting the National Operation Drought in the Central District by the government, providing water to affected regions. At the level of the HRC Headquarters, a virtual training for the National Intervention Teams in Water and Sanitation is being prepared, aimed at promoting hygiene in the current epidemic. The network of HRC Branches has been activated at the national level, for monitoring through the Local Emergency Operations Centres. 24-hour shifts are maintained at the National Emergency Operations Centre in the Permanent Contingency Commission of COPECO, from where the different response actions are coordinated. HRC is present at the various meetings of the Humanitarian Network in the country and provides technical support to the initiatives for the activated clusters, food security, water, sanitation and hygiene, temporary shelters and protection. HRC is supporting the elaboration of the Guidelines for the installation, operation and closure of Isolation Centers at the national level. The institutional HRC National Monitoring Centre remains active, generating reports and providing follow-up to the different actions carried out as part of the response to COVID-19.

**Nicaraguan Red Cross (NRC)**

Hygiene kits (soap, toilet, chlorine, alcohol) have been delivered to Nicaraguan Red Cross (NRC) administrative, operational and service staff and handwashing station has been set up at the NS headquarters. NRC, as part of its readiness response, has updated its Contingency Plans for Civil Unrest and Floods. Prevention and hand-washing blankets and murals have been sent from the 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)**

Panamanian Red Cross (PRC) volunteers supported the assembly of food bags at the collection point established at the ATLAPA Convention Center during the night shift. PRC provided support to the Spanish Embassy in Panama, establishing preventive measures for the repatriation of Spanish citizens at Tocumen International Airport. In coordination with the Ministry of Agricultural Development and the MERCA PANAMA Service Management, a team of PRC volunteers reinforced the hygiene and prevention advice in response to the health alert issued by COVID-19. PRC is supporting the Municipality of Panama in its plan for the homeless with the delivery of used clothing in good condition and clean.

**Antigua and Barbuda Red Cross Society (ABRCS)**

The Antigua Today’s Daily Observer published a story about the Antigua and Barbuda Red Cross (ABRCS) planting initiative with the Ministry of Agriculture. 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. 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)**
Bahamas Red Cross Society (BRCS) ambulance and emergency medical team (EMT) members are assisting the Bahamas Ministry of Health with testing and transportation. BRCS set up a Volunteer Hotline to register people who wish to volunteer to help in the fight against COVID-19. The BRCS WASH Project response installed handwashing stations at the entrances of the BRC Headquarters and in two Shelters housing Evacuees of Hurricane Dorian. Epidemic Control and PSS activities and messaging strengthened and increased education on preventative measures for transmission of COVID-19 and coping mechanisms facilitated at the BRC for staff, clients and at the shelters. COVID-19 sessions were facilitated for preschool staff members, primary school students in by the BRCS New Providence branch and family islands and health care providers. Brochures, leaflets, and pamphlets were developed, branded, discussed and distributed widely among staff and the community by BRCS. Virtual PSS training is being developed to train Red Cross Family Island Branch Leaders to provide PSS at the community level. Leaders are being contacted to identify appropriate time and media to conduct this training. Virtual PSS and sharing of COVID-19 information for Bahamas Red Cross staff via social media, BRCS WhatsApp Group chat. This chat group is intended for BRC staff members to express themselves and unwind to cope with the mental burden of the COVID-19 Pandemic. BRCS Volunteers Unit is collaborating with government and non-government agencies to package and distribute food items to vulnerable families and groups, including those who have lost income due to Social Distancing COVID-19 preventative strategy. Volunteers and Group Leaders at BRC Branches in the Family Islands are assisting NGOs to package and distribute water and food items to individuals and families who have lost their jobs due to social distancing preventive effort for COVID-19. BRCS continues with its daily meals on wheels services to shut-ins to promote and maintain social distancing. Food items were boxed and distributed by volunteers to 115 of the 65 families in this programme.

Barbados Red Cross Society (BRCS) is actively working with public authorities to develop contingency plans for continuance with its Meals on Wheels service to vulnerable persons. The BRCS has obtained from the government, waivers for essential staff to be exempt from the restrictions on movement while conducting necessary Red Cross activities. The NS is working in partnership with businesses and the Rotary Club to support a household hamper drive to assist families that have lost jobs and income because of COVID-19. The BRCS volunteers have packaged and, with the help of District Emergency Officers, arranged the distribution of over one hundred food boxes (vegetables, fruits, and eggs) to vulnerable households across Barbados. 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 continues 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) jointly with the Ministry of Health (MOH), Mental Health Department, Ministry of Human Development, and Salvation Army, relocated homeless persons to a shelter for the quarantine period of the state of emergency. Home Care Givers certified by BRCS are working on shifts to attend people in the shelters. BRCS donated mattresses, pillows sheets, blankets, and hygiene kits for the isolation and quarantine centers. Medication will be provided every day by the MOH and meals by the Ministry of Human Development. The NS has written to the Government for inclusion and recognition of the organization as essential services and to facilitate waivers for crucial personnel. Awaiting approval of a proposal to a local donor for a substantial donation to procure and distribute food parcels to 5,000 families countrywide. The MOH is training 26 BRC Volunteers to assist at isolation centers. There is a scarcity of PPE for volunteers, and there are concerns due to the lack of insurance coverage.

**Dominica Red Cross**

The Dominica Red Cross (DRC) started a Text message blast campaign. One blast per day is being distributed via DigicelL Dominica, with key information relating to COVID-19. Due to lack of insurance, DRC volunteers are no longer providing screening services at Dominica-China friendship Hospital. Logistics are being put in place to resume such services in the future. The DRC is having a discussion with telecommunication networks (Digicel and Flow) regarding setting up a hotline for PSS support to persons affected directly and indirectly by COVID-19, including staff and volunteers. This venture is being supported by the Dominica Psychological Association. DRC partnership with IOM and IsraAID continues.

**Grenada Red Cross Society (GRCS)**

The Grenada Red Cross Society (GRCS) continues with public sensitization sessions using various forms of social media. 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) held a handwashing demonstration in an at-risk community with 35 children, who came in small groups at different times during the day to avoid a large crowd. The National Society collaborated with various businesses in the area which provided hygiene items for the children 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), in coordination with the Ministry of Labour and Social Security (MLSS) is using ODK to collect data on persons who are self-quarantined at home across the island. JRC has received monetary donations of 200,000 and 100,000 Jamaican dollars from Victoria Mutual Group and Jamaica Police Cooperative Credit. JRC procured the first set of items for the sanitation packages (soaps, tissues, hydro clean disinfectant, hand sanitizing gel, liquid chlorine bleach) that will be distributed to 360 persons. Glastonbury
Purveyor Company will be donating food items to the Jamaica Red Cross for the Meals on Wheels programme. These items are to be received this week. JRC received a donation of three (3) tonnes of sugar from the Frome Sugar Factory to assist with feeding the vulnerable people that the National Society serves. JRC will partner with Nestle to provide food for vulnerable persons JRC had meetings with the Ministry of Health to secure trainings for the volunteers. The Ministry made commitments of training and other forms of support for the JRC’s operations as well as outlined the specific areas in which the Government has requested assistance. JRC has a strong psychosocial support programme and the Government has seen it fit for Jamaica Red Cross to fill the gap of providing PSS to citizens and those acting on the frontline of the COVID-19 operations. Also, other response organizations have expressed an interest in being trained in the area, and Jamaica Red Cross is willing to provide psychosocial training. Jamaica Red Cross sent a letter to authorities to request an exemption and free movement to Red Cross staff and volunteers to carry out COVID-19 related activities. JRC participates in NEOC activities daily at ODPEM (Office of Disaster Preparedness and Emergency Management). JRC volunteers are still assisting with the packaging and distribution of food, drink and care packages to these quarantined communities.

Saint Kitts and Nevis Red Cross Society

St Kitts and Nevis Red Cross (SKNRC) continues to serve in the NEOC, which has been on 24-hour response for over one week. SKNRC has negotiated with Flow for sim cards and limited-time data for the PSS Team. SKNRC has developed a data collection form to be used during PSS sessions for further assistance where necessary. The SKNRC staff and volunteers have been classified as essential workers by the government to be able to respond during the lockdown times. SKNRC volunteers within the seven branches are kept abreast of all critical information. SKNRC developed localized flyers and messages were developed to be disseminated via electronic media. Printed copies will be placed in the care package.

Saint Lucia Red Cross

St. Lucia Red Cross (SLRC) has been engaged in the packaging and distribution of care parcels for the most vulnerable, particularly elderly and shut-ins. Last week 550 care packages were distributed. The care packages included food and hygiene items. SLRC is compiling a list of persons through our community disaster response teams and local red cross units for distribution as soon as food deliveries are received. Packages will be prepared in accordance to Sphere Standard.

Saint Vincent and the Grenadines Red Cross

The St. Vincent and the Grenadines Red Cross (SVGRC) printed leaflets and information on the prevention and symptoms of COVID 19. Volunteers trained in PSS under Zika will provide support to local authorities (Ministry of Health and NEMO). The NS will distribute PSS care packages consisting of stress balls, a comic book on COVID-19, a comic journal for family interaction, and a recipe book. The SVGRC will print bumper stickers for public transportation. Spray bottles will be provided to assist the ministry of health with their sanitation activities. The NS will assist the Ministry of Health with the distribution of 25 cleaning kits and blankets for isolated people. The SVGRC will mount billboard messages in areas frequented by the commuting public. The NS is assisting 15 families who have been quarantined because of a person returning from New York and were quarantined with immediate effect and had no time to prepare. Due to water restrictions and drought conditions, the NS will provide jerry cans for water storage and leaflets on educational material on boiling water for consumption.

Suriname Red Cross

The Suriname Red Cross is coordinating the surveillance of the persons in home quarantine. 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 and Tobago Red Cross (TTRC) continued to support local health authorities in the national response to COVID-19. TTRC is finalizing discussions with a local authority to reach the prison population with education materials and care packages. TTRC distributed donations of soaps and posters for the nine (9) prisons in Trinidad and Tobago. TTRC prepared treat packages and feelings check posters to support the doctors and nurses at the hospitals. TTRC’s Feeling charts are up and being used by staff. They were also sent to prison, hospitals and well as the detention centres. TTRC is in the process of creating a PSS plan for the 14 patients moving into the transition phase before they can return home.

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

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

- Risk communication and community engagement materials distribution (flyers, posters and radio/TV messages).
- Streaming sessions on social media on anti-fake news information.
- 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.
- 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.
- PSS information sessions for volunteers
- PPE trainings for volunteers.

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

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.

**British Red Cross Overseas Branches (Anguilla, Bermuda, British Virgin Islands, Cayman Islands, Montserrat, Turks and Caicos Islands)**

COVID-19 activities carried out by the British Red Cross Overseas Branches (Anguilla, Bermuda, British Virgin Islands, Cayman Islands, Montserrat, Turks and Caicos Islands):

- Anguilla RC received interest from 141 people in volunteering. ARC is planning to set-up a PSS hotline, and collaborate with the Ministry of Health to interview residents who have recently returned to Anguilla from overseas but are waiting for PPE to arrive.
- Bermuda RC has been tasked with contacting passengers from all incoming flights to conduct a health check and follow-up on any symptoms, reporting back to the government, and are in the scoping phase of setting up a PSS hotline for those who work for health and emergency services.
- British Virgin Islands (BVI) RC has sourced PPE for staff and volunteers and set up a PSS hotline. It is also picking up prescriptions and groceries for the sick and elderly. BVI RC has partnered with the government to distribute food items, and their office is one of the food distribution locations. Discussions with the government are taking place around designing a cash programme.
- Cayman Islands RC has an MoU with their government to manage the national volunteer response; to recruit, train, and deploy volunteers. Volunteers will then either support government agencies or directly support vulnerable groups in communities. Cayman Islands RC has also started recruiting seamstresses to prepare masks for frontline workers.
- Montserrat RC is awaiting a response from phone companies regarding the setting up of a PSS helpline. The government has asked MRC to provide a grocery delivery service to the community – they are waiting to receive permits for volunteers to carry out this task.
- Turks and Caicos RC has set up a PSS hotline and is providing clothing and hygiene items for detainees (the national gymnasium has now been converted into a detention centre due to sloops arriving with migrants from Haiti). The government has requested support with a voucher/food programme.

All British Red Cross Overseas Branches will be/are supporting with 1) providing information via social media and other platforms, 2) psycho-social support hotline run by trained PSS volunteers and, 3) assisting vulnerable groups with collecting groceries and medication.

**Cuban Red Cross**

The Cuban Red Cross (CRC) is working with a local company that will facilitate the printing of COVID-19 awareness materials. CRC 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 CRC in its role for this response. The CRC initial preparedness and response plan has been designed to support the Cuban Red Cross considering the scarcity of goods available on the island based on past emergency response experiences. The Cuban RC continues to coordinate the response of the authorities at the community, municipal and provincial levels. Hygiene promotion, prevention, symptomatology and case referral messages are being shared with the population and in student centres. Ten members of Cuban RC operations and relief were mobilized to support community actions. CRC plans to provide PPE for the team, and the printing of handling material.
Dominican Red Cross
The Dominican Red Cross (DRC) has been included by the Ministry of the Presidency as part of the Provincial Prevention, Mitigation and Response Committees. DRC is preparing audiovisual materials to create awareness to the general population on Psychosocial Support, handwashing tips, and COVID-19 (prevention, infection, transmission, patient care, Restoring of Family Links, others). Handwashing and hygiene established in key locations: Dominican Red Cross branches, Ministry of Defense, Armed Forces Central Hospital. 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
20 Volunteers from the Haitian Red Cross (HRC) Committee and Delmas City Hall were trained on essential protection measures, social distancing and key messages for the COVID-19 response. Enhanced movement coordination to support the 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
Argentine Red Cross (ARC) has issued alerts to mobilize over 300 volunteers to various National Society activities in response to COVID-19. ARC specific safety protocols are being developed. A single system for issuing credentials was created. A new ARC centre will be opened with 50 assistance stations, which will accompany people who have to undergo compulsory isolation for three months, with a strategy for access to information, psychosocial support and referral. Some 300 volunteers have been virtually trained. The television program "Unidos por Argentina" was carried out in the national open television channels to collect funds so that, in coordination with the Ministry of Health, for the purchase of supplies to expand the installed capacity of different public and private hospital centers in the country. The campaign raised a total of one million American dollars

Bolivian Red Cross
The Bolivian Red Cross (BRC) began the management of a shelter located in Pisagua (border with Chile) for the quarantine of Bolivians returned from Chile. The call tool is used to reestablish contact family links for people in shelters. BRC is producing radio spots in native languages and lifestreaming on Facebook. The BRC
Migration Working Plan is underway with the support of the Swiss Red Cross. Ongoing proposal negotiations with Nestle.

**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**

Chilean Red Cross (ChRC) volunteers are assisting in the screening and taking the temperature of passengers destined for Europe. 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) is developing: Guidelines for Emergency Response Services by COVID-19 and for the Reception and Management of Emergency Humanitarian Aid and updated its Guidelines for the Implementation of Money Transfer Programmes and Guidelines for Restoration of Family Links. Activation of the CRC Water, Sanitation and Hygiene Committee. CRC has shared key actions and messages for coexistence at home (routines, care guidelines, parenting, etc.), key messages for protection from gender-based violence and domestic violence, self-care and collective care. The CRC website https://www.cruzrojacolombiana.org provides direct access to various information and materials of interest to the National Society and the community. 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 (ERC) developed a Plan of Action focused on support the national health system, provision of PSS services and operational continuity of the blood bank. The NS is going to support Health Ministry on the rapid test for COVID 19. The NS has deployed a Rapid Assessment Team to Guayaquil (Guayas Province), with the support of WHO/PAHO and backed by OCHA. A Cleaning Unit has been deployed to Guayas Province due to the emergency. ERC 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.

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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 specialized 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 (PRC) delivered to 87 hygiene kits to migrants in a local shelter in Lima. With the support of the IFRC, PRC set up a virtual PSS line for humanitarian workers and vulnerable people (migrants and locals). So far, 23 people have received PSS services, and 91 people have been monitored. PRC is managing a WhatsApp Business line with the support of the IFRC. So far, 192 users have been contacted and got reliable information about COVID-19. PRC submitted a project proposal for the prevention of COVID19 to Bayer with focus on the dissemination of key messages and epidemiological control through temperature monitoring in transit areas and migrant shelters. PRC 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) signed an agreement with the Government to provide hygiene kits, cleaning kits and communication materials to vulnerable older adults, homeless people, juvenile detainees and impoverished communities. The URC through its branches in Maldonado and Rio Negro provides food boxes to local people in need. 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) branches and sub-committees are conducting educational sessions on prevention measures against COVID-19. As 4 April, 19 branches are reporting, and 7,559 people have been reached through these activities. VRC is regularly sending relevant scientific information on the evolution of the COVID-19 pandemic to the different levels of the Venezuelan Red Cross health network. With the technical support of IFRC, a triage protocol is being developed. In the VRC branches of Zulia and Falcon Venezuela Red Cross volunteers have begun to provide health guidance through telephone lines and PSS support. 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

Europe region became an epicenter of COVID -19, leading on the number of cases worldwide. By 7 April, more than half of the cases worldwide - 687,236 cases and 52,824 deaths (76.3% of worldwide deaths) were registered in the European region.

The IFRC Europe Regional office COVID-19 Response team jointly with Country Cluster Support Teams and Country offices continues to provide guidance and coordination support to National Societies with regular communications and coordination at all levels and through the weekly joint task force calls with the Global Operational Team in Geneva. 45 National Societies of the region implement several types of COVID-19 response actions. Europe regional COVID-19 response team has been constantly monitoring the evolving situation in Europe and Central Asia region and is actively keeping the region informed through the daily situation reports and regular calls. Information on COVID-19 response measures, trends in the number of confirmed cases, governmental actions, and activities being implemented or planned by National Societies regularly received and analyzed by Europe Regional COVID-19 response team. Regular communication with partners NSs, institutional and corporate donors are ensured to attract funding for the EA.

In total 26 NSs requested financial support from IFRC. Funds for 12 of them have been allocated within the Global Emergency Appeal: Armenia, Azerbaijan, Belarus, Georgia, Kazakhstan, Kyrgyzstan, Moldova, North Macedonia, Tajikistan, Turkmenistan, Ukraine, Uzbekistan. Funds for Russia, Ukraine and Poland have been confirmed. For 8 NSs: Albania, Greece, Slovenia, Montenegro, North Macedonia, Bosnia and Herzegovina, Serbia, Croatia, Project Proposals have been processed by Europe Regional and Global Ops Teams.

This week COVID-19 response team has been working closely with Italian RC, French RC, Hellenic RC and Turkish RC to develop Country Proposals for Emergency Appeal funding. IFRC ROE continues to provide technical support to the NSs involved in activities in different sectors Health, RCCE, PSS, Volunteers management.
1. to support older people as a most vulnerable group to COVID-19. NSs actively involved in this support receive regular information on available tools and publications for older people and COVID-19 through the Europe Regional Health and Ageing Advisory Group. IFRC Europe Team is in process of preparing recommendations and guidance for NSs to help them to properly address the needs of older people and protect their physical and mental health during COVID 19 outbreak.

2. Continue to provide technical support to NS for volunteers involved in mental well-being providing PFA / PSS and support in the mental well-being of volunteers

3. Coordination is taking place with the group of NSs working with migrants (PERCO) and the ICRC to find ways and share information on how to best respond to specific the needs of migrants along with host communities in different settings in Europe, now impacted by the COVID-19 crisis. As part of this separate messages are being prepared in different languages and channels explored on how to best engage and reach the migrant population.

Country by country

Armenia Red Cross (ARCS)

From 27 March to 5 April, ARCS managed the sorting, packaging and distribution of food donations in cooperation with the RA Prime Minister Administration, RA Ministry of Labor and Social Affairs and RA Ministry of Territorial Administration and Infrastructure, to alleviate the social consequences of COVID-19 pandemic.

1027 lonely elderly, people with disabilities, graduates of orphanages and homeless people received food parcels in Shirak, Lori, Armavir and Yerevan. Starting from 7 April, cooperating with the “My Step” foundation, 351 lonely elderly and disabled people will receive food and hygiene parcels. From 6 April, following the request from the Government bodies, ARCS has been supporting the food parcels distribution to the 132 self-isolated people in regions.

ARCS psycho-social support centers operate in emergency mode, based on the needs the volunteers visit lonely elderly and disabled people to help in households, including helping in daily shopping. All ARCS care services continue to operate in the same mode, humanitarian assistance is being provided to lonely elderly, disabled people and refugees.

Azerbaijan Red Crescent (AzRC)

Started from 28 March 2020 staff and volunteers of the National Society visited elderly people with food parcels at their homes. Humanitarian action is implemented in 71 local branches and covers 1119 beneficiaries. 587 volunteers distributed 1021 food parcels in total. At the same time 88 volunteers provides different social services (cleaning of flats, purchasing of bread etc.) to elderly people. (report is attached)

Volunteers of National Society distributed 1447 leaflets among the population in different regions of the country.

On 4-5 April 2020 AzRC carried out on-line trainings on COVID-19 for staff and volunteers (total of 16 persons) of 4 local branches (Ganja, Mingehcevir, Lenkoran and Astara) of the NS.

Belarus Red Cross (BCRS)

- 1,541 BRCS volunteers were recruited throughout the republic.
- BRCS received 479 requests for delivery of medicines and 480 requests for the delivery of food and basic necessities. Help on these appeals was provided by 475 volunteers.
- Belarus Red Cross Society’s working group continues to combine efforts to respond to the situation associated with the spread of coronavirus infection, an action plan has been developed.
As of April 3, 2020, 1,541 volunteers are working throughout the republic. 479 requests for the delivery of recipes and 480 for the delivery of food and basic necessities were received. 475 volunteers assisted with these requests.

Thanks to the support of partners, 6000 disinfectant wipes, 3220 bottles of disinfectant and 7513 bottles of antiseptic, 91 210 pairs of gloves, 5400 masks were bought and distributed across the regions.

A mobile application is being developed for those who want to become a volunteer – one can leave a request.

“Good Phone” is open on weekdays from 9.00 to 18.00. As of April 5, the line received 46 calls, most of it from the city of Minsk. 70% of the questions related to home delivery of food, medicine, 25% required referrals to other services, 4% - about COVID-19 infection, 1% of callers just wanted to talk.

BRCS is assisting the medical staff of healthcare institutions and has already transferred over 5 tons of water to quarantine patients and staff of several quarantined hospitals. Children’s infectious diseases hospital, City Infectious Diseases Hospital, Minsk city Oncological Hospital and the 4th City Hospital each received 1,000 liters of water. 1,500 liters went to the City Dermatological Hospital, 500 liters - to the 6th city hospital.

The Red Cross Society of Bosnia and Herzegovina

Red Cross at all levels continues to provide support for people over the age of 65, people with chronic disease and people in isolation. Red Cross volunteers are doing procurements of basic life goods, including medications, to the risk groups according to the needs. They also distribute goods that are donated.

In Brčko Red Cross continues with disinfection of buildings where COVID-19 cases have been confirmed. In Republic of Srpska RC is expanding coverage and more organizations have been involved in support to citizens that are in need.

Additionally, Red Cross continues to publish informational material regarding COVID-19 such as awareness posters and leaflets. RC of Republic of Srpska distributed and printed leaflets to all its branches. Postings at social media are constant and increasing.

British Red Cross (BRC)

BRC’s initial focus is supporting the 1.5 million individuals over the age of 70 who have existing medical conditions, as well as the 8 million over 70s who will also be stranded at home. BRC has been supporting people and families self-isolating since the early stages of the outbreak, and in March sign-ups to RC Community Reserve Volunteer network have jumped from 8,000 to over 30,000 people. These volunteers can be deployed in their local communities across the country, supporting with practical tasks such as organising supplies at food banks, calling vulnerable service users or delivering welfare packs.

With the network continuing to grow, RC is more equipped than ever to respond to the growing need in communities together. Other activities include a national support line in collaboration with a number of partners, available for anyone to call throughout this emergency to seek support, a number of educational and digital resources to help parents, and teachers to learn and teach first aid and enhance community resilience.

Other activities:

- Supporting health sector: BRC is currently working with 100 hospitals around the UK; many more have requested support
- Supporting Vulnerable Groups: Considering the refugees and asylum seekers who are among the most vulnerable in UK, BRC is planning a national distribution of cards, pre-loaded with cash to our most
vulnerable clients to make sure they can support themselves and their families through this difficult period.

- Addressing Economic Insecurity: In order to address the needs of many individuals and families that will experience economic hardship as a result of the COVID-19 outbreak, BRC is launching the Coronavirus Hardship Fund, which will provide grants to vulnerable individuals and families experiencing economic hardship as a result of the coronavirus outbreak.

**Croatian Red Cross**

In addition to previously reported activities for this update CRC reported the following new activities:

**Raising awareness on COVID-19:**

- The CRC Integration House: Instructions on COVID-19 and preventive measures in Arabic language distributed via WhatsApp, also as voice message for illiterate and semi-literate people provided by cultural mediator
- The Executive President of the CRC has regular participations at national and local media to share information on the situation and response activities

**PSS activities:** Peer support telephone line available 24/7 set-up for staff and volunteers

**Collaboration with corporative sector** – “Corporative Volunteering” with Atlantic Group, Nestlé Adriatic, Germania Sport and Blitz Cine Star offered their employees support to participate as volunteers and contribute to the CRC activities related to COVID-19 response. These volunteers will be engaged according to the CRC needs.

Additionally, CRC has established collaboration with the Croatian Pharmacy Chamber (CPC) and their employees engaged in the CRC volunteer activities for delivering medicine and information to people in self-isolation (older person, people with disabilities).

**Czech Red Cross**

- Information sharing messaging on COVID 19 including online campaigns “We Will Manage It”, media campaign in cooperation with TV Prima – video spots (how to behave to wash hands, how to wear masks etc.)
- Cooperation with Integrated Rescue System of the Czech Republic and delivering assistance for people being detained on the borders due to suspicion of being infected of Covid-19 (the people are checked on the borders by professional staff)
- Czech RC Local Branches are providing assistance, especially for the most vulnerable ones. Specific activities include: shopping for the basic food items, drugstore goods, medicines, sharing information leaflets, PSS support, blood donations as well as assistance to homeless people.

**Estonian Red Cross**

Estonia is in state of emergency and the Estonian Red Cross has been working as an auxiliary to the authorities by screening thermal cameras, distributing information materials and providing health counselling if needed at Tallinn port passenger terminals and Tallinn Airport for two weeks. 60 volunteers and staff members were involved, for a total of 700 hours.

Now the Estonian Red Cross is supporting local authorities in needs-based support like food distribution to the elderly living alone, the distribution of information materials and other community support aimed at the most vulnerable at branch level.
Regional level volunteer management in close cooperation with the Ministry of Interior has been set up. Four ERC regional coordinators are mapping and updating local volunteers all over the country in order to be ready to support the most vulnerable people in their region.

**Finnish Red Cross (FinRC)**

FinRC has continued health and safety messaging to the public both directly by volunteers and through social media. In support to national and local authorities, volunteers have shared leaflets at the airport and in communities as well as participated in coronavirus call centres, PSS Hotlines and Youth meeting points/chat online. FinRC’s Helpline was opened on April 1st and has received more than 120 calls during the first three days.

Key forms for practical assistance are a) home-delivery of medication and groceries to people in high-risk groups unable to visit public places, b) food distributions and c) guidance for most vulnerable groups, e.g. elderly, homeless and paperless people.

Support to government health services includes a) volunteers providing guidance at hospitals, b) blood supply to hospitals via FinRC-owned Blood Service and c) scaling up of material preparedness should the need arise to set up temporary field hospitals or surge wards.

FinRC coordinates the work of major civil society organizations in multiple districts across the country, acting as a focal point towards government counterparts. FinRC has reallocated EUR 1.6 million from its development co-operation programmes to COVID-19 response.

**French Red Cross**

Since the beginning of the crisis, the French Red Cross has established task forces (strategic, operational and steering) at the headquarters. French Red Cross continues the essential activities towards vulnerable people (first aid, food assistance, etc.) while aiming to recruit new volunteers. The provided support services include:

- implementation and management of Containing centers
- Solidarity delivery (food and drugs) + psychological support “Croix-Rouge chez vous” for isolated people (53 000 appels – 19 500 appels traités – 3 500 commandes)
- Opening of about twenty “Centres d’hébergement spécialisés” (shelter centers for homeless people with COVID-19) throughout France: 1 042 beds and about 100 volunteers and staff people
- Psychological support: Strengthening of the call center “Croix-Rouge écoute”

Government/Health authorities support activities (strengthening of call centers, containing centers, centers for homeless people with COVID-19, transportation of people, patients welcoming and triage, more requests for first aid, especially in the trains transporting people infected by COVID-19)

**Georgia Red Cross**

- More than 1200,000 individuals are reached through COVID-19 related awareness raising activities nationwide, including communities populated by ethnic minorities. Currently, the dissemination is
switched to online; video sessions with volunteers explaining how to decrease infection risk were recorded and disseminated through multiple media channels.

- As part of the cooperation between the Georgia Red Cross and the Tbilisi City Hall, a campaign is launched in different hypermarkets to encouraged customers to buy products from the special list of needs developed by the Georgia Red Cross for the elderly and donate it. Up to 3000 food and hygiene parcels were collected in Tbilisi.

- More than 15,000 lonely elderly, 10,000 in Tbilisi and 5,000 in regions are reached through essential humanitarian relief items provision: food, personal hygiene parcels, and medicines. Also, GRCS is providing support to more than home-bounded persons with specific needs.

- More than 5,000 volunteers (among them those volunteer workers who approached the Tbilisi City Hall and local municipalities) are mobilized and trained in accordance with the Georgia Red Cross COVID-19 training module in close collaboration with the National Centre for Disease Control and Public Health / NCDC, Tbilisi City Hall and municipality authorities in regions.

- More than 1,400 people are reached through psychological first aid service provided by the trained volunteers to overcome panic and stress via the Georgia Red Cross Hotline.

- Georgia Red Cross Society launched a MHPSS Coordination Platform, including all the relevant non-governmental organizations and professional groups in the country working in PSS response to the COVID-19 crisis, with the aim to contribute to sharing information, experience and lessons learned between the key stakeholders in the humanitarian sector and coordinating activities to reach and support maximum number of vulnerable people living in Georgia.

- GRCS plans to support relevant institutions in rapid testing of health workers, military, police, Red Cross workers and other organized groups.

- Promotion of voluntary non-remunerated blood donation has started by GRCS to highlight the need of blood with dissemination of the additional information about recommendations specific for the outbreak.

**German Red Cross (GRC)**

GRC is further extending its COVID-19 response. To increase communication/awareness raising and fundraising (#füreinander, [https://www.drk.de/corona](https://www.drk.de/corona)), new approaches are being implemented, e.g. communication through a GRC-WhatsApp-Bot and social media influencers.

The national response, coordinated by a task force, is currently dominated by procurement and distribution of PPE to ensure the continuity of critical infrastructure incl. GRC hospitals. Due to the lack of proper face masks and to save the scare resources for medical staff, several local GRC branches have started initiatives to produce homemade non-medical cloth masks for support staff in health and care services. The main activities of GRC branches 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 homeless people and stranded travellers; emergency care services in the event of day-care center and school closures; psychosocial support; assistance for vulnerable population groups (shopping service, telephone counselling, etc.); assistance in transporting COVID-19 patients to Germany.

On the international level, GRC continues to support the Lebanese Red Cross in mainly community-based activities. Currently, emergency support is extended to the Ethiopian Red Cross for its preparedness and response plan, in partnership with Austrian Red Cross. In Ethiopia, the focus is on WASH and Health, from public hand washing facilities at critical locations over RCCE and social mobilisation to support of emergency medical services with e.g. PPE.
Icelandic Red Cross

Icelandic Red Cross is part of the country’s national task force and all districts task forces, and continue to support vulnerable and marginalized groups by providing them with basic health care, emergency shelter, access to hygiene kits and awareness raising on COVID-19.

Icelandic Red Cross also runs two quarantine centres on behalf of the Icelandic authorities in Reykjavik and Akureyri for COVID-19 suspected or confirmed cases. National Society helpline serves as a national MGPSS hotline and has become a national social affairs hotline on behalf of the Ministry of Social Affairs and municipalities.

PSS has been provided to selected groups and individuals. Keys messages on COVID-19 are being provided through social media and newspaper platforms for awareness raising. Food distribution is provided to households in quarantine and isolation when needed.

Italian Red Cross (ItRC)

The Italian Red Cross has been in the frontline since the beginning of the COVID-19 outbreak main activities including:

- Health surveillance services and management of emergency medical evacuation procedures at 26 airports and ports. ItRC employs medical and nurse staff for an average of 1300 hours per week and an average of 150 volunteers per day.

- Emergency activities: Transports in bio-containment of people suspected to be COVID-19 affected; transport of people from one hospital to another to allow free intensive care beds for Covid-19 affected people in the critical regions. There are an average of 600 emergency-urgency activities per day carried out by 2.500 Red Cross staff and volunteers per day.

- Screening activities in triage tents at hospital facilities, in order to detect potential COVID-19 patients before entering the hospital

- RFL services to allow family to re-establish links with hospitalised persons and vice versa, to deliver Red Cross messages and to find where dead relatives are taken while waiting for burial.

Additionally, ItRC is ensuring the recruitment of doctors and nurses for the most affected areas, in particular for the hospitals of Bergamo, also through the temporary volunteering institute;

- the supply of equipment for resuscitation departments and individual safety devices;
- the support of volunteering in the operating rooms of regional and municipal bodies, to respond to the information needs of the population and to orient services;
- the deployment of facilities to manage dead bodies.
- ItRC is also ready to deploy a field hospital to increase the capacity of hospital beds.

The ItRC National Response Centre is receiving an average of 8.500 call a day from community for:

- Request of information regarding Covid-19 infection: 4 doctors ensure 24/7 assistance
- Psychological support carried out 24/7 by 5 staff and 22 volunteers
- Home delivering of food and medicines (1500 requests a day)
- Home delivering of food aid for people in economic difficulties
- Transport to hospital facilities to take Covid tests
- Delivering of personal effect to hospitalized persons.
- The National Response Centre is also ensuring psychological support for health personnel to allow doctors and nurses to share the stressing situation they are living.

- Deaf people can also access the ItRC services, thanks to an app translating the voice in written words

Kazakhstan Red Crescent

- The RC of Kazakhstan is conducting an awareness-raising campaign among the population, including through social media.

- RC volunteers have supported medical staff in Almaty clinics №1 and №4, in observing the state of quarantine for persons on the list of potential contacts.

- Targeted social assistance is provided to the most vulnerable groups (food packages); as of now, over 790 families have received foodstuff baskets.

- RC regional branches in Atyrau, Pavlodar, Zhambyl, Akmola, Karaganda, Kostanay, North Kazakhstan, South Kazakhstan and Astana launched the production of medical masks with support of volunteers and local partners. More than 2,000 masks have been made and distributed by volunteers and staff to vulnerable groups.

Kyrgyzstan Red Crescent

- The National Society provided the following to governmental bodies (MoH KR, MES KR) involved in the COVID-19 response: 10,755 units of disinfectants and 32,916 units of personal protective equipment.

- The National Society has arranged public information campaigns and distributed more than 582,000 information materials.

- More than 2,400 vulnerable families all over Kyrgyzstan have received food parcels.

Lithuania Red Cross

- Lithuania Red Cross is focusing its efforts to protect elderly persons are and ensure that they receive the support they need in order for them not to leave their homes

- Lithuanian RC is increasing their online service provision to migrant and refugee communities

- Planned activities include increased psychological first aid and psychosocial support for the society.

Malta Red Cross

Currently ongoing and planned activities include:

- Migrant Isolation Unit: All those residing in the Open Centre have been put under mandatory isolation. Malta Red Cross is managing the clinic at the center

- Plans to begin thermal screening service outside supermarkets & governmental/private entities, delivery of shopping (basic necessities) to the elderly and all those who are in isolation (free of charge) as well as first Aid Courses via online platforms

Monaco Red Cross

- Support to the Monaco Home Monitoring Center, including 7/7 COVID-19 call center with medical and psychosocial specific support helplines and home visits to proven COVID-19 cases, contact cases, untested symptomatic cases as well as with medical and psychosocial support and “home bags” for symptomatic people.
• Social assistance to people affected by the COVID-19 crisis.

• Deliveries of food and non-food items (i.e. pharmaceutical products) and other services (dog walking 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-through.

**Montenegro Red Cross**

• Home care professional services provided by home helpers: In 2020 RCM is providing this service in 18 municipalities in Montenegro, for around 1 340 beneficiaries. Services are provided by 134 home helpers and consist of: house visits, PSS, cleaning, washing, cooking, assisting in maintaining the personal hygiene of beneficiaries, purchasing food, hygiene, medicines, scheduling an appointment with a doctor etc.

• House visits provided by trained volunteers – in 5 local branches for around 300 beneficiaries. More than 100 volunteers are providing following: distribution of assistance based on needs assessment, shopping, paying bills, small housework, checking level of sugar and blood pressure, procurement of medicines

Visits with older people continue and are recognized as priority (people who are alone without any support, people without food and medicaments), respecting all preventive measures.

National Society is running a phone line for providing information and receiving requests for assistance. In addition, there is a specific hotline for providing PSS. There are more than 300 calls on a daily basis. Assistance is being provided to the Roma population as well.

**Netherlands Red Cross**

The Red Cross helpline is daily operational from 9am to 9pm. Most questions received through the helpline are practical questions and health related questions. Also many calls are received from people with anxiety or feelings of loneliness. NLRC continues to support health centers and foodbanks; provide transportation for patients and collecting and distributing PPE items.

The Red Cross has started a “Let op elkaar” campaign (take care of each other), in which people are encouraged to help vulnerable people in their neighborhood or can alert the Red Cross of people who might need support.

Next week, in partnership with a national public radio station 3FM, the Serious Request: You Never Walk Alone campaign will be held. ([https://www.npo3fm.nl/seriousrequest](https://www.npo3fm.nl/seriousrequest))

The Netherlands Red Cross is also responding on our overseas branches in the Caribbean with risk communication, food assistance and PSS.

**Republic of North Macedonia Red Cross**

New activities in response to COVID 19 include the following:

• NMRC volunteers are assisting Ministry of Health in distribution of the medicaments for the people with chronic diseases in state quarantines

• Distribution of insulin for people with diabetes that are in self-isolation

• In cooperation with UNICEF, North Macedonia RC volunteers are supporting vulnerable groups of population especially children
Distribution of hygiene parcels for 10,000 Roma population

**Polish Red Cross**

Food distribution: Operational Program Food Aid 2014-2020, implemented under the European Fund for Relief to the Most Deprived (FEAD) is continuing according to the schedule. PRC has been still transferring food to 113,000 people, of which 10% are seniors.

Home care: Every day almost 16,000 beneficiaries with different diseases are visited by over 5,000 home carers. They provide care, support in daily activities like washing up, tidying, cooking or shopping. All PRC Branches continue this mission and actively invite communities to provide neighbour help.

Rescue Service: 22 PRC Rescue Teams are prepared to provide assistance during disasters. This time they support construction of temporary shelters and quarantine camps, transport food in container trailers, and are mobilized with pneumatic tents, power generators and heaters to contribute to municipal civil protection response.

Psychological helpline: With the engagement of volunteers, PRC has started a psychological helpline where qualified psychologists and psychotherapists are on duty

Blood donation: PRC urges donors to donate blood because there has been a significant decrease in donations in recent days. All persons who are healthy and have not been in contact with a person infected by COVID-19 or have not recently been abroad can contact the Regional Blood Donation and Blood Treatment Centers. Blood donation centers have reduced all risks and blood donation is safe.

Education: PRC is active in prevention. Its basic activities are focused primarily on educating the community how to protect themselves against infection and how to care for the others. PRC uses info-graphics and messages in social media and website about good social behavior.

**Spanish Red Cross**

In their auxiliary role to public authorities and considering the decentralization of health, social and emergency services, Red Cross regional branches are being part of emergency coordination services in different levels. Key actions and results up to date in collaboration with the emergency system:

- Support to 18 emergency coordination rooms and telephone numbers
- Set-up of 10 temporary health infrastructures for mild patients affected by COVID-19
- Set-up of 76 shelters for confinement for special vulnerable groups (mainly homeless people)
- Providing logistics support to back-up ambulances services, with 2,354 services up to date

Red Cross health facilities are collaborating with the public health system with more than 470 beds available for COVID-19 patients. Psychosocial support is another key area, with 15 teams activated at the request of authorities and other entities and a free hotline telephone open to general population, volunteers and staff will be available in the coming days.

A good practice that is helping to reach vulnerable people, has been the planning of telephone calls to more than 380,000 regular Red Cross users. Up to date 233,665 people have been reached which has proven to be very useful to strengthen bonds and identify needs to be addressed with these users and with other vulnerable people. Coverage of basic needs is one of the main needs, having to adapt logistics for delivery at home and up to day 90,500 households have received food and non-food items. Access to education is another priority line, with free online courses available with more than 300,000 people having participated
in courses. Support to home-schooling is being provided to 1,250 children, including devices to ensure connectivity.

More than 5,000 staff are on the frontline of the response and more than 25,500 volunteers have been mobilized, with more than 12,000 requests of new volunteers received since the beginning of the emergency.

**Swedish Red Cross**

As of 7 April 2020, the Public Health Agency of Sweden has recorded 7,693 confirmed cases of COVID-19 (3,833 women and 3,860 men) and 591 deaths (234 women and 357 men).

The Swedish Red Cross has been actively involved in the national COVID-19 response since the start of the outbreak. Our nationwide network of dedicated volunteers and staff are among many other things involved in providing information on COVID-19 and support available in key locations around the country, we distribute food and medicine to people in need, and we help people with limited access or in quarantine with grocery shopping. The Swedish Red Cross also provides psychosocial support and psychological first aid and has set up a phone line for concerned citizens. In addition, the Swedish Red Cross works closely with public authorities, including the National Board of Health and Welfare and the Swedish Civil Contingencies Agency, and other civil society actors, in order to provide support and fill gaps in the response.

**Swiss Red Cross**

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 and advocate to the most vulnerable. At headquarters, a Task Force has been set up to oversee business continuity and response.

The ongoing activities include:

- **Surge Support to government response in hospitals:** In some cantons (St. Gallen, Lucerne, Schaffhausen), SRC first aid volunteers (Samaritarans) have been requested by the authorities to provide surge support in hospitals where capacities are overstretched. 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.

- **Risk communication:** Swiss RC actively promotes to widely distribute COVID19 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, the SRC provides information on the COVID19 in many languages to migrants.

- **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.

- **SRC support for Test centers:** In order to get better information on the number of cases and to contain the outbreak, the Swiss authorities are setting up test centers, for example in the city of Bern and the canton of Basel-Land. 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.

In the canton of Bern, the SRC has set up a hotline for elderly people in quarantine or in protective self-containment who want to talk to somebody. The SRC is also preparing to step up its support to vulnerable
people affected by the outbreak with cash assistance, in partnership with Swiss Solidarity. The Swiss RC volunteer drivers (Fahrdienst) continue to facilitate pick up services for the elderly to drive them to urgent medical appointments.

SRC is adapting the procedures in the SRC-run asylum centers in the cantons of Ticino and Uri as well as in the ambulatory services for migrants in Bern and Basel. The SRC childcare service is confronted with a very high demand after closure of schools. Services are adapted to correspond with new requirements of the authorities.

**Russian Red Cross**

From the beginning of COVID-19 outbreak Russian Red Cross has been implementing informational and risk communication activities focused on behaviour change and hygiene promotion. All Russian Red Cross regional branches are actively disseminating information on disease prevention and hygiene promotion, including through web resources and social networks. In addition, RRC branches (in Novosibirsk e.g.) have launched a “hot” telephone lines to provide people with correct information on COVID-19 prevention.

Within a “self-isolation” regime introduced in the country on 28 March, Russian Red Cross is being provided the support to the most vulnerable to COVID-19 categories of people (elderly people, disabled people, migrants) in access to basic needs (hygiene and food). In St Petersburg and some other regions, Red Cross branches established volunteering centres and launched telephone lines where elderly people can call and request for assistance (food and medications delivery, taking out the garbage) which will be provided by volunteers. In Moscow, Red Cross team jointly with the Moscow Department on Social Protection has been started to provide such support to people infected by COVID-19 and quarantined in their houses. Russian Red Cross also provided humanitarian assistance (more than 3 tons of food and hygiene items) to 1,000 migrants, who are detained in the Temporary detention unit for foreign citizens (Sakharovo), as well as to 1,500 homeless people in Moscow.

One of the biggest challenges in the current situation is to equip Red Cross staff and volunteers, as well as medical workers involved in response actions, with personal protection equipment (gloves, masks, antiseptics etc.). Regional RRC branches (Vologda, Omsk e.g.) launched the producing of hand-made PPE by Red Cross volunteers. Vologda regional branch provided local medical institutions with more than 1,000 sets of PPE. Moscow regional branch provided more than 5,000 masks to metro and public transportation staff.

**Tajikistan Red Crescent Society**

The National Society completed its plan for USAID funded project. The focus is on risk communications and community engagement including stigma prevention. The aim is to reach 1,134,000 people (756,000 rural population and 378,000 schoolchildren in 32 districts). 1,800 volunteers will be mobilized from 69 local branches of the NS.

The RCST Leadership on response was involved in Thematic group on communication and elaboration IECs on COVID-19, social distance taking into account religious particularity, local habits and customs. RCST was also involved in the training group on education Management of Prisons under the Ministry of Justice of Tajikistan rules of COVID-19 preventions. RCST in joint collaboration with WHO office in Tajikistan, Ministry
of Health of Tajikistan and other key Partners in Tajikistan will continue observation the situation and continue awareness works among local population.

Serbia Red Cross

Red Cross of Serbia has currently 158 operating RC branches in support of COVID-19 activities including the engagement of more than 22,000 volunteers, and the national society has reached more than 71,000 supported persons. EOC has been setup to monitor the overall situation in country and coordinate the activities.

Red Cross of Serbia has established 116 info centers to share information on COVID-19 and prevention measures. 124 mobile volunteer teams established has been established on branch level to assist people in need, and the national society is running two information lines to do information sharing.

Turkish Red Crescent (TRC)

TRC’s Crisis Management Center is working on 24/7 basis to ensure effective coordination together with timely and collective response. Online and face-to-face trainings have been organized on protection/prevention methodologies targeting the office and field staff. 1204 staff and 848 volunteers in total are trained.

- Guidelines on COVID-19 awareness raising including written materials, visuals and activity infographics have been developed and disseminated to all staff via internet, e-mail communication and posters.
- TRC shares videos on hygiene rules, COVID-19 and social distancing through social media and on the field. Social media tools are actively used in raising awareness. TRC provides PPEs to the staff in charge of food distribution in the quarantine fields.
- TRC takes an active role in providing social support to citizens, within the Vefa Social Support Group project formed under the coordination of governorships and district governorships.
- Doctors and phlebotomists of the blood services instructed to use PPEs and asked to provide masks to donors when requested. Blood services physically restructured donation rooms in the centers keeping social distancing measures in mind. Staff involved in blood donation received briefings on coronavirus prevention and protective measures.

As of 03.04.2020, Turkish Red Crescent has provided 3 meals of food support to 18,136 individuals in 102 service centers in 51 cities, combining to more than 938,00 meals in total. Volunteers support food service activities. TRC announced a support package “This Crescent is present for these days” and started a donation campaign. TRC branches assess the needs of vulnerable households and provide identified households with assistance in various forms. Different types of support are canned food, hygiene sets, recreation kits, shopping support for elderly and PWD, cash support, rental and utility assistance, newborn assistance. TRC works on an initiative that aims to support the elders and those who were left unemployed.

Additionally, TRC has distributed more than 1,200 hygiene kits to Syrian households. Particular attention is placed on migrants that face restrictions due to their age, providing information on restrictions and informed that TRC will be providing support in covering their needs.

Turkmenistan Red Crescent Society (TRCS)

The National Society is conducting an awareness-raising campaign among the population and organizations on the prevention of spread of COVID-19, including through the media (radio, television, newspapers) on safety measures and personal hygiene. The information material provided by IFRC has been adapted, translated into Turkmen and is used in presentations, and is also included in a seminar module. The National Society staff were also provided with PPE, and the RC offices are treated with disinfectants.
**Uzbekistan Red Crescent Society (URCS)**

- Together with authorized state bodies active work is being carried out among the population to prevent the spread of COVID-19 and mitigate its effects, in particular:

- The National Society is carrying out health education and personal hygiene discussions, distributing medical masks and information materials (received from IFRC, ICRC, WHO and the Ministry of Health) in crowded places - in markets, public transport, car parks, enterprises and mahallas (local communities).

- Care for the wards and socially vulnerable groups of the population; in particular, the lonely, the elderly, the disabled and others.

- The National Society has arranged 1,620 events and reached around 56,755 people. Around 1,038 people are involved (221 staff and 817 volunteers) in actions. They distributed 43,972 medical masks, 20,423 sanitary and hygiene products, and 21,901 information materials.

**MENA Regional Overview**

77,465 laboratory confirmed cases and 4,386 cases have been reported in 16 countries in MENA region, except Yemen. More than 80% of confirmed cases and almost 90% associated deaths have been reported in Iran.

DCPRR unit continues to provide support to NSs response plan development and to coordinate the technical support to the NSs operation plans to respond to the pandemic. The weekly call with NSs focal points has been conducted. The aim of these meetings is to provide technical support to MENA operations, and encourage peer to peer support between the NSs.

The Health & Care unit has been focusing on strengthening its technical capacity and coordination to ensure quality and timely support to NSs in terms of provision of standard information, materials and guidelines in English, Arabic and French as well as technical expertise though assignment of human resources seconded by the movement partners (e.g. Netherlands RC, Norwegian RC and Japanese Red Cross). The unit has been providing technical support on NS COVID-19 operational plans. The Movement in MENA is operating in fragile settings due to pre-existent conflicts and economic crisis and dealing with high-risk populations such as refugees, migrants, IDPs and vulnerable host communities, whose health status is already precarious (prevalence of NCCs is particularly high). In order to respond to COVID-19 outbreak and the pre-existing challenges, the Health and Care unit has been coordinating and working closely with WHO and UNICEF on the fragile settings, adopting CEA/RCCE and MHPSS strategy and policies.

In addition, most of NSs has the specific mandate from MoH/MoPH to manage clinical care components (e.g. hospitals, health centers, quarantine facilities and units, pre-hospital care including transportation, screening and triage). In this matter, the unit has been providing relevant guidelines and guidance to the NSs has been organizing bi-weekly Health & WASH forum/webinar with the aim to share information and increase NSs skills and knowledge. Moreover, the unit is developing the COVID-19 glossary to be shared and utilized by all regions, based on WHO and IFRC guidelines. This glossary aims at unifying terminology, definitions and relevant tools used in health activities in COVID-19 response, on order to facilitate the reporting process for the NSs. Lastly, Health and WASH integration is recognized as essential for this operation, in order to work closer with WASH team in MENA.

Risk Communication and Community Engagement (RCCE) Strategy for MENA Region was finalized. As RCCE is a key element in the Regional Emergency Plan of Action (EPoA), the strategy aims at complementing the EPoA, providing a more detailed overview of RCCE capacities in the countries and outlining the approach, priorities and RCCE activities under each phase of the response. This (RCCE) Strategy is available in English and is in the process of translation to Arabic. IFRC MENA Comms and CEA team is translating and sharing IFRC messages, infographics and other resources daily through regional communications and social media channels. IFRC MENA team is also producing social media content in Arabic to Twitter and to TikTok: [https://www.tiktok.com/@ifr_arabic](https://www.tiktok.com/@ifr_arabic). 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.

Joint technical team with Community Health, CEA, WASH and MHPSS continues the e-learning for Libya RC community health volunteers, including the topic related to how to deliver health messages through the social media. Also, LRCS health activity M&E plan is developed in support with MENA Community health & PMER teams. The team is preparing to support the development of the Iraqi RC e-learning platform.

A coordination mechanism with Global MHPSS surge, IFRC Reference Centre for PSS and DRC is in place to support MENA MHPSS network. MHPSS and CEA focal persons had a brainstorming session with RCCE on developing messages tackling Stigma.

Global Health and WASH Team Technical have been advising NSs not to promote large scale outdoor spraying, as there is no evidence to support efficacy against COVID-19, but rather to encourage selective spraying (following Vector Control Guidelines) and to disinfect in-door settings such as high-density homes; health structures, public transport, supermarkets, pharmacies, care homes for the elderly, police and military establishments etc. WASH Technical support on mass spraying/disinfection has also been provided as part of the COVID-19 rapid training in the LibyaRC webinar. An upcoming e-learning webinar will be organized with IraqRC to tackle Community Health and WASH. The team is also developing a guidance list for COVID-19 Hygiene kit distribution in MENA countries, based on IFRC standard specifications.

The WASH team is coordinating with WASH Working Groups and ICRC WASH Focal points in MENA and is liaising with Geneva WASH team concerning WASH guidelines.

**Country by country**

**Egyptian Red Crescent (ERC)**
ERC launched a ‘Corona Hackathon’ in partnership with “Yomken”, the International Finance Cooperation and the British Embassy in Cairo. The Hackathon is about hacking some daily life challenges in preventing the disease spread across the nation. ERC has developed the ‘ERC preparedness and response plan in response to the COVID-19 pandemic’, along a guidance protocol for COVID-19 risk management. Online presence has been intensified through the ERC social media page with messages produced in numerous languages, for people with low literacy, and messages targeting People Living with Disabilities (PLWD). ERC are conducting trainings on health education and PSS for COVID-19 virtually. A PSS hotline and WhatsApp were launched to provide PSS operated by the PSS volunteers. A medical hotline and WhatsApp was launched to provide medical information operated by specialised and trained medical volunteers. The ERC and IFRC contingency plan for COVID-19 is currently being revised in line with the recent strategic positioning of ERC in response to COVID.

**Iranian Red Crescent Society (IRCS)**
IRCS, in coordination with Medical Council, provides general and specialized trainings on Corona online courses for volunteers and staff. A total of 817,767 people, 65,417 volunteers, 28,023 staff and 11,839 trainers have been trained on COVID-19 through the online courses and information sharing. Dissemination of health awareness is happening through brochures, posters, info graphic, clips and motion graphic. Also, 8 educational documentation videos have been produced.
A fever screening system at the entrance of the cities is set up in 470 locations and more than 3,000 volunteers and staff are taking part in it.

**Iraqi Red Crescent (IRCS)**
The Iraqi Red Crescent Society is part of the Crisis Management Cell in the Iraqi state in COVID-19 response. 900 IRCS staff and volunteers have been trained and are actively involved in epidemic response, reaching 5,328,683 community members with the following operations: risk communications and health education and awareness, hygiene promotion and hygiene kit distribution, procurement and distribution of PPE, kits for diagnosis and other medical devices, distribution of food parcels, psychosocial support, disinfection
IRCS is coordinating with Movement partners and other agencies. In particular, IFRC is providing technical support for the development of Operational, business and continuity plans.

**Jordanian Red Crescent (JRC)**
In coordination with Governmental efforts in covering the needs of the most vulnerable population, JRC relief teams in all branches are preparing to distribute food parcels and vouchers to beneficiaries. JRC plan for the next week is to deliver 11,000 food vouchers to 9,000 households based on specific criteria provided by the Social Security department in Jordan. JRC is currently profiling the beneficiaries of relief distribution and coordinating with the authorities in order to obtain authorizations for relief volunteers to operate during the curfew imposed by the Government. JRC fleet and logistical capacities are facing additional pressure in covering both distributions and JRC hospital needs. PPE equipment (especially masks) present in the country are scarce and quality does not meet the movement standards. 250 JRC staff and volunteers have been trained on how to respond to the outbreak and are currently operating in all Governorates by supporting, until now, 11500 community members. JRC is strictly planning and coordinating the response with IFRC and ICRC.

**Lebanese Red Cross (LRC)**
Lebanese Red Cross response focuses on 6 strategic objectives: 1. risk communication, community engagement and public awareness. 2. Identification and detection of COVID19 cases. 3. Transportation of suspected and confirmed cases. 4. Ensuring maintenance of services (BTS, PHCs, EMS, Relief, Youth). 5. Shelter and shelter management for refugees requiring quarantine. 6. Providing basic assistance for refugees and Lebanese citizens in quarantine requiring support. 5000 LRC staff and volunteers have been trained on how to respond to the outbreak, of which 791 are operating in all Governorates.

Currently, 50,430 have been benefitting from LRC service provision: 549 suspected cases have been transported by LRC Emergency Medical Service and 49,881 community members have been reached during the 2,587 awareness sessions already undertaken. In addition, LRC carried out a disinfection campaign in Prisons and Detention Centers and finalized training courses to UNIFIL staff, and medical staff in PHC and hospitals. 88 nurses from LRC PHCs were trained on new policies for response, dissemination of policies and protocols for BTS and PHCs. As also concerns capacity building activities, LRC launched a dedicated online learning platform to provide risk communication and to address FAQs.

Community Action Plan with municipalities, union of municipalities, and governors have been developed. Weekly coordination meetings are held with PNSs and RCRC partners and regular coordination with ministries, UN agencies and other stakeholders is maintained.

**Palestine Red Crescent (PRCS)**
PRCS has mandates and responsibilities on emergency medical response, risk communication and distribution medical consumables to local community and health facilities in Gaza, West Bank and branches in Lebanon and Syria.

In Gaza and West Bank, 5,500 volunteers are involved in the COVID-19 Response. Approximately 1 million people have been reached by awareness messages disseminated by TV, Radio, Social Media, and SMS. 94 suspected cases have been transferred by the Emergency medical Services to hospitals. Other activities are ongoing, among others the provision of personal protection equipment (PPE) for internal staff and volunteers and distribution of medical consumables to community organizations, the establishment of a toll free hotline (235 calls received within this reporting period), the provision of psychosocial support to families and community members in need, food distribution (70 households reached during the current reporting period) and the provision of 4 tents for the setting-up of triage points. A Coordination Meeting with IFRC, ICRC and PNSs was held on April 2, while regular communication is maintained with MoH, Health Cluster, municipalities and community organizations.
In Lebanon, PRCS Branch adheres to the guidelines of the Lebanese Ministry of Health and the World Health Organization. Coordination mechanisms are in place with Movement partners (IFRC, PNS and Lebanese Red Cross—specifically for transfer of suspected cases), UNRWA and MSF. Hamshari hospital in Saida has been equipped to admit COVID-19 cases, training of medical and paramedical staff is ongoing. 146 volunteers are currently involved in COVID-19 community activities in 7 camps, and a total number of 39,860 people have been reached.

Yemeni Red Crescent (YRCS)
Still in preparedness phase, YRCS trained 80 volunteers and 6 staff on Epidemic control and 45 volunteers are actively involved in COVID-19 activities. To date, 8413 community members have been reached with distribution of 713 Hygiene Kits, 50 Mattress, 625 Blankets, 483 Mosquito nets, 212 Sanitizer, 113 buckets, 270 mats, 200 food parcels and 323 cans. Procurement of PPE materials is ongoing. YRCS is currently coordinating with Movement Partners to produce the final draft of the NS Response Plan.

FUNDING UPDATE

Donor response to the Appeal MDR00005

CONTACTS

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

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<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Email</th>
<th>Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frido Herinckx</td>
<td>Operations Coordinator</td>
<td><a href="mailto:RROps.GVA@ifrc.org">RROps.GVA@ifrc.org</a></td>
<td>+41-79-103-98-82</td>
</tr>
<tr>
<td>Rodolfo Bergantino</td>
<td>Planning Monitoring Evaluation and Reporting</td>
<td><a href="mailto:PMER.GVA@ifrc.org">PMER.GVA@ifrc.org</a></td>
<td>+44-7825-907-689</td>
</tr>
<tr>
<td>Benjamin Labit</td>
<td>Supply Chain Logistics Coordinator</td>
<td><a href="mailto:SupplyCC.GVA@ifrc.org">SupplyCC.GVA@ifrc.org</a></td>
<td>+41-79-963-91-99</td>
</tr>
<tr>
<td>Hanne Eriksen</td>
<td>WHO liaison</td>
<td><a href="mailto:WHOLiaison.GVA@ifrc.org">WHOLiaison.GVA@ifrc.org</a></td>
<td>+41-79-3827-435</td>
</tr>
<tr>
<td>Gwen Eamer</td>
<td>Public Health in Emergencies</td>
<td><a href="mailto:Gwen.Eamer@ifrc.org">Gwen.Eamer@ifrc.org</a></td>
<td>+41-79-217-3337</td>
</tr>
<tr>
<td>Ombretta Baggio</td>
<td>Community Engagement and Accountability</td>
<td><a href="mailto:Ombretta.Baggio@ifrc.org">Ombretta.Baggio@ifrc.org</a></td>
<td>+41-22-730-4495</td>
</tr>
<tr>
<td>Monica Posada</td>
<td>Risk Communication and Community Engagement</td>
<td><a href="mailto:Riskcomm.GVA@ifrc.org">Riskcomm.GVA@ifrc.org</a></td>
<td>+41-78-969-1313</td>
</tr>
<tr>
<td>Katie Wilkes</td>
<td>Communications</td>
<td><a href="mailto:RRCommunication.GVA@ifrc.org">RRCommunication.GVA@ifrc.org</a></td>
<td>+01-312-952-2270</td>
</tr>
</tbody>
</table>

- IFRC Geneva Programme and Operations:
  Nelson Castano, Operations Coordination Manager, Nelson.CASTANO@ifrc.org +41-22-730-4926
  Panu Saaristo, Emergency Health Team Leader, panu.saaristo@ifrc.org +41 79 217 3349

- IFRC Resource Mobilization and Pledges support:
  Diana Ongiti, Emergency Appeals and Marketing Sr. Officer, diana.ongiti@ifrc.org +41 22 730 4223

- IFRC Communications
  Laura Ngo-Fontaine, Media and Advocacy Manager, laura.ngofontaine@ifrc.org +41 79 570 4418

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.

<table>
<thead>
<tr>
<th>Operational Update Link</th>
<th>Published</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operational Update 9</td>
<td>3 April 2020</td>
</tr>
<tr>
<td>Operational Update 8</td>
<td>27 March 2020</td>
</tr>
<tr>
<td>Operational Update</td>
<td>Date</td>
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</tr>
<tr>
<td>Operational Update 7</td>
<td>20 March 2020</td>
</tr>
<tr>
<td>Operational Update 6</td>
<td>13 March 2020</td>
</tr>
<tr>
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<td>06 March 2020</td>
</tr>
<tr>
<td>Operational Update 4</td>
<td>28 February 2020</td>
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<td>21 February 2020</td>
</tr>
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<td>07 February 2020</td>
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