Situation Update
9,277,214 confirmed cases globally reported to WHO as 25 June
Rapid acceleration in transmission, with approximately 1 million new cases per week.

National Society Response
111 National Societies reporting via public COVID-19 Field Reports as submitted on the GO Platform.

111 Sustaining Health and WASH
103 Addressing Socio-economic Impact
102 Strengthening National Societies

*Breakdown of pillars in annex and on GO.

GO Platform
National Society Field Reports and Emergency pages can be found on GO platform.

Click here for the detailed up-to-date information on the situation, analysis, RCRC Movement actions, documents and additional information available on go.ifrc.org

Useful Links
Technical Guidance - Compendium
The Red Cross And Red Crescent Movement Resource Compendium has links to resources and guidance and resource hubs such as

- Health Help Desk
- Business Continuity Planning Help Desk
- Cash Help Desk
- Community Engagement Hub
- Livelihoods Help Desk
- IFRC Reference Centre for Psychosocial Support
- National Society Resources and Guidance by a number of topics

The latest WHO sit-reps are here and visualisations at WHO and on GO Platform.
OPERATIONAL UPDATE

The Revised Emergency Appeal (28 May 2020) is available here.

Red Cross and Red Crescent activities globally

Health and Care

The health and care team participated in a contact tracing consultation with global partners, with an aim to better position NS and clarify the role of NS volunteers in contact tracing at the community level. Effective and sustainable contact tracing is emerging as a key area for investment globally. At global level support to regional offices and national societies on implementation strategies and assessment processes for CBS (specifically MENA and NSs in AP region). Consultations with WHO during revision process of COVID-19 suspect case and community case definitions. Development of updated contact tracing IFRC guidance following consultations to be re-shared with the membership. Ongoing risk analysis.

Risk Communication, Community Engagement and Accountability

Coordination: RCCE Collective Service coordination mechanism advancing with finalisation of its governance, functioning and workplan. Regional needs assessment on going and RCCE global strategy revision process defined. IFRC regularly co-chairing the weekly partners call. Focus will be on strengthening RCCE for contact tracing (key for suppressing transmission) with a set of recommendations (from previous experiences)/check list for countries expanding or reviewing their contact tracing programmes. GOARN partners with IFRC have created a dedicated interdisciplinary working group.

Technical: IFRC co-developed with the interagency subgroup on Community Engagement and low resource settings the Planning Guide for Conducting Safe Covid-19 Community Meetings: RCCE Operational Tool with post lockdown Considerations. To ensure all RCCE reference resources are accessible, a CEA landing page has been generated in the GDPC compendium portal: https://www.preparecenter.org/site/covid19/cea/.

TWB and IFRC have put together a short webinar on How to write in Plain English aiming at answering what, why and how it is important to establish clear and understandable two-way communications with vulnerable population, which is key in times of COVID-19. Access below the recording of the webinar in English.

Livelihoods and Household Economic Security

Coordination: The Food Security and Livelihoods (FSL) HelpDesk continues to provide remote support to National Societies. The main requests are focused in how to conduct remote livelihoods assessments, how to adjust the ongoing operation to COVID-19, how to target effectively and how to integrate the social protection systems in the response. A new webinar has been conducted providing information about the impact of COVID-19 in people's food security and livelihoods, potential intervention and services, tailored and facilitated by for Asia Pacific Region. Several infographics related to livelihoods and food security have been developed, focus in migration and food security and livelihoods assessments.


Shelter and Urban Settlements

- The first of the planned four webinars on "Rethinking Urban Community Risk Reduction and Resilience while responding to COVID-19" was held on 12 June 2020 with the participation of 74 people from all regions and some external partners. Philippines RC and Lebanese RC presented how they are adjusting their current response but also future urban programming in urban context. The recordings can be accessed here.
Developed technical guidance note for remote rapid assessment for socio-economic impacts of COVID-19 in urban context is continued in coordination with the Livelihoods Centre, German RC, AP region and Turkish RC.

- Shelter and settlements team is working with the Cash Hub to produce a tip sheet on “The Importance of Rental Assistance during Times of COVID-19” to support the national societies in their activities under Operational Priority 2. The tip sheet will also be supported by an informational video based on field examples, which will be made available as part of the webinar series organized by Cash Hub.

- Global Shelter Cluster has issued its key messages and actions for security of tenure and COVID-19. This has been

## Migration and Displacement

IFRC continued to monitor and analyse emerging needs, including policy and protection related concerns for refugees, migrants, and host communities. The aim is to ensure that ‘at risk’ migrants, refugees and displaced people in countries experiencing COVID-19 are included in preparedness and/or response plans, in line with the respective National Society's mandate and capacity to respond.

**Tools and guidance (available on GO)** have been developed to build capacity related to migration to respond to the protection and assistance needs of this vulnerable group, and support National Societies to put migrants, refugees and displaced communities at the centre of the COVID-19 pandemic response, linking sector interventions in health, shelter, protection, inclusion and livelihoods (incl. cash based support) to ensure a coordinated and holistic approach.

Worth mentioning are the “**Recommendations on reducing the impact of COVID19 on IDPs**” released as a public note, jointly developed by IFRC and ICRC, and the “**Joint ICRC IFRC Guidance on the inclusion and protection of migrants in the face of COVID-19 pandemic in Europe and Central Asia**” which aims to support advocacy-oriented communications when engaging with governments, donors, humanitarian and development organizations.

We have contributed to the development of **inter-agency guidance** on Risk Communication and Community Engagement, Interim Guidance for preparedness, prevention, and control of coronavirus disease (COVID-19) in refugees and migrants in non-humanitarian and non-camp settings and contributed to webinars organised by the UN Migration Network, on various topics including access to services.

**A MOOC (Mass Open Online Course) on COVID-19 Adapting Child Protection** Case Management will start June 29. This is an interagency project that IFRC has helped to lead, and profiles interesting practices from Icelandic RC, Italian RC and Philippines RC on their use of the Virtual Volunteer platform to reach migrants during the current COVID-19 pandemic.

## Protection, Gender and Inclusion

The PGI and Education team continued to coordinate the overall IFRC plan and response, complemented by dedicated support on specific themes. In the area of **Sexual and Gender-Based Violence**, a **training video and resource materials** were developed for the current context, outlining the basic core concepts and how to receive a disclosure from a survivor.

In the area of **Child Protection**, a **training session on Psychological First aid for Children** was developed in collaboration with the psychosocial centre. The massive open online course on “**case management of children during COVID-19**” was finalised and preparations were underway for the launch.
In Education, support was provided to develop or revise education products, including adapted the Turkish Red Crescent's animation video for children on the virus for global use, digitising of educational materials (Climate Centre Kids’ Activity Cards) and online delivery of RCRC educational programmes such as YABC session for CCM's virtual Atlantis Youth Camp and others. Two more webinars on RC RC education response to Covid-19 were held, one on partnerships and one on futures of education post Covid-19.

Several inter-agency processes were contributed to, including: discussions on best practice for Covid and SGBV at annual partners meeting on “Call to Action to End GBV”; contributing to the advisory group of the Alliance for Child Protection in humanitarian action (e.g. on the issues of around schools’ reopening); with Save the Children on limiting the use of schools as shelters.

The focus on overall coordination continued with the development with ICRC of a mini-survey on Protection, Gender and Inclusion activities in Covid-19 by National Societies, to support future programming. Collaboration with PGI regional focal points and sector focal points in IFRC established a coherent joint plan of support to National Societies in their programming and monitoring of PGI-related responses to Covid-19.

National Society Preparedness

IFRC is playing an active role in the IASC Emergency response preparedness working group, which recently held a webinar to present the ERP interim guidance for COVID-19. The ERP approach was adopted by the IASC in 2015 with the IASC Emergency Response Preparedness Guidelines, which aims to increase the speed, volume, predictability and effectiveness of aid delivered after the onset of a crisis. For COVID-19, the IASC developed the Interim Guidance on the Emergency Response Preparedness Approach to the COVID-19 Pandemic, a short and technical step-by-step guide. It supports the development or strengthening of preparedness measures for country teams to implement activities required to address the potential non-health impacts of the COVID-19 pandemic and its compound effect on existing risks.

National Society Preparedness for Effective Response (PER) global and regional results trends visualization are continuously updated. Collaboration among DREF and NS Preparedness teams, supported by Canadian and Netherlands RC continues to support the identification of the response system gaps/challenge and operational lessons learned, faced by National Societies in recent operations using the PER mechanism as an analytical framework. 120 operations have been tagged, and 1.800 pieces of learning identified and organized following the PER mechanism.

A template structure and checklist for Business continuity planning has been developed by the BCP helpdesk and technical experts from IFRC Geneva and is ready for further consultation. These tools shall support IFRC and NS to enhance their operational sustainability and ensure vital humanitarian services while addressing the duty of care for staff and volunteers. Coordination calls were held between colleagues working on BCP and contingency planning guidance to ensure a close alignment between the two planning tools. A focus is put on a common scenario development and analytical process of hazards, threats and vulnerabilities. Several regional colleagues are starting to plan for a testing and roll out of CP and BCP tools in the coming weeks.

National Society Development

Financial Sustainability:

- A webinar on “From Operations Continuity to Sustainability of National Societies in the Americas as a result of the Response to COVID19” was organised in the Americas Region, serving as a space for National Societies to share various approaches to tackle economic impact and challenges towards NS’s Financial Sustainability;

- “Financial Sustainability” is a complex problem with multiple factors linking with one another. Defining the “real problem” will be a crucial step for setting an effective action. In this regard, Action learning is a widely accepted methodology for solving such real-life work-based problems. The approach has been used widely in settings that are fraught with complexity, problems, challenges, and particularly effective
for solving complex problems that may appear unsolvable. It elevates the norms, the collaboration, the creativity, and the courage of groups. The IFRC is finalising the formal agreement with World Institute for Action Learning (WIAL), which will allow National Societies to access support from pro bono coaches to conduct Action Learning. The pro bono Action Learning coach shall assist National Societies in reframing the problem, give feedback on how the team plans and work together and reflect on both what they are learning and how they are solving problems.

Others:
- Webinars have been organized for both the Asia Pacific and Africa regions for the promotion of the SOKONI platform with COVID-19 related resources for NS Staff and volunteers, as well as interactive spaces for knowledge sharing and peer to peer support.
- The work with the Reference Centres and IFRC colleagues in Operations and IT continued in the consolidation of the IFRC Covid 19 landing page to be accessible through the IFRC public website.
- An intern has joined the NSDV unit for 6 months to work on data and information management and to help to organise and manage an increasingly rich resource of data on National Societies’ contexts, status, capacities and needs. The tasks include developing reports, visualizations and other management information tools to extract analysis and insights. Over time this digital transformation will help us to serve our National Societies better.

Business Continuity Planning and Security within IFRC Secretariat

A significant number of countries around the continue to exhibit strong tensions between local, regional and federal de-escalation procedures. These discrepancies continue to cause logistical difficulties in the movement of goods, but they are significant obstacles to the movement of individuals, including humanitarian workers. Following the agreement signed with WFP Air Passenger service, that allows us to move personnel to different locations around the world dedicated FedNet page has been created and where a set of documents to comply with all the requirements of WFP has been uploaded and serve to provide information. So far, WFP has established 35 routes and IFRC used the service for moving more than 29 staff. In addition, IFRC constantly monitor national COVID-19 procedures in order to ensure full compliance: 105 daily travels advisories have been produced. Following the Guidance approved by Secretary General on gradual readjustment of working arrangements, 3 offices have received authorization to change the working modality.

Joint analysis is constantly ongoing between BCP and security experts in IFRC and we note the return of targeted restrictions in areas where infection rates are rising but we now see strong social pushback – sometimes in the form of public protest – against the extension and/or return of restrictions. We expect this situation to continue and, in some places, even deteriorate over the next weeks and months despite government efforts to respond with lifting of COVID-19 restrictions. The spread of COVID-19 among refugees, IDPs and migrants in several countries such as Bangladesh, Lebanon, Greece, South Sudan, Syria, Libya, and to a lesser extent in Americas amongst others, might deteriorate the security situations in affected areas if infections rise within these communities.

Priority will be maintaining BCP plans updated and capacity in the IFRC and strengthen capacity of National Staff and our NS as we will struggle deploying international staff during flare ups or second/third waves.

Communications

Media Highlights

• Report from BBC News (Featuring Italian Red Cross)

• BBC World Service Radio mentioning the IFRC field hospitals in Bangladesh

• Article from Voice of America – IFRC Opens 2 Field Hospitals in Bangladesh’s Cox’s Bazar

• Opinion piece from the Bangkok Post – It’s time to help suffering migrants and refugees (written by Ezekiel Simperingham)

• Article from the Guardian – Two in five UK adults feel lonelier under lockdown, finds survey (British Red Cross quoted)

• Article from TRT World – Covid-19 reduced opportunities for Latin American migrants in Spain (Spanish Red Cross quoted)

• Radio Australia – Timor-Leste faces dengue fight amid COVID-19 pandemic (Timor Leste Red Cross quoted)

• Article from ABS CBN News – Philippine Red Cross to mount COVID-19 testing centers in Boracay, other tourist spots

Social Media Highlights
• A mini-concert featuring refugee musicians living in Turkey was broadcasted live on LinkedIn, YouTube, Facebook and Twitter and TikTok.

• Red Talk with two special guests: Félix Sessay from Spanish Red Cross and Shaza Almasri from Turkish Red Crescent.

• Instagram takeover by Hanan, a Syrian refugee. Hanan also shared with us some of her favorite songs curated on a Spotify playlist!

• Global Instagram story on World Refugee Day.

• Visuals promoted by Cameroun Red Cross, Thai Red Cross, Brazil Red Cross, Maldivian Red Crescent and Bulgarian Red Cross.

Supply Chain

Four global requisitions were signed in March and April for the procurement of 12.5 million PPE with a budget of 11.9 million CHF. Thanks to global efforts, we have procured 13.8 million PPE for a budget of 10.2 million CHF.

| PPE Items | 6.1 million | to 35 |
| (pieces)  | distributed | countries |

The PPEs not yet delivered are in transit in our RLU in Dubai or Kuala Lumpur, and few contracts will be delivered by suppliers in China at the end of the month.

To deliver these PPE, we have used a global framework agreement signed with a freight forwarding company, but we also have transported 81,9 MT / 495.33 CBM using WFP services, amounting to a total savings of 1,003,484 USD.

Federation-wide planning and reporting:

• A set of key indicators to monitor and show the Federation-wide scale and reach (beyond number of NSs involved in specific activities) is being finalised, based on the pillars of the three operational priorities.
• Work on guidance for country support mechanisms is about to be finalised after consultations with regions and PNSs. Two distinct mechanisms are defined based on presence or non-presence of the IFRC Secretariat alongside the HNS in a given country. The first one called “country support teams” aims at scaling up through the membership the support to the National Society to plan, monitor, report and to a certain extent implement its domestic response. The second one, the “Country implementation teams” aims at bringing direct support to the IFRC Secretariat to implement jointly with the HNS the multilateral component (the Emergency Appeal) of the response. The aim of those mechanisms is to support the delivery by the NS of the Domestic Response Plan in a coherent manner by maximising resources and expertise already present in-country.

Interagency-coordination:

The IASC Principals have met twice in the reporting period. On 16th June, regular COVID meeting with discussion around funding concerns, many remarking on the ‘plateauing’ that is being seen. The UN GHRP has attracted approx. USD1.3 billion (out of USD 6.7 billion). Increasing concerns regarding impact of COVID on people on the move and those in camps (Greece and Cox’s Bazar) as well as impending food security crisis (see embedded links for UN SG’s policy briefs). 24th June (closed door meeting with UN SG Guterres) was a strategic, forward looking meeting where concerns were aired around the growing politicisation of aid (as well vaccine nationalism), the lack of global leadership exacerbating geopolitical tensions, the need for global solidarity, acknowledgement that the peak remains months away whilst facing pre-existing humanitarian and health crises, reduction in funds, increasing likelihood of a ‘hunger pandemic’ (on a scale not seen for 50 years) and corresponding migration. Strong recognition of the fragility of civil society with many reiterating the importance of localisation and community empowerment (led by IFRC’s President Rocca). Many noted that health impacts will be (and are being) used to justify repressive approaches towards migrants, IDPs, refugees.

Consultations are ongoing with WHO on updated COVID-19 suspected and community case definitions. Health colleagues continue participation in global consultation on contact tracing (led by WHO and GOARN), including discussions on the role of proximity notification apps and similar technologies.

In partnership with inter-agency partners, IFRC is leading on guidance and materials on post lockdown considerations in different contexts and humanitarian responses. IFRC co-led a side-event at the ECOSOC Humanitarian Affairs Segment (together with CARE, Oxfam, WHO and UNICEF) chaired by the government of Ireland, to discuss lessons learned and unique opportunities for community engagement as part of the COVID-19 response.
Regional Overview
The IFRC Asia Pacific Regional Office 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 continues to monitor the evolving situation in Asia and Pacific – which has seen spikes in the number of cases in countries like India and Bangladesh during the reporting period – and is actively keeping the region informed through the weekly Regional Task Force meetings with COs and CCSTs. Similarly, CCSTs and COs continue to update the APRO on the progresses in-country for preparedness measures, trends in the number of confirmed cases, governmental actions, and activities being implemented or planned by the National Societies.

Health and Care
During this reporting period, the Asia Pacific Health team continue to support National Societies in their efforts to curb the COVID-19 pandemic, including a secondary health impact due to the suspension of the immunization campaign, increase in malnutrition, etc. The regional health team updated the health guidance note to support National Societies to strengthen their response within their mandated roles.

COVID-19 in the region has been manifesting differently and National Societies are responding according to their mandate. Activities during the reporting period included enhancing support to clinical interventions continues with ongoing support to isolation and treatment centres to be established in Cox's Bazar and Dhaka, Bangladesh, and Corona Hospital in Rawalpindi, Pakistan. The team is currently working to support testing facility in Cox's Bazar.

The Regional Health team continues its series of webinars and has recently conducted webinars on COVID-19 safe first aid practices and various resource platforms.

Livelihoods
The IFRC Asia Pacific Regional Office, in collaboration with the Livelihoods Resource Centre (LRC), conducted the COVID-19 Livelihood Webinar participated by 61 NS and PNS across Asia Pacific.

Technical support and guidance were provided to IFRC CCST and country offices/NS in Afghanistan, India, Pakistan, Philippines, and Timor-Leste on COVID-19 emergency basic needs and early recovery livelihoods planning and implementation. While some NSs have expressed interest in engaging in livelihoods early recovery, due to funding limitation the quality of early livelihood recovery activities may deter.
On-going monitoring and analysis of the impact of COVID-19 on livelihoods and income within the region to help keep IFRC focal points/country offices/CCST/NS updated on the current trends and possible ways forward.

The Livelihoods Coordinator shared the COVID-19 CEA livelihoods good practices (within the region), especially from Myanmar

**Migration and Displacement**

The IFRC Asia Pacific Migration and Displacement team continues to provide regional coordination and technical guidance to National Societies to support migrants, refugees and IDPs at risk from COVID-19 and its impacts. This included:

- **Ongoing monitoring and analysis of regional developments**, trends and risks related to migration and displacement.
- Engagement in the **inter-agency regional thematic working group on migration**, refugees and COVID-19 (hosted by IOM).
- 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.
- **Technical support and guidance for the development of National Society plans to address the needs of migrants, refugees and IDPs** continues, focusing on support to Myanmar Red Cross, Bangladesh Red Crescent, Pakistan Red Crescent, Maldivian Red Crescent, Sri Lanka Red Cross and Nepal Red Cross.
- **Media:** New interview and article published on regional migration trends: [here](#).
- Coordinated the development of **guidance for AP National Societies on the Global Migration Strategy, the Manila Call for Action and connections with COVID-19 programming**. Coordination as part of shared leadership approach with Australian Red Cross.
- Coordinated the **collection and sharing of relevant COVID-19 IEC materials for AP National Societies**. Coordination as part of a shared leadership approach with New Zealand Red Cross.
- Coordinated the development of **new migration needs assessment guidance in the context of COVID-19**, with IFRC CO Pakistan and shared leadership with Australian Red Cross.
- Finalisation of global guidance on **trafficking in persons into COVID-19 response in key priority contexts** (on go platform), as part of a shared leadership approach with British Red Cross.
- Acted as project lead for **Thai Red Cross programme** to reach more than 400,000 migrants in Thailand as part of the COVID-19 response.

**MPHSS**

Based on findings from assessments, trainings are being supported in Malaysian Red Crescent, Maldives Red Crescent and integration of PSS into PGI at Australian Red Cross. The health delegate is supported in carrying out a webinar on stress management.

**Logistics**

International procurement of PPE for AP demand is about 80% fulfilled. For long-term supply chain planning, the template has been shared with countries which has helped to broadly identify the longer terms needs for the COVID-19 response, especially on priority procurement.

Importation challenges in some countries, especially in Bangladesh, on documentation requirement which is not commonly requested by other countries (causes shipments delay and held up at ports of entry).

**Shelter and Urban Settlements**

Challenge for NS to identify where shelter may be useful for response/ mitigation.
Communications
Media stories profiling Red Cross Red Crescent COVID-19 humanitarian work has appeared in a range of major English-language news publications, including The Jakarta Post, Manila Times, Xinhua, Reuters, The Bangkok Post and more.

The APRO communications team worked with National Societies across the region on a range of initiatives that scored strong engagement in IFRC Asia Pacific and IFRC social media channels including:

- World Blood Donor Day videos, and photo and story packages from many countries.
- Volunteer postcards profiling the life-saving and critical work of volunteers on the frontline of the response.
- Photo and video packages from Bangladesh, Myanmar, Indonesia, Philippines and Thailand.

National Society Updates

Afghan Red Crescent Society (ARCS)
Over 6,121 individuals have been screened by four medical health teams (MHTs) across four provinces in Afghanistan. A total of 258,060 individuals have been screened since the beginning of screening operation.

During the reporting period, 283 suspected cases were found across the country, which accumulates to 823 cases since the beginning operation, while 205 suspected individuals have been referred to the COVID-19 hospitals, giving a cumulative total of 488 individuals. Over 7,448 individuals received health awareness on COVID-19 by MHTs and clinics across the country, totalling 144,610 individuals since the start of the operation. Renovation of the ARCS hospital building is ongoing, with the installation of 15 tents into the green area of the hospital. A total of 98 new hospital staff to be recruited have been identified. Preparation for the screening area, PPE area, waste management and electricity are ongoing. With the support of ICRC and in coordination with the Ministry of Public Health, ARCS conducted a three-day workshop on PPE usage for nurses and health practitioners.

Food and NFIs were distributed to 475 individuals in Kabul and Badakhsahn provinces, giving an accumulated total of 59,912 individuals across the country since the beginning of the operation. Contract for the procurement of food items for an additional 5,600 households is completed and is at the quality test and laboratory phase.

Australian Red Cross (ARC)
As of 22 June 2020, a total of 7,461 cases of COVID-19 have been reported in Australia, including 102 deaths and 6,896 reported as recovered from COVID-19. Over the past week, there has been an average of 21 new cases reported each day. Of the newly reported cases, the majority have been from Victoria, with New South Wales recording a daily average of 3 new cases and all other States and Territories recording 0 new cases since 7 June.

Australia has conducted 2,107,849 tests for COVID-19 with 0.4% of tests returning a positive result. Of cases with a reported place of acquisition, 62% have recent international travel history, including over 1,300 cases associated with cruise ships. 28% of cases were locally acquired from contact with a confirmed case, 10% were locally acquired but the source of the infection is unknown.

ARC’s humanitarian response to COVID-19 has moved into a recovery phase which aims to ensure that people experiencing vulnerability can cope with the psychosocial impacts of COVID-19. Psychosocial support (PSS) has been provided through emergency relief to 4,915 migrants on temporary visas and responding to a further 7,500 referrals; psychological first aid phone outreach to more than 24,894 people experiencing self-isolation or mandatory quarantine; development of a social connection phone call service for 368 of the broader population of adults experiencing social-isolation due to COVID-19 restrictions; well-being kits provided to 3,507 people in mandatory hotel isolation, advocated to government on psychosocial impacts; developed resources and training to build capability of community organizations to support their clients facing increased vulnerability; public information activities to encourage people to help flatten the curve and cope with the impacts with 31,296 views of content; and a Recovery Positioning document to guide advocacy to government and other agencies.

A rapid needs assessment of Red Cross clients, with particular focus on people with temporary visas, Aboriginal
and Torres Strait Islanders and people in mandatory quarantine is being undertaken to determine further recovery needs. Australian Red Cross has also mobilized funding and technical support to the IFRC global appeal and ARC partner national societies. ARC influenced the Australian Government and humanitarian sector to take global action and strengthen global solidarity in response to COVID-19 and its impacts.

**Bangladesh Red Crescent Society (BDRCS)**

During the period under review, BDRCS established 40 COVID-19 sample testing booths for the general population in Dhaka and nationwide. With the support of German Red Cross, BDRCS distributed BDT 5,000/family to urban migrant laborers, slum dwellers and single-headed women-led households in Dhaka North City Corporation on 9 June; a total of 1,800 households were covered. BDRCS reached 502 people with direct psychosocial support (PSS) support over the PSS call centre.

As of 15 June, a total of 494 patients had been admitted to the Holy Family Red Crescent Medical College Hospital (HFRCMCH). Of this, 258 patients have successfully received treatment and recovered from COVID-19, while 236 patients are receiving treatment, and 10 from this figure are admitted in ICU.

Upon request by the Bangladesh government, a 10-member COVID-19 expert team sent by the Chinese government visited the HFRCMCH on 13 June. They participated in a round table discussion and an experience sharing session. The focus was on the major concerns, such as resource mobilization, intervention, control and management of the epidemic. The visit is expected to strengthen the resource mobilization and management capacities of HFRCMCH to provide better services in this pandemic situation.

BDRCS, with the support of Turkish and Qatari Red Crescent, distributed 8850 food packages in Cox's Bazar, Rajshahi and Sirajganj districts. Through disinfection activities BDRCS covered 268 hospitals throughout the country as well as built the capacity of the hospital staff in carrying out the disinfection activities on their own.

With support from IFRC and PNS's, BDRCS continue to address the dual threats of monsoon-associated hazards and the spread of COVID-19 in Cox's Bazar.

A total of 182 community volunteers, 14 community mobilizers and a supervisory team of five members were working on outreach messaging, making door-to-door visits in the camp settlements. Ten volunteers and two mobilizers attended induction training and have been newly deployed.

Hygiene promotion sessions, which are aimed at preventing the transmission of COVID-19 at household level in the host community, have continued and received positive feedback from households. Community feedback indicated that people welcomed these sessions and revelled in the opportunity to learn new things. The distribution of soap helped host community members maintain proper hand washing practices.

The PGI team contributed to the development of IFRC global guidance on the impact of COVID-19 (people trafficking), and is playing an active role in the Cox's Bazar anti-trafficking working group. As the spread of COVID-19 continues, camp occupants have showed awareness and knowledge of COVID-19 and expressed interest to learn more about the ways of preventing transmission of the virus, according to reports from CEA community volunteers. The involvement of religious leaders in messaging as well as the use of local volunteers has contributed towards such awareness.

**Bhutan Red Cross Society (BRCS)**

Bhutan Red Cross Society has from the start of pandemic been part of national response operation. Moreover, the NS has lead responsibility for Safe and Dignified Burials (SDB) by the Health Emergency Management Committee, Bhutan. The NS trained 854 volunteers on SDB across all 30 branches and 374 volunteers are precisely based in 4 risky branches; Thimphu, Mongar, Sarpang and Phuntsholing) Bhutan RC is supporting government with PPEs and RC volunteers were provided with PPEs for duty.

Hundreds of people and vehicles are screened and recorded in a day. Volunteers advocate on personal hygiene and health safety practices, check people's temperature with an infrared thermometer, and if a person has a high
temperature, a form is filled out and the health officials are being called for further assistance. The volunteers of Tsirang Branch stated that they will continue to volunteer until the country is free of COVID-19 pandemic. Four volunteers carry out midnight shift. Volunteers at Waklatar checkpoint carrying out regular duties. Volunteers also monitor social distancing and hygiene practices at the weekend vegetable market.

**Cambodian Red Cross (CRC)**

In close collaboration with the local authorities, Red Cross senior management, staff, volunteers and youths have been equipped with hygiene items (alcohol and soap) and adapted IEC materials from the Ministry of Health (MoH) and IFRC (posters, flyers, radio spots, etc.). They are continuously disseminating key COVID-19 preventive messages through mainstreaming with core activities of all 25 RCBs. From June 8 until June 14, the CRC efforts reached 3,893 persons (2,404 women, 1,489 men) located in 137 places in 16 provinces. During this period, the following IEC materials were distributed: 36 units of PVC banners on COVID-19 prevention and hand washing, 98 units of posters on COVID-19 prevention and hand washing, and 1,850 units of flyers on COVID-19 prevention and hand washing. In addition, four loudspeakers were used to disseminate key messages.

Between June 8-14, the following hygiene and personal protection items were distributed: 1,250 pieces of soap, 4,255 units of face mask, 139 bottles (500 ml/bottle) of alcohol, and 841 units of Krama (Siem Reap, Kampong Thom, Kampong Speu and Svay Rieng provinces). The CRC Branches in Mondulkiri provinces also distributed 184 T-shirts to RCVs. The 25 RC Branches have raised requests for support: more IEC and hygiene materials needed, visibility items such as T-shirts and caps and technical support from NHQ-team in terms of finance and operation management. Through distance technical support and information sharing, the Emergency Health Sub-Department team follows the operation, providing coaching and strongly encouraging RC Branches to complete their activities and provide reports to NHQ on time.

**Cook Islands Red Cross (CIRC)**

For the COVID-19 operation, CIRC has two main roles: First to support the national efforts to contain COVID-19. This is done through participating in the National Emergency Health Taskforce which developed the National COVID-19 Plan. Provides risk communication and awareness raising to all communities, through face-to-face discussions and online media. Conducting health and hygiene promotion through the distribution of 1,500 hygiene packs to vulnerable people and through trainings for healthy living promotion. Promoting and supporting the MoH with PSS. Second, is to support each village EOC by allocating 10 Red Cross volunteers to each to support with various activities including community-based surveillance, IPC, WASH, CEA, and access to essential health. The NS also established its EOC at headquarters to support its volunteers on the ground. CIRC has put in place the COVID-19 plan in alliance to the government’s plan.

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

The DPRK RCS has mobilized 11,936 (6,207 male, 5,729 female) trained volunteers in the communities of its four target provinces, these volunteers are continuously working, in their respective communities to prevent the spread of COVID-19 with focus on health promotion, surveillance and disinfection.

In response to the resumption of schools, both RC volunteers and household doctors are escalating a variety of health promotion among schoolteachers and school children for increased health awareness and positive behavioural changes. In addition, they are actively engaged in the provision of chlorine to community based educational and nursing facilities and thorough disinfection of frequently touched surfaces.

As part of the celebration of the World Blood Donor Day 2020, the DPRK RCS undertook various promotion
activities all across the country to raise public awareness on the importance of blood donation with a strong reference to MoPH developed guidelines and IFRC key messages relating to blood donation. Also, as a good recognition, DPRK RC volunteers, together with the household doctors, have visited regular blood donors at their homes to appreciate their devotions to save lives, highlight key COVID-19 messages and offer FA kit and encouraged them to stay healthy and provide regular blood donations.

Communication To support the firm efforts made by the DPRK RCS within the nation-wide emergency anti-pandemic campaign of the DPRK government, health, disaster management, organizational development and other activities conducted by the DPRK RCS are presented on the its website for more information.

Fiji Red Cross Society (FRCS)
The FRCS response has been focused on COVID-19 Health and Hygiene messaging. Staff and volunteers were trained on basic COVID-19 information for community messaging. Hand washing and behavioural change videos were developed, translated into the 4 main languages and shared on social media and with city councils to be played on advertisement screens. The FRCS also provided tents for mobile clinics.

Indian Red Cross Society (IRCS)
The IRCS 2025 Helpline has been established and continues to provide information and support to the public. Since the start of the operation, 650,000 people have been assisted. Approximately 4,500 IRCS volunteers have been trained on COVID-19 case detection. Volunteers that are trained on epidemic control, hygiene, and first aid are working alongside the government. These volunteers have been provided with basic PPE Kits.

Some 276,000 vulnerable people, such as senior citizens, women-headed households and the people in need in red/containment zones have been reached at their doorsteps with essential commodities such as medicines and food supply. More than 30,000,000 cooked meals were served to migrants and people living in the host community, while 1,100,000 families were provided with dry rations which can last for an average of 20 days per family. Blood donation camps continued during the period under review; around 79,000 units of blood had been collected. More than 1,775 blood donation camps have been held.

IRCS also provided PPE material and awareness raising activities for the prevention of COVID-19. Under community engagement activities, 1,770,000 people were reached on risk communication and social distancing, and 850,000 on hygiene.

The IRCS shelter facilities across the country have supported approximately 30,000 people. A total of 25,775 people has been supported through the Isolation Centres across the country, while 1,274 Quarantine Centres have supported 41,760 people. 61,570 beneficiaries (mainly Thalassemia, cancer and dialysis) have benefited through transportation services provided by 388 IRCS vehicles during the lockdown period. Free medicine has also been provided to the people in need, including several TB and Thalassaemic patients.

Indonesian Red Cross Society (PMI)
As of 18 June 2020, PMI COVID-19 response operations have been conducted in 34 provinces and 347 PMI districts/cities all over Indonesia. Activities includes conducting disinfection spraying 71,333 points (population: 47,440,761); health service: 1,289,011 people reached; health promotion: 4,025,184 people reached; PSS: 20,549 people reached.

PMI provided ambulance services to 460 people that were positive and suspect patients of COVID-19. PMI has 3
main focuses in response to the COVID-19 outbreak: (1) educate and inform communities through health promotion activities; (2) mitigation efforts through spraying disinfectants in public areas; (3) distribute food packages and hygiene kits for vulnerable communities impacted by COVID-19 outbreak. PMI is also involved in Risk Communication and Community Engagement and Accountability as well as ensuring institutional readiness.

**Japan Red Cross Society (JRCS)**
JRCS is developing staff support guide, especially for the Red Cross Hospitals. The NS had been collecting the challenges and successes of each hospital during the last four months (including the period under review), to ensure the hospital staff and JRCS are prepared to respond for the second wave.

The JRCS community volunteer corps are still actively involved in making cloth masks, gowns and collecting donations.

**Kiribati Red Cross Society (KRCs)**
As there had been no reported cases and borders remain closed, the KRCs response has been focused on health and hygiene messaging in coordination with various sectors of the National COVID-19 Task Forces and Committee. Main activities include distribution of Information, Education and Communication (IEC) materials and dissemination of Information and Risk Communication and Community Engagement.

**Republic of Korea National Red Cross (KNRC)**
As of 17 June, the total number of confirmed cases in the Republic of Korea is 12,198 (including 1,371 imported cases), of which 10,774 cases have been discharged from isolation. Newly confirmed cases are 43 in total. Three of the seven KNRC Hospitals, which were designated as National Infectious Disease Hospitals (COVID-19 Special Treatment Hospitals) on 23 February and 6 April, have been released from the designations.

During the operational period of those state-designated hospitals, 374 patients out of the 463 hospitalized have fully recovered from COVID-19 and were discharged. The remaining patients had been transferred to other treatment centres as the hospitals return to their normal medical services. However, six KNRC Hospitals continue their services of COVID-19 testing at their separately established negative-pressure wards. From 28 January to the period under review, 5,209 people have visited the KNRC hospitals to check their symptoms and to get tested for COVID-19.

During this period, KNRC continued with the national blood transfusion services, which includes blood donor recruitment, blood collection, testing, processing, and distribution.

**Lao Red Cross (LRC)**
During the reporting period, LRC trained staff from five branches (Luang Prabang, Xaignabouli, Bokeo, Savannakhet, and Champasak) in epidemic control. As of June 17, 113 participants (50 men, 63 women) from three branches attended the training. The training covered COVID-19 symptoms, prevention, disinfection, social distancing, and basic hygiene interventions. LRC is working to procure hygiene products to support the COVID-19 operation such as hand soaps and hand disinfection gel. The five branches plan to complete the distribution of hand soaps and hand gel by the end of June 2020. The IEC materials LRC is producing are: i) how can we protect and reduce risk related to COVID-19 (2,500 materials); ii) three ways to protect yourself and your family from COVID-19 (3,250 materials); and iii) how to manage stress during the COVID-19 pandemic (3,250 materials). Four LRC branches (Xaignabouli, Bokeo, Savannakhet, and Champasak) should start distributing the IEC materials in July 2020. The Luang Prabang branch finished distributing the IEC materials last April.

LRC has now applied for Volunteer Group Insurance and provided insurance for 400 LRC volunteers. LRC has assigned one focal point who is now working with the IFRC CCST Bangkok office to cover the basics on insurance reimbursement.

**Marshall Islands Red Cross Society (MIRCS)**
There are currently no confirmed cases of COVID-19 in the Republic of the Marshall Islands. The Travel Alert (TA) 14 issued on 4 June extended travel restrictions through to 5 July.

The Republic of the Marshall Islands (RMI) Health Emergency Operations Centre (HEOC) has been activated since 16 July 2019 monitoring the dengue outbreak, measles outbreak and monitoring of COVID-19 operations, implementing prevention, preparedness and response measures to minimize the risk of importation and potential local transmission of the virus.

During the reporting period, MIRCS was requested by NDMO to conduct a condition-level training of trainers (ToT), which included teams from Ebeye and Jaluit. The NS was engaged with the traditional leadership and Majuro Atoll local government to support the pilot of condition level outreach. MIRCS finalized the mental health awareness tool in coordination with the Ministry of Health and Human Services (MoHHS), IOM, and Marshall Islands Epidemiology Prevention Initiative. The mental health awareness tool will be included in the ToT.

MIRCS completed the training and formation of COVID-19 outreach teams; distribution of hygiene supplies to the national jail (with support of ICRC); finalization and preparation of the first aid strategy retreat as part of the holistic preparedness and response plan of action; finalized and produced the MIRCS newsletter on COVID-19 and other issues; participated in the National Disaster Committee (NDC); continues coordination and support to the National Emergency Operations Centre (NEOC) to include cluster engagement; ongoing coordination with the risk communications advisory group; continued COVID-19 awareness and hygiene promotion on Jaluit Atoll; coordination meetings with Marshall Islands Marine Resources Authority (MIMRA) for outer island trainings and awareness (partnership and scheduling); ongoing participation in the World Disaster Report Technical Advisory Group; and ongoing recruitment of new volunteers and members.

**Micronesia Red Cross Society (MCRS)**

As a partner in all the states in the Federal State of Micronesia (FSM), MCRS is supporting the response by filling the gap for the government. MRCs is leading the community outreach activities and supporting by providing hand washing station in all the states. A better communication equipment is needed to support the coordination of COVID 19 response from HQ to the chapters.

MRCs is leading the outreach awareness activities in the 4 states of Federated States of Micronesia (FSM), and also provided hand washing stations at the public areas. MRCs staff and Volunteers are also leading the states in a hand washing campaign by visiting one house after another demonstrating the proper hand washing and distributing hand washing poster materials.

**Mongolia Red Cross Society (MCRS)**

Since the beginning of the COVID-19, MRCs has been actively involved on the preparedness and response activities. "Volunteering in Public Health Emergencies" training was conducted 3 times during this operation period and a total of 180 volunteers have been trained. Training is being organized in collaboration with the Ministry of Health, National Emergency Management Agency, and the Focus on the Family NGO to provide knowledge and skills on epidemic control, WASH and PSS. With support from UNICEF, USAID and WHO, MRCs prepared hygiene kits for 218 child monks who were repatriated from India, and distributed the kits through the Agency for Family, Child and Youth Development.

Procurement of disinfection and sanitation materials was completed and were ready to be distributed to 10 points of entries and 1 quarantine site around the country. As part of the promotion and dissemination of "Law on prevention, fight and mitigation of the socio-economic impact of the Covid-19 pandemic", a short video and brochures were produced on roles and responsibilities of the general public, and being broadcast through billboard which is stationed at Central Square.

**Myanmar Red Cross Society (MCRS)**

Risk Communication, Community Engagement and Accountability (RCCEA): public awareness sessions were conducted among the general public in both urban and rural areas, as well as with people in the community-
quarantine centers throughout the country. Referring to the health education materials printed or adapted from MoHS, IEC materials (posters, stickers, DVDs) for various messages of COVID-19 were distributed and verbal dissemination of messages were also conducted at public places in each location. Pamphlets are no more encouraged to distribute with personal contact in consideration of social distancing. RCCEA was also conducted in the camp setting in Kachin State and Rakhine State MRCS volunteers who are involved in the COVID-19 preparedness and response activities are provided with the trainings for epidemic control and Psychosocial support skills. More trainings are being planned to provide for more active RCVs in the form of online training.

MRCS provided psychosocial support to the communities in need by providing the right information and reducing panic. RCVs also supported communities accessing updates of government guidelines. At the community-based facilities for quarantine (CBFQ), RCVs also conducted psychosocial support sessions such as performances for dancing and singing or taking physical exercise together. In consideration of social distancing, RCVs are encouraged to do PSS via phone calls, messenger and other similar mobile tools.

At the bordering townships of the country, returnees from abroad were screened, their body temperature taken, provided with food, transported to the respective CBFQ and provided with risk reduction information, health promotion education. Moreover, RCVs were engaged in the disinfectant spraying activities which were led by the local health department and local general administration department (GAD).

**Nepal Red Cross Society (NRCS)**

NRCS, in coordination with the IFRC, in-country PNSs in and ICRC, has developed an approach paper which will guide the overall COVID-19 response and preparedness operation in Nepal. The NS has also finalized the district needs assessment for COVID-19 in coordination with IFRC, PNSs and ICRC as well as the report.

NRCS has ensured the continuity of essential services such as blood transfusion, ambulances, and eye hospital/care centres. However, the security of the staff and volunteers providing such services has been the upmost priority. Hence, availability of adequate PPEs and related orientation/trainings to the frontline service providers had been ensured.

The NS has been rolling out trainings for RC staff and volunteers in contract tracing based upon the contact tracing guideline of the Government of Nepal. The trained staff and volunteers work with the case investigation and contact tracing team (CICT) established by the government in rural municipalities. Similarly, as part of community surveillance, RC volunteers support the rural municipality to move 504 migrant returnees to the quarantine site, these persons had reached their homes without screening or residing in quarantine sites as per the guidelines of the government.

NRCS is carefully carrying out risk communication activities without creating panic of the COVID-19 spread within the organization as well as in the community.

A total of 200,995 people has been reached through awareness sessions, orientation sessions, door-to-door visits, messaging and through the RCV's support to the help desk. A total of 1,075 members from the community received psychosocial support from NRCS. 215 people received training on Psychological First Aid (PFA) through the online platform of NRCS through its online learning platform.

NRCS has ensured the provision of WASH services including distributing 390 hygiene kits, 25,983 soaps, and installing 271 handwashing stations, for those people residing in the quarantine sites. Almost 7,000 people have been reached with the hygiene promotion activities.

Risk Communication and Community Engagement and Accountability (RC-CEA): NRCS is providing critical information, responding to concerns and questions to counteract misinformation and promote positive behaviours. Also working on rumour tracking and widely sharing the message regarding stigma. A new concept of Social media volunteering has been introduced on Facebook.
63 RC staff and volunteers have been trained on Protection, Gender and Inclusion (PGI) to ensure the PGI component is part of the COVID-19 response and preparedness, and 209 RCRC staff and volunteers participated in online trainings on PGI.

NRCS is supporting local quarantine and isolation facilities established either by the Federal Government or the local government with relief items such as tarpaulin, tents, blankets, bedsheets, mattresses, and mosquito nets. As of 18 June, NRCS has supported the various quarantine and isolation facilities with 439 tents, 2,089 tarpaulins, 13,598 blankets, 3,341 mosquito nets and 1,704 mattresses. District committee representatives have been frequently visiting the quarantine sites as a member of the district quarantine monitoring committee and providing updates to the NHQ team for further planning.

As an immediate action of the COVID-19 response and preparedness, NRCS has identified 40 quarantine sites, point of entries in 20 districts to implemented response and preparedness activities.

**Pakistan Red Crescent Society (PRCS)**

PRCS continues to run the 10-bed ICU with nine ventilators and the 120-bed isolation centre at the PRCS Corona Care Hospital in Rawalpindi. None of the admitted cases were in critical condition while 100 patients were discharged during the reporting period. A total of 7,346 tests have been performed to date by the NS at different public places, including railway stations in Peshawar, while more than 100,000 tests have been performed to date by the Baluchistan branch at the Pak-Afghan Chaman border.

PRCS NHQ dispatched 49,160 N-95 masks to all PHQs for further distribution to government-designated health facilities for COVID-19 across country (source: NDMA). Distribution of the first consignment of PPEs is almost complete, while the second consignment is ready to be dispatched. A total of 3,500 HHs have been provided with dry ration by PRCS.

PRCS Virtual Call Centre at NHQ continues to be operational with the support of Ufone through toll-free helpline for guidance to public regarding COVID-19. A team of doctors have been working on the PRCS “COVID-19 AAGAHI Call Centre”, operational 24 hours a day every day, to guide and advice people on preventing the spread of the virus. Based at the NHQ and all seven PHQs, the PRCS Corona Crisis Management Unit (CCMU) continues to provide services 24/7. PRCS KP have referred a cumulative total of 1,388 suspected cases to government facilities, and the NS medical teams supported the tracing of 137 suspected cases to date.

A total of 6,634 different hygiene items have been distributed to the quarantine centres by PRCS, and 915 hygiene kits have been distributed to different HHs in Khyber Pakhtunkhwa (KP). To date, PRCS HQ have distributed 2,383 pieces of soap and 1,215 bottles of hand sanitizers amongst communities in different districts of KP. Community awareness campaigns - which included awareness banners, posters, IEC brochures, and social media updates - continued during the period under review in different cities across country. These campaigns were conducted by the PRCS first aid responders (FAR) teams.

**Palau Red Cross Society (PRCS)**

During the period under review, PRCS’s visibility and coverage at both national and community levels were increased, with the number of youth volunteers involved in the COVID-19 National Society Response increasing.

PRCS continues to work in partnership with MOH for the printing and dissemination of IEC materials. MOH continues to carry out testing for frontline workers and other essential workers.

A total of 12 blood donors have been recruited. People from the Bangladesh Association, Australian Embassy, the Filipino Community in Palau (T.F.C.P), Western Caroline Trading Company (WCTC), and PRCS COVID-19 EOC HQ volunteers have donated 12 units of blood.

Procurement and inventory of PPE and medical consumables and distribution to staff and volunteers for COVID-19 response continued during this period.
Papua New Guinea Red Cross (PNGRC)

During the period under review, PNGRC had been actively involved with helping staff and volunteers in risk communication and community engagement. The NS has been disseminating essential messages about the basics of containing the spread of the virus and health-related precautions, social distancing, usage of face masks and hand sanitizers, etc, through handouts, and banners. PNGRC staff and volunteers have been actively supported by the national headquarters and branches executive councils.

Philippines Red Cross (PRC)

PRC's "Helpline (1158)" has been established to take calls related to COVID-19. During the reporting period, the total number of feedback or calls received through the Helpline at the headquarters level was 13,802, while 3,396 calls were received by the local chapters.

PRC has three operational molecular laboratories in Luzon: two in Mandaluyong City and one in the City of Manila. There are two molecular laboratories in Central Luzon (Clark and Subic) which passed its proficiency testing in line with the Department of Health's (DoH) standard operating procedures. PRC has done a maximum of 16,000 tests per day. Batangas, Bacolod, Cebu, Zamboanga City and Misamis Oriental are the areas with ongoing molecular laboratory construction. With the three operating molecular laboratories now operational, PRC has tested 123,917 specimens which comprise 26% of the national tests output in the Philippines.

PRC ambulances are continuously mobilized to support DOH with the transportation of suspected and confirmed with COVID-19 individuals. PRC has 6 units of negative pressure ambulances, and medical isolation and transportation units to appropriately support COVID-19 infected patients. PPE for ambulance crews and training of ambulance crew, as well as ambulance running costs (fuel and maintenance) are being covered by partners. A total of 535 suspected and confirmed COVID-19 cases were catered. PRC has set up 60 medical field tents, which will serve as a staging, and isolation wards.

PRC, together with IFRC and UNICEF, started the distribution of hygiene kits in areas with more confirmed cases of COVID-19 in Quezon City. The distribution was accompanied by the hygiene promotion sessions and disaster risk reduction allowing people to understand the infection control measures and how to evacuate during times of emergencies. To date, 405,579 people were reached with hygiene awareness activities. Aside from this, portable toilets were installed in Barangay Addition Hills as part of the extended interventions for people affected by the fire incident that left thousands of people homeless during this pandemic.

The pilot of the cash assistance, together with IFRC interventions, is being conducted in Mandaluyong City and San Juan City, which will include an assessment and feasibility study, and risk management for cash assistance. Food distribution is continuously being provided not only with frontline workers but with families that are heavily affected by the economic impact brought by COVID-19. PRC has extended its assistance to locally stranded...
individuals (LSI) in Ninoy Aquino International Airport (NAIA) by providing food and hygiene kits. These people are trapped because of the COVID-19 lockdown. These LSIs are from the province who have booked flights to depart Manila but due to the lockdown, flights were cancelled. The PRC Chapters continuously implement community-based psychosocial support activities to help in coping with the stress brought by COVID-19.

**Samoa Red Cross Society (SRCS)**

In compliance with Samoa’s SOE orders to ban large gatherings, SRCS allocated several teams of two people each to work with the first 95 communities on the main island of Upolu to conduct household assessments; to identify inaccessibility vulnerabilities to WASH; food security and nutrition; and shelter and settlement, including communications and health. SPCS stressed the importance of basic hygiene practice (handwashing and physical distancing) through hygiene promotion and facilitated establishments of isolation space for home-based care for likely patients having flu-like symptoms. The NS also conducted sessions on how and when to contact medical attention on MoH toll-free and hotline numbers.

**Singapore Red Cross Society (SRCS)**

During the period under review, SRCS completed home visits and 740 tele-surveys for customized care packages. Volunteer befrienders have increased tele-befriending to weekly instead of fortnightly, as well procuring and delivering essential items such as hearing aid batteries and insulin injection lancets. As part of volunteer care packages, 2,000 packets of masks and hand sanitizers were prepared. Of this, volunteers delivered 1,200 care packages.

Home Monitoring and Eldercare (HoME+) services such as installation and volunteer responders’ activation were suspended during the lockdown but have now resumed, on the condition that the client/caregiver are agreeable to SRCS’s visits and due diligence checks are done prior to the visits.

SRCS contributed 20 psychological first aid (PFA) trained volunteers for the National CARE Hotline. SRC volunteers have covered 304 volunteering hours as Duty Care Officers, handling calls to provide PFA and emotional support to the community during the COVID-19 crisis.

Hygiene kits, 2,100 thermometers, 2,000 blankets, 2,850 packets of dates, 300,000 masks, and 47 bottles of 5L hand sanitisers were distributed to over 20,000 migrant workers in over 180 dormitories. In addition, SGD 10,000 (approximately CHF 6,812) worth of supermarket vouchers were provided to injured migrant workers and another 20,000 masks were distributed to 2,000 workers in newly established dorms. SRCS also provided temporary shelter for two migrant workers during the lockdown.

Due to the lockdown, blood collection had dipped to approximately 55% (Mar) and 77% (Apr) of the collection levels from previous years. Nonetheless, total blood collection for Jan-May remains at 86% compared to the total collection for the same period in previous years. This has enabled SRCS to continue ensuring an adequate blood supply to hospitals during this period. Coming out of the lockdown, Community Centres will be resuming the hosting of blood donation drives, subject to their availability.

In its role of operationalizing the Pandemic Preparedness Centre for Excellence for South East Asia, SRCS has been organizing weekly sharing sessions online for volunteers, where National Societies around the region are invited to share their experience, activities, and lessons learnt during the COVID-19 response. The centre has also procured and delivered PPEs including 1,110,000 surgical masks, 60,000 N95, 10,500 coveralls, 10,500 face shields, 10,000 isolation gowns to a total of 19 countries from Southeast Asia, Northeast Asia, and South Asia to support the COVID-19 response.

**Solomon Islands Red Cross Society (SIRCS)**

SIRCS continue to provide its auxiliary role to the national emergency sectors. The NS had activated its EOC with the disaster and health teams manning the centre. Coordination with the National and Provincial Emergency Operation Centre continues to be maintained. A total of 31 volunteers inducted and trained on ECV were involved with SIRCS staff in COVID-19 planning and supporting the health sector (national and provincial) and Honiara City
Council in conducting house-to-house awareness on the virus, hygiene promotion, and tracking survey. Although house-to-house awareness had ended on 20 May in Honiara, other branches are continuing with this activity until completion.

During the period under review, the SIRCS branches (Malaita, Western, Malaita, and Temotu) reached a total of 28,544 people and 638 households in Guadalcanal province and in the emergency zone (Honiara). Hygiene kits have been distributed to volunteers as front liners and repacked to be sent to branches. Distribution of hygiene kits were made to Rove Prison in the emergency zone. This also included communication for prisoners.

The SIRCS business continuity plan, the disaster management SOP, and communication tree continue to be updated. Three SIRCS staff and two volunteers are currently engaged at the IFQs.

**Sri Lanka Red Cross Society (SLRCS)**

SLRCS has been responding to the pandemic from the onset and has gradually improved the level of intervention. During the period under review, SLRCS has been implementing Social behavioural change communication activities, Transmission Risk Reduction (TRR) in police stations, court complexes and other public places, TRR for School Safety Programme. WASH activities, which includes hardware component (wash points) and software component (behavioural focused) programmes. Relief distribution and the provision of PPE to frontline workers and implementing Staff and volunteer care (PSS and volunteer insurance), including and Volunteer capacity building activities. SLRCS through its auxiliary role have supporting the governments health system, through the provision of blood donations and the transportation hospital staff.

Monsoon preparedness in a pandemic situation continues to be a focus of the Nation Society.

**Thai Red Cross Society (TRCS)**

On 8 June, the Acting Head of Nurse of the Relief and Community Health Bureau (RCHB) and her team, the Head of General Administration Division of the Thai Red Cross Chapter Administration Office, the Executive Vice President of the Thai Red Cross, the Vice Governor of Nakhon Ratchasima province, the President of Nakhon Ratchasima Provincial Red Cross Chapter, and relevant agencies met to prepare the establishment of the H.R.H. Princess Maha Chakri Sirindhorn Royal Kitchen. The Royal Kitchen was active as of 25 June and will run through to 4 July. The kitchen will be used to feed people in Nakhon Ratchasima province affected by COVID-19.

On 9 June, the Deputy Director of Relief Bureau met with the Head of Community Relations Unit of the private phone company Advance Info Service (AIS) and the team to discuss the possibility for the company to support free phone sim cards with internet for foreign public health volunteers (AST). This initiative allows foreign public health volunteers to use the TRCS’ disaster warning application, named “Phon Phai”, effectively.

Also, on 9 June, TRCS led by the Thung Song District branch provided 100 relief kits for bedridden patients, the elderly, and people in need at Na Pho sub-district, Thung Song district, Nakhon Si Thammarat province. The team also distributed cloth masks and brochures informing on COVID-19 at Khao Khaw Industrial Estate, Khao Khaw sub-district, Thung Song district Nakhon Si Thammarat province. Hygiene items for the public awareness and public education (PAPE) intervention in schools and communities have been delivered to three Red Cross Stations.
located in Chiang Mai, Pang Nga and Ubon Ratchathani. Distribution of the hygiene items should start next month once TRCS receives the cloth bags that will contain the hygiene items. Since 8 June, TRCS received 260,000 cloth masks that will be distributed to migrant populations.

**Tonga Red Cross Society (TRCS)**

Government Ministries (including the MoH), TRCS, and Cluster representatives met to collaborate in the identification of the most-at-risk to Covid-19, barriers to healthy behaviours, and gathered information based on contextual cultural factors such as risky behaviours, practices of communities, and the preferred and trusted channel of engagement that could possibly help or hinder an effective response to COVID-19.

TRCS worked on risk mapping and response planning, which were put in place for each related ministry, clusters and stakeholders, including TRCS itself.

**Tuvalu Red Cross (TRC)**

TRC continues to work in partnership with the Department of Public Health in providing community awareness outreach programmes, training of volunteers in COVID-19 preparedness and prevention, and working with passengers under a compulsory 14-day quarantine.

**Vanuatu Red Cross Society (VRCS)**

Although there have been no confirmed cases in Vanuatu, the country has closed its borders and have introduced internal travel restrictions.

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

Training courses on Cash beneficiary selection in Khanh Hoa and Binh Thuan have been undertaken on 11 June and 13 June, respectively. The training covered selection criteria, amount of money needed to support households, implementation process, and templates. A total of 66 people attended the training courses and participants included the chapters project management board members, technical supporting groups, local authorities, and village heads of targeted communes. VNRC headquarters worked with the provincial project management boards to select a suitable Financial Service Providers (FSP) for the distribution of cash grants. For Khanh Hoa, Sacombank was identified as the preferred FSP and Vietnam Post was selected as the FSP for Binh Thuan. Other provinces are in the process of selecting their FSP to support the distribution of cash grants in their area.

VNRC continues to cooperate with the National Centre for Information Communication and Education and MoH to co-facilitate the Epidemic Control for Volunteers (ECV) Training of Trainers (ToT) course. One ToT course on ECV was conducted at the Quang Ninh Chapters. Twenty-five participants (Quang Ninh:15, Ninh Binh:10) completed the training. Participants learned about COVID-19, prevention, communication skills and participatory teaching method to train volunteers in epidemic control. Between June 3 and 18, three ECV training courses were conducted in Khanh Hoa with 108 volunteers attending. VNRC continues to update and design infographics on a weekly basis. The team posted 50 news stories on COVID-19 on the VNRC website and 80 news reports and pictures on Covid-19 were posted on the VNRC Facebook page. VNRC has also developed a script for a TV talk show to promote good practices which has also now been completed. VNRC continues to update the list of donors contributing to the operation, including organizations and individuals, on their website.
Health
Health is the first and foremost in the response in Africa region. The secondary impact on livelihoods and social-economic impact of the pandemic are far-reaching especially in Africa where the continent is facing multiple disasters. National Societies have been also responding to these secondary impact as well as undertaking activities to ensure that there is a holistic response, National Societies are strengthened to continue responding to current and future disasters and that National Societies continue to provide duty of care to volunteers, staff and communities we are serving.

The regional office was engaged in the following activities.
- Organised an online ToT for the combined ECV/RCCE training package for health and CEA personnel in
Africa. 28 health and CEA staff across the region will be able to deliver the ECV/RCCE training package content online as needed in areas where traditional trainings are unable to take place. The interactive Zoom ToT included participants from IFRC, PNS and NS working in the region.

- A Webinar on Psychosocial Support at the time of COVID-19: A Pan Africa Dialogue was held on 10 June 2020. The webinar was opened by Annette Msabeni, Deputy Secretary General, Kenya Red Cross, followed by presentations from Kenyan NS, Sudan NS and South Sudan NS. Special inputs were provided from the IFRC Reference Centre for Psychosocial Support. The Webinar was attended by 41 people and there was a great engagement of participants through reflections, raising questions and sharing resources.

- Completed technical review of NS funding proposals on the health and wash components for Round 2 allocation under the Appeal.

- Participation the UN Technical Working Group for lab, PoE and Surveillance and Africa level calls with WHO. IFRC presented the results of community feedback in the meeting and urged WHO country teams to follow up to correct information on the rumours and provide correct information.

- Organised a call with Africa Centre of Disease Control to discuss the collaboration between Africa CDC and IFRC. It was agreed that an MoU to be signed between IFRC and Africa CDC for strategic partnership on COVID-19 and other health areas.

**Risk Communication and Community Engagement**

The CEA team continues to be engaged in discussions and activities to strengthen RCCE for COVID-19. Engagements undertaken in the last week are:

**Community feedback collection**

- Support was provided to the Movement's Africa Together virtual music concert to run surveys and debates, based on community feedback collected across Africa, and respond to questions or misinformation shared during the concert by viewers.

- A new #AskDrBen video was shared on IFRC Africa Twitter page and through WhatsApp providing visual guidance on how to use masks safely [https://twitter.com/intent/retweet?tweet_id=1268133909646237698](https://twitter.com/intent/retweet?tweet_id=1268133909646237698)

**Internal and inter-agency coordination**

- IFRC continues to co-lead the East and Southern Africa interagency RCCE technical working group and community feedback sub-working groups for East and Southern and West and Central Africa. A kick-off meeting was held with the Bill and Melinda Gates Foundation to discuss the new project to scale up this interagency coordination and provide a collective service.

**Capacity enhancement**

- An online epidemic control for volunteers (ECV) and risk communication and community engagement (RCCE) training of trainers was completed by 26 participants from IFRC, National Societies and partner National Societies across Africa. The training took participants through the 1-day ECV and 1-day RCCE training pack for volunteers for COVID-19, as well as building skills in how to deliver online trainings. The combined ECV RCCE training will now be rolled out at cluster and country-level and the face-to-face and online training packs are being updated and finalised based on learnings from the TOT. Delivery of the training was supported by the British Red Cross CEA Advisor, who provided help to deliver and translate the training to be online.

**Communications**

- On 4 and 5 June, the Movement online concert – Africa Together – was broadcast on Facebook in English and French. In total, the concert videos reached 1 million views (English: 358,000; French: 689,000). The IFRC portion of reach was approx. 245,000 users. The event was also reported on several African broadcast news channels including RFI, BBC News Afrique, Newzroom Afrika (ICRC speaking as
However, public sensitization on COVID-19 operations manager for Africa, had an interview with Euronews interview regarding the pandemic in Africa. "Mistrust will kill us that's why we have to defeat it"

- Interview with Dr Aissa Fall, IFRC Regional Health Coordinator for West and Central Africa, on (Deutsche Welle) - Covid-19 progresses in Africa according to WHO.
- Several National Societies media gained coverage on their activities in their own domestic markets.

### National Society Updates

#### Red Cross Society of Benin

The NS supported actions at the community level through awareness-raising at the Floriane school (Abobo) and ESPOIR association in Clouetcha (Abobo). They also raised awareness in schools, markets, churches and mosques to comply with COVID-19 prevention measures through group chats. The NS also supported maintenance of handwashing devices in corridors and markets. The NS continued distribution to the most vulnerable households in precarious neighbourhoods (handwashing station 20 litre (bucket + tap), 15 litre plastic bucket, 350 ml liquid soap / for 1830 households) (Yopougon). A total of 20 awareness-raising activities were carried out reaching 2,276. A total of 63 volunteers participated in awareness-raising activities.

#### The Comoros Red Crescent

In terms of health and psychosocial support the NS supported the following activities: Provision of 600 handwashing station in 60 villages, disinfection of 4,500 houses located near the main highways and public sites, disinfection of 17 markets, 195 mosques, 150 alleys and 5 public enterprises. Furthermore, disinfection of 3 treatment centres of the Covid-19 three a day and screening of volunteers involved in the disinfection of the treatment centres. In terms of Risk Communication and Community Engagement, a total of 3 TV broadcasts were organised to promote preventive measures were done. Epidemic information was shared through the National Society’s Facebook page. Meetings with WHO and IFRC were held to join efforts in COVID-19 response.

#### Red Cross Society of Côte d’Ivoire

The NS supported the containment operation at the INJS-coordinating meeting, home and registration of new contacts, food distribution, restoration of family links. A total of 89 outreach activities were carried out reaching at least 9,500 people through 235 volunteers. The activities done at the community level included: awareness caravan in Cocody on COVID-19 through the route of Town Hall-Blockauss- Allocodrome-2Plateaux-Blue Marine-Sococé-Angré château-Angré 7th tranche-Riviéra bonoumin-Riviéra2- Anono-Riviéra golf-Mairie. The NS also raised awareness about COVID-19 in markets, main roads, bus stations, kiosks, shops, sewing workshop/coiffure, in towns and villages (Tiassalé/Zagné/Zuenoula/Adzopé).

#### Ghana Red Cross Society

The NS has concluded the first-round allocation activities. However, public sensitization on COVID-19 through radio/TV discussion and mass sensitization using vans with mounted speakers and megaphones at lorry stations and markets are still ongoing in all the regions. The NS last week broadcasted SMS to 700 persons through MTN, Vodafone and Airtel-Tigo.

#### Red Cross of Equatorial Guinea

Continuation of training sessions for PSS focal points to provide psychosocial support to volunteers involved in the response to COVID-19, frontline health staff and bereaved communities. The Guinean Red Cross has initiated
the training process for its 38 PSS focal points. During the week 18 focal points were trained in Mamou for those in Middle Guinea and Kindia for those in Lower Guinea. Sanitation activities were carried out in 22 public and residential sites to limit and stop the spread of COVID-19 in the community. In total 248 places have been disinfected and 578 people sensitized on COVID-19 prevention.

As part of the response to COVID-19, the NS volunteers are conducting Risk Communication and Community Engagement ranging from social mobilization in gathering places to visits. This campaign is focused in 11 high-risk areas, namely the five Red Cross communal committees of Conakry (Ratoma, Matoto, Dixinn, Matam, Kaloum) the epicentre of the epidemic and the prefectures of Mamou, Faranah, Labé, Siguiri, Boké and Kindia. These actions are carried out by 380 volunteers and are aimed at promoting the application of barrier measures by vulnerable communities. A total of 998,920 people were reached disaggregated as follows: (358,870 women, 295,744 men, 339,372 children and 4,934 disabled people).

**Liberian Red Cross Society**

The NS continued engagement with chapter volunteers, tracking of volunteer weekly report and attending stakeholders’ meetings. It is worth noting that the number of volunteers has increased from 30 to 75 (40 male, 35 female) in Margibi County. This increase is due to continuous commitment and passion on the part of volunteers to contribute to the LNRCS efforts towards humanitarian service delivery to the vulnerable people and communities in Liberia. Out of the 25 locations where handwash facilities were mounted, volunteers assigned were tasked to at least do 3 mass awareness campaigns per week to nearby places where people congregate. The NS provided training for 2 volunteers in PSS after providing TOT training for 5 staff and volunteers in PSS. A PSS call centre is being set up to provide remote PSS service to families faced with intense COVID-19 related stress as the two volunteers were trained to manage the call centre which is being established.

**Malagasy Red Cross Society**

The NS supported the installation of 354 handwashing points in the most affected districts, particularly at markets and schools. They also supported disinfection activities on 12 high risky sites in Antananarivo and Antalaha such as markets, schools, banks, public toilets, police station and public offices. The NS provided psychological support to 3,794 families through home visits. There are On-going activities in Analamanga, Atsinanana, Antalaha, Vakinankaratra, Analanjirofo on community sensitization through home visits (7,797 families reached), outreach program (12 pathways), mass sensitization (9,105 people reached), leaflets, posters, audio spot broadcasting, banners, and video. The Malagasy RC hotline number is operational, and it received more than 30 calls related to cases of COVID-19 which were registered and shared with the Ministry of Health. The NS supported the training of more than 40 volunteers on response mechanisms to COVID-19 in Fenerive-Est, Fianarantsoa and Toliara. Community sensitizations were done through their Facebook page [http://facebook.com/croixrougemalagasy/](http://facebook.com/croixrougemalagasy/) through #stay at home messages.

**Mali Red Cross**

A total of 22,996 people reached by the volunteers through RCCE awareness in the cities of Bamako, Kayes, Koulikoro and Mopti. In Bamako District, continuation of community sensitization on the barrier measures to fight against the spread of the coronavirus (Engagement of community leaders: village chiefs, imams, youth and women leaders) in the six communes of the District through door to door and public places. The activity carried out by Mali RC Branch were supported by IFRC and the French Red Cross. In Kayes Region, continued Community awareness-raising on barrier measures to combat the spread of the coronavirus (community leaders: village chiefs, imams, youth, and women leaders) through door to door and community group discussions. Activity carried out by Mali RC Branch supported by IFRC.
and the Netherland Red Cross. In Koulikoro Region, continued community awareness-raising on barrier measures to combat the spread of the coronavirus (Engagement of community leaders, Head of Villages, imams, youth and women leaders) Activity carried out by Mali Red Cross Branch Supported by Canadian Red Cross and IFRC.

Mauritanian Red Crescent
As part of the preventive measures to combat COVID-19, the NS continues to raise awareness in the three wilayas of Nouakchott. In this context, an awareness day for the distribution of leaflets and masks was organised in all TOTAL service stations in Nouakchott. During these days, volunteers of the NS distributed 5,000 leaflets in Arabic and French and 4,000 masks and 8 litres of gels to the users of these petrol stations. The NS continues to support coronavirus through several activities: Distance awareness campaigns in Nouakchott, Nouadhibou, Sélibabi, Rosso and Boghé. Installation of 5 big Posters at road junctions in the capital, Nouakchott and Nouadhibou carrying key messages; Production of two television and radio spots in Arabic and French. -They have also supported in positioning of 11 handwashing devices in public places.

Seychelles Red Cross Society
The NS supported delivery of “Kits for Kids” and school stationary for kids, indeed for those from foster homes. Additionally, 4 sessions of psychological support were done to different groups and individuals as well. They are also conducting an assessment for families who have lost their jobs and providing necessary items. The NS shares epidemic information through the National Society's Facebook page. Finally, 2 sensitization sessions were done with police officers to promote against public violence.

Sierra Leone Red Cross Society
A total of 225 community-based volunteers carried out community engagement activities on COVID-19 in the different branches and were able to reach 12,850 (7,473 F/5, 377 M) people on social mobilization regarding the proper use of face mask and social distancing. The volunteers in Kenema branch visited 21 quarantined centres with a total of 294 (176 M/118 F) people. They counselled the affected people on positive living and acceptance of their current situation as well as sensitized them on sustained and appropriate use of face mask. The volunteers of Kambia branch engaged a total of 123 (all male) commercial motorbike riders (okada riders) on stay-safe measures (proper use of face masks, social distancing, and handwashing). A total of 20 (12 M/8 F) journalists were trained on communication in emergencies and effective media engagement practices in line with Red Cross principles and mandates. This activity was coordinated by the Communications Unit of SLRCS and the training was conducted in Makeni and Bo cities, respectively. The DM Coordinator, Hotline Officer, CP3 Manager, Communications and Youth Officers participated in radio discussions and TV programmes. The discussions were centred around adherence to COVID-19 guidelines such as proper use of face mask, proper hand washing and social distancing. The discussions were held at the Sierra Leone Broadcasting Corporation (SLBC). It was a phone-in programs with many callers from the public wanting to know when the COVID-19 pandemic will come to an end. The NS continues to engage Freetown City Council for the establishment of Community Care Centre in Waterloo. The centre will serve as a referral facility for people that are confirmed positive, asymptotic and those with mild symptoms.

Togolese Red Cross
The NS carried out radio shows and jingles with the focal point journalist and volunteers. The also carried out sensitizations in the markets and communities. They also did follow-ups on proposals submitted to local donors and UAF-AFRICA for donation of handwashing systems, contact tracing and awareness campaigns. Additionally, they submitted a funding proposal to the Islamic Bank of Development with the MOH. The National Society has been participating in the weekly meetings of the MoH Committee to ensure all the RC activities are aligned with the government activities and necessary support is provided as required.
The Americas continues to be the region with the highest number of confirmed cases in all 54 countries and territories. The United States, Brazil, Peru and Chile are hot spots for confirmed COVID-19 cases and contributing to 87% of the regional cases. Brazil passed one million confirmed cases - the second highest in the world after the United States. Other countries in the region, including Mexico, Chile and Peru, are also battling major outbreaks.

**IFRC Americas actions**

The IFRC Americas Regional Office (ARO) continues to provide guidance and coordination support to National Societies through its country-level offices, with regular communications and coordination at all levels to support to regional member national societies and provide technical assistance in areas of health, WASH, risk communication and community engagement, livelihoods and household economic security, shelter, migration and displacement, protection, logistics, and resource development. Operational Budget allocation with current funding for NS is in progress. So far, 26 NS have received the funds.

Rapid Response Members have been deployed (to Panama or remotely) to support regional actions:

- Pandemic Preparedness
- Risk Communication
- Community Engagement and Accountability (CEA)
- Three rapid response Data visualization specialists
- Planning, Monitoring, Evaluation, and Reporting (PMER)
- Risk Management

The IM team developed an Americas Region: **COVID-19 Outbreak - Red Cross Movement Mapping and Funding Dashboard**. The information is being updated continuously by Red Cross partners.

An assessment team was deployed early June to support the analysis of the evolution of the response and to identify the regional impacts of COVID-19 that will enable ARO to define multisectoral mid- and long-term actions that address the most critical humanitarian needs with a recovery perspective. The team is composed of the following specializations: Emergency Need Assessment and Planning coordination, Public Health in Emergency. Livelihoods and basic needs, Recovery, National Society Development, Information Management, Information Management Analysis, Planning, Monitoring, Evaluation, and Reporting (PMER). The team is working on the final assessment report, and its analysis will be included as part of the Regional Plan Revision.
North America

<table>
<thead>
<tr>
<th>Government Actions</th>
<th>Canada</th>
<th>Mexico</th>
<th>United States</th>
</tr>
</thead>
<tbody>
<tr>
<td>Declared Alert</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>State of Emergency in Affected Provinces</td>
<td>●</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emergencia Sanitaria</td>
<td></td>
<td>●</td>
<td></td>
</tr>
<tr>
<td>State of Emergency/Public Health Emergency</td>
<td>●</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Preventive quarantine for nationals and foreigners</td>
<td>●</td>
<td>●</td>
<td>●</td>
</tr>
<tr>
<td>Curfew / isolation required</td>
<td>●</td>
<td>●</td>
<td>●</td>
</tr>
<tr>
<td>School Suspension</td>
<td>●</td>
<td>●</td>
<td>●</td>
</tr>
<tr>
<td>Restriction to public events and meetings</td>
<td>●</td>
<td>●</td>
<td>●</td>
</tr>
<tr>
<td>Flight restrictions</td>
<td>●</td>
<td>●</td>
<td>●</td>
</tr>
<tr>
<td>Restrictions on access to the country</td>
<td>●</td>
<td>●</td>
<td>●</td>
</tr>
<tr>
<td>Driving/Circulation restrictions</td>
<td>●</td>
<td>●</td>
<td>●</td>
</tr>
</tbody>
</table>

**COUNTRY CONTEXT**

**RELAXATION OF MEASURES**

- Face-to-face work
- Non-essential trade
- Schools and educational centers
- Events and public spaces
- Flights and access to the country

**REFERENCES:**
- ● Yes / Yes there are restrictions
- ○ Partial Restrictions
- ★ No / No restrictions

**National Societies response**

**American Red Cross (AmCross)**

American Red Cross COVID-19 missions focused on supporting community efforts to help those impacted from coast to coast. In addition to various support missions that are unique from state to state, and over 70 feeding missions across the United States, a Virtual Family Assistance Center has been made available to assist anyone who has lost a loved one.

Since February, when the coronavirus outbreak escalated in the United States, Red Cross workers have helped more than 53,000 people recover from more than 13,000 home fires nationwide. As AmCross adapted its physical response due to COVID-19, it has provided hotel accommodations rather than opening emergency shelters. Since April 16, Amcross provided more than 29,000 overnight stays in emergency hotel lodging, rather than opening traditional shelters for tornadoes, large home fires affecting multiple families and other crises.

The NS is also working with public health officials on its COVID-19 plans to respond as needed to the ongoing threat of spring flooding, severe storms, wildfires, and the above-normal hurricane season forecast for this year.

To help ensure vulnerable people do not go hungry during this public health crisis, the Red Cross is working with local community partners to support feeding efforts where there are government-ordered quarantines or mandatory stay at home orders.
AmCross volunteers are making face coverings for veteran and military hospitals across the world.

The NS is working closely with the Food and Drug Administration (FDA) and blood industry partners to collect and distribute convalescent plasma. People who have fully recovered from COVID-19 have antibodies in their plasma that can attack the virus. This convalescent plasma is being evaluated as a treatment for patients with serious or immediately life-threatening COVID-19 infections, or those judged by a healthcare provider to be at high risk of progression to severe or life-threatening disease.

Essential First Aid and CPR courses are being held, where permitted, with social distancing approaches and follow public health guidance.

AmCross continues with:

- Setting up a health screening process for everyone coming into shelter - Creating an isolation care area.
- Providing masks, tissues, and plastic bags throughout shelters.
- Following social distancing practices, as much as possible, by staggering mealtimes and adding extra spacing between cots, chairs, tables, etc.
- Providing additional handwashing stations, in addition to normal restroom facilities.
- Increasing wellness checks to identify potential illness, including self-monitoring and checking temperatures of both shelter residents and staff.
- Enhancing both cleaning and disinfecting practices throughout the shelter. We are working closely with public health officials to ensure the safety of local communities and our workforce, while still providing the help and hope they need should disaster strike.

The American Red Cross has also helped evacuated citizens that were placed in quarantine after returning to the United States. AmCross teams provided relief items such as blankets, comfort kits, and children’s toys to partners managing quarantine facilities.

**Canadian Red Cross (CRC)**

**New! Support to Quarantined Travelers:** CRC is providing care and comfort services at designated sites to travellers who, upon arrival, declare sign/symptoms of COVID-19 and are not within a 12-hour drive from their home location OR do not have the means to transport themselves via private transportation to their final destination. Travelers will remain ‘quarantined’ in hotels until their isolation period is completed. CRC is also 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. To date, over 1,600 returning travellers have been supported through care and comfort services over their quarantine time. 445,000 individuals have registered for relief assistance and over 56,000 emergency response stock items and over 59,000 pieces of Personal Protective Equipment have been deployed to support needs in provinces, municipalities, and communities.

**Support to Isolated Individuals & Families:** CRC has provided immediate relief services including information, referral, support to Safety & Well-Being, financial assistance by utilizing our registration systems, call centre capacity, volunteers, and Mental Health and Psychosocial Support specialized teams. CRC is also enabling municipalities and communities to support those in isolation through the provision of emergency response stock, including cots, blankets, and personal items.
**New! Support to Indigenous Populations:** CRC is working with First Nations, Métis, and Inuit communities to strengthen their health preparedness and response capacity. This includes securing and shipping food, personal items, medical supplies, and the provision of emergency response stock, including cots and blankets. CRC is also supporting Indigenous communities by activating an Indigenous Help Desk aimed at providing information and referrals on Planning & Preparedness for Health Emergencies, Health Guidance Information including Infection Prevention & Control, as well as guidance on Community Wellness and Protection. As of June 19th, the Canadian Red Cross has supported 140 Indigenous Communities with health and emergency guidance.

**New! Support to Seniors:** CRC actively supports thousands of Canadians across the country by connecting vulnerable individuals and older adults to a wide range of community support services. These services provide needed resources and daily supports to older adults, vulnerable people, and their caregivers. Services include meal delivery, wellness checks, emergency care connection, and friendly calls. CRC has completed over 12,000 friendly calls, 3,600 door to door wellness checks and has provided over 8,600 food deliveries to vulnerable populations.

**New! Health Emergency Response Unit (ERU):** The Emergency Health Unit (ERU) is a field hospital that has 24/7 year-round deployment capability. It is a standardized modular package of trained personnel and equipment deployed to emergencies on short notice. It provides an essential, primary, and standardized service platform, entirely self-sufficient, which can be deployed for up to four months. The ERU offers pre-trained groups of technical specialists, standardized pre-packed equipment. CRC is providing components of their emergency hospital and assisting in the set-up of augmented health infrastructure and testing stations in different locations in the country. To date CRC has assisted 57 Long Term Care Facilities and provided training to over 1,400 personnel in 153 courses. In addition to this, a team of over 45 Epidemic Prevention and Control specialists have been trained to support the Quebec Support to Long Term Care operation.

**Support to Long Term Care Facilities:** CRC is responding to the growing gap in the collective ability to respond to the needs of seniors and vulnerable individuals in residential & long-term care homes. Services include recruitment and training of new staff, equipment loan, as well as providing teams of experts to assist those facilities in containing the spread of COVID-19 through a series of concrete actions including a site assessment, site-specific recommendations to layout and protocols, coaching and monitoring.

**Epidemic Prevention & Control:** CRC is stepping up its support to vulnerable populations as an auxiliary to public authorities. As part of this effort and following an analysis of the most critical gaps, the CRC has offered to assist long-term care homes through several services including recruitment and training of new staff as well as providing teams of experts to assist those facilities in containing the spread of COVID-19 through a series of concrete actions including a site assessment, site-specific recommendations to layout and protocols, coaching and monitoring.

**Support to Community Partners:** CRC provides support to community partners through several avenues including administration of grants, training on prevention of disease transmission and use of personal protective equipment as well as courses in psychological first aid.

**New! Psychosocial Support/Safety & Well-Being:** Psychosocial Support addresses the psychosocial needs of those affected and contributes to individual and community capacity and resiliency in the areas of mental health and psychosocial support (MHPSS). Safety and
Wellbeing (SWB) aims to support those directly and indirectly affected by COVID-19 through enhancing resilience and coping, decreasing isolation, by providing connections and referrals, and direct emotional/psychosocial support, including considerations for gender, diversity, and inclusion. Over 4,800 people have been assisted by the Safety & Well-Being teams.

**International Support:** Support is provided worldwide in bilateral projects to address preparedness and response to COVID-19. So far, it is participating in COVID-19 efforts in 17 countries. Discussions are underway with donors to allocate funds from preparedness and migration interventions to support National Societies' actions proposed in their contingency plans.

The Canadian Red Cross continues to support the Rapid Response requests that continue to be launched and has supported the deployment of personnel across Americas, Africa and MENA region.

**Mexican Red Cross (MRC)**

The National Society has set up a Clinical Assessment Centre (triage) to support suspected coronavirus patients and refer them to health hospitals for specialized care.

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

**Central America**

IFRC in close communication and coordination with Central America National Societies has mobilized exiting funds to respond to the emergency. Discussions with donors continues to allocate funds from preparedness and migration intervention to support National Societies on the action proposed under their contingency plans.

Under the leadership of the Central American Cluster and in cooperation with CEPREDENAC, two educational sessions on COVID-19 have been developed for humanitarian organizations, National Red Cross Societies, and Civil Protection Systems, with more than 500 people reached. Also, in coordination with CEPREDENAC, an online resource box was developed so that the region's civil protection systems can access information on COVID-19. This is hosted on the Reference Centre's website and is organized by thematic areas, e.g. PPD, PGI, APS, Migration.

Within the framework of the regional DIPECHO programme for Central America (Guatemala, El Salvador, Honduras, and Nicaragua), technical assistance continues to be provided remotely to the NS. As of today, Preparedness for Effective Response (PER) action plans are adapted to COVID 19's operations and are part of the recovery process, including the National Societies' business continuity plans.

All the National Societies in Central America have completed their response plans. The proposed actions focus on the following programmatic areas:

a) Information: all activities related to information sharing (symptoms, differences with flu and other similar diseases, among others).
b) Response: active participation in the respective national plans for this crisis, prehospital services, psychosocial services, and support to shelter (quarantine and others), support to local authorities with competencies for the response.

c) Staff and volunteer management: self-protective measures, internal arrangements for National Societies services, procurement of PPE and first response equipment.

d) Communication: internal and external communication with a strong component of operational communication and socialization of the key messages in the mass media.

<table>
<thead>
<tr>
<th>Government Actions</th>
<th>Costa Rica</th>
<th>El Salvador</th>
<th>Guatemala</th>
<th>Honduras</th>
<th>Nicaragua</th>
<th>Panama</th>
</tr>
</thead>
<tbody>
<tr>
<td>COUNTRY CONTEXT</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Preventive quarantine for nationals and foreigners</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Curfew / Isolation required</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>School Suspension</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Restriction to public events and meetings</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Flight restrictions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Restrictions on access to the country</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Driving/Circulation restrictions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>RELAXATION OF MEASURES</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Face-to-face work</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-essential trade</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Schools and educational centers</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Events and public spaces</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Flights and access to the country</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

REFERENCES:
- Yes / Yes there are restrictions
- Partial Restrictions
- No / No restrictions

National Societies response

Costa Rica Red Cross (CRRC)  New! CRRC continues to disseminate messages to the population through perifoneo (speakers), distribution of 2,174 flyers and cleaning kits in coordination with the CNE. CRRC held 26 talks and 43 teleservice sessions of psychosocial care for staff.

New! In the last two weeks, three procedures were carried out to prevent contagion and 35 hours were invested in awareness-raising work on the use of PPE.

New! The work of the areas with the highest rate of COVID - 19 patients is being reinforced and strategies are being defined for the transfer of patients to alternative shelters and other non-traditional places.

New! In Limón, follow-up is maintained with screening and support with motivational messages for first responders. Visits are being made to the Auxiliary Committees to verify the application of the PGO Screening and to generate greater dialogue with the staff in service about the emergency.
New! Under the Red Cross - Costa Rican Tourism Institute agreement on the actions of the Lifeguards: In this operational period, a total of 11,800 hours of work were achieved in support of pandemic prevention and water rescue actions, where 297 precautions were taken for bathers during the opening of beaches (recommendations on currents and other dangers) and 3 water rescues were carried out. The measures that enable the beaches to be used from 5 a.m. to 8 a.m. have been maintained, so the lifeguard teams of the Costa Rican Red Cross (ICT Project) continue with work schedules adapted to cover this period of use on 4 beaches in the northern and southern Pacific: Ballena, Tamarindo, Manuel Antonio and Ventanas, and on 2 beaches in the Caribbean: Cocles and Manzanillo.

New! In Cartago, a planning meeting was held on the approach in Los Santos due to the arrival of people from Panama (mainly indigenous Nogbes) to harvest coffee. In Limón, the operation for the arrival of returnees on June 11 at the Hernán Garrón Pier, JAPDEVA, was accompanied by a total of 14 Costa Ricans admitted under strict health measures and the participation of all the response institutions in that province. The logistics for the repatriation of 1 Costa Rican who suffered a stroke in Panama were carried out in coordination with the Panamanian Red Cross, the Costa Rican Social Security Fund (CCSS), Air Surveillance and the Ministry of Health of Costa Rica, generating a safe environment and taking into consideration the COVID-19 in Panama.

New! The issue of Central American transporters on standby in Costa Rican territory in the sector of the border with Panama, in Sixaola, continues to be followed up.

New! In Talamanca de Limón, 3300 water rations were distributed, each one of 1 litre.

New! In anticipation of possible emergencies due to increased rainfall, in addition to the attention of COVID-19, CRC is preparing the design of information material for subsequent dissemination to the population on different techniques of home water purification, as well as the recommended doses for chlorination of drinking water.

New! In the last two weeks, CRC moved 11,036 humanitarian aid packages (food and cleaning kits) from the National Production Council (CNP) to different CNE facilities in San Jose and San Carlos and Puntarenas, Cartago and indigenous territories such as Chirripó, Alto Conte and Coto Brus, with a total mass of 122,381 kilograms.

New! 3 of 9 Regional CCOs remain active (Guanacaste is inactive and Northern Zone, San Jose, Heredia, Puntarenas and Alajuela reported no actions). These 3 CCOs are participating in the sessions and actions of the Regional Emergency Committees (REC), with an accumulated 28 hours of work this week. Personnel from the National Society's Auxiliary Committees participate in the sessions and actions of 36 Municipal Emergency Committees (CME) with a total of 602 hours of work for this operational period.

As of June 22, a total of 9,355 incidents related to COVID-19 have been addressed by the CRC by telephone. 1,243 people have been transferred to medical centres that meet the parameters agreed by the Ministry of Health and the SN.

In the migration sector, 118 persons continue to be treated in CATEM Norte and 170 in CATEM Sur (92 minors and 196 adults). Ten cases of CFR have been dealt with and all have been resolved. The service for restoring contact between family members is maintained by the National Directorate of Doctrine, Principles and Values, in coordination with the ICRC offices in Panama and Mexico.

Awareness campaigns aimed at the population continue to be conducted through loudspeakers and CRCR staff with talks, using the Microsoft Teams platform. In addition, volunteers and staff who
have been in contact with suspected and confirmed COVID-19 patients continue to be monitored to determine whether they are developing symptoms.

CRC continues to participate daily in the virtual meetings of the EOC National, Regional and Municipal Committees. The National Directorate of Doctrine and the ICRC have coordinated resources for the procurement of personal hygiene and general cleaning items for migrants in the temporary migrant holding centres.

**Guatemalan Red Cross (GRC)**

New! GRC continues to develop its action plan for dealing with this pandemic, implementing actions in pre-hospital care, health, water and sanitation, livelihoods, communication with the population and prevention of gender-based violence. GRC has implemented the following activities: 336 people have been transferred in GRC ambulances, 20 tents have been set up in care centres, and a total of 1,752 hygiene kits have been delivered. 633 GRC have been trained, 1,422 migrants have been informed about preventive measures, 1,000 units of blood have been collected and delivered to the Ministry of Health, and 260 communication materials have been produced. A total of 204 health personnel has been trained and has benefited from 12 care centres. All these actions have been carried out in close coordination with the Ministry of Public Health and Social Assistance.

GRC volunteers are distributing hand disinfectant (alcohol gel) in coordination with the Municipal Coordination for Risk Reduction (COMRED) and providing humanitarian information on the containment measures promoted by the Ministry of Public Health and Social Assistance. Also, explaining the correct washing of hands, the ways to cough to avoid contagion, and the correct application of the antibacterial gel.

The GRC continues to analyze and follow up on information related to trends and forecasts for the rainy and hurricane season in the country, with national and regional authorities on the subject.

GRC developed a colouring book for children from 4 to 9 years old, Dr. Perla and Dr. Albert, on how to beat COVID-19. This material aims to provide recommendations for children to recognize the symptoms of COVID-19 and ways to prevent it.

It has provided humanitarian assistance to returnees by land, providing clean water, hygiene kits, snacks, antibacterial gel, and guidance on COVID-19. Psychosocial support has been provided to the GRC team that attends to returnees during the emergency.

The SN has held sessions to update cleaning and disinfection procedures with first responders (change validation practices) and with volunteers to update infection control and prevention procedures (at HQ).

GRC, as part of local capacity building, promotes basic online training on disaster preparedness and has printed materials on VOC information and prevention-19.

GRC participates in coordination meetings through the Emergency Operations Centres for actions related to the COVID-19 pandemic, under the responsibility of local authorities. CRG continues to participate in the health, water, sanitation, and nutrition thematic groups in Guatemala.
**Honduran Red Cross (HRC)**

**New!** The process of delivering food kits to 3,217 families in the department of El Paraíso was completed.

**New!** The donation of biosecurity equipment was made to four (4) Integral Health Centres in the city of Choluteca: La Providencia, Las Acacias, San Luis and San Pedro Sur.

**New!** In Choluteca, four (4) vaccination and deworming campaigns were supported in the neighborhoods of El Morazán, Brisas del Río, Los Fuertes and El Aterrizaje. A total of 369 people was immunized, including children under 5 years of age, pregnant women, and people at risk.

**New!** Advice and technical assistance were provided to 15 farmers on food production for food security and storage of products for family consumption and local marketing in Santa Elena and La Paz.

**New!** A Feasibility Study and Market Analysis is being conducted to identify the mechanism for delivering humanitarian assistance in municipalities along the banks of the Goascoran River. HRC, as leader of the cash transfer country team, is participating in the elaboration of the sector contingency plan for the rainy season including scenario by COVID-19, with the technical assistance of CashCap.

**New!** The academic processes assigned to the student population of the alternative education programme are being followed up, reaching a total of 166 students in Los Pinos, also following up with volunteer tutors, and monitoring to keep the student population in the PEA who have difficulties in presenting academic assignments.

**New!** Support was given to the development of a training session on Community First Aid PAC for volunteers from the Amapala Municipal Council and volunteers from the Goascoran Municipal Council.

**New!** Biosecurity equipment was delivered to the volunteers of Tegucigalpa and La Lima who provide RFL services to the returned migrant population.

**New!** A backpack hand pump was donated to the Local Emergency Committee for use in fumigating vehicles at a migration control point at the entrance to the municipalities of Santa Elena and La Paz.

**New!** In the context of the dengue emergency, support has been provided for two (2) home fogging campaigns in Choluteca, benefiting approximately 2,069 people; logistical support is being provided to the staff of the Ministry of Health and the Municipal Mayor’s Office. A fogging campaign was carried out in the La Granja and La Merced neighbourhoods, benefiting 1,770 households. 850 households were benefited through fogging activities in Col. 21 de abril, Comayagua. The La Paz prison was also fumigated. 27 young people from the Brisas del Sur and Santa Rosa de Sampile neighbourhoods participated in home visits and BTI application days to control the mosquito that transmits Dengue fever in Choluteca. Twelve volunteers were trained in rapid Aedes aegypti index (LIRA) survey and larval sampling.

The network of CHR Councils at the national level works together with the Municipal Emergency Committees to support people with food and supplies for basic needs. The Cash working group has provided technical support to the humanitarian delivery actions by this means.

Psychological and medical monitoring of HRC staff in the four regions, with the COVID-19 case management protocol and monitoring of the solidarity fund for COVID-19 cases in HRC staff.

Through follow-up and monitoring, individual attention continues to be given to users of the psychological clinic for victims of violence.
In Choluteca, three CIS (Las Acacias, La Providencia and Las Colinas) have been supported in mobilizing medicines, vaccines and publicity material for the implementation of the vaccination day.

Following the agreement signed by the HRC with the Inter-American Development Bank (IDB) and the Permanent Commission on Contingencies (COPECO), 400 more families from the municipality of Alauca have been added, bringing the total to 2,811 families with food rations.

The Choluteca Council, in coordination with CODEM, continues the process of pre-selection and filtering of 456 families from five neighbourhoods in the area of influence of the PAO South Project, with the aim of providing humanitarian aid under the food ration modality through coupons. In Tegucigalpa CRH is carrying out advocacy and monitoring of the provision of humanitarian assistance with other civil society organizations at the local level to support 225 families in the Community of Los Pinos. And has conducted a census to identify the population with disabilities in the Community of Los Pinos.

CRH has initiated socioeconomic studies at the national level to support CRH personnel affected by COVID-19, medical follow-up is also being carried out for the prevention of cases at the institutional level, and psychosocial accompaniment continues to be provided to CRH personnel and their families. HRC is implementing the Plan to Strengthen Biosafety Measures for Pre-Hospital Emergency Personnel in 8 municipalities in Region 3.

CRH in Tegucigalpa continues to disseminate self-care messages, nationwide self-care days continue to be developed for health personnel and volunteers, and prevention messages and mechanisms are disseminated to reduce infection, aimed at community leaders and teachers and at women sex workers in La Merced Park and Bar Bellos Amanecer.

Virtual sessions continue to be developed through CRH social networks for advice on PHC and self-care issues with the general public, some of the topics developed being: How to handle grief by COVID-19, Mental health in times of COVID-19 with older adults, among others.

The CRH National WASH Intervention Team continues to work with the Directorates, Managements and technical departments of the staff working in the National Council, to maintain minimum standards in the areas or work areas within the institution and thus prevent the spread of COVID-19.

Follow-up and monitoring of families affected by the rains in Colonia Altos de Los Pinos through the Local Emergency Committee in coordination with CODEM of the Central District.

CRH continues to provide RCF support to 789 Honduran migrants who have returned to the Temporary Isolation Centres for Migrants.

CRH prepared the COVID-19 prevention guide in administrative areas of the CRH headquarters, and is in the process of preparing a training package for National Intervention Teams in epidemic control in the context of COVID-19.

In addition, support has been provided to the Honduran Ministry of Health (SESAL) in the transfer of medicines and vaccines to various comprehensive care centres, and epidemiological channels have been donated for monitoring COVIS-19 and Arbovirus cases and PPE for health providers for the San Pedro Sur comprehensive health centre. The Choluteca council donated PPE, information registration material to the Las Acacias Comprehensive Health Centre.
CRH is one of the institutions implementing the WASH Response Plan to provide safe water to families affected by COVID-19 at the national level. CRH is carrying out hygiene promotion and proper use of biosecurity equipment with health personnel through the use of digital tools.

Water, sanitation and hygiene support is planned for the Temporary Isolation Centres (CAT), which will be gradually installed throughout the country.

Among one of the DRM actions in the COVID-19 context, CRH has prepared 9 departmental and municipal maps using a geographic information system, an action coordinated with COPECO in the department of Valle.

Awareness sessions on basic knowledge and measures to avoid the dissemination of COVID-19 have been held for HRC volunteers and staff in 48 councils, and virtual seminars on COVID-19 guidelines have been held for health personnel, in which 103 people have already been trained at the national level. In addition, a training programme on epidemic control in the context of COVID-19 is being developed for national intervention teams.

Biosecurity measures for the prevention of COVID-19 continue to be implemented in offices and headquarters and compliance is being monitored. It has also established procedures for the protection, prevention and care of patients with COVID-19 at home.

Guidelines have been developed (and are being revised) for access to the emergency fund for volunteers and staff infected with COVID-19. Coordination and negotiation is ongoing with the Resource Mobilization Administration for food assistance to volunteers and staff in need.

CRH is supporting vulnerable groups (elderly, people with HIV, among others) in the transportation of medicines for chronic diseases.

Accountability actions include weekly updates of the Emergency Response Plan for International Cooperation and Movement representatives.

Councils' Contingency Plans for the rainy season continue to be updated, including scenarios for COVID-19.

The CHR council network at the national level continues to develop coordination and support actions for pre-hospital care for persons suspected, confirmed and recovered by COVID-19. The SN maintains a presence and provides support in the clusters activated in the country as a coordination measure for monetary assistance, temporary accommodation, information management, water and sanitation, cash transfers, sanitation and hygiene, and nutrition. CRH volunteers have established 24-hour shifts at the National Emergency Operations Centre in COPECO, from where different response actions are coordinated at the national level. The institutional National Monitoring Centre remains active, generating reports and following up on the different actions developed within the framework of the response to COVID-19. Key messages have been shared in support of the communities with which it works to raise awareness among community-based organizations.
New! A campaign to disseminate key messages for the prevention of dengue fever and recommendations for flooding due to the heavy rains in the country is being carried out.

New! The fourth delivery of equipment and supplies needed to deal with the pandemic was made to 32 branches of the Nicaraguan Red Cross, including the Yali and San Carlos branches. Hygiene products, personal protection equipment and first aid kits, among others, were delivered.

New! Working hours are being managed using teleservice orientation for NRC staff, except for areas such as Relief, Ambulance Technicians, Radio and Health, which continue to attend National Headquarters due to their commitment to the Nicaraguan population.

The Health and Communication and Information Commissions of the CRN’s EOC remain active, following up on the event and actions carried out. The NRC continues to promote cleaning activities, taking the temperature of personnel when they enter the National Headquarters and cleaning and disinfecting the units after each service and the private vehicles that arrive at the facilities.

The public awareness and information campaign continue through social networks, Facebook, Twitter, Instagram, issuing recommendations on breathing techniques for stress management.

The Nicaraguan Red Cross continues its work to protect the staff working at the National Headquarters, carrying out temperature control and vehicle disinfection actions that are extended to the users of the services provided by the institution and who arrive by vehicle. Distance signs were installed in the various public service areas to maintain physical distance between users of visual fitness and psychological examination services.

Technical personnel in Psychosocial Support of CRN from the National Headquarters, as part of the attention to the first line personnel before the emergency of COVID - 19, give talks to Members of the Area of Relief and Radio for the management and control of stress and the self-care of mental health, also was given posters on techniques and tools to perform these exercises.

The Rivas branch of the Nicaraguan Red Cross is in the final stage of rehabilitating showers for disinfection for the frontline personnel who are responding to this COVID - 19 emergency, with the support of Ministry of Health staff who collaborate regularly in disinfecting the branch's facilities.

The Nagarote branch of the Nicaraguan Red Cross is constantly cleaning and disinfecting the branch building and the vehicles and equipment, in addition to training new staff in this activity that will allow the necessary replacements during operational periods. The Rio Blanco Red Cross and the Rio Blanco branches are cleaning and disinfecting the facilities on a daily basis in order to reduce the risks of the COVID-19 pandemic.

NRC held workshops and sessions on

• Psychosocial support sessions (PSA) for volunteers and staff members to manage panic, stress and stigma reduction. PHC coordinators have been appointed in each affiliate to provide emotional support to volunteers and members.

• Promotion of health prevention and control measures for staff and volunteers by the RRC medical team (temperature taking, symptom assessment, emotional assessment).

• The NRC has developed a washing and disinfection policy for the transport units, and a space has been built between the drivers’ area and the patient care.

• The NRC has launched a communication campaign on social networks, television and radio media and shopping centres, with educational material on the prevention of VOCs-19, hygiene and hand washing and on stress management.

• Users of NRC services are given talks on promoting respiratory hygiene and hand washing through exercises carried out by staff and volunteers.

**Salvadorean Red Cross Society (SRCS)**

**New!** SRCS continues to provide its services. To date 11,480 emergency clinic care and 1,088 ambulance care services were provided, and continues to provide remote psychosocial care via teletherapy, email, WhatsApp and through authorized contacts.

**New!** During the COVID-19 emergency, SRCS has distributed 172,000 gallons of water, delivered 241 food kits, 517 hygiene kits, 4 kitchen kits, 771 mats, 2,263 blankets and 1,088 disinfection kits in various communities nationwide.

**New!** In recent weeks, SRCS delivered surface cleaning kits to 240 families in Colonias El Ferrocarril 1 and 2, Santa Cruz Michapa and 301 kits to families in the Tequera community in San Pedro Masahuat and La Anona community in San Luis la Herradura, 265 kits in the Tikal colony in Apopa and 181 kits to families in the La Meca community in Quezaltepeque. The kits contained 12 containers of bleach, a one litre atomizer, two flannels and a 15 litre bucket with a lid, they also included educational material on the correct process to disinfect surfaces, the deliveries were made in compliance with the protocols of social distancing and awareness actions were carried out through loudspeakers.

**New!** The Facebook live sessions continue to respond to public concerns about topics of interest to the COVID-19 pandemic, the last was on the theme "The correct handwashing in the COVID-19 emergency.

CRS developed and is already implementing the Contingency Plan for the transfer of COVID-19 positive patients in support of the Ministry of Health (MINSAL). Three transfers of COVID-19 positive patients to hospitals authorized by the MISAL have been carried out.

The Institutional Security Unit of the CRS continues to strengthen security guidelines and the installation of health spaces.

The CRS continues to participate in the meetings of the departmental and municipal commissions of the National Civil Protection System.
Red Cross Society of Panama (PRC)  

**New!** Training is being provided to volunteers and administrative staff on biosafety issues and the formation of a health committee, in compliance with the regulations issued by the Ministry of Health and the Ministry of Labor and Labor Welfare.

PRC is contributing with the transfer of blood donors to the donation centres.

The virtual platform conversation "Anxiety Management Techniques in the face of COVID-19" was developed a psychologist from the University of Panama and professor at the Universidad Especializada de las Américas (UDELAS), and was broadcast live simultaneously on the YouTube channel and the Panamanian Red Cross' Facebook page.

In coordination with Panama's Foreign Ministry and the United Nations Development Programme (UNDP), the PRC delivered bags of food to the communities of rural Cerro Viento and part of the community of Las Trancas, in the district of San Miguelito, with the support of volunteers from branches close to the sector.

PRC with the support of Cobre Panama, developed sanitation work in communities in the province of Cocle with chemical disinfection. The PRC, with ICRC support, provides RFL services, applying all necessary biosecurity measures. The PRC, in support of the Panamanian Social Security Fund (CSS), continues to deliver bags of food in different provinces of the country and has coordinated the delivery of medicines house by house. PRC volunteers continue to support seven epidemiological fences throughout the country, carrying out screening tests. In Darien, PRC assists with the distribution of water and care for migrants in Peñita.

PRC continues with the dissemination of the "Stay at Home" campaign through different media and social networks. Volunteers from the Colon branch delivered food packages to 80 families in Ciritito, Costa Abajo.

PRC volunteers are supporting the distribution of medicines to the homes of the National Social Security Fund (CSS). The establishment of a telephone help line is being coordinated, as well as virtual online platforms for the attention of the volunteers, their families and collaborators. Multiple intervention sessions were held to provide psychosocial support to the staff of the CRP. In support of the Ministry of Health of Panama, Procter & Gamble (P&G Panama) made available 200 hygiene kits, essential for medical staff and residents, which were delivered to 4 hospitals in the province of Panama and to the Fundación Jesús Luz de Oportunidades.

PRC supported the Fundación Amigos del Niño con Leucemia y Cáncer, transporting children by ambulance to several hospitals so that they could receive their treatments. PRC, with the support of donors, distributed bags of non-perishable food and hygiene items to more than 600 families, affected by the restrictions of the state of alert. 46 PRC volunteers have participated in a workshop on the use and decontamination of personal protective equipment (ambulances, basic relief units, logistical support and personnel transport vehicles).

The PRC has delivered food to homeless and vulnerable people in Boca Isla, to help mitigate the conditions of food shortage. The PRC supported the Spanish Embassy in Panama by setting up preventive measures for the repatriation of Spanish citizens at Tocumen International Airport. In coordination with the Ministry of Agricultural Development and the Directorate of MERCA PANAMA
Services, a team of PRC volunteers reinforced advice on hygiene and prevention in response to the health alert issued by COVID-19.

**English and Dutch Caribbean**

<table>
<thead>
<tr>
<th>Government Actions</th>
<th>Antigua &amp; Barbuda</th>
<th>Bahamas</th>
<th>Barbados</th>
<th>Belize</th>
<th>Dominica</th>
<th>Grenada</th>
<th>Guyana</th>
<th>Haiti</th>
<th>Jamaica</th>
<th>St. Kitts &amp; Nevis</th>
<th>St. Lucia</th>
<th>St. Vincent &amp; the Grenadines</th>
<th>Suriname</th>
<th>Trinidad &amp; Tobago</th>
<th>Public health regulations</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The IFRC Port of Spain (POS) Country Cluster Support Team (CCST) for the English and Dutch Caribbean has continued conversations with Presidents, Disaster Managers, and other Partners to better understand the situation on the ground and to provide support as needed.

There are ongoing conversations with donors and partners to explore the possibility of allocating additional resources to cover the activities identified under the Contingency Plans.

National Societies have made some adjustments to their Contingency Plans due to the changing scenarios and spread of the virus, funds available, and according to the role of the NS in the national response. The CCST is working closely with NSs to update Contingency Plans and to define and prepare Business Continuity Plans.

**National Societies response**

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

*New!* Preparations for this year’s Hurricane Season are gathering pace and taking place alongside the Covid-19 response activities

The National Society continues to use its social networking platforms to extend its outreach to the population on the importance of handwashing and social distancing. Videos targeting deaf people have been posted on Facebook.

Menstrual Health Day Distribution: ABRCS conducted a World Menstrual Health Day distribution to women and girls on May 28 and 29. Hygiene packages were created as a part of the NS’s COVID response while catering to the need of menstrual Hygiene for women. Distributions were done for the ‘Sunshine Home for Girls’, ‘Good Shepherd’ and to the female’s ward at ‘Her Majesty’s prison’. Packages contained Sanitary napkins, tampons, feminine wipes, bath soaps, razors, combs, toothbrush, mini hygiene kits, hand sanitizers, washing soaps, rags, and heat & cold packs. A total of 23 packages were distributed to these organizations and for those spending time behind bars even though 50 were initially prepared. COVID-19 influenced the decreased number of the distribution, as Her Majesty's Prison only had 10 female prisoners and only four and seven packages were distributed to the Sunshine home for girls and Good Shepherd, respectively.
Sign language COVID-19 ads aired on national television (continuously): A series of sign Language were prepared in April as a part of the NS's risk communication efforts, that were prepared for the deaf community. In May, these ads were shared to the Antigua/Barbuda Broadcasting station (ABS) which is the country’s main news station. These ads are continuously being aired until further notice.

The Antigua & Barbuda Red Cross collaborated with a soup kitchen to conduct a distribution to the homeless on May 17th. 50 packages were distributed, which contained both food and non-food items such buckets, jerry cans to encourage water storage and hygiene items such as an assortment of soaps, and shampoos.

The ABRCS conducted screenings for persons returning from Antigua to Barbuda. Precautions were taken for anyone who was recorded with a high temperature for any sign of illnesses, to be quarantined for 14 days if necessary. A total of 41 travellers were screened.

The National Society was also invited to conduct screenings for the Irene B Williams Secondary School, on May 18th, 20th and 21st for returning 5th formers as they are writing exams as well as teachers and other staff of the aforementioned school. A total of 159 individuals were screened over the three-day period.

Bahamas Red Cross Society (BRCS)

**New!** PSS Training in collaboration with the Bahamas Psychological Services is being planned for BRCS staff and volunteers. Trainings will be conducted in English and Creole. Communications and invitations were sent out to the various creole speaking religious and civil organizations for members to participate. Date of training and methodology to be determined.

**New!** A volunteer trained in PSS assigned to meals on wheels project to identify people with mental and PSS issues. This has proven to be very effective as beneficiaries are now verbalizing their fears regarding contracting COVID-19, loss of jobs and income, survival, and the way forward. Counselling services, physical support and referral provided. Appropriate messaging, educational needs including media and cultural considerations are also being identified during these visits. This information is useful to ensuring effective messaging.

**New!** PSS Kits and breakfast items were delivered to the collective shelters. Volunteers are visiting these shelters 3 times per week to provide PSS services in the form of recreational activities, share information on epidemic control specific to COVID-19 and vector borne diseases. Additional PSS kits are being considered for distribution to families within the wider community.

**New!** House to House visits in selected communities strengthened. Volunteers conduct home visits to share Hurricane Preparedness COVID-19 and Vector Control messages. Community members are taking initiatives to maintain a clean healthy environment as they cleaned their own yards, public parks and assist elderlies and other vulnerable groups to clean up their properties. This initiative is not only an extension of the Zika Prevention Project but used by some individuals as a means of coping with unemployment, curfews.
New! The BRC PSS Coordinator participated as a panellist in the Webinar Civil Society Roundtable: COVID-19 and Non-communicable Diseases (NCDs) in the Caribbean. The panel consisted of several Directors and Presidents of Caribbean civil societies including Jamaica Heart Foundation, Barbados Diabetic Association and many others who shared their unique experiences in the Response to COVID-19 Pandemic and planning for the future. The Webinar was very well attended with just over 100 joining via zoom and over 400 people connecting via Facebook Live. This was a rewarding experience to share best practices and information among the panellists, organizers, and the audience.

New! Visitors and beneficiaries are being screened with use of infrared thermometer on entry to the BRC Administration Office, Health and Wellness Cottage. The COVID-19 Hotline will be immediately informed of all Clients with elevated temperatures. These clients will be denied entry into the BRC waiting and service areas. Training in the use of this medical tool was done for all staff and volunteers prior to implementation.

Head Knowles Foundation, a Charitable organization in the Bahamas, donated a supply of rice to the Bahamas Red Cross to supplement food packages for distribution to residents in the community. This food item constitutes a part of a food package which is being prepared by BRC volunteers for distribution to people affected by COVID-19 Pandemic in Nassau and family islands.

Bahamas Red Cross North Eleuthera branch continues to distribute meals daily to the elderly, disabled, unemployed, and frontline workers affected by COVID-19 Pandemic. This service was strengthened through partnership with other private, civil and religious organizations resulting in increased number of people reached.

On-line-Tracker System is in full operation and assisting BRCS Call-In Centre and Community Engagement and Accountability (CEA) Unit to facilitate and enhance the referral and enrolment processes for Meals on Wheels and other support Services. People are being identified and referred to Health & Wellness for PSS Services

French Creole-speaking caseworkers, volunteers continue to interact and collaborate with the immigrant communities through social media, Religious and community group leaders. This support has increased the number of marginalized individuals and families reached and supported. Although many of these individuals and families have returned to Abaco, this service continues and is enhanced through collaborative efforts and support from BRC Branch Leader and Volunteers in Abaco.

Volunteers in Grand Bahama and Abaco continue to distribute food parcels, to individuals and families affected by the loss of employment and income due to COVID-19 strict preventative measures. This activity is enhanced through collaboration and support from private/non-governmental organization and the National Feeding Project.
### Barbados Red Cross (BRC)

**New!** The Barbados Red Cross has supported families’ livelihoods by donating food hampers, personal hygiene kits, and household cleaning kits to community organizations and government agencies including The Migrants Project, Barbados Family Planning Association, Ministry of Youth and Culture, Community organizations and the National Mitigation Unit.

**New!** The NS has partnered with the Government’s Department of Emergency Management (DEM) in hurricane preparedness messaging and amplifying the public health and social messages re COVID-19.

**New!** Volunteers and NS Disaster Management Officer have been featured on live radio broadcasts from community social spots.

**New!** Barbados RC in conjunction with DEM facilitated the training of members of District Emergency Organizations in community disaster response over the two weekends of 13 and 20 June. The NS presented modules on health and hygiene at the community level.

Different humanitarian assistance requests have reached the NS, and these are being acted on. The NS continues to liaise with local authorities with regards to way of assessing and assisting in vulnerable communities.

### Belize Red Cross Society (BRC)

**New!** Concurrent with the Covid-19 response Belize has been affected by heavy rains which have resulted in floods in some districts. Among others Belize RC is working in some villages in the Cayo Districts, working with communities to determine the extent of damage thus far, the number of persons who need evacuation to shelter etc.

**New!** The National Society continues with food distributions. In the last 2 weeks 1,238 food packages were distributed to older persons, persons living with disabilities, migrants, tour guides who lost employment as well as other persons who also were affected through employment loss. This brings the NS to a total of 3,943 families assisted or approx. 19,717 persons.

**New!** Hygiene kits were distributed in the districts by the branches to front line personnel, police officers and MOH.

**New!** Psychosocial support was administered to 23 persons on the distribution routes.

**New!** 1,200 masks were procured and are being distributed to the general public in need.
New! Communication and education on COVID-19 and precautionary measures continue in every distribution and in the district by branches.

Volunteers continue stand-by to assist the MOH with management of isolation and quarantine centres.

Protection of Volunteers, providing them with the necessary PPEs continue as well as equipment for protection from the elements, rain and floods.

The NS continues to strengthen partnerships for sustainability of community activities, e.g., UNICEF, Protected Areas Conservation Trust (PACT), and the private sector.

Reopening First Aid training with first training booked for June 8, and integration of precautionary measures for prevention of COVID-19.

Reopening Home Care Givers Course to commence on Tuesday, June 30, with participation of 20 persons and incorporation of precautionary measures for prevention of COVID-19.

---

**Dominica Red Cross Society (DRC)**

**New!** DRCS continues with the distribution of food packages (to include fresh vegetable and provisions) and hygiene packs to affected households and vulnerable persons impacted by COVID-19. To date, a total of 279 packages have been distributed to communities by Dominica Red Cross branches.

**New!** Considering new measures being implemented by the Government of Dominica and the easing of restrictions, the project team has decided to keep PSS Hotline services for a longer period, with limited calling numbers being assigned.

**New!** Nestle Caribbean Incorporated through its agent H.H.V Whitchurch & Co Ltd donated products more than EC$8000.00 towards DRCS COVID-19 Outbreak response activities.

**New!** MHPSS session was conducted for all Governing Board members.

**New!** NS developed new public service announcements (PSA) in view of the current situation in Dominica, currently with no Covid-19 active cases recorded. One PSA speaks on “Not Letting Guards Down” encouraging people to stay alert and not to be complacent.

**New!** PPE training conducted for Branch Leadership and CDRT’s.

**New!** Through the partnership developed with IOM, the PSA developed into Haitian Creole was converted into a video which is disseminated via WhatsApp to majority of Haitian nationals on island. Link to video attached. [https://youtu.be/vWE3pD8WOAw](https://youtu.be/vWE3pD8WOAw)

DRC continues to provide support in various capacities as the country continues with the national response to COVID-19.

Social Development (Text message blast alerts) continues with Digicel Dominica.

RBC Royal Bank of Canada funds were utilized to purchase items required for Food Hampers.
DRC has commenced a partnership with UN-women focused around the provision of agricultural produce to be distributed in communities.

Partnership with IOM and IsraAID continues.

**Grenada Red Cross Society (GRC)**

**New!** Plans for food and hygiene packages distributions for those affected by Covid-19 keep moving ahead. Quotations were done and a beneficiary list was finalized in collaboration with various stakeholders like NADAMA, The Ministry of Education, The Police, Ministry of Social services, and many others.

**New!** Several locations were visited by GRCS staff to erect handwashing and sanitizing stations

**New!** A volunteer plan was developed for case management and for the purchasing, packaging and distribution of food and hygiene packages.

The Covid Operations Team continues to work tirelessly to ensure the distribution of hygiene and food packages are given to the most vulnerable.

Partnership and coordination continue with the National Disaster Management Agency and other stakeholders concerning the Covid-19 response.

Grenada Red Cross continues with the implementation of its Covid-19 contingency response plan while working closely with different suppliers, the national disaster preparedness office, Ministry of Health and engaging with local partners.

Grenada Red Cross continues to share information on various social platforms on the importance of hand washing, physical distancing, and psychological support.

**Guyana Red Cross Society (GRC)**

**New!** GRCS conducted a Radio Panel Discussion focused on “Coping with COVID-19”.

**New!** GRCS conducted sensitization sessions specifically targeting opened shops and businesses, focusing on sanitizing and safety precautions. GRC continues general awareness and sensitization campaigns, hand-washing demonstrations, distribution of hygiene kits and face masks to vulnerable groups. GRC continues to provide PSS and PFA support to its staff and volunteers.

GRC continues the Meals on Wheels programme, as well as support to the Ministry of Public Health National COVID-19 Hotline. GRC continues to work on its preparedness and readiness plan and attend regular meetings at the HEOC and NEOC National Platforms. GRC continues to support the Ministry of Public Health Blood Bank with Blood Drive.
Volunteers at the branch level have commenced the distribution of food packages to the vulnerable in their parish. Deputy Director General, Lois Hue and Chairman for the Emergency Services Section have also distributed food packages to the vulnerable in the Dallas Castle community.

Preparations for the hurricane season are gathering pace. An assessment of the warehouse was done by the Logistics and Warehouse Coordinator, Windel Redley to determine the needs of the National Society. Branches are being contacted to provide information concerning issues like inventory of pre-positioned stocks, number of trained staff/volunteers, number of available registered volunteers etc.

Materials for Jamaica Red Cross public relations strategy have been developed by Public Relations Chairman for the National Society. These include social distancing floor signs, t-shirts, tote bags and posters.

A psychosocial support session lead by Dr Angella Gordon Stair and Dr Cheyl Porter was held with staff and volunteers from the different branches via Zoom.

Laptops have been purchased for each branch to better facilitate their participation in virtual activities.

The $50,000 Sampars voucher donated to the Jamaica Red Cross by the Jamaica National Foundation was used to provide assistance to the Cew's Foundation, a community group that assist vulnerable children. The voucher was used to purchase food items for distribution in the community.

Jamaica Red Cross branded masks continue to be distributed among the vulnerable who are given assistance by the National Society.

The National Society continues to post messages on its social networking platforms (Facebook, Instagram, Twitter), encouraging people to stay at home and to end the stigma against COVID-19. Also, photos of Jamaica Red Cross activities are also being posted on social media along with important messages or updates from the Government.

The Public Relations Committee, together with National Society staff, developed a video to encourage the public to play their part and stay at home to help fight COVID-19, which was posted on the Jamaica Red Cross social media platforms.

The Jamaica Red Cross in partnership with Bay-C and the IFRC collaborated to develop an anti-stigma video which was shared on the Jamaica Red Cross social media platforms. This video was also shared regionally.

The National Society continues to be represented at the National Emergency Operations Centre (NEOC) in the Office of Disaster Preparedness and Emergency Management (ODPEM).

The Youth Officer continues to compile a consolidated list of vulnerable persons across the island. 12 of the 13 branches have submitted their list of vulnerable persons to be addressed.
Also, church groups and other community groups have been submitting their list of vulnerable persons to be served.

The National Society continues to provide the vulnerable with sanitation packages through community groups such as a Dallas Castle community group and Red Cross area groups.

The Jamaica Red Cross continues to participate in the packaging activity by the Ministry of Labour and Social Security by assembling food packages to serve those directly and indirectly affected by the coronavirus.

The Jamaica Red Cross continues to partner with the Private Sector Organization of Jamaica (PSOJ) and the Jamaica Defence Force (JDF) on their COVID-19 relief programme. The Jamaica Red Cross Society is actively involved in this activity by providing volunteers to assemble the food packages.

The Beneficiary Form developed continues to be used in the field to report on the packages delivered to the vulnerable.

**Saint Kitts and Nevis Red Cross Society (SKNRCS)**

**New!** SKNRCS continues to participate at the NEOC

**New!** SKNRCS continues to provide PSS on both St. Kitts and Nevis

**New!** Care Packages for vulnerable families impacted by the economic impact of Covid19 have been distributed

**New!** A community risk assessment has been conducted in collaboration with the Ministry of community & Social Development

General elections held on 5 June. The St. Kitts Nevis Red Cross Society continues to work with the NEOC and the HEOC to contain the spread of the Corona Virus.

The NS has started to circulate hurricane preparedness messages to the public during the Covid-19 outbreak. Refresher courses on Hurricane Preparedness and Damage Assessment and Needs Analysis (DANA) planned.

SKNRCS continues to provide, PSS, and Best Practices Information on both St. Kitts and Nevis.

The OFDA Phase 11 of the CBI Project is being implemented with the assistance of a small Management Team. To date 2 local experts have been engaged to assist with strengthening the NS via the development of a "Strategic Plan" and Damage Assessment & Needs Analysis (DANA) Forms.

**Saint Lucia Red Cross (SLRC)**

**New!** The Saint Lucia Red Cross continues to support those most affected by Covid-19. SLRC has distributed food items to 260 households, 185 of which were distributed to daily paid staff of the Castries Constituency Council (CCC). The cohort was selected as the CCC was facing challenges in meeting their wage bill to the workers. Given the implications of sanitation and hygiene on the spread of COVID-19, SLRC has also provided guidance to these workers on how to continue working in a safe environment. Members of the Castries' Fishermen's Coop and...
other vulnerable persons also benefited from the distribution. Additionally, 40 volunteers of the Saint Lucia Red Cross received food-parcels.

The demand for support from the SLRC continues to increase as several persons have lost jobs and there is no unemployment insurance. The NS continues to monitor the situation to identify the most effective interventions including livelihood support activities and PSS.

SLRC continues to distribute educational material on COVID-19.

SLRC is part of a working group developing shelter guidelines in preparation for the hurricane season amidst COVID-19.

SLRC ambulance service continues to transport persons between the country's two hospitals.

**Saint Vincent and the Grenadines Red Cross (SVGRC)**

SVGRC continues to provide support in various capacities as the country continues with the national response to COVID-19

**Suriname Red Cross (SRC)**

*New!* On Sunday 21 June, 23 persons were trained in eCBHFA (Community Based Health First Aid) – Covid-19 module

*New!* SRCS is assisting with the disinfecting of different venues and locations.

SRC volunteers continue assisting the National Disaster Office in areas including:

- The hotline service established by local authorities and the digitalization of information.
- Logistical and administrative activities.
- Making home visits to people in quarantine.
- On borders points: checking people temperature and carrying out prevention measures.
- Reception and accompany of repatriates to quarantine facilities.
- Identification and approval of quarantine facilities.

**Trinidad and Tobago Red Cross Society (TTRC)**

The TTRC adult coping kit was launched and will be distributed soon.

TTRC continue to utilise social media platforms to send out risk communication messaging. Food Security measures are still ongoing in the form of food vouchers and hygiene kits. Basic screening ongoing for socially displaced persons in continued partnership with the Ministry of Social Development. Public Service announcements are still ongoing in the various communities.

PSS kit continued to be distributed. We have distributed to the Trinidad and Tobago Fire Service, Trinidad and Tobago Regiment, Trinidad and Tobago Prisons Service and Trinidad and Tobago Police Service and their children. Hotline and call centre still operational.
Activities of NRC branches

**Aruba**

New! The economic impact of Covid-19 has been more acute on the autonomous islands Curacao, Aruba and Sint Maarten (CAS). Activities in the past weeks have focused on helping the most vulnerable meeting basic needs including food, hygiene, and shelter.

New! The project via the Ministry of Interior Affairs (NL), in which the Red Cross coordinates and implements (together with local partners) a large-scale COVID response operation will scale up further from coming week, as all contracts are signed. Until the end of September 2020, the local organisations and the RC on the three islands will deliver food and hygiene for an amount of 16m euro.

Awareness campaign, food and cash distributions, warm meals distribution, ambulance transport, PSS phone hotline, buddy system for older people, donations of toys and books delivery to the local shelter for battered women, contact with community leaders. The branch has provided training to local government and civil servants, care packages to older people, decontamination of police and security cars.

**Bonaire**

Branch activities:

Volunteers sessions held on the risks and prevention of COVID19.

RCB to help registering 225 people soon returning to Bonaire.

Vitamin C and hand sanitizers have been distributed to 80 older people.

RC talked about hurricane preparedness on local radio. Awareness campaign, delivery of care package to older people, registration of repatriations to Bonaire, planning food distributions (not yet ongoing).

**Curacao**

New! The economic impact of Covid-19 has been more acute on the autonomous islands Curacao, Aruba and Sint Maarten (CAS). Activities in the past weeks have focused on helping the most vulnerable meeting basic needs including food, hygiene, and shelter.

New! The project via the Ministry of Interior Affairs (NL), in which the Red Cross coordinates and implements (together with local partners) a large-scale COVID response operation will scale up further from coming week, as all contracts are signed. Until the end of September 2020, the local organisations and the RC on the three islands will deliver food and hygiene for an amount of 16m euro.
### Awareness campaign, elderly telephone hotline, food, hygiene- and baby packages distributions, ambulance transport.

<table>
<thead>
<tr>
<th>Location</th>
<th>Description</th>
<th>New!</th>
</tr>
</thead>
<tbody>
<tr>
<td>Saba</td>
<td>Awareness campaigns, groceries and pharmaceutical delivery service, planning cash distribution (not yet ongoing)</td>
<td>The economic impact of Covid-19 has been more acute on the autonomous islands Curacao, Aruba and Sint Maarten (CAS). Activities in the past weeks have focused on helping the most vulnerable meeting basic needs including food, hygiene, and shelter</td>
</tr>
<tr>
<td>Sint-Eustatius</td>
<td>Awareness campaigns, planning distribution of food or cash (not yet ongoing)</td>
<td><strong>New!</strong> The project via the Ministry of Interior Affairs (NL), in which the Red Cross coordinates and implements (together with local partners) a large-scale COVID response operation will scale up further from coming week, as all contracts are signed. Until the end of September 2020, the local organisations and the RC on the three islands will deliver food and hygiene for an amount of 16m euro. Awareness campaign, food distribution, soup kitchen, contact with community leaders, transport of elderly for grocery shopping, planning cash distribution (not yet ongoing)</td>
</tr>
</tbody>
</table>

### Activities of French RC branches

<table>
<thead>
<tr>
<th>Location</th>
<th>Description</th>
<th>New!</th>
</tr>
</thead>
<tbody>
<tr>
<td>Guadeloupe</td>
<td>The Guadeloupe branch is present in the containment centre to accommodate people arriving at the airport. Coordination with the Regional Health Agency on the health checks during the stopover of these travellers to monitor COVID-19 symptoms.</td>
<td><strong>New!</strong> Distribution of 3000 Hygiene kits</td>
</tr>
<tr>
<td>Martinique</td>
<td>The Martinique branch is present in the containment centre.</td>
<td></td>
</tr>
<tr>
<td>French Guiana</td>
<td><strong>New!</strong> Distribution of 3000 Hygiene kits A WASH project supporting the organization of water distribution and public awareness with prevention messages and social distancing, is being developed to meet the water supply challenges of populations, particularly those living in precarious neighbourhoods. This project is a response to a request from the Regional Health Agency, which noted that the disorganization of water distribution could be dangerous for populations through the epidemic transmission. In this framework, the French Guiana branch has already distributed 3 000 Hygiene Kits Other activities: Emergency accommodation centres, food distribution; medical mobile screening team.</td>
<td></td>
</tr>
<tr>
<td>Saint Martin</td>
<td>The French Red Cross in St. Martin has been mobilized by the authorities to participate in the development of a care access system deployed by the St. Martin Hospital Centre. The project aims to detect cases of COVID-19 among precarious populations who cannot or do not go to the hospital for various reasons (fear of being contaminated, financial and/or administrative precariousness).</td>
<td></td>
</tr>
<tr>
<td>Saint Barthélemy</td>
<td>Partnership with a restaurant to prepare meals to be distributed to homeless people. Health control post at the airport for arrivals on the island.</td>
<td></td>
</tr>
<tr>
<td>PIRAC</td>
<td>PIRAC has deployed on 04/06 more than 28t of equipment from the IFRC warehouse in Panama to Guadeloupe via a military aircraft of the French army. This equipment includes PPE intended to fight against Covid-19 and NFI</td>
<td></td>
</tr>
</tbody>
</table>
for the hurricane season. Some of this equipment are storing in the PIRAC warehouse in Guadeloupe, while the rest was deployed in Dominica on 06/10 by another smaller military aircraft. The rest of the equipment will be deployed to Saint Kitts and Nevis, Saint Vincent and the Grenadines and Grenada on 24 and 25/06.
PIRAC also participated in a shipment of PPE material to the Haitian Red Cross via the ECHO humanitarian flight from France to Haiti (19/06)

<p>| British Red Cross overseas branches (Anguilla, Bermuda, the British Virgin Islands, the Cayman Islands, Montserrat and the Turks and Caicos Islands) |</p>
<table>
<thead>
<tr>
<th>All British Red Cross Overseas Branches are supporting with providing information via social media and other platforms in English, Spanish, Haitian Creole, Portuguese and Tagalog, where appropriate.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Activities of British RC branches</td>
</tr>
<tr>
<td>Anguilla RC (ARC)</td>
</tr>
<tr>
<td>Bermuda RC (BRC)</td>
</tr>
<tr>
<td>British Virgin Islands (BVI) RC</td>
</tr>
<tr>
<td>Cayman Islands (CI) RC</td>
</tr>
</tbody>
</table>
CI)CR RC collaborates with all relevant government agencies involved in the Covid-19 response. They have an MoU with government to manage the national volunteer response; to recruit, train and deploy volunteers.

CIRC continues to produce masks for frontline workers. The materials have been received by government or donated by the private sector.

CIRC is using different communication channels to conduct awareness campaigns on Covid-19

**Montserrat RC (MRC)**

**New!** The Montserrat RC (MRC) food and basic needs assistance programme will distribute supermarket vouchers to supplement the government’s cash assistance for households who have children.

MRC have also identified a gap of primary-aged children who are unable to access remote education due to no access to a computer/tablet and are scoping a project to purchase computers for them.

Montserrat RC (MRC) continues to support with a grocery and medicine delivery service.

MRC continues to operate the food bank set by the government it – delivering food to vulnerable groups including older people and the Hispanic community. As the economy is reopening, the Government will be implementing a cash programme to replace the foodbank and MRC is in the scoping phase of how they might support.

**Turks and Caicos Islands (TCI) RC**

TCI RC are running a small voucher programme to provide $50 vouchers to those most affected by the Covid-19 pandemic, distributing 50 so far.

TCI) RC collaborates with all relevant government agencies involved in the Covid-19 response, which has among others involved the provision of hygiene kits and clothes for Haitian detainees PSS hotline from 7am – 11pm.

---

**Latin Caribbean**

Considering the emergency, the IFRC working with NS and donors has designated funds from ongoing projects funded by DIPECHO, UNDP and Swedish Red Cross to support prevention actions.
National Societies response

**Cuban Red Cross (CRC)**

New! 21 Cuban Red Cross Relief Groups received disaster response training and equipment (19 Municipal Relief Groups and 2 Specialized Relief Groups).

New! Complying with biosafety and protection measures, no volunteer on duty has tested positive for COVID-19.

3,566 volunteers involved in COVID-19 response activities in the 15 Cuban provinces (158 municipalities). 336 volunteers are actively supporting the response in 52 of the Ministry of Health's isolation canters (case reception, nutrition, psychosocial support to patients and families, logistics, hygiene, elaboration of materials, among others). Face masks elaborated by 127 volunteers in 35 municipalities (11 provinces). Working with Health and Civil Défense authorities in 23 border control points in 6 provinces. Fumigation of key areas. Continue making efforts to identify population in need of re-establishing contact with families.

The National Society is supporting the Ministry of Health in checkpoints, protective measures, awareness-raising, distribution of medicines and provision of services in quarantine centres. Members of Cuban RC operations and relief are being mobilized to support community actions. PPE and printed COVID-19 and awareness materials distributed.

**Dominican Red Cross (DRC)**

New! “Let's not let our guard down” awareness campaign to promote and emphasize compliance with protection and distancing measures even in this reopening phase.

New! Safe Return to Work” communications campaign to promote adequate personal and workplace protection measures

Volunteers from the Dominican Red Cross, through its National Sanitary Disinfection Brigade (BRINADES), participate in disinfection days in public spaces in hospitals, schools, neighbourhoods, and prisons in different provinces of the country. The Dominican Water and Sanitation Team (EDAS) continues to install hand washing points and instructions.

The Blood Bank has processed 1,172 units of blood components between June 15 and 19. 123 Ambulances provided medical assistance to 11,550 people through the Emergency Service of the National System of Emergency Care and Security 9-1-1.

Food kits, contributed by the private sector, continue to be delivered to elderly people living alone, parents and children benefiting from school lunches.

Community networks are kept informed and oriented on social distancing and the necessary distancing in supermarkets, markets and pharmacies is reinforced. Subsidiaries work with local organizations to carry out communication campaigns, train municipal leaders and share information through their social media. Information focal points on virtual volunteering have
been established in each branch and volunteers access the Spanish Red Cross' Virtual Volunteering course.

Distribution of protective materials and equipment to headquarters and branch staff.

Psychological first aid is provided to affected persons and pre-hospital care staff while a PHC hotline has been set up.

The Risk Management Department assigned technical staff to support the monitoring and management of emergency information on the IFRC GO platform. Humanitarian diplomacy efforts and actions continue to support improved coordination between the Dominican Republic and Haiti. The Ministry of the Presidency activated in April the Provincial Committees for Prevention, Mitigation and Response of which the National Society is an integral part. Close communication and sending of key messages to the national EOC.

National Society operators continue to work in the COVID-19 call centre established as part of the National Customer Care System.

The Dominican Red Cross Crisis Management Room is constantly monitoring COVID-19.

<table>
<thead>
<tr>
<th>Haiti Red Cross Society (HRC)</th>
<th>New! Hand washing facility in Arcahaie and Les Cayes installed.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>New! Delivery of Hygiene Kits to 5 local committees</td>
</tr>
<tr>
<td></td>
<td>The National Society in its community outreach activities has shared messages related to the prevention of violence, including gender-based violence. Including protection systems.</td>
</tr>
<tr>
<td></td>
<td>Specialized volunteers from the Haitian Red Cross and the Civil Protection Directorate continue with disinfection spraying sessions in different public buildings in the country to protect employees and users who frequent these public establishments (Ministry of Public Health and Population, Ministry of Social Affairs and Labour, Maritime and Navigation Service of Haiti, Grace Children’s Hospital, Haitian State University Hospital and National Television of Haiti)</td>
</tr>
<tr>
<td></td>
<td>Hand washing points placed in different locations in Delmas 33, Airport Crossroads, Maïs Gaté, Delmas and Carrefour de Gérald Bataille and Croix-Desprez. Increased community outreach and disinfection activities in conjunction with personnel from the MSPP and the Civil Protection Directorate of the Port-au-Prince. 22 volunteers trained in protection measures from the Croix-des-Prez branch; sponsored by the Canadian Red Cross.</td>
</tr>
<tr>
<td></td>
<td>20 Volunteers and Delmas City Hall personnel were trained on essential protection measures, social distancing, and key messages for the COVID-19 response. Ongoing RCRC Movement coordination to support the HRC in strengthening and adapting its ambulance service to respond to surge the demands of a potential outbreak. Monitoring migration flows at unmonitored border points where there have been reports of mobilization.</td>
</tr>
<tr>
<td></td>
<td>A direct line of contact established between the President of the HRC and the Ministry of Health. Working group (HRC Senior staff, volunteers, and Movement partners) created to enhance monitoring and preparedness. With the direct support of IFRC, the bi-national agreement has</td>
</tr>
</tbody>
</table>

New! Hand washing facility in Arcahaie and Les Cayes installed.

New! Delivery of Hygiene Kits to 5 local committees

Haitian Red Cross Society delivers hygiene kits to different local and regional committees. Source: Croix-Rouge Haïtienne juinio 2020
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. Enhanced movement coordination to support the HRC in strengthening and adapting its ambulance service to respond to surge the demands of a potential outbreak.

### South America

<table>
<thead>
<tr>
<th>Government Actions</th>
<th>Argentina</th>
<th>Bolivia</th>
<th>Brazil</th>
<th>Chile</th>
<th>Colombia</th>
<th>Ecuador</th>
<th>Paraguay</th>
<th>Peru</th>
<th>Uruguay</th>
<th>Venezuela</th>
</tr>
</thead>
<tbody>
<tr>
<td>Declared Alert</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Preventive quarantine for nationals and foreigners</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Curfew / isolation required</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>School Suspension</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Restriction to public events and meetings</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Flight restrictions</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Restrictions on access to the country</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Drinking/Distribution restrictions</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Face-to-face work</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Non-essential trade</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Schools and educational centers</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Events and public spaces</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Flights and access to the country</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>

**REFERENCES:**
- Yes / Yes there are restrictions
- Partial restrictions
- No / No restrictions

### National Societies response

**Argentine Red Cross (ARC)**

- **New!** +4,800 activities carried out since the beginning of the pandemic (60% of the activities have been field activities, the rest through remote means)

- **New!** +27,500 volunteer participating in the response since the beginning of the pandemic

- **New!** Work is being done in the Water, Sanitation and Hygiene Promotion sector to improve the access of vulnerable communities to safe water and thus reduce the spread of COVID-19, through the production of drinking water, safe storage and home treatment.

- **New!** Supplies such as: respirators, volumetric infusion pumps and personal protection equipment were delivered to strengthen the health system in different hospitals and out-of-hospital centres in several parts of the country. These supplies were acquired with the collection of the initiatives: Argentina needs us and United for Argentina.

- **New!** The second accountability report was prepared and disseminated through the media.

Three planes arrived with supplies to equip the local health system and with PPE for the personnel involved in the emergency. Also, 10,000 thermometers arrived to be used in the "Detect" program of the national government, which is dedicated to the early detection of COVID-19 symptoms, especially in vulnerable communities.
5 COE's are operational. Actions continue in the communities in the north of Salta where a water treatment plant has already been installed to provide up to 60,000 litres of drinking water per day to all the communities affected by the social and health emergency, and work is being done on assistance and health promotion linked to issues such as coronavirus and dengue, among other actions.

Food Security and Livelihoods: Food assistance and nutritional advice to community kitchens, which have seen their demand increase due to the inability of the most vulnerable families to carry out their usual economic activities. In the recovery phase, work is being done with the same communities to strengthen and protect their livelihoods. Responses will be contextualized according to whether they are urban, peri-urban, or rural populations, and according to the particularity of each local economy.

ARC is developing a Comprehensive Plan of Action to respond to the COVID-19 pandemic in coordination with the National Government. Two main lines of action have been developed:

On the one hand, in coordination with the Ministry of Health and support for IFRC processes, work is being done to equip the national health system, strengthening the capacity to provide care in hospitals and out-of-hospital centres, and providing inputs and personal protection equipment for health personnel. This line of action is supported by two fundraising campaigns: "Unidos por Argentina" (United for Argentina): a telethon held on 5 April, on national open television channels to raise funds, and "Argentina Nos Necesita" (Argentina Needs Us): a fundraising campaign to which private sector actors contribute.

On the other hand, the National Society is implementing actions through its network of branches and higher institutes throughout the country, focusing on the health aspect and support for people in vulnerable situations. This line of action is being implemented by individual donors, companies, and has the support of the IFRC and the ICRC. Some of the activities developed are:

- Socio-health assistance: assistance in the coordination of out-of-hospital centres and temporary accommodation.
- Tele-assistance in emergencies: remote centre for monitoring, follow-up, and emotional support for more than 50,000 people affected by COVID-19 and their relatives, which operates 24 hours a day.
- Training for health personnel: specific training in intensive care, on-call and respiratory problems for nurses and health personnel, both virtually and in person.
- Support for control and prevention actions: temperature taking on routes, pre-hospital triage, prevention and health safety on public roads.
- Assistance to people abroad and new arrivals: assistance and monitoring of repatriated people and restoration of contact between family members.
- Risk communication: providing accurate information from reliable sources to communities that help combat the distress caused by rumours and uncertainty.
- Assistance to people in a situation of vulnerability: support to the state and other organizations in restoring food and medicine to people in a position of vulnerability, such as people at risk, older adults, people with disabilities, people on the streets, and migrants.
- Dealing with social isolation and psychosocial support by telephone: NS volunteers make calls to the general population, people with risk factors and adults over 60, to provide information on care, psychosocial support, and recommendations for dealing with social isolation.
- To promote community participation and accountability to the community, the NS launched the first Accountability Report, which was disseminated to individuals and donor companies through various media outlets, as well as broadcast and published in the media and social networks.
Bolivian Red Cross (BRC)

3,340 food kits have been delivered to frontline workers. A total of 4,200 fumigations have been carried out in Potosi. 1,800 hygiene kits have been delivered as well as 2 kits for cleaning community centres.

In health, 240 medical care services have been provided, 49 psychosocial support consultations, more than 250 personal protection equipment have been delivered and 2 community sessions about COVID-19 and social stigma have been held.

The work at the "Tata Santiago" camp in Pisiga, on the border with Chile and in Puerto Suarez on the border with Brazil, is being maintained. A total of 3,455 people has been assisted

832 Restoring Family Links (RFL) services have been provided in coordination with the ICRC. Medical care and the delivery of hygiene kits in the shelters for the migrant population and refugees in the city of La Paz are maintained. Since April, 513 medical services have been provided, and 332 hygiene kits and 135 first aid kits have been distributed. With the support of GACIP and World Vision, hygiene and food kits were delivered in vulnerable areas of Tarija, reaching 1800 people, focusing on children.

180 food kits have been distributed to families affected by the floods in the department of Cochabamba. Facebook Live sessions have been held to disseminate prevention messages to COVID-19. - Volunteers have been virtually trained in epidemic control and psychosocial support. COVID-19's information sessions and relaxation exercises are maintained on this platform. With the support of the Swiss Red Cross, volunteers from the Bolivian Red Cross in the Chuquisaca branch trained the city's police and army in biosecurity.

Awareness campaigns are being carried out in the markets of Santa Cruz de la Sierra. In coordination with the Ombudsman's Office, the Potosi branch provided medical care, took temperatures and delivered medicines to vulnerable groups in Cerro Rico (Roberto and Robertito Mining Centre). A web seminar session was held to share the BRC's experience in the "Management of collective centres in the COVID-19 outbreak". Information on COVID-19 continues to be provided through radio and media announcements in native languages and sign language. In the province of Beni, a prison was fumigated as part of COVID-19 prevention measures.

The National Society participates in the National Office of Operations working groups in the health, water and housing sectors, where it coordinates with government agencies and the Humanitarian Country Team (HCT).

Brazilian Red Cross (BRC)

**New!** In June, the Brazilian Red Cross recorded activities that reached 15,449 beneficiaries in 13 cities in 8 states. These people were reached through: "donations of basic items, medicines and food (3206), "community communication (5126), "education and prevention actions (information dissemination) (1155)"), "triage of suspicious cases (467)"), "disinfection of areas (245)"), "psychosocial support (250)"), "distribution of hygiene and prevention items (5000)".

**New!** The Brazilian Red Cross continues to carry out community awareness actions with the distribution of graphic material in 2 cities in 2 states. Under this line, triage activities of suspicious cases are also registered in 2 cities of 2 states. PHC actions are registered in the state and city of Rio de Janeiro, one

of the most affected states. The triage activity of suspicious cases was performed in the states of Rio de Janeiro (83.5%) and Amazonas (16.5%).

**New!** In the northeast of the country, five disinfection activities were carried out, reaching 245 beneficiaries. For this region, 5,000 people were registered as beneficiaries of hygiene and prevention items.

**New!** In terms of Livelihoods and Basic Needs, the National Society continues to work on the distribution of food, basic baskets, water and clothes. The southeast of the country has been the region with the most beneficiaries in this period, reaching 40% in these activities.

**New!** The Brazilian Red Cross continues to work with its strategic partners on resource management for response activities as well as for the development of the National Society. It is currently working in close communication with the components of the Movement and a letter of agreement is in force with the International Federation of the Red Cross and Red Crescent for CHF 185,000, of which the CVB is already working with the first CHF 155,000.

From March to the end of May, BRC provided services to more than 275,000 people. Among the activities carried out by the various branches throughout the country are vaccination campaigns, donation distribution, city sanitation, and rapid testing for COVID-19. More than 7,800 baskets, 750 gallons of water, 20,200 protective gloves, and about 35,900 masks were distributed during this period. Also, some branches distributed other hygiene products (razors and alcohol). During vaccination campaigns, more than 67,900 people were vaccinated against influenza.

The BRC hospital is 100% occupied and has two refrigerated chambers with capacity for 24 bodies and four non-refrigerated containers that work as follows: one for recognition, one for disinfection of clothes and utensils, one for support to the funeral service and one for the family reception room.

The humanitarian logistic hub is distributing 10,000 basic baskets per day and 5,000 to 8,000 hygiene kits daily. The Paraná branch hospital has 53 beds for COVID-19, with the capacity to expand up to 92 beds in Contingency Units for Respiratory Syndromes. The branch of the Federal District is mapping positive cases through rapid testing. To date, the Federal District branch has conducted 21,000 rapid tests.

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 NS, partners and financial resources raised and structure and resources materials available for NS’s response to the pandemic.

BRC is working with the Ministry of Health on joint activities and dissemination of IFRC material in the media. 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 (ChRC)**

**New!** Support for the return of migrants to their countries in the North of the country (Arica).

**New!** Development and distribution of face shields for National Society volunteers.

**New!** Elaboration of educational capsules for the community about COVID-19

**New!** In the Araucanía Region, the affiliates have participated in blood collection campaigns by the Hernán Henrique Aravena Regional Hospital in the city of Temuco.

Some of the actions of the Chilean National Society are aimed at:

- Polyclinic care.
- Support for vaccination campaigns.
- Delivery of emergency kits to migrants, delivery of information and prevention measures to the population.
- Collection of food for affected people and elderly people living alone.
- Visit to people with mobility difficulties and elderly people.
- Support in shelters and to migrant communities stranded in the country and delivery of aid to this group of the population.
- Health routes for people living on the streets.
- Support to blood bank campaign, delivery of food to vulnerable people, support in humanitarian flights.
- Psychosocial support, teleassistance.
- Collection of information for reports and newsletters.

In the region of Antofagasta, the Society assists transport of recovered patients in ambulances, health routes for people in street situation and support to blood bank campaign, food delivery and support in humanitarian flights.

The Atacama-Coquimbo Regional Committee is carrying out a blood donation campaign on behalf of the San Juan de Dios Hospital in La Serena, considering that an adequate reserve is required to meet the health needs of the local population.

The El Loa branch is collaborating in the categorization of patients, support in vaccination, orientation and care in various strategic points of the city.

An interdisciplinary team of volunteers from the Esmeralda-Colina branch conducted an educational exercise at the largest free fair in Colina, where they distributed 600 masks to clients and tenants, who were taught the correct way to use them and at the same time demonstrated the use of a sanitation tunnel installed by the local municipality.

### Colombian Red Cross Society (CRC)

<table>
<thead>
<tr>
<th>Within the response of CRC (04 March - 07 June 2020), 226,579 people have been assisted in 27 Sectionals and 142 Municipalities. In services: 19,209 have been in primary health care, 115,504 in humanitarian assistance, 1,941 through care lines, 4,209 in protection services, 35,122 liters of water distributed, 2,661 related to welfare for volunteers and collaborators, 7,347 in articulation with other institutions, and 75,708 in dissemination of key messages.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infographic of the operational balance of the response in migration during the COVID context, with accumulated figures between March 4 and May 16, including actions in primary health care (11,843 services), delivery of humanitarian assistance to 29,627 vulnerable families, with 19,594 litres of water distributed, and 2,127 actions in protection.</td>
</tr>
<tr>
<td>Care continues, with restrictions, in the Health Care Units. Actions to respond to migrants in transit continue through the delivery of household's items. Provision of health, RFL and counselling services to returned migrants.</td>
</tr>
<tr>
<td>Courses continue to be offered through the virtual campus. Home care for the COVID-19 epidemic (23,811 participants) and Family Emergency Plan in the COVID-19 period (16,836 participants),</td>
</tr>
</tbody>
</table>
International Humanitarian Law (10,435 participants) and Volunteer Management Cycle (1,263 participants)

Guidelines for the provision of connectivity services in the line of RFL, Restoration of Family Contacts, in a face-to-face, by Doctrine and Peacebuilding. The GAPS teams of the branches provide accompaniment via telephone to the staff (volunteers and employees). Promotion and prevention: Sectionals continue to broadcast messages through radio, television, periphery and social networks.

The second session of the Tripartite Committee, made up of the International Federation of Red Cross and Red Crescent Societies, the International Committee of the Red Cross and the Colombian Red Cross, was held this year, where it made its statement: The concern about the continuity of cases of urban violence and other situations of violence, cases of improper use of the emblem and lack of respect for the medical mission, the analysis of the Colombian Red Cross Society's Continuity Plan, the perspectives of the International Committee of the Red Cross and the IFRC's work with the COVID-19, the results achieved to date with the National Response Plan and the current implementation of strategies to continue managing resources with the #YoDonoEnCasa campaign.

The consolidation of the EEAHE-COVID19 Special Teams for Humanitarian Attention in Emergencies is being carried out, which will consist of the organization of groups of up to 10 members from each of the Sections to strengthen humanitarian activities. 27 national circulars have been issued with the aim of socializing guidelines, measures and actions in relation to the actions of the Volunteers in this pandemic and decisions from the Commission of the Board and the National Board of Directors. Technical assistance to the Sectionals

Telecare for employees, volunteers and family members. The Peacebuilding and Institutional Doctrine team has held 20 meetings with state and private organizations, to strengthen support networks; and also actions in the different topics such as: medical mission, orientation, tools, strategies, RCF, psychosocial support (NNA, parents, families, promotion and prevention, support), gender and diversity, among others. Implementation of the #PacoEnCasa campaign by addressing the following principles Learning not to assault others, learning to interact and learning to take care of oneself.

Development of the fourth national virtual chat for volunteers "Healthy Alliances", during which 115 volunteers and their families participated, addressing topics such as: healthy eating, physical activity at home and nutritional tools in the context of COVID-19. Continuing Education for Volunteers. Virtual courses for the community: Family Emergency Plan COVID-19 (7,575 people), Home Care COVID-19 (14,900 people), IHL (1,116 people).

Delivery of electronic vouchers to the families of the vendors of the Colombian Red Cross Lottery. To date, 936 families have been given electronic vouchers; and 75 telephone contacts have been made to lottery vendors who are in preventive isolation. In relation to the Colombian Red Cross Lottery, according to the National Government’s guidelines, its commercialization was reactivated with the appropriate biosecurity measures.

The National Board of Directors defined the use of part of the resources collected in the #YoDonoEncasa campaign to support the situation in the department of Amazonas with medical equipment and personal protection elements, as well as the sending of health professionals for needs assessment.

During the month of April, 1,639 news items were recorded, which put us in the media spotlight and positioned us as one of the organizations with the most media presence. From March 25 to April 13, through the virtual campus of the Colombian Red Cross, 119,579 participants accessed the COVID-19 programmes for the community (59,992 participants) and First Aid for the community (59,587 participants)
The National Society launched the fundraising campaign #YoDonoEnCasa, which seeks to support the country’s most vulnerable communities and address the needs arising from this pandemic.

Various response actions are being carried out aimed at migrants (delivery of food kits, primary health care, cash transfers), establishing hand washing stations, distributing drinking water and attending to the prison population. The National Society is providing remote psychosocial support. As part of the procedures of this service, a protocol on how to deal with cases related to gender-based violence has been developed.

Practical guidelines were developed for the branches “Guidelines for the prevention, reception and referral of cases of gender-based violence, including sexual violence during COVID-19”,

Key messages for ethnic populations of African descent have been developed for the Pacific regional offices, mainly on issues related to mental health, prevention of domestic violence through the development of parenting skills.

Shared Red Cross Movement communication to respect the Movement’s emblem.

<table>
<thead>
<tr>
<th>Ecuadorian Red Cross (ERC)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health/APS: ERC maintains its participation in the meetings of the Humanitarian Country Team, sectoral working groups and the National EOC. Within the Health Working Group, it works with government agencies on community health protocols for the oil and automotive sectors. In the provinces of Guayas and Pichincha, medical care is maintained through the virtual appointment system. So far, 200 virtual appointments have been made. Twenty-two pre-hospital care ambulances are still in operation and during the last week 186 emergency calls have been made, especially medical emergencies.</td>
</tr>
</tbody>
</table>

| CCST Lima: Remote PHC services continue in 23 provinces of the country, and 514 services have been provided in the last week. This brings the total to more than 1,600. |

| WASH: Fumigation continues in high-traffic areas, serving 7,000 households in the last week. Reaching more than 29,000 homes. During the last week, two disinfection tunnels have been installed in health centres in Guayaquil. The community distribution of sodium hypochlorite is being maintained in the provinces of Sucumbíos, Imbabura, Manabí and Santa Elena. To date, 5,461 litres have been distributed. |

| Humanitarian Assistance and Migration: With the support of local companies and individual collaborations, the provincial boards have continued during the last week with the delivery of 260 food kits and 18 hygiene kits, serving 2,553 people between migrants and the host population, benefiting to date more than 12,000 people between locals and migrants. |

| RCF points are maintained at the Scalabrini (Imbabura province) and Casa Amiga (Sucumbios) shelters where call and internet services are available. A new RCF point was installed in the provinces of El Oro and Pichincha. With more than 20 RCF services provided. |

| In the provinces of Guayas and Pichincha, medical care is maintained through the virtual appointment system, with 850 medical appointments made to date. Three disinfection bows for people and two for vehicles have been installed in the provinces of Guayas and Santo Domingo. The Health Programme, in coordination with other institutions, has collaborated in the preparation of the MIES document "Recommendations for the management of older persons in the context of the COVID-19 emergency in public and private residential gerontological centres and home care". |

| ERC has worked on the development of job profiles for "telemedicine professionals" and recommendations for the management of newborns with suspected or confirmed COVID-19. The |
National Society has supported the National Health System in carrying out rapid tests. So far, 3,983 tests have been implemented. The provincial delegations of Azuay, Guayas, Galapagos and Pichincha have distributed food kits for a total of 2,240 families.

The Emergency Medical Unit installed in Los Ceibos functions as an evaluation and triage module before entering the emergency area. The youth unit has developed a set of Facebook Live sessions with topics on mental health, parenting skills, reproductive and sexual rights. With the support of private contributions, it distributed food, cleaning and hygiene kits to shelters and organizations that serve people in situations of human mobility in the provinces of Carchi, Imbabura, El Oro, Guayas, Pichincha, Cotopaxi and Sucumbíos. In addition, the RCF point at the Scalabrini hostel in Ibarra is still active and a new one has been installed at the “Casa Amiga” hostel in the province of Sucumbíos.

The National Society's Permanent Monitoring Room is still active, with regular meetings with the presidents of the country's provincial delegations. In addition, with the support of the Lima Cluster, a regional Concept Note (Ecuador and Bolivia) has been prepared for medium-term intervention through ECHO contributions.

**New!** The volunteers, with all the biosecurity care and trained to do so, visit families to assist in their health needs, coordinate aid to reach the food supplies, organize lunches or snacks, make reception with control and prevention of public places where people go, generate open spaces to promote proper handwashing, are attentive to those who need specialized support, motivate those who are in shelters for many days, train on issues related to the management of shelters, use of equipment, controls, records, psychosocial support.

**New!** The 154 system is a service of the Ministry of Public Health that receives hundreds of calls daily with the concerns, worries of people seeking guidance, support, and health care. It is a service created for this emergency by COVID-19, in order to specialize care and strengthen health surveillance. The volunteers are part of this service, with a previous training, following a system of guards and mainly with the best attitudes to assist the user in their needs.

**New!** The capacity of the subsidiaries to offer information and training on COVID-19, biosecurity, action protocols and hostel management is available to all entities that require it. Training spaces are developed, both in person and virtually, for officials from the different government entities that request them, thus promoting the effectiveness of the intervention in all areas.

**New!** In the health centres of populations far from urban areas, and in other centres for community use; in a coordinated manner; hand washing facilities were placed to guarantee health promotion, disease prevention, through the habit of hygiene and individual care. Communities in Nueva Italia, Ñemby, Limpio, Capiatá, Itá, Itapúa and San Pedro have this contribution.

**New!** The Asunción Capiatá, Mariano Roque Alonso and Limpio subsidiaries promote the formation of community brigades to generate co-responsibility for the elimination of mosquito breeding sites. Taking all the individual precautions in this time of pandemic, they develop exchange of knowledge on issues such as waste management, use of organic waste.

Paraguayan Red Cross volunteers carry out campaigns on the correct and timely use of masks, especially in crowded places such as buses, service entities, cemeteries.
The Red Cross with international support is working with hospitals, community centres, schools, markets, and other points identified by the branches to make handwashing a welcome element in all places of community movement.

Volunteers take advantage of all the services they provide to encourage the practice of hygiene that not only prevents VIDOC-19, but also avoids any other health risk.

The National Society has daily pre-hospital care services. Considering the required care, they attend to emergencies on the public highway or at home.

Volunteers are protected during their services, recognition processes, virtual meetings, visits to branches, etc.

The Red Cross trains officials from different bodies and organizations on COVID-19. Topics such as shelter management, action protocols, use of biosecurity equipment and organization of community actions under safety and protection standards are some of the topics required by organizations that want to optimize their services with the appropriate training in this emergency.

Necessary and complementary inputs were delivered to the Ministry of Justice for its Educational Centres for Adolescents. With the support of Unicef, after offering training in the areas of hygiene, water, and sanitation, use of protective equipment and protocols for action in institutions, hygiene kits and biosafety equipment were delivered.

The National Society's volunteers are carrying out psychosocial support activities in temporary accommodation with children and adults. PRC volunteers supported distributions of food kits and the promotion of proper handwashing, in coordination with the Ministry of Science Education, the Ministry of Children and Adolescents, and UNICEF, in schools. PRC supported health controls and route prevention in the towns of Itapua, Ñemby, and Alto Parana. PRC helped with the management of five shelters in the city of Alto Parana. PRC supported vulnerable communities in the preparation of food (soup kitchens) in the towns of Guaira and Nueva Italia.

**Peruvian Red Cross (PRC)**

Health and SCA: PRC continues to develop and distribute face shields that are distributed to health personnel. More than 250 supplies were distributed to health personnel in local hospitals and medical centres. The PHC service is being maintained for the participants and the general public. During the last week, 34 PHC services were provided in the city of Lima and 12 through the tele-health channel. The latter included 107 follow-up calls. Remote medical care and permanent water supply are available to the 130 people in the shelters located in Tumbes, while 54 medical care calls have been made.

CCST Lima: The COVID-19 enquiry service is maintained via the WhatsApp line. To date, 904 people have been contacted, of whom nearly 25% are migrants and refugees.

Protection: The Arequipa and Yslay branch continue to distribute food rations to vulnerable people and street dwellers. More than 2000 rations have been distributed based on local donations. The Lima Branch distributed 250 food kits in the province of Huarochí and provides humanitarian support to the shelter for homeless people staying at the Metropolitan Municipality of Lima Shelter. In addition, 10 food kits and 8 shelter kits were distributed to groups of targeted migrants. Cash-based interventions continue in the city of Lima. During the last week, 32 deliveries were made to vulnerable migrant families.

Branches in the cities of Ica, Pisco, Arequipa, Ayacucho and Mollendo have distributed the private donations received as part of the challenge #unboxing19. Within the framework of the Call for
Migration, 178 cash assistance vouchers (CVA) have been distributed in the city of Lima. 110 protection visors have been distributed to medical personnel in health centres in the city of Arequipa. In Arequipa, shelter and food kits were delivered to migrants and refugees, with the support of UNHCR. The Ayacucho branch has collected donations that will be delivered to the most vulnerable families in the region. RFL care has been provided to walkers returning to their hometowns.

The Arequipa branch of the PRC has given masks to the medical staff of two hospitals in the city of Arequipa and a banking centre with a high flow of people, who have also been trained in their use. The National Society has provided clean water to migrants in the temporary shelters set up by UNHCR and IOM in Tumbes. Cleaning equipment has been distributed for public spaces. Four hundred hygiene kits are being purchased.

**Uruguayan Red Cross (URC)**

**New!** The National Society continues to deliver the food boxes proposed for the first stage of implementation.

**New!** The delivery of Shelter Kits to affected people throughout the country has started.

**New!** The National Society has deployed its technical teams to the field to begin the Feasibility Study, which will provide information on how best to implement livelihood assistance programmes.

**New!** The Uruguayan Red Cross' COVID-19 Response Action Plan has been published and includes actions in the sectors of Health, Water, Sanitation and Hygiene Promotion, Livelihoods, Migration, Protection, Gender and Social Inclusion, among others.

Conducting a needs assessment in the city of Rivera, on the border with Brazil, in response to an outbreak of COVID-19 to define the next interventions.

Summary of actions taken to date:

- More than 100,000 people reached through social networks and more than 8,000 people reached directly, through 12 operating subsidiaries and 290 active volunteers. This includes Tele-assistance focused on the elderly.
- Delivery of food baskets to priority families; Dinner for migrants; Delivery of food to the homeless; Delivery of disinfection kits in long-stay establishments for elderly people; Awareness talks on health and hygiene; Vaccination sessions; Delivery of clothing kits and diaper kits for children. URC National Interventions Teams (ENI for its acronym in Spanish) have been deployed across the country to provide humanitarian assistance to vulnerable people. URC is working on a needs assessment with the National Emergency System. URC is sharing prevention materials with branches and through social media, including a communications campaign to respond to rumours. URC launched a marketing dossier to inform the public and potential donors on the different areas of intervention. The NS is coordinating with universities the incorporation of medical students as volunteers. An online First Aid course is available on the National Society's website, free of charge.
- URC is offering remote assistance (tele-assistance) and accompaniment to people, with priority given to the elderly using the Spanish Red Cross mode, including PSS support to volunteers. URC developed a child- friendly guide with information and key messages of COVID-19 that can be downloaded from their web page. The assistance under the Regional Emergency Appeal for migrants is maintained. 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.

**Venezuelan Red Cross (VRC)**

**New!** Constant monitoring of different official information sources to update key figures and content

Telemedicine: Telephone attention for medical orientation, with a reach to date of 528 people in 4
states of the country (Lara, Zulia, Bolivar, Merida).

CEA: The activities developed within the framework of the CEA approach have been
- Perifoneo and Volanteo with prevention information before the COVID-19.
- Hand washing points and educational talks about COVID-19 continue in the transit shelters for
migrants in the border states.

Communication:
- Follow-up to the #EchaUnaManoPorVzla campaign with sportswoman Greivis Vásquez and
Fundación Greivis Vasquez.
- Management of guidelines for audio-visual material (photos and videos) regarding COVID-19's
actions.
- Follow-up and guidance to the material disseminated by the sections.
- Timely and effective interaction with the public on the various digital platforms in response to
comments or questions regarding the information disseminated by COVID-19.
- Continued broadcasting of micro-radios on more than 200 stations in the country.
- Preparation of gifs, computer graphics and illustrated images concerning COVID-19.
- More than 30 tweets published in one week of COVID-19 and in which surveys are also carried
out to ask for our scope.
- Inter daily publications on Instagram with information material reaching more than 2000
accounts each.
- Publications on the official Facebook account reaching more than 3816 likes.

The response currently being implemented by the National Society against COVID-19 is based on a
reorientation of the activities of the Country Plan programmes and the Appeal for Assistance to
Venezuela.

Health Promotion: Health promotion activities are carried out mainly in the facilities of the National
Society's Hospitals and Outpatient Clinics and are aimed at patients requesting health services from
these institutions. In addition, these activities are also carried out outside the facilities of the
Venezuelan Red Cross branches, through talks to small groups in the community. Since 13 March,
22,210 people have benefited from these activities throughout the country.

Psychosocial support: Psychosocial hotlines have been established for the Venezuelan population in
five Sectionals (Zulia, Táchira, Apure, Guasdualito, Valencia and Falcón). To date, 230 people have
been reached by this service.

The psychosocial actions are maintained, mainly in awareness raising and psycho-education in the
communities, and in the Sectionals that have PASI, especially the border ones. With messages related
to the prevention of GBV during quarantine, self-care, stress and anxiety management. To date, 1223
people have benefited from these activities.

Epidemiological surveillance: The National Health Directorate regularly sends relevant scientific
information on the evolution of the COVID-19 epidemic at the global and regional levels to the
Venezuelan Red Cross Health Network.

During the period of this report, the hospitals and outpatient clinics of the National Society's Health
Network have continued with passive surveillance activities. As of the date of this report, 24 sections
regularly send their epidemiological reports to the National Health Directorate of the Venezuelan Red Cross. Since the last report, 14 patients suspected of having COVID-19 have been identified (Barcelona, Barinas, Capital District and Zulia Sections), patients referred to Sentinel Hospitals.

Since the beginning of the national quarantine, 1,561 patients not related to COVID-19 have been treated in the emergency services of the hospitals and outpatient clinics of the CRV.

Activities of National Society Sections and sub-committees

- Sub-committee on Sailing: Disinfection of commercial premises in the centre of the La Vela municipality (beneficiaries 31 persons), activities to promote handwashing (beneficiaries 73 persons)
- Coro Section: Peripheral activities on key prevention messages against COVID-19 in the Castulo Marmol Ferrer community, municipality of Miranda Beneficiaries approximately 1100 people. Delivery of individual hygiene kits to 300 people. Training on biological waste disposal protocols for the Section’s volunteers. Delivery of kits. Delivery of personal hygiene kits to people housed in PASI - Petit Municipality (benefiting 60 people), PASI Gimnasio Carlos Sanchez (benefiting 43 people)
Regional Update

In the period from 8 to 24 June 2020, the epidemiological situation in Europe region has continued to evolve and slightly improved compared to May 2020. As of 24 June 2020, 29% of the global cases (more than 48% in April) and 41% of global deaths (more than 68% in April) were observed in the Europe region. The dynamic of epidemic continues to evolve from Western Part of Europe to Central, Southern and Eastern parts including South Caucasus and Central Asia. As lockdown measures are being eased, there are signs of increase in cases in some countries.

Compared to May 2020, the increase in new cases and deaths in Spain and Italy has slowed down, the number of new cases is rapidly increasing in Armenia (20% increase), Azerbaijan (46% increase), Israel (128% increase), North Macedonia (69% increase), Sweden (30% increase) and Republic of Moldova (72% increase). The top 10 countries
with most cases detected are: Russia, UK, Spain, Italy, Germany, Turkey, France, Sweden, Belgium, Belarus and Netherlands.

In the reporting period, the IFRC ROE COVID-19 Response Team continued to provide technical support to the National Societies (NSs), specifically those requesting multi-lateral support, for implementation of the activities for COVID-19 response. Series of Skype meetings with the NSs were conducted (see below) to provide them with technical assistance on operation issues in their response to COVID-19 to their countries, numerous exchanges with NS stakeholders on planning, implementing and supporting NS action were taking place. Wider support has also included supporting National Societies in own income generation activities, including domestic COVID-19 appeals.

The revision of the EPoA for the Europe region is in full swing, following up on the launched of the revised Emergency Appeal (end of May).

**Priority 1: Sustaining Health and WASH**

The IFRC ROE COVID-19 Response Team continued to provide advisory support to South Caucasus NSs in the survey “Secondary impact of COVID-19 on older people and caregivers”. Draft ToR for this survey was developed in close collaboration between Austrian RC, Swiss RC, IFRC ROE and IFRC CCST in the South Caucasus. The Austrian, Swiss RC and IFRC CCST in the South Caucasus will be making financial contributions into this consultancy.

**Epidemic control**

In June 2020 IFRC Europe Health and Care Team organised Consultation meeting on Mobile COVID-19 testing under the EU Emergency Support Instrument. This meeting was organised jointly with IFRC GVA Emergency Health Unit and RC EU office in Brussels. Representatives of the following NSs participated in this meeting: Austrian RC, Czech RC, German RC, Hellenic RC, Italian RC, Spanish RC and Portuguese RC. The main topic of discussion was the interest and existing capacity of the NSs in mobile testing and considering an opportunity to deploy mobile COVID-19 testing teams to support EU Member States as per their request in the coming months. As currently number of EU countries are in the process of the opening borders, participants discussed potential opportunities to extend readiness of these teams on call and ready response.

Bilateral knowledge sharing and exchange meeting between MDA, Israel and Georgia Red Cross organised to discuss possibility to develop COVID-19 testing capacity of Georgia Red Cross. MDA, Israel introduced its own COVID-19 testing experience and possible ways of further development plan of the testing capacity of Georgia RC was discussed.

**Risk communication, community engagement, and health and hygiene promotion**

Guidance for Older People – working with the Health, PGI and RCCE/CEA delegates contributed to detailed guidance for NS staff and volunteers for working with older people in the COVID-19 response, coordinating with Communications and colleagues at global level to develop content and channels for sharing the information, also including volunteer profiles of older people. A global RedTalk on Healthy Aging during COVID-19 will be organized on 29 June with the participation of 2 NSs from European Region RC (Red Cross of Serbia and Swedish RC).

RCCE/CEA have worked alongside ROE Comms and Health colleagues to develop a Social Media COVID Quiz to go out on Twitter.

**Infection prevention and control and WASH at the community level**

In the reporting period IFRC ROE Health Team jointly with IFRC GVA Geneva WASH unit, Learning Platform unit and Country Cluster Teams for South Caucasus and Central Asia prepared and launched cycle of webinars on WASH in COVID-19 context for the NSs of South Caucasus and Central Asia.
On 17 June, a kick-off meeting was organised to cover following topics: Basic WASH, WASH and the relation with Public health, how to use the platform and tools. On 24 June, a second webinar was held on the topic of: Hygiene promotion, WASH – COVID-19 in schools, Hand washing resources, Hygiene kits. In total more than 25 participants from HQ and branches of Armenia RC, Azerbaijan RC, Georgia RC, Kyrgyzstan RC, Tajikistan RC and Uzbekistan RC as well as ICRC offices in South Caucasus took part in these webinars.

The following webinars are scheduled for July: 1 July solid waste management, general COVID-19, disinfection COVID-19; 8 July: facilitation skills TOT, wrap up.

**Maintain access to essential health services (community health)**

In June 2020, the IFRC ROE Regional Health and Care Team facilitated preparation of Red Cross Red Crescent Blood Service activities in the COVID-19 context initiated by the MDA in Israel and Turkish Red Crescent. Online preparation meeting was organised with the participation of IFRC GVA Emergency Health Unit, GAP Secretariat, led by Australian RC and two NSs (MDA and Turkish RC). The main outcomes of the meeting:

- IFRC and GAP Secretariat welcomed the joint initiative of MDA in Israel and Turkish Red Crescent on organizing of online conference on Red Cross Red Crescent Blood Services in the COVID-19 context.
- Taking into account the global importance of this topic and wide experience of the National Societies in different regions of the world (Asia Pacific, Americas, MENA regions) proposed to organize this conference with participation of the NSs globally.
- The following aspects of the Blood Service were suggested for discussions in the conference: Innovations, session convalescent plasma (more scientific), advocacy and auxiliary role of the NSs, challenges with blood donors recruitment in the context of COVID-19, what RCRC can and what cannot do, how RCRC engage with authorities to make sure RCRC is taken into consideration in public policies.
- The format of the Conference: to achieve the main aim and objectives of the conference, it was proposed to combine both plenary and several group sessions for each topic, to create effective platform for knowledge sharing and engaging wide number of the NSs to interactive discussions.
- The agenda, exact date and format of the conference will be agreed and finalised in July 2020.

**Priority 2: Addressing Socio-economic impact**

**Livelihoods and household economic security (livelihoods programming, cash and voucher assistance)**

Six NSs in the region have considered CVA in their plans of action to address the socio-economic impact either through multipurpose cash for basic needs or vouchers for hygiene parcels or clothes. 4 additional NS are currently evaluating the option for CVA interventions.

A Livelihoods and Basic Needs coordinator has joined the ROE team as surge capacity for 3 months. Ongoing mapping to assess NS capacities is ongoing and plans reviewed with the aim to address the socio economic impact of the pandemic in the region. This is done through an NS livelihoods preparedness survey and conference calls with CCST /CO, project managers and other relevant resources. Tailored support and guidance is or will be provided to NS together with IFRC ROE and the Livelihoods Reference Centre. A online help desk has also been put in place for NS to ask specific questions/guidance for their LLH preparedness and implementation.

**Shelter and urban settlements**

11 NSs in the region are actively involved. Activities are focusing on adaptation of collective centres for quarantined persons and the provision of household items to affected families.

**Social care, cohesion and support to vulnerable groups**

Different guidelines were produced in coordination with the Global PGI teams and International organizations to provide technical guidance to NSs on how to better address vulnerabilities related to COVID-19. The technical guidance document aims at IFRC and NS staff involved in the global operation, especially PGI and health focal
points, and provides key messages and activities to deliver during the outbreak, considering key groups at risk of exclusion. The guidance outlines issues that may threaten people’s dignity, access, participation and safety, and suggests actions to address these threats. Likewise, key messages were disseminated and basic guidance provided on PGI in the response to COVID-19 (IFRC for NS staff and volunteers). Technical webinars were also organized to discuss about NSs activities and challenges in addressing risks and vulnerabilities and provide guidance on best ways to adapt services and address access barriers.

**Priority 3: Strengthening National Societies**

National Society readiness (preparedness, capacity strengthening, auxiliary role and mandate)

In the reporting period, the IFRC ROE COVID-19 Response Team continued knowledge sharing and technical support to the NSs of the region by organizing following webinars on different topics of COVID-19 response.

- **European regional webinar `Working with older people during COVID 19`**. On 8 June, IFRC ROE and GVA Health, CEA and PGI focal persons conducted a joint webinar with participation of 53 participants. Several aspects of `Working with older people during COVID 19` from Health, CEA and PGI perspectives were discussed.

- **Two MHPSS webinars were conducted**: Webinar on “Remote Psychological First Aid” on 4 June and “Caring for staff and volunteers” was conducted on 11 June 2020. Both webinars were organised jointly with IFRC Reference Centre for Psychosocial Support. These webinars were very well accepted by participants and served as an excellent platform of sharing advance experience and best practice on MHPSS.

- **Livelihoods Webinar**: Organized in coordination with Livelihoods Reference Centre. 12 NSs from Europe and Central Asia participated, where the impacts of COVID-19 on livelihoods has been discussed along with the services of the Livelihoods Reference centre. A survey on Livelihoods preparedness of National Societies, targeting all European and Central Asian NS, was launched in the aftermath of the webinar and was open until 12 June. The results of the survey are being analysed.

- **ICRC and IFRC Regional Offices for Europe and headquarter colleagues arranged a webinar on: COVID-19 and Engaging with Migrant Communities**. Presenters included: VOICES Network (an initiative bringing together experts-by-experience to advocate on refugee and asylum issues), Turkish Red Crescent, Hellenic Red Cross, and migration, CEA, and communications experts from ICRC and IFRC. During this interactive webinar, guests, National Society speakers and participants shared their insights and experiences of how to better engage people who are migrants in the COVID-19 response.

- **Webinar with RC DM and / Civil Protection Focal Points**: jointly organized with RCEU Office and 15 NS attended the call. ROE COVID-19 team presented the preparedness, response and information management aspects of the COVID-19 operation from the regional perspective, where RCEU office has also facilitated the section on Civil Protection Mechanism, rescEU, Emergency Response Coordination Centre (ERCC) collaboration as well as the impact on the policies.

**Enabling Actions**

**Coordination for quality programming**

**Inter-sectoral coordination with WHO Europe**

In June 2020, IFRC ROE Health and Care Team further developed its cooperation and coordination with WHO Europe Regional Office. On 18 June 2020, IFRC representatives participated in the Regional WHO-UN-Red Cross coordination platform to discuss the Global Action Plan on Healthy lives and well-being for all, and engage with Member State representatives to understand, discuss and address current, country-specific challenges in multisectoral health response activities. This meeting engaged representatives of multisectoral health response actors at the regional and country level.
In the framework of IFRC cooperation with WHO, the IFRC ROE COVID-19 Team is considering an opportunity to engage our National Societies in Risk Communication and Perception surveys. Potential countries for this survey is Albania, Azerbaijan, Bosnia and Herzegovina, Bulgaria, Georgia, Kyrgyzstan, Kazakhstan, Poland, Czech Republic, Moldova, Montenegro, North Macedonia and Ukraine. WHO will request their country teams to reach out to respective NS counterparts.

**IFRC-ICRC Movement coordination**

The "Joint ICRC IFRC Guidance on the inclusion and protection of migrants in the face of COVID-19 pandemic in Europe and Central Asia" was finalized and shared with all NSs in Europe Region. This guidance is to support advocacy-oriented communications and to provide talking points when engaging with governments, donors, humanitarian and development organizations, making sure that the protection of migrants and their access to key and basic services are considered in all national or regional level response plans and contingency measures.

IFRC ROE COVID-19 Response Team further developed its close collaboration with ICRC. IFRC ROE Health and Care Coordinator conducts regular (on a bi-weekly basis) meetings and exchange of information with ICRC, Head of Health Sector for Eurasia and Americas, based in GVA. Following main areas of cooperation identified so far: MHPSS, RCCE, PPE use. On MHPSS, close cooperation between IFRC and ICRC Europe regional PSS delegates established, joint actions identified. IFRC and ICRC closely work together in RCCE with special focus on the most vulnerable groups, such migrants, people living in fragile contexts. ICRC representatives in South Caucasus participate in the cycle of WASH webinars organised by IFRC. Currently ICRC supporting several NSs by adapting existing Health/MHPSS programs to the COVID-19 context: Armenia, Azerbaijan, Bosnia and Herzegovina, Georgia, Greece, Kyrgyzstan, Tajikistan, Ukraine.

In addition to the above, regular calls are in place between IFRC Regional Director a.i. for Europe Region and ICRC Regional Director for Europe and Central Asia.

**National Society Updates**

According to public COVID-19 field reports submitted to GO platform

<table>
<thead>
<tr>
<th>HEALTH AND WASH</th>
<th>SOCIOECONOMIC INTERVENTIONS</th>
<th>NS INSTITUTIONAL STRENGTHENING</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ambulance services for COVID-19 cases</td>
<td>Management of the dead</td>
<td>National Society readiness</td>
</tr>
<tr>
<td>Community-based surveillance (CBS)</td>
<td>Isolation and clinical case management for COVID-19 cases</td>
<td>Livelihoods, cash support &amp; food aid</td>
</tr>
<tr>
<td>Epidemic control measures</td>
<td>Maintain access to essential health services (clinical and paramedical)</td>
<td>Shelter and urban settlements</td>
</tr>
<tr>
<td>IPC and WASH (community)</td>
<td>Maintain access to essential health services (community health)</td>
<td>Support to volunteers</td>
</tr>
</tbody>
</table>

**National Society Response per pillar**

12 Ambulance services for COVID-19 cases
15 IPC and WASH (health facilities)
2 Management of the dead
24 CEA, including community feedback mechanisms
29 National Society readiness
10 Community-based surveillance (CBS)
11 Isolation and clinical case management for COVID-19 cases
31 MHPSS
30 Livelihoods, cash support & food aid
19 Epidemic control measures
19 Maintain access to essential health services (clinical and paramedical)
34 Risk communication, community engagement, and health and hygiene promotion
32 National Society sustainability
17 IPC and WASH (community)
19 Maintain access to essential health services (community health)
31 Social care and cohesion, and support to vulnerable groups
<table>
<thead>
<tr>
<th>Red Cross</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Albanian Red Cross</strong></td>
<td>Albanian Red Cross (ARC) distributed standard food packages for people in need - while maintaining distance as well as using protective equipment. Blood donations continue in some branches. Additionally, awareness raising activities are performed through social media about COVID-19 for prevention and sharing facts-based information on the disease. The three IFRC delegates in the country support the ARC in their efforts to enhance the ARC support to the COVID-19 affected families and communities.</td>
</tr>
<tr>
<td><strong>Andorran Red Cross</strong></td>
<td>The National Society is currently dealing with the social economic fallout, organizing a food bank and distribution of essential necessities to those in need, mobilizing 130 volunteers over last weekend and collecting 8,400 kilograms of supplies. The Andorran Red Cross has otherwise returned to normal operations.</td>
</tr>
<tr>
<td><strong>Armenian Red Cross Society</strong></td>
<td>ARCS is part of the national response mechanism set up under the auspices of the Deputy Prime Minister. From the very first days of the State of Emergency, the ARCS has been implementing activities in response to the needs of vulnerable groups in collaboration and coordination with the Commandant’s office, Ministry of Labour and Social Affairs, Ministry of Health, Ministry of Territorial Administration and Infrastructure, all the Administrative Regions of Armenia and the Yerevan Municipality. All other ARCS care services continue to operate in the same mode-humanitarian assistance is being provided to lonely older people, people with disabilities and refugees. To date, the Armenian Red Cross Society supported over 20,000 vulnerable people across the country with basic food and hygiene supplies. 1,500 Armenian Red Cross volunteers support the humanitarian operation. ARCS Psycho-social support centres operate in an emergency mode, in cooperation with the Ministry of Health and the Ministry of Labour and Social Affairs, in four locations of Armenia: two in Yerevan, the capital city, one in Tavush region, city of Dilijan, another one in Gegharquniq regions, city of Gavar, where ARCS psychologists provide psycho-social support services to anxious citizens and also conduct volunteer recruitment, registration and provide guidance. The centres allow the identification of people in difficult situations, establish their needs and assign volunteers to help with some households needs, including with shopping for lonely older people and people with disabilities. Between 16 March and 10 June, 7 PSS officers and staff responded to 10,285 calls and helped with 520 home visits by volunteers. Armenian RC continues to operate hotlines for people who are in isolation and provides referrals and direct services that are within its response plan. The Armenian RC is focusing on risk communication across the whole country through printed information materials, social media and telephone. To date 69,000 people were directly covered by ARCS’ risk communication and awareness raising work and about 135,000 indirectly. Some 7,000 leaflets with the hot-lines numbers were printed and distributed to the general population and people in isolation. 35,000 leaflets were printed based on translated versions of leaflets developed by the IFRC. All risk communication materials and community engagement strategies consider issues of domestic violence, child protection, working with people with disabilities, working with migrants and capturing myths and misinformation to further adjust risk communication approaches. Volunteers are being trained in these areas.</td>
</tr>
<tr>
<td><strong>Austrian Red Cross</strong></td>
<td>So far, 20,100 infectious transports and 186,000 COVID-helpline calls were handled by the Austrian RC. 222,700 regular COVID-19 tests were performed by RC staff and 73 mobile teams are still active conducting tests on daily basis. 26 drive-in testing stations remain open and operational. A Pageflow story on the Armenian and Georgian Red Cross COVID-19 response for fundraising and visibility purposes can be accessed <a href="#">here</a> in German language.</td>
</tr>
</tbody>
</table>
### Red Crescent Society of Azerbaijan

All humanitarian activities supporting efforts of public authorities against COVID-19 that Azerbaijan Red Crescent Society undertakes are done under the slogan “We are stronger together”. From 28 March till 10 June, the AzRC provided 13,423 vulnerable households, including lonely older people, people with disabilities, migrant families with relief parcels consisting of essential food and non-food support and providing social services in Baku and 53 locations across the country. To date, 1,978 volunteers across the country have been involved in the response and received training. Online COVID-19, PSS, Healthy lifestyle training was provided to 96 NS staff and volunteers, as well as the community volunteers in Ganja, Mingachevir, Lankaran, Astara and Sheki. Awareness raising and risk communication work is activated in all regional branches. 926,000 information materials on COVID-19 prevention were produced by AzRC based on materials shared by the IFRC developed by the WHO and distributed in-country. The AzRC established a hotline in Baku at its headquarters. From 27 March to 10 June, over 4,873 phone calls were received through this hotline. Branches also receive regular phone calls. To date, around 47,000 calls were received. Thanks to six big supermarket networks of “Bravo”, “Araz”, “Bolmart”, “Grandmarket”, “Bazarstore” and “Rahatmarket” in Baku, Sumgayit and Ganja, AzRC successfully implements a humanitarian campaign whereby buyers are encouraged to do an extra purchase to help provide food to older people.

![Volunteers and staff of Azerbaijan Red Crescent are distributing food packages and hygiene kits to lonely elderly people and low-income families across the country. Photo: AzRC](image)

### Belarus Red Cross

The BRC continues its work in accordance with the five main areas of activities. Provision of sustainable work of the medico-social service of the BRC “Dapamoha”: 147 visiting nurses and 17 junior visiting nurses provide home care to more than 1,500 people. 1,802 volunteers have been recruited to provide social support to vulnerable groups of the population (older people living alone, people with disabilities, 1\textsuperscript{st} and 2\textsuperscript{nd} level contacts) throughout the country. More than 20,000 people have been assisted to date. A total of 11,338 home deliveries of prescriptions from health institutions, 5,714 deliveries of food and essential goods, and 10,056 services related to other needs have been provided by volunteers. Personal protective equipment has been handed over to volunteers and social workers of 147 social service centres: 193,114 disposable gloves, 10,292 face masks, 17,940 litres of antiseptic, 250 medical overalls, 707 face respirators ffp2. Personal protective equipment was also provided to social workers in 84 inpatient social service institutions: 42,800 disposable gloves, 2,140 face masks, 4,498 litres of antiseptics, 2,922 medical overalls, 1,400 shoe covers, 1,400 medical aprons, 1,400 medical armbands, 50 protective shields, 18 non-contact thermometers, 4,636 ffp2 respirators. A multi-channel telephone helpline project has been launched in cooperation with the charity platform "IMENA" supported by telecom service providers. 24 volunteers provide informational and psychological support. Since the beginning of its work, 954 citizens have been provided with support. Assistance to the medical staff of healthcare institutions: Thanks to corporate sponsorship, the BRC has transferred 54,732 tons of drinking and mineral water, as well as 4,200 litres of soft drinks to patients and staff in a total of 83 hospitals. BRC campaign "Medobed": together with various companies the BRC delivers free hot meals to the medical staff of hospitals in Minsk: 7,021 lunches, 1,500 breakfasts and 3,000 servings of coffee have been delivered to 8 medical institutions. The BRC also supports the state health care system by providing healthcare workers from 187 health care institutions with personal protective equipment to date: 169,098 disposable gloves, 7,065 face masks, 11,129.5 litres of antiseptic, 2,694 protective shields, 8,568 medical overalls, 28,346 face respirators ffp2, 3,600 medical caps, 1,080 medical sleeves, 1,190 shoe covers, 680 medical aprons, 150 protective overwear suits, 1 X-Ray device have been provided. Assistance to the staff of the temporary detention facilities of the State Border Committee and Ministry of Internal Affairs of Belarus: With the support of the International Committee of the Red Cross, the staff of 21 temporary detention facilities
facilities received 25,200 disposable pairs of gloves, 25,200 face masks and 2,520 litres of antiseptic.

**The Red Cross Society of Bosnia and Herzegovina**

As of 1 June, since all measures have been lifted and movement is allowed to all population, the need for wide support to the affected population has been seized. However, the Red Cross Society of Bosnia and Herzegovina still providing support to older people if and when needed (upon call) and is working on supporting vulnerable groups through socio-economic programs. In both RC entities, local RC branches are working closely with centres for social welfare to provide support to vulnerable groups. RCSBiH at all levels (Federation of BiH, Republika Srpska and Brčko district) continues to promote all recommendations set by WHO and local authorities through its social media networks as well as through regular presence on national and local TV stations. From 4 to 20 June, there has been a significant increase in the number of confirmed cases (from 2,594 to 3,349). The number of active cases in same period have increased from 455 to 931. However, most of the cases have very weak or no symptoms and are mostly related to contacts through family or workplace so it is still controllable. Hospitals still have capacities and are not overwhelmed, but authorities are warning the population to take all recommended measures seriously.

**British Red Cross**

Community-based cells are delivering support to the most vulnerable focusing on food and medicines, distribution of cash assistance, supporting people to access medical care and return home following a stay in hospital with the support to live independently. Support line providing access to help and psychosocial support. Refugees and asylum seekers receiving support to ensure security of accommodation and access to funds. National society viability being ensured through accessing funds. Staff and volunteers are supported through comprehensive well-being package. Recovery planning is underway to ensure National Society readiness to respond as people’s needs change over time. 2,300 local staff and 4,700 volunteers are involved in the response. Central government agencies, local resilience forums and local authorities involved in the response, coordinating in part through the Voluntary & Community Sector Emergencies Partnership in England, using BRC-developed tools to identify vulnerability and target those most in need. Devolved governments are taking the lead in Scotland, Wales and Northern Ireland alongside LRFs and LAs.

**Bulgarian Red Cross**

In May, the Bulgarian RC has managed to reach out to 28,264 people in need by mobilising 801 volunteers and staff members. Until 14 June, the Bulgarian RC has registered 709 requests via its national PSS online chat platform. Approximately 44% of the requests are coming from the capital city Sofia which is also the location with most COVID-19 cases. A further 563 people were supported via the telephone lines of the branches of the Bulgarian RC in 6 cities, involving 55 volunteers. The Bulgarian Red Cross Youth opened Life skills online training which is free and features vlogs, attracting youngsters to join in. Up to 16 June, BGN 862,116 have been raised via the Bulgarian RC national campaign to support people in need. In addition to financial resources the NS has also raised large amounts of material donations worth over BGN 1,211,779 to support people in need, as well as staff and volunteers of the NS, and the work and safety of medical teams in hospitals, police officers and others actively involved in the fight against the pandemic. The Bulgarian Red Cross partners with another FinTech company iCard to raise funds for the NS covid-19 response. The cooperation will continue beyond the scope of covid-19 campaign and the iCard network presents also an opportunity for prolonged promotion of Bulgarian RC activities to [iCard partners' network](#). The Bulgarian RC donated respirators to municipal and state hospitals procured with financial means raised via the NS campaign in response to covid-19. The amount of the...
**Croatian Red Cross**

The Croatian Red Cross continues to monitor the epidemiological situation and ensures humanitarian assistance according to its national capacities, respecting risk reduction and hygiene measures. The economic situation in the Republic of Croatia becomes more difficult and results in unemployment of 155,000 citizens, facing the COVID-19 caused crisis. The interventions of the Croatian Red Cross fill the gaps in 21 counties and 131 local Red Cross branches, with focus on vulnerable groups of people, supporting their needs in humanitarian assistance. As the main "caregivers" in the country, the Croatian Red Cross provide home care services for 20,000 vulnerable persons and with the assistance of 5,100 personnel (3,500 volunteers and 1,600 staff). For persons in socioeconomic distress, the Croatian Red Cross is implementing project “Your gift for the right thing” and distribution of 11,500 standardized food packages for 11,500 unemployed persons. The “call centre” (0800 11 88) operates on a daily basis and psycho-social support is provided to 6,000 persons with the aim to alleviate their anxiety. Volunteer services at Reception Centres for foreigners (migrants) maintain psycho-social support. The Croatian Red Cross produced a video-clip for children “Clean Hands” and is published on social networks. The World Blood Donor Day was marked on 14 June with voluntary non-remunerated blood donor action organized for the Croatian Red Cross personnel and other voluntary donors, respecting COVID-19 risk reduction measures.

**Cyprus Red Cross Society**

The CRCS issued informative leaflets on COVID-19 in four languages, English, Greek, Turkish, and Arabic, which were distributed to all units nationwide, as well as to all facilities of the CRCS staff and volunteers and to various stakeholders. To serve the needs of the most vulnerable, the CRCS created the “Emergency Service for Support to Third Age and Vulnerable People”, which is available on a Pancyprian basis and is offered one-to-one. People can call the dedicated hotline located in the Headquarters and the request is then forwarded to a volunteer residing in the district concerned. The CRCS, after constantly evaluating the emergency needs of the most vulnerable of our society, is in the process of designing a new psychosocial support (PSS) service. This service will be available to any person in quarantine or self-isolation, to friends and family of affected people, and to the elderly with limited social connections.

**Czech Red Cross**

At headquarters level, the Czech Red Cross has produced educative texts on COVID-19 for use on websites and social networks and has created TV and online educative campaigns. It works in cooperation with Integrated Rescue System of the Czech Republic. It provides counselling services and has prepared humanitarian packages for people detained on the borders for COVID-19 testing. It cooperates with the private sector and with celebrities, including to put on performances for vulnerable people: “Concerts under Windows” (e.g. clients of the Czech RC senior houses.) The Czech media inform the public on available services including those provided by the Czech RC. The local branches coordinate and recruit volunteers, provide humanitarian aid including obtaining basic food and medical items for vulnerable people and provide transport services for older people, distribute information leaflets, provide or support hotline services, provide psychosocial support, distribute masks and other protective items, blood services, assisting families with home education, and cooperate with hospitals and other social/medical facilities (asylum shelters, seniors’ houses etc.).

**Danish Red Cross**

DRC HQ has set up two call centres, where the NS on behalf of the Danish authorities hosts a COVID-19 call centre for three weeks. In the second call centre DRC has established a network linking those in need of support services (shopping/walking the dog) with volunteers to support

---

*Photo: CRC*
them. More than 10,000 persons have volunteered. DRC is also supporting in running a shelter for the homeless and undocumented migrants, who have symptoms of COVID-19. A phone service platform has been set up so that volunteers can chat with people who are alone.

**Estonian Red Cross**
Due to the Covid-19 pandemic outbreak, the state of emergency was declared on 12 March 2020. Estonian Red Cross (ERC) continued with all the activities on branch level in close cooperation with local authorities including food deliveries for older people, supporting people in quarantine, operating soup kitchen, sharing information, explaining emergency restrictions to people and helping to ensure all the precautions are followed in public places like streets, queues, shops, ATMs etc. Four regional coordinators have been involved in the work of regional crisis management centres in close cooperation with the Ministry of Interior.

**Finnish Red Cross**
The Finnish Red Cross is still supporting the most vulnerable groups such as the older and other vulnerable people. Support is offered online and by phone, as volunteers trained in psychosocial support help those still troubled by the situation. The major form of assistance is still public food distributions, accompanied with errand services to most vulnerable and remote friend services.

**French Red Cross**
In addition to its previous activities (reinforcement of the emergency services and emergency response networks; transport of COVID-19-infected people, Red Cross at Home activities, etc.) the French Red Cross developed new ones in the past days. The operation "I offer a mask" is based on the establishment of a partnership between a pharmacy/drugstore and the French Red Cross. Each pharmacy customer purchasing a box of single-use surgical masks has the possibility of offering one or more masks to the French Red Cross. Pharmacies received communication kits from the French Red Cross in order to easily explain the operation to customers. The French Red Cross then collects masks and then gives it to people in need such as homeless people, students, families. This operation was started by volunteers of the Herault's branch and will be duplicated at a national level. Action with detainees: in order to comply with the containment measures, the French Red Cross had to stop its interventions with detainees. The French Red Cross volunteers, in order to maintain contact with detainees usually encountered in its activities, can keep contact through letters as confinement increases isolation. This action will not be continued after leaving containment, but this is a priority to keep a minimal link during the crisis, before a restart of classic activities. This form of social bond is complementary to the platform "Red Cross Listen to Detainees" telephone call. During the confinement period, the teams are reinforced to open the platform from 8 am to 8 pm every day of the week. Red Cross Listening to detainees is confidential and free. Anyone can join. Since 29 April and until 31 July, the French Red Cross has agreed to collaborate with the European Parliament and the Bas-Rhin Prefecture for an unprecedented solidarity operation. The institution which has put its activity on hold due to the epidemic of COVID-19, offered to cook 500 meals every day, distributed by the volunteers of the Red Cross to people in precarious situations. Every day of the week, Red Cross volunteers are mobilized to deliver the 500 meals - starter, main
course, dessert -, cooked in the kitchens of the European Parliament. The French Red Cross helps with visits of families to accommodation facilities for the older and dependent people. Indeed, barriers gestures are still implemented, and structures need to adapt visits as visitors still cannot access rooms. Volunteers help staffs by accompanying people from their room to the place of visits, facilitated contacts with families in order to help to the restart of relations. During the containment, volunteers spent time with patients to help them to deal with isolation and listen to them.

**Georgia Red Cross Society**

The Georgia Red Cross Society has expanded the emergency response operations in coordination with the Ministry of Health, Tbilisi City Hall and the municipalities in the regions, through its network of 39 local branches and over 5,000 Red Cross active volunteers throughout the country and over 4,500 trained spontaneous volunteers. In cooperation with the Coordinating Council against the spread of COVID-19, the Georgia Red Cross Society is arranging special spaces for testing entrants (bus drivers, etc.) at 11 checkpoints of the country. The volunteers and staff members of the different branches are involved in the process. It is worth mentioning that the Georgia Red Cross Society along with the Movement partners have right tools in place for the response to the COVID-19 outbreak in Georgia: Georgia RC leadership made a statement to the Government of Georgia, the Embassies, business associations, foundations, which has been submitted to the Prime Minister of Georgia. The National Society has developed an operational plan until the end of this year, divided response services into phases having in mind the scaling down these services after the crisis, as the GRCS has scaled down some of its services and implementation of the projects temporarily.

**German Red Cross**

Since 10 March 2020, a specific COVID-19 task force was set up with employees of the German RC headquarters. Furthermore, the German RC maintains a liaison office at the Joint Medical Service of the German Bundeswehr and the Ministry of Health, so that effective communication is guaranteed. The main functions of the task force are the following:

Coordination of the German RC headquarters and branches responses and assistance in collaboration with public authorities. Conducting operations of the German RC which are commissioned by the Federal Government (i.e. taking care of returnees -care services, MHPSS, medical check-ups during quarantine in a military barrack or other buildings- patient transport of six Italian (region Bergamo) COVID-19 and two French (region Grand Est) COVID-19 patients for further intensive medical treatment in six hospitals run by the German RC. Provision of situation reports and updates. Central procurement and distribution of PPE and disinfectants. On 17 March 2020, the pandemic was internally classified as a "state of crisis" according to Art. 5.2 of the German Crisis Management Regulation and this is still in force. A detailed and comprehensive Pandemic Preparedness Plan was implemented for the German RC headquarters, which was developed in cooperation with the Robert-Koch-Institute (Germany's leading governmental institution for public health). The National Society has communicated about Covid-19 via social media and through press releases. So far 13 million Euros has been raised via a Corona-emergency assistance fund. COVID-19 responses on a regional/Lander and local level: The 19 regional branches and the Federal Nursing Association of the German Red Cross and its more than 500 local branches conduct a wide spectrum of Covid-19 activities, such as opening of emergency operation centres, operating quarantine facilities, psychosocial support, support in outpatient clinics, conducting Covid-19 pre-tests, support services for people in home quarantine, infectious disease transports,
hotline services, care for homeless people and stranded travellers, emergency day care services in kindergartens and schools.

| Hellenic Red Cross | Greece has implemented measures to slow the spread of the coronavirus, from quarantines to school closures and finally to the lockdown. After the lift of the restrictions and the lockdown measures, most of the businesses have reopened with strict hygiene measures. Hopefully, we have not encountered any increase in the infection rate. As early as 18 May, Greece took the first step to open the airports and travel to domestic destinations. Gradually until the end of May, the interconnection with some major European destinations will be resumed. The Hellenic Red Cross in order to support the migrants at the Centre of Malakasa organized a humanitarian aid distribution of 1,200 individual hygiene item kits, which was successfully conducted on 20 May. A total of 1,189 migrants received the hygiene packages, containing liquid soap for hands, shampoo, body soap, body sponge, face towel, toothpaste, toothbrush, baby wipes, baby diapers, sanitary pads for women and razors for men. HRC’s employees and volunteers participated in the distribution, and executives of the IFRC and ICRC assisted voluntarily. Regarding the Region, the HRC Local Branch of Thessaloniki, following all the measures for the protection of the volunteer’s health and safety, restarted the educational programs for volunteers, on 18 May. With the reopening of the courts and at the request of the Bar Association of Kalamata, staff and volunteers of the Local Branch conduct body temperature measurements of people entering court premises, while the Local Branch of Loutraki provided the Corinth Bar Association with medical supplies, such as masks, gloves and antiseptics. At the request of the Federation of Judicial Officers of Greece to the Central Governance of the HRC, and following a relevant request of the Magistrates’ Court of Argos, the HRC Local Branch of the city began performing temperature measurements of citizens at the entrance of the Court. Furthermore, people are provided with guidance on how to wear and remove personal protective equipment against COVID-19. HRC volunteers from the Nursing and Social Welfare Services of the Local Branch of Thessaloniki continue to operate a Temperature Measuring Station against the pandemic at the premises of the Ministry of Justice in Thessaloniki and Chalkidiki. |

| Hungarian Red Cross | Supporting families, the older people and those unable to provide for themselves with hot food, non-perishable food, hygiene products and replacement of medicines is a core area of focus in the Hungarian RC response operation. Existing food distribution programs e.g. Meals for Kids and Budapest Catering Program are ongoing. In addition, packages of non-perishable food and hygiene products are distributed to respond to the growing needs as a result of unemployment and its social consequences. Structure of social programs has also been re-designed and adapted to the current situation. Since schools are closed instead of school distribution programs more community distributions are organised. Donation collection points are set up to receive donations in kind in a contactless manner in order to reduce the risk of the transmission of infection. New hygiene and social distancing rules and lockdown measures have been introduced in social welfare institutions and shelters. New regional warehouses were rented to store the aid items and the Budapest Sports Arena was granted for free to the HRC to be used as a warehouse facility. PSS is available through the HRC Info Centre on the info line and similar services are also organised at the branches. The Info Centre disseminates COVID 19 information, organizes and coordinates volunteers. Online and offline information materials are available, info leaflets are distributed with the food and hygiene packages. Activities in support of the ambulance service include the transport of test samples to the laboratories, transporting the health care personnel and volunteers taking samples, providing food for paramedics during their shift breaks, and the assistance in entry temperature checks at border crossing points. Hungarian RC vehicles and drivers are at the disposal of the ambulance service. The Hungarian RC is involved in operator and dispatcher services to facilitate the coordination in terms of logistics. Hungarian RC teams support the Red Zones of hospitals. |
**Icelandic Red Cross**

In the reporting period, the Icelandic Red Cross activated a business continuity plan early in the operation. The NS was actively involved in the National Crisis Coordination and local Crisis Command Centres throughout the operation. The Red Cross Helpline 1717 served as an auxiliary health hotline for several weeks and served as an MHPSS hotline as well. The NS operated isolation centres in two locations (Reykjavik and Akureyri). Volunteers assisted people in quarantine and isolation with necessities in several places, mainly rural areas. Red Cross MHPSS teams were activated several times because of serious COVID-19-related incidents.

**Irish Red Cross Society**

On a daily basis, Irish Red Cross (IRC) continues to deliver essential supplies and care packages to hundreds of vulnerable individuals and at-risk populations. Up until 3 June, IRC volunteers carried out 258 patient transfers nationwide. This included transporting patients to their elective surgeries, oncology appointments, out-patient appointments, and those either discharged home or to step down care. Through the hardship fund, which provides specific support to older populations, 453 grants have been approved, with more than €74,000 distributed to date. Key public health measures continue to be shared online and via printed materials. This includes the production of information videos in more than 8 languages that have been prepared providing guidance on current restrictions per the Governments Roadmap for reopening society and business. IRC continues to ensure that staff and volunteers working with vulnerable groups such as migrants and prisoners have access to the information developed for the IRC response.

**Italian Red Cross**

ItRC is greatly contributing to enhancing coverage in the delivery of services, reaching vulnerable and most affected alike. Through its hotline, through municipalities-social services and directly in communities, ItRC makes sure to cover the last mile of vulnerability. ItRC ensures transportation of patients and temporary infrastructures next to hospitals for triage system, through its toll-free number and in emergency rooms, ItRC provides support information to the population. ItRC works in cooperation with all members of Civil Protection and other organizations and institutions to ensure essential response for the crisis, including monitoring and health care at quarantine facilities, health surveillance at airports, medical and paramedical support in health facilities. In the past two weeks, the ItRC field presence included: 2 medical and nurse staff and 249 volunteers in the airports, 44,398 volunteers involved in activities related to COVID-19, an average of 1,000 means of transportation per day for the activities related to COVID-19, 100 pre-triage tents and 2 Advanced medical posts. Thanks to the donations received, the ItRC has been able to provide the Local Branches with 3 bloodmobiles. Furthermore, the ItRC, in collaboration with the Italian Ministry of Education has launched a project to support the school personnel in the activities related to the national exam at the end of the year. The support of the ItRC employees and volunteers are the following: 60 online training sessions addressed to teachers and school personnel and 21 regional focal points for 1,823 school facilities. The regional focal point is in charge to coordinate the Local Branch that will support the school director in order to facilitate and ensure the containment measures foreseen by the Scientific Committee of the Ministry of Health.

**Kazakh Red Crescent**

The Red Crescent of Kazakhstan continues the emergency response, giving priority to socially vulnerable groups. Thanks to the support of partners and the support of responsive citizens, employees and volunteers delivered 4,716 essential goods to families in need throughout Kazakhstan. Support is provided to blood centres throughout the country in disseminating information, as well as in attracting blood donors. The Red Crescent of Kazakhstan collaborates with the city administration of health. At present, one of our goals is supporting clinic employees with trained volunteers of Red Crescent. Volunteers of Red Crescent assist clinic stuff to keep control-observing persons, who are at the list of potential contact with COVID-19. To do this, volunteers make calls to persons in quarantine. Moreover, volunteers deliver medicines from clinics to people with chronic diseases and older people. Since 27 March, 2,683 calls were received, and medicines were delivered to 522 addresses. Currently, this activity has been discontinued due to the weakening of quarantine measures. PPE is provided to medical institutions Ten regional
branches launched the production of medical masks. 3,613 masks have been made and distributed. Now, this activity has been suspended due to the fact that the KRC has received humanitarian aid from China. The Red Crescent of Kazakhstan launched a project to inform the public about new coronavirus infection (COVID-19), preventive measures and dispel established myths together with the IFRC and with financial support from USAID. The project will cover all regions of the Republic of Kazakhstan, including remote areas, in order to disseminate information about prevention and protection measures among the population as efficiently as possible, as well as increase confidence in official sources. As part of the regional emergency relief project COVID-19, the German Red Cross, in collaboration with the Red Crescent of Kazakhstan, has provided humanitarian assistance for families in need. A total of about 1,000 families will receive one-time emergency humanitarian assistance in eight cities across the country. Funds were allocated by the German Federal Ministry of Foreign Affairs.

**Red Crescent Society of Kyrgyzstan**

The Red Crescent Society of Kyrgyzstan is still supporting vulnerable groups in response to the COVID-19. All its activities are closely coordinated with health authorities, government agencies and partners. From 18 to 24 June, RCSK distributed 144 units of disinfectant, 191 units of PPEs, 150 units of hygiene items to medical facilities, and 620 litres of fuel to vehicles in the country's mobile health care groups, who visited quarantine patients. RCSK distributed 30 food parcels to families living under difficult living conditions. From 18 March to 24 June, RCSK delivered a total of 15,079 food packages and 17,504 hygiene kits. RCSK has launched an information campaign on COVID-19 via social media platforms and has produced different information materials. RCSK teams distributed 890,067 brochures to urban and rural communities as well as to government organizations across the country.

**Latvian Red Cross**

Latvian Red Cross (LRC) has worked without a stop, especially in providing services that cannot be done remotely, such as providing home care; running social centres, shelters for homeless people, crisis centre, accommodation centre for people in crisis (24/7) and day centres (also remotely). The National Society is also distributing food packages (through the ‘FEAD’ program), as well as buying and delivering food and medicine to isolated people by volunteers, and providing meals in night shelters and social apartments with a support of donations (catering companies) and volunteers. Latvian Red Cross continuously works with refugees and asylum seekers. The Secretariat of the NS has continued work non-stop. First Aid trainings had to be stopped for the whole period of state of emergency but started again since 23 May with certain restrictions. Frist aid provision at public events has stopped at least until Autumn. LRC maintains regular communication with governmental institutions and municipalities to work together with local branches to provide support to people in need. The Ministry of Defence and Ministry of Health has appointed the Latvian Red Cross as the coordinator organization for distribution of protective equipment (face masks, disinfectants) - procured by the government – among NGOs. Latvian Red Cross is using all communication channels (webpage, Facebook, Instagram, e-mails) to communicate risk prevention messages. Health prevention materials, including IFRC informative materials, have been translated and posted to all information channels, also used as posters in Latvian Red Cross premises, as well as being shared with partners - companies, universities to be posted in their premises. A considerable challenge has been the lack of PPE on the market, accompanied by with increasing prices.
<table>
<thead>
<tr>
<th>Lithuanian Red Cross Society</th>
<th>The NS manages a hotline for people in self-isolation and quarantine, mainly older people, providing psychosocial support, information and guidance. The reserve of the volunteers was established in the three biggest cities of the country. Together with the existing NS volunteers the task of the reserve is to provide vulnerable people with essential products and support their needs on a regular basis. The NS is focusing on supporting older people. The “Good neighbours help network” around Lithuania matches community volunteers with persons in quarantine or those at high risk and provides them with practical assistance – a food package, medicine, hygiene items, anything a person needs to survive.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Luxembourg Red Cross</td>
<td>LRC has a Business Continuity Plan in place for the critical activities. Additionally, the NS created a coordination cell to answer the questions regarding precautions, etc. This cell is likely to also coordinate human resources if those become limited (an important part of their health-personal comes from the countries around Luxembourg). For the Health Department services (including home-care services, Rehabilitation Centre, Home for older people, Blood-Transfusion centre) there is work on preparedness and managing the stocks. Discussions with the Ministry of Health are ongoing evaluating the situation and human resources mobilization capacities.</td>
</tr>
<tr>
<td>Malta Red Cross Society</td>
<td>The Malta Red Cross is working in coordination with the government in responding to COVID-19 amongst the migrant community. Activities include the following. Migrant Isolation Unit: Part of the Hal Far Tent Village (HTV) has been isolated to segregate those migrants who had been in direct contact with others who have tested positive for COVID-19. The Red Cross provides the medical assistance to those residing at the centre, including the daily monitoring of parameters, whilst taking all precautions recommended. The National Society is also managing a clinic at another reception centre to care for migrants who have tested positive for the virus, with 44 migrants receiving care up to 27 April. In direct contact with the Public Health Department, Malta Red Cross is also in charge of the swabbing procedure for the migrant community. Up until 27 April the Malta Red Cross have done 513 swabs in HTV. This is by far the largest sample of random swabbing that has been conducted on the Maltese islands since the beginning of the spread of COVID-19. These tests have yielded results as they managed to identify a cluster of positive cases. In the coming days more swabbing will be carried out in other migrant centres.</td>
</tr>
<tr>
<td>Magen David Adom in Israel</td>
<td>In light of the increase in the number of new cases, MDA was requested by the Israeli Ministry of Health to continue and increase the activity in the sampling project. MDA continues to focus on nursing homes, as well as in the drive-through complexes in the four largest cities (Jerusalem, Haifa, Tel Aviv and Beer Sheva. The responsibility for home sampling has transferred to the primary health care providers since 3 May. MDA increases the number of samplers and samples taken and refreshes the instructions to the staff and volunteers. So far more than 401,000 persons have been sampled for COVID-19 by MDA. Since 3 May, the responsibility for sampling is of the primary health care providers and MDA samples in nursing homes. MDA teams have taken over 4,500 daily samples in the last few days. Following a request of the MoH, MDA is taking serological samples as part of a serological survey to study the extent of the spread of the virus in the country. MDA's paramedics were trained in the procedure that already started, with the goal of reaching 6,000 serological sample in Beni-Braq within the coming weeks. In the past week, an average of 100 serologic samples was taken daily. MDA has several members (staff and volunteers) under home quarantine. MDA is in constant contact with them to support their needs. MDA teams are treating and transporting patients that</td>
</tr>
</tbody>
</table>
are under home quarantine and have a situation that requires medical assistance, or exacerbation of their condition, or become symptomatic and are tested positive for COVID-19. MDA is also transporting the patients who tested positive to the hospitals, and those who are discharged from the hospital to the quarantine hotel. MDAs blood services collect plasma from patients who recovered from COVID-19 and have antibodies, and provide it to hospitals to treat sever patients. 3,333 plasma units have been collected up to date, and more than 100 patients were treated this way so far, as a new treatment protocol with promising results so far. Additional 413 units will be used for HIG preparation. MDA's volunteers transport the donors from their houses to the blood centre for the donation if needed. Several of the donors donated more than once. MDA website has a dedicated section, with all the relevant information and instructions in several languages.

Red Cross Society of the Republic of Moldova

Moldova RC engages people and communities, online and offline, in promoting behaviours that reduce the risk of contracting or transmitting the virus, facilitate community understanding and acceptance of infection prevention and control measures, and help to prevent misinformation, rumours and panic. The activities of Moldova RC are focused on development, printing and dissemination of informational materials, dissemination of antiseptic supplies (in public transport, but also for older people, families with many children, families of returned migrants), strengthening capacity of staff and volunteers. Through the IFRC funded project “Moldova: Measures to respond COVID-19 outbreak”, Moldova RC developed, printed and distributed informational materials on COVID-19 and its prevention. The materials were distributed in partnership with health authorities (through health institutions), post offices (within the post deliveries) and by RC staff and volunteers. In total, 799,540 informative flyers were distributed in 23 regions of Moldova. 70 staff and volunteers were equipped with PPE. Two training sessions were conducted, and more than 75 staff and volunteers were trained. Moldova RC purchased and disseminated antiseptic supplies jointly with health and local authorities. The antiseptic supplies were placed on the local transport vehicles to allow those people, who have to move through the city within the quarantine regime, access to prevention measures. In addition to it, Moldova RC has a focus on hygiene promotion among the most vulnerable categories of people (institutions for older people, orphanages, etc.). 3,790 litres of disinfectant were distributed in 48 regions of Moldova. At least 100,000 people received access to protection measures, including antiseptics supplies. Moldova RC branches are active in the response to COVID-19. On 2 June, volunteers of the Basarabyask branch organized an informational campaign as part of the "Live Now!" Charity event in which volunteers handed out to informational booklets “Protect Yourself Against COVID-19 Infection”. In addition, the Red Cross provided the Recunoştinţa multifunctional centre for older people in Basarabăşk and the Speranţa nursing home for people with disabilities in Sadakliya with disinfectants. Information booklets were also received in all mayoralities and all medical institutions of the region. In Edinet district, financial support was provided for the purchase of food and hygiene products for older people, socially vulnerable people in difficulty with low incomes. 60 food packages and 60 hygiene packages were distributed. In Anenii Noi district, 50 food packages and 50 hygiene packages were distributed in the villages of Ruseni, Albinița, Cobusca Nouă, Speia, Bulboaca. In cooperation with the Directorate of Social Assistance and Family Protection from Bălți municipality, volunteers of the Red Cross distributed 60 food packages and 60 hygiene packages - to single mothers with children at risk, lonely older people, large families and other people in difficulty. Moldova Red Cross with the support of Swiss Red Cross is distributing disinfectants, gloves, masks and protective costumes for penitentiaries. Turkish Red Crescent provided humanitarian aid (PPE – gloves, costumes and masks) to assist the Moldova Red Cross in its response to the crisis.
**Red Cross of Monaco**

As a response to the situation, Red Cross of Monaco operated a COVID-19 call centre with medical and psychosocial specific support helplines. The Red Cross provided home visits to confirmed COVID-19 cases and untested symptomatic cases providing medical and psychosocial support and “home bags” for symptomatic people. The NS delivered food and non-food items (i.e. pharmaceutical products) and other services and delivered and distributed PPEs to the Princess Grace Hospital Centre, medical establishments, laboratories, general practitioners, pharmacies, ambulance drivers, and fire brigades. Additionally, the Red Cross of Monaco ensured support to the Ventimiglia camp for migrants managed by the Italian Red Cross. The Red Cross of Monaco provided funding for the IFRC appeal (EUR 150,000), the ICRC appeal (EUR 150,000) and NS appeals (Italy, Burkina Faso, Ivory Coast / total EUR 140,000). The Monaco Red Cross took part in the massive COVID-19 testing campaign led by the Monaco Government, that took place from 19 May and is ending now. The Call Centre is still operational whereas all the other specific COVID-19 activities have now stopped.

**Red Cross of Montenegro**

From the very beginning of the COVID-19, the Red Cross of Montenegro has been responding to the situation in line with its role, mandate and responsibilities in the system. There were over 100 employees involved in the response, together with 130 professional home helpers and around 450 volunteers. Thanks to its emergency stocks, the Red Cross was able to provide immediate relief support to people in need. However, due to the scope of need, additional assistance was required. This was provided with the support of many local, national and international donors and partners who were willing to assist. Requests for assistance were mainly related to provision of humanitarian parcels for vulnerable groups, but also some raising awareness activities, community engagement, risk communication. Through the IFRC's Global appeal, the Red Cross of Montenegro received the assistance for its response activities. Thanks to this, the Red Cross was able to procure around 5,000 food and hygiene parcels for socially vulnerable population, but also to increase the level of its community engagement. In addition to this, through its bilateral support, the Red Cross was able to provide some assistance from the sister National Societies (Austrian Red Cross, e.g.) but also from UN agencies in the country, diplomatic missions and some international foundation (Coca Cola foundation, e. g.). The Emergency Operations Centre (EOC) of the Red Cross of Montenegro was established within the initiative “Building communication and coordination capacities for efficient preparedness and response in South-Eastern Europe”, with USAID funding, whose main objective is to increase the interoperability and capacity of the South-Eastern European countries’ emergency management sectors to adequately and effectively prepare for and respond to emergency events, both within national boundaries and across the region. The purpose of the EOC is to support the National Society headquarters, Red Cross branches and Disaster Response Teams (DRTs) with real-time disaster and crisis information for efficient decision-making and to internal and external stakeholders. Due to the COVID-19, the Red Cross of Montenegro was able to test and use the EOC as well as the “Next generation Incident Control” system (NICs) as a tool that facilitates coordination and emergency management. The idea was to start with gathering basic information during lockdown, NS social services have remained open and are more than ever supporting those in need. Photo: Red Cross of Monaco

Red Cross of Montenegro has been operating a call center until the end of May 2020, but now the conditions have been created for them to return to regular ways of communication.
from the Red Cross local branches – location, contact information, working hours, number of engaged volunteers and staff, photos, etc. As the response to COVID-19 became more complex, information uploaded in the system also expanded – information on donations, humanitarian aid that was distributed (requests and responses, food and NFI), tents and containers that were provided to the local hospitals, information on provided psychosocial support. In addition, the system contains data on COVID-19, such as number of cases, number of active cases, locations for quarantine etc., which is shared by the relevant institutions, such as Institute for Public health of Montenegro. Distribution of humanitarian parcels (food parcels, hygiene kits, baby parcels) is ongoing.

**The Netherlands Red Cross**

The Netherlands Red Cross (NLRC) set up a national helpline for psychosocial support and concrete support requests. The Ready2Help network volunteers is mobilised to support people with grocery shopping and home visits. Red Cross volunteers in the worst hit areas support clinics with non-medical tasks and provide transport to hospitals. NLRC finished collecting and distributing PPE materials to hospitals. NLRC supports homeless shelters with general capacity. Most vulnerable people are assisted with food parcels and vouchers. Volunteers are mobilised to support the ministry of health with contact tracing and testing. Due to a decrease in hospitalisations, the NLRC support to hospitals, clinics and GPs is being downscaled. The situation is closely monitored to ensure NLRC is prepared for upscaling these activities whenever necessary.

**Norwegian Red Cross**

The Norwegian Red Cross response has consisted of a combination of activities that have been implemented as a direct response to COVID-19, and previously existing activities that have been adjusted to the situation. Existing virtual activities were scaled up and where possible physical activity where made into virtual ones. National help line for children and youth and “digital homework assistance” are two examples of activities that were scaled up to meet the increased needs of children and youths. Replacing “Visitor Friend Service” with “Telephone Friend Service” is an example of a physical activity that was adjusted to meet the needs of those who feel especially lonely during these times. New activities that were implemented include food shopping/delivery to people that are in home quarantine/isolation, as well as patient transport. These have been implemented both as a result of dialogue with local government and on the initiative of local branches. Now that the government is easing up and rolling back many restrictions that were put in place in mid-March, the NS is focusing on assisting local branches with adjusting activities back to a new “normal” that upholds the regulations that the government still has in place. The NS is also focusing on adjusting activities this summer to meet the needs that will arise from the situation.

**Polish Red Cross**

Polish Red Cross, as auxiliary to the public authorities, has initiated Humanitarian Aid Centre, which is focused on three major areas: 1) central intervention crisis warehouse dealing with current equipment purchases and distribution; 2) psycho-social support; 3) education and prevention. There are a number of different activities completed and ongoing since the beginning of pandemic in Poland: 1. Social Campaign - PRC, together with AVIVA Poland, has launched a social campaign “Be safe!”, with a dedicated website with clear, few-steps instructions how to prepare for different disasters like floods, heavy storms, heat, frost and the COVID-19 pandemic. 2. Rescue Service - 15 of the 19 PRC Rescue teams are supporting 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. It is estimated that 700 people have been already supported. 3. Family links - Tracing service is actively promoting restoring family links through on-line communication with family members, reaching 2,000 people. 4. PRC has provided Easter packages with food and protective equipment to 5,000 people focusing on those who live alone and had nobody to spend Easter with. 5. Food distribution program implemented under the European Fund for Relief to the Most Deprived (FEAD) is continued according to the schedule. PRC has been still transferring food to 113,000 people, of which 10% are seniors. Car manufacturing companies donated vehicles to the PRC to support food
distribution. It is estimated that food was provided to 113,300 people in need. 6. Home care - Every day almost 16,000 people with different diseases are visited by over 5,000 home carers. They provide care, support in daily activities. 7. Blood donation campaign-It is estimated that 35,000 blood donors have been properly instructed about safe blood donation. 8. Education - PRC basic activities are focused on raising awareness, using infographics and messages about good social behaviour in social media and its website, reaching approx. 45,000 people. 9. Fundraising Campaign - an estimated 180,000 people reached with information on various donation modalities. 10. With the engagement of volunteers, PRC has started psychological helpline where qualified psychologists and psychotherapists are on duty. Up to 46,000 people have been reached. It is estimated that since the beginning of pandemic Polish Red Cross has informed about its activities and supported around 450000 people through different activities listed above. Majority of these activities will be continued in coming weeks and months.

**Portuguese Red Cross**

The NS is providing support in transporting COVID-19 patients, with its 15 dedicated ambulances with a total of 597 transportations. A total of 15,199 people have been tested by the Red Cross for COVID-19, including in residential facilities for older people. The NS maintains 53 social and psychosocial helplines, directly supporting 4,298 people. It is working on awareness raising and prevention/mitigation, with 55,136 people directly informed. 14 medical field units supported public health facilities and 21 quarantine areas were also established. The National Society is also engaged in provision of food and non-food items to those in need, through the distribution of food aid and meals (28,446 people), personal and household hygiene items (16,148 people), provision of medicines (1,401 people), assistance with shopping (1,831 people) and care for the homeless (1,256 people).

**Red Cross of the Republic of North Macedonia**

The National Society is active since the beginning of the pandemic including raising public awareness on COVID-19, hygiene promotion activities, provision of assistance to screenings at the borders, distribution of medicines for the people with chronic diseases in state quarantines, distribution of insulin for people with diabetes that are in self-isolation, and supporting vulnerable groups of population especially children. The NS is also distributing food, hygiene, medicines, etc. for vulnerable people and people in isolation, and maintains an SOS phone line for psychosocial support for vulnerable people and people in isolation. The NS is involved in distribution of humanitarian aid for the homeless and social cases from stocks and donations. The National Society performs disinfection of vehicles, premises and equipment of volunteers and staff of Red Cross. The National Society actively supports migrants, who transit the country and migrants sheltered in the transit centres, Centre for asylum seekers and centre for foreigners. The NS launched a national appeal for humanitarian aid and has been actively mobilizing funds. The NS
performed the following activities from the beginning up until 22 June 2020: 3,682 people from vulnerable groups assisted with PSS, 5,631 people from vulnerable groups reached with delivery service for food, hygiene, medicines; 16,710 monthly food parcels distributed from donations and stocks; 18,580 monthly hygiene parcels distributed from donations and stocks; 638 disinfection kits distributed, 350-450 staff and volunteers mobilized on a daily basis. In addition to these, the NS distributed 90,329 protective masks and 73,912 protective gloves.

**Romanian Red Cross**

Romanian Red Cross is working closely with the state authorities in charge of managing the COVID-19 Crisis (State Dept. of Emergency Situations, Ministry of Health, Secretariat of Government,) on one hand to better contain the spreading of the virus and to prevent new infections and on the other hand, to provide the font line personnel with the needed materials and equipment enabling them to fight against the virus and to properly assist the patients, obtaining better results. The NS together with the authorities launched a public campaign to keep the population informed with updated and verified information and instructions on prevention. RRC, on national level, based on the authorities’ recommendations of the authorized hospitals and medical care institutions for COVID-19 treatment, has distributed tents for triage, medical and protective equipment and other equipment and materials needed for the personnel working in the front line. The NS is distributing information materials on a national level about stress mitigation and how to maintain well-being in this period of crisis and lock-down. On local level, RRC branches are working with the County Committees for Emergency Situations, with the General Directions for Social assistance, with Directions of Public Health, Prefecture and Municipalities. RRC has been designated by the state authorities at governmental level as main actor to receive donations both cash and in-kind and to supply/deliver to the hospitals, personnel working in front line and other categories in need with products and specific materials. RRC open for that different channels for donations, as: SMS campaign for donations (available only on national level through Romanian mobile phones networks) and online donations (available on the RRC website) as well as corporate partnerships for cash and in-kind donations. Romanian Red Cross also launch a national campaign named “#RomaniaSalveazaRomania to support the hospital and first responders with equipment. The Romanian RC is working in cooperation with other NGOs for assisting the most vulnerable people in need: Concordia, Romanian National Council for Refugees, UNICEF, Association Schools of our villages, National Council of Disabilities, Value the life, etc.

**The Russian Red Cross Society**

As of 9 June, more than 485,000 COVID-19 cases and 6,000 deaths due to COVID-19 are confirmed in Russia. Almost all the National Society’s branches have been mobilized. More than 4,000 Russian Red Cross volunteers and staff are providing critical support to communities during the COVID-19 pandemic. Red Cross teams are distributing masks to public transport staff, providing food and water to some hospitals: more than 2,000,000 masks distributed and 12,000 masks produced by local Red Cross branches, humanitarian aid in the amount of more than CHF 300,000 (food and hygiene kits, vitamins and cream from Bayer, clothing) was transferred to health facilities. The Russian Red Cross focuses its efforts on helping those most vulnerable, including migrants and those experiencing homelessness. Teams are distributing food and hygiene items to older people, those living with chronic diseases such as HIV and tuberculosis, people with disabilities and other vulnerable households. More than 20,000 vulnerable migrants have been supported with more than 5 tonnes of food and hygiene kits. The National Society also runs a phone line where older people can request assistance in food delivery and rubbish collection. More than 18,000 appeals were received by the Russian red cross hotlines. Food, hygiene items and medicine delivered to more than 50,000 people. More than 1,000 people are under the permanent patronage of the Russian red cross (nursing service). The Russian Red Cross is conducting information and awareness-raising activities in media, public areas, via social networks, telephone hotlines. Red Cross teams are organizing COVID-19 information sessions in public areas such as shopping centres and universities. The National Society also provides reliable information on how to protect oneself from COVID-19, how to cope with isolation and how to manage stress. More than 7,000
vulnerable people have been supported through Red Cross operated telephone hotline, including psychosocial support.

**Red Cross of San Marino**
The Red Cross of San Marino is responding to COVID-19 emergency through the provision of clinical and paramedical services in the hospital of San Marino as well as emergency social services for quarantined individuals. Regarding clinical and paramedical services at the hospital of San Marino, 20 services are performed monthly with shifts of 6 hours. During these services, the volunteer staff of the San Marino Red Cross carries out patient assistance activities. In addition, the Red Cross of San Marino, in collaboration with the hospital, carries out both emergency and non-emergency patient transport services for patients with COVID-19. The number of these services is 40 per month. For quarantined people, the San Marino Red Cross carries out home care services and transport of COVID-19 patients to health facilities for medical visits. The number of these services is 20 per month. The number of active volunteers in both services is 25.

**The Red Cross of Serbia**
During the state of emergency (15 March - 23 May), the Red Cross of Serbia engaged 176 local Red Cross branches and implemented the following activities. Needs assessment was conducted in 166 municipalities and 138 local RC branches organized info-centres in order to provide the right information to citizens and to receive requests where support is needed to all people in need (180,500 people supported). 157 local Red Cross branches formed and engaged RC field mobile volunteer teams in local municipalities to provide support and care to people in need in municipalities (75,000 people supported). 126 local RC branches organized psychosocial support for citizens in need, volunteers and RC personnel through local and national telephone info-lines for psychosocial support and psychosocial first aid as well as via SMS messages (for hearing impaired vulnerable groups). Online platform for psychosocial support has been developed and 87,275 people has been reached through it. 172 local RC branches are implementing risk communication and community engagement activities and providing advice from a safe distance on the correct use of PPE, keeping the physical distance, washing hands and helping them to carry food and non-food items that they have purchased observing all the safety guidelines (264,000 people supported). 103 local RC branches are distributing leaflets and other printing material that is having prevention purpose, reaching 101,600 people. 15 local RC branches are providing support to the health care system and institutions in Serbia by the placement of tents for triage of patients (4 tents placed in Belgrade, one in Jagodina) and support in data processing of tested persons. 44 local RC branches are proving support with tanks that are filled with disinfection liquid that is distributed to citizens. 125 local RC branches supported their local self-governments with the packaging of food and hygiene parcels (392,000 packed parcels). 157 local RC branches were distributing food and hygiene parcels (648,433 people supported). 76 local RC branches were running public / soup kitchen program (134,000 meals were delivered to those in need). 141 local RC branches were implementing blood donation program (405 local actions implemented for blood donations). In total, the Red Cross of Serbia reached and helped more than 554,522 people through the implementation of the previously mentioned activities. There were 149,138 instances of volunteer engagement, 450,532 volunteer and 237,523 RC personnel hours dedicated, 712,218 kilometres passed over during the implementation of activities.

**Slovak Red Cross**
Current activities of Slovak RC staff and volunteers include assisting people accommodated at state quarantine centres; a mobile unit run by the Slovak RC regional branch has started COVID-19 testing in a broader region; the Slovak RC regional branches are reaching out to homeless people, checking their health status, measuring body temperature, distributing protective masks,
providing basic information on COVID-19, together with charities securing their basic needs (food, blankets, etc.); and several regional branches in bigger towns have been approached by municipalities and they may soon start being involved in quarantine centres for homeless people. The Ministry of Labour, Social Affairs and Family of the Slovak Republic has declared all the social services facilities (including those run by the Slovak Red Cross) to be subjects of economic mobilization – in order to maintain the smooth and secured running of these services.

**Slovenian Red Cross**

The NS ensured home delivery of food and non-food items (medicine, person hygiene items, firewood, etc.) to the older people and other vulnerable groups with no financial or other means of provision. The NS provided hot meals, PPEs and assistance in securing a shelter or an accommodation to the homeless as well as distributed clothing, footwear and hygiene items to migrants in reception centres. The NS ensures transportation for vulnerable groups to the doctor check-ups and other urgent appointments. The NS maintains phone lines offering PSS, COVID-19 information and support requests from the public. The National Society has been ensuring digital learning aid for school children via internet. The NS is helping at care homes for older people and provides health care to the homeless in Ljubljana by SRC IMT1 team. The NS is engaged in home delivery of food parcels, hygiene kits and/or hot meals to vulnerable persons; and continues the distribution (under COVID-19 precaution/prevention regime) of food parcels and hot meals at humanitarian centres of local branches. The National Society continues the organization of blood-donates, under COVID-19 precaution/prevention regime. The possible donors are invited individually by SMS after which a blood donation appointment is made. The NS continuously informs and raises awareness of the public on its COVID-19 prevention and response measures. Most national media coverage on SRC COVID-19 related activities, together with SRC COVID-19 related information and photo/video reports on SRC engagement in local/national communities are available via [SRC Facebook profile](http://www.src.si). SRC continues to regularly coordinate its provision of support to persons with granted international protection and asylum seekers with all other relevant counterparts in Slovenia, within regular coordination meetings held by UNHCR.

**Spanish Red Cross**

The Spanish Red Cross has adapted its regular services and activities to alleviate the impact of COVID-19 pandemic. New measures have been adopted and public authorities supported through the Red Cross's RESPONSE Plan, ensuring continuous support and medical equipment to vulnerable groups and general population. The Red Cross coordinates health, social and emergency services in all the autonomous communities, mobilizing nearly 50,500 volunteers and over 6,000 staff, with 26,709 new volunteers, reaching more than 2,000,000 people. The NS has also put in place a campaign to mobilize neighbour support in a safely manner, in collaboration with the Directorate General for Civil Protection and the Ministry of Home Affairs. Since our last bulletin, the Spanish Red Cross has raised its RELIEF services to a total of 42 psychosocial teams (with more than 5,000 interventions to date), more than 12,000 ambulance services, 30 temporary additional health facilities, 103 shelters, more than 9,000 kits of essential emergency supplies and more than two million articles of personal protective equipment distributed. This HEALTH emergency has especially targeted vulnerable groups, which we have provided with prevention and contention measures, and bio-measures and symptoms monitoring to more than 32,000 people. The NS has also providing assistance and transportation of patients to health facilities (nearly 1,200 patients have been mobilized), and psychosocial (4,235 people reached) and pharmacological assistance (more than 21,000 deliveries). Through its support to SOCIAL INCLUSION, The Spanish Red Cross has delivered more than 500,000 food and non-food essentials to vulnerable and at-risk populations, as well as shelters, support for families with limited resources (more than 60,000 people have received cash assistance), aid on essential procedures,
relief to elderly people, women affected by gender-based violence and other vulnerable groups (more than 260,000 people had benefited), and emotional support and accompaniment by phone for people in social isolation. We have assisted over 25,000 people through labour orientation and online training, helping unemployed people and those who have recently lost their jobs survive this unprecedented EMPLOYMENT crisis. Over 414,752 people (staff, volunteers and general public) have completed at least one of the COVID-19 and first aid online courses by The Spanish Red Cross EDUCATION program. The NS has also provided school support for more than 13,000 children and provided online training for employment conducting more than 700 workshops.

| Swedish Red Cross | The mission of the Swedish Red Cross interventions is to support and fill gaps in disaster relief to people in need, with a special focus on particularly vulnerable groups. The domestic response consists of several nationwide operations targeting all municipalities in the country, based on needs and requests. Nationally, Swedish Red Cross continues with information activities and safe meeting places in socioeconomic vulnerable areas with the aim of providing information, psychosocial support and alleviating anxiety in different languages to reach as many as possible. [Daily data can be followed through this link](#). The following data was collected and verified by 1 June and will be updated in July. 16 operations in 11 areas reached 3,690 people. Lunches were served to families in need, 200 deliveries each week. The Swedish Red Cross is also continuing the locally based collaborations with municipalities across the country to reach isolated and at-risk groups with information, food and medication. 8,477 deliveries were made in 95 municipalities under an agreement with the Swedish Contingencies agency. Psychosocial support at 4 emergency hospitals reached 1,469 people. The hotline on covid19 received 973 calls. 38 transfers of protection equipment were delivered to emergency hospitals and companies/authorities as part of an agreement with the National Board of Health and Welfare. More than 100 local branches have adapted or started new activities related to the Corona outbreak and include awareness raising, health education, assistance to the elderly and other vulnerable groups, and community-based support activities. Volunteer services at migration detention centres and custodies have developed digital alternatives to maintain psychosocial support. Based on the current scope of the response, an estimated 10,000 people are reached with some form of assistance. As the outbreak evolves, the Swedish Red Cross will adapt and adjust its strategy accordingly. |

| Swiss Red Cross | The SRC has committed 1 mn Swiss francs in bilateral COVID-19-support with partner HNSs. The respective HNSs concentrate their efforts on increasing preparedness, reducing the spread of COVID-19 through information and supporting community support mechanisms, mitigating the health and economic consequences of the pandemic and securing the business continuity of the NS. Multilaterally, the SRC has committed CHF 800,000 to the IFRC appeal to allow for further strategic and conceptual support in the form of un-earmarked funding. Domestically, the SRC runs a COVID-19- drive-thru test centre in Bern in which approximately 150 tests have been performed. The test centre’s key objective is to follow the WHO recommendations for increased testing in order to gain a better understanding of national infection rates and to support the national health system in its screening and mitigation efforts. SRC has also increased its efforts in serving the most vulnerable groups such as older people by increasing volunteer services which provide grocery shopping, telephone-based psycho-social support and letter writing. The matching platform 5up which matches volunteers with the vulnerable has seen an unexpected surge in use which has carefully been managed to meet demands. |
The Red Crescent Society of Tajikistan (RCST) from 17 to 23 June 2020 conducted the following actions in collaboration with partners on COVID-19 prevention throughout for the country: 640 project volunteers and their support team (1,160 people in total) conducted education sessions among 64,105 rural and urban population, as well as among 42,135 secondary schoolchildren at home level about the rules of COVID-19 prevention. The total number of people reached has been 106,240. Over the entire period of the information sessions, training was conducted among 708,093 people and 447,959 schoolchildren. The total coverage is 1,156,052 people. The RCST is actively continuing educational trainings for the medical staff of the Department for Prisons Management on prevention of spreading COVID-19 in prisons and conducting protocols for epidemiological surveillance. USAID ETICA project volunteers (100 people) continue to provide food and psychological support to 53 MDR-TB patients in 5 districts of Sughd region and conduct training among their family members on the prevention of COVID-19. In the framework of cooperation with UNICEF, RCST is responsible for warehousing and delivering of humanitarian aid to provinces and district Governmental health structures received from European Union. With the support of USAID, RCST actively works in 32 pilot areas in Tajikistan where 640 trained volunteers covered 17,000 rural and urban population with information on COVID-19.

TRC continues to provide protective equipment support to its staff working in the field at hospitals, observation points and food banks. As of 23 June, close to 1,000,000 PPEs have been distributed to the health institutions, staff, volunteers and public. After the earthquake occurred in Bingol Karlıova district on 14 June, 14,190 PPEs including 9,800 masks, 4,000 gloves and 390 hand sanitizers were distributed to the staff and volunteers in the region. TRC continued producing mask and visors through its staff and volunteers in the community centres. TRC cooperates with public health organizations towards distributing the products. In the community centres, since 29 March, the number of masks produced is 558,583, the number of visors is 4,353 and the number of distributed masks is 217,620 and visors is 1,925. Total PPEs distributed by the Kızılaykart Program is 106,325. Total number of PPEs distributed by all structures of the TRC is 5,759,436. The operation in support of COVID-19 treatment continued at TRC’s 18 blood centres. These centres collected the convalescent plasma with apheresis devices from patients who were diagnosed and treated in accordance with the directives of the Ministry of Health. TRC received active immune plasma donation at its 16 regional blood centres. The teams reached 26,588 people to ask for the donation of immune plasma until now. Action plans are under review in order to ensure that bloodstocks would meet the demands. Information bulletins and videos about coping mechanisms for children, elderly and people who have chronic diseases were shared electronically with TRC staff, volunteers and external stakeholder and since March, the teams reached 640,370 individuals. TRC Child Programs paid visits to 2,047 homes between 12-18 June to confirm the children at home. In this scope, TRC teams delivered 2,479 training sets for 4,762 children in 26 activity areas in 14 different cities including the activities composed of UNICEF training resources. The total number people reached through 168 TRC call centres is 467,033. According to the decision by GoT announced on 15 March 2020, people coming from abroad are monitored for 14 days as part of measures to combat COVID-19. Arrivals are requested to spend the quarantine period at the state-run dormitories in various identified locations around the country. TRC continues to provide hot meals to them, over 4 million meals have been provided to date. TRC provided in-cash and in-kind assistance to 30 countries since the beginning of epidemic.
**Red Crescent Society of Turkmenistan**
The National Society has been 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. National Red Crescent Society of Turkmenistan (NRCST) has trained staff and mobilized and trained volunteers to participate in COVID-19 preparedness and response activities. The training included information on prevention of COVID-19, self-protection, information on handwashing, social distancing. 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. NRCST is a member of the working group for the implementation of the national COVID-19 Preparedness and Response Plan, closely coordinating with the Government Ministry of Health (MoH), UN agencies and other partners.

**Ukrainian Red Cross Society**
Ukrainian Red Cross Society continues to react on situation with COVID-19 in Ukraine and provide humanitarian assistance. Since the beginning of May 2020, the newly established Ukrainian Red Cross Society Information Centre has received 25,529 calls, 7,276 of them were about PSS assistance. As part of information campaign, URCS along with Ministry of Health released 30 videos related to COVID-19 information and broadcasted them via National TV channels and social network as social advertisement. (Up to 1,517 views on YouTube, 6,277,000 on Facebook, 38,000 in Instagram and 561,000 in TikTik) About 866,500 copies of printed material (posters, calendars, pocket notes, leaflets) have been distributed to the local population through the Ukrainian Red Cross Regional organizations and other government institutions. Ukrainian Red Cross Society distributed 244,785 pcs of personal protective equipment and 3,526 litres of disinfectant. 8,639 people received tea, coffee and sweets. 3,338 blankets, bed linen and towels, 2,645 Easter breads have been distributed. 2,432 kg of coffee, 30,300 litres of water and beverages were donated to health care facilities. Also, 21 core hospitals have received medical equipment in an amount of UAH 13,8 mln along with 17,331 pcs medicines. URCS donated appliances to 24 hospitals and now in the process of delivering 750 pcs more to 100 hospitals and small health care facilities all over Ukraine as a part of humanitarian campaign “Assistance to 100 hospitals”. The volunteers of URCS in cooperation with Public Health Centre of Ministry of Health of Ukraine conducted information sessions for medical staff of 182 core hospitals all over Ukraine. During the quarantine period, URCS arranged the delivery of 2,200 hot meals and 750 litres of beverages and 400 Easter breads to homeless people. As of 10 June, URCS distributed about 40,654 food parcels to the most vulnerable people. 5,618 portions of hot meals and 30,931 hygiene kits and 22,279 pcs of household chemicals were distributed to older people as well.

**Red Crescent Society of Uzbekistan**
To date, the NS has mobilized 298 staff and 976 volunteers at headquarters and in branches for its COVID-19 response activities, all of whom have received training on COVID-19, and personal protective equipment provided by the National Society and its branches (the government does not provide PPE for the National Society staff and volunteers). Throughout Uzbekistan, in local communities, in marketplaces, on public transport etc., Uzbekistan Red Crescent has distributed a total of 25,951 information materials, in Uzbek and Russian languages, received from the IFRC, WHO, the Ministry of Health and ICRC. The Red Crescent Society of Uzbekistan has organized 2,004 different events, information sessions, workshops and classes related to raising public awareness of COVID-19, self-protection, and the proper use of PPE, reaching a total of 70,491 people. A total of 194 publications on mass media (on local TV, radio, newspapers, on Facebook, and Instagram). The National Society has distributed 57,853 medical masks to staff and volunteers, and also to at-
risk groups (mainly produced by local manufacturers), funded by the National Society and its branches, and partly by USAID. The NS has also distributed 25,658 sanitary and hygiene products to staff and volunteers, and also to at risk groups (mainly products from local manufacturers), funded by the National Society and its branches, and partly by USAID. In accordance with the agreement on cooperation between the National Society and the Ministry of Health, the above activities were carried out at the regional and district level throughout the Republic of Uzbekistan. At the same time, the branches of the National Society worked closely with local health authorities. The Head of the Public Health Department of the National Society participated in meetings, seminars and on-line meetings, organized for partner organizations by the WHO country office in Uzbekistan. National Society staff and volunteers of regional organizations and branches took part in similar events organized by regional government health departments. Additional activities funded with domestic funds and other partners: In cooperation with the Ministry of Health, the National Society has an ongoing social care programme, looking after over 3,000 households from socially vulnerable groups across the Republic. These include disabled people, poor families, families with many children, families with disabled children and vulnerable older persons. During times of COVID-19, the National Society intensified its support to these groups and provided medical, social and home visit services to 10,261 people and provided financial or food assistance to 7,500 people. The National Society funded these activities from its own domestic funds and spent over CHF 28,000 on these activities.

The Middle East and North Africa

Regional Update

Health:
- Screening and contact tracing
- Psychosocial Support
- Clinical, paramedical or homecare services
- Emergency social services for quarantined individuals

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

Institutional Readiness:
- Contingency Planning
- Business Continuity Planning
- Reducing staff and volunteer risk exposure

MENA RO Health & Care unit has welcomed two new members: MENA Regional WASH Surge and incoming new WASH Delegate in Yemen. The team has engaged in the process of on-going EPoA revision and providing technical guidance and COVID-19 related resources to the National Societies. Information (guidance updates and translations, infographics and RCCE materials) has been shared on Google drive while sharing science and. The unit has continued working closely with WHO EMRO for Epi update, joint webinars and possible collaboration on Community Health Surveillance (CBS). Moreover, the glossary of health-related terminologies for COVID-19 response and team is assuring the implementation of the temperature screening protocol and the setting of the isolation room. The team is also coordinating and contributing to PMER initiatives and supporting in the review of National Societies’ M&E frameworks.

New channels are being opened with North African NSs (Algerian RC, Egyptian RC and Tunisian RC) concerning the community health and RCCE e-learning package. The team is preparing for community health interventions e-learning webinars with Algerian, Yemeni and Egyptian RC. The health message for Heat Waves during COVID-19 has been developed and shared with the MENA NSs, and the team is now preparing new Key Messages on continuity of Vaccination despite COVID-19. The team is also supporting CBHFA project implemented by Libyan RC, adapting the non-COVID19 messages (NCDs, Maternal and new Child health) to align with COVID-19 situation.
In addition, the discussion with NSs on how to activate the Community Based surveillance (CBS) within their current community-health activities has initiated. IFRC RCCE team, jointly with all members of the Inter-agency Eastern Mediterranean RCCE Working Group at regional level, issued updated guidelines in English and Arabic on “COVID-19: How Can Risk Communication and Community Engagement Include Marginalized and Vulnerable People in the Eastern Mediterranean Region” and contextualized the original guidelines developed by RCCE partners in the Asia and Pacific region. As part of the documentation of successful community engagement approaches in the region, interviews with Libyan Red Crescent focal people and volunteers were conducted to explore the approach of “one volunteer in every street” initiative and its effectiveness. The team is also involved in the process of preparing video addressing stigma in the region, in collaboration with the Communications team.

MENA MHPSS team and GVA Care in Community (CIC) team started a discussion about the drafting of the 5 years MENA MHPSS strategy. During the global MHPSS coordination team meeting with IFRC regional MHPSS focal points and IFRC Reference centre the topics discussed were the global updates on MHPSS published resources, challenges, and way of support to NSs and upcoming MHPSS webinars. The team is also involved in the discussion on the e-learning file for Egypt RC and way forwards.

The guidance note on WASH scaling-up for COVID-19 was formulated and disseminated to NSs. During the MENA WASH working group meeting with National societies, PNSs and ICRC in the region, some important topics have been covered: challenges faced in maintaining WASH services amid COVID-19, potential scale-up of activities and MHM experience sharing with Iraqi Red Crescent and French RC. The team had also a technical meeting with Lebanese Red Cross on WASH Scaling-up and a HIF project discussion with them and IFRC Geneva for MHM-friendly WASH facilities for refugees.

Regarding migration and displacement, ongoing technical support to Country Offices and National Societies has been ensured by the Regional Office. The first "IFRC MENA Migration Update" has been delivered with an analysis of the migration trends during the time-frame January - May 2020 as well as a report of the migration and displacement activities implemented by MENA National Societies. On the other hand, the Migration Unit has delivered an update presentation on the secondary impacts of CoViD-19 on the MENA countries.

Information management unit has worked together with the DCPRR and HR units to summarize the rapid response deployments in MENA region. IM unit supported the health team to prepare Mobile Data Collection survey in 3 languages (AR, EN, FR) using Kobo IFRC Server, asking National Societies on the peer to peer support for every unit. The survey was shared with National Societies and IM team will work on the analysis soon when respondents are fully received.

IM unit initiated a Logistics- MENA distributions of PPE’s dashboard to track the quantities requested/received per type and per countries in MENA, the dashboard is still in development phase and not yet finalized, coordination is being done with the regional logistics team to finalize the dashboard. The IM unit supported Libya Population Movement DREF operation with IM products including maps for the displacement direction from and different area. Finally, IM Unit supported Geneva team to prepare an analysis about the usage of GO Platform in MENA region to be shared with GO users in the region.

The Communication team continued engaging with the media and issued several press releases and did many interviews. Visibility to IFRC and NSs was covered by writing web stories about the activities of Algeria Red Crescent and Yemen Red Crescent. Advocacy campaigns focused on World Refugees Day. Skill share and capacity strengthening was focused during this period on the technics of video production and media interviews.
Press releases:
COVID-19: Red Cross and Red Crescent urge more support for refugees in the Middle East North Africa region

IFRC and UN partners launch guidelines to address the needs of most vulnerable groups during COVID-19
15 June 2020

Web stories:
Awareness Campaigns and Rumors’ Busting about COVID-19 Throughout All Governorates in Yemen
22 Jun 2020
https://twitter.com/IFRC_MENA/status/1275169783177240581?s=20

In Support of Nomadic Bedouins During COVID-19: Algerian Red Crescent Sends Aids to Al-Oued

Campaigns: World Refugees day
https://twitter.com/IFRC_MENA/status/1274395905379176454?s=20
https://twitter.com/IFRC_MENA/status/1274388089415311360?s=20
https://twitter.com/IFRC_MENA/status/1274397870301511682?s=20
https://twitter.com/IFRC_MENA/status/1273878288792944640?s=20
https://twitter.com/IFRC_MENA/status/1273882515019837441?s=20
https://twitter.com/IFRC_MENA/status/1273891557326966784?s=20
https://twitter.com/IFRC_MENA/status/1273883906652229633?s=20
https://twitter.com/IFRC_MENA/status/1273890094374694913?s=20
https://twitter.com/IFRC_MENA/status/12738904154320389?s=20

Videos:
Emergencies don't stop during a pandemic
https://twitter.com/IFRC_MENA/status/1270680887445917696?s=20
How to keep some normality while COVID19 is spreading
https://twitter.com/IFRC_MENA/status/1273582325520048128?s=20

Capacity strengthening:
Skills share training on video editing to Morocco red Crescent lead by Jordan Red Crescent
Skill share training on how to do media interviews and manage the difficult questions to 25 communications officers at Saudi red Crescent.
https://twitter.com/IFRC_MENA/status/1275417854620426240?s=20
https://bit.ly/31kxvEm
**National Society Updates**

**Algerian Red Crescent (ARC)**
Since the start of the COVID-19 pandemic (early March 2020), the Algerian RC has conducted a national campaign to raise awareness, prevent and combat the spread of the virus. Awareness campaigns on risk communication and community engagement are continuing, reaching only in the past 2 weeks (from 8 to 22 June) 253 neighbourhoods, and 2123 awareness materials have been distributed. Algerian RC is also very active on social media: during the last two weeks, Algerian RC registered a total of 481,109 views on Facebook, 23,592 views on Twitter, 13,810 views on Instagram and 1432 views on Youtube. In addition, during the past two weeks, 916 hot meals and 1,807 food parcels have been distributed to vulnerable families in the remote areas of the country and other people in need.

Moreover, 1,588 public spaces have been disinfected and 17,862 masks have been produced and distributed in in public places (market, post office, highway, street and construction site). And additional 4,000 masks have been distributed to detainees in prisons and basic emergency and resuscitation equipment have been provided in 12 hospitals in rural areas. During the reporting period Algerian RC has organized an international solidarity operation for Malian people: 90 tons of humanitarian aid consisting of food and disinfection equipment have been delivered by air to Kidal.

**Iran Red Crescent (IRCS)**
IRCS relief workers, rescuers and volunteers set up fever screen stations at the entrance of the cities to break the chain of transmission. From 28 February to 2 April 2020, 835 teams from Relief and Rescue Organization affiliated to the IRCS undertook 21,387,742 fever screening, referring 14,288 people to close hospitals.

IRCS volunteers have provided support to the affected people by distributing 500,000 hygiene kits, 201, food parcels and other in-kind contributions. The IRCS along with Jihadi groups (NGOs), relief institutions and IRCS volunteers provided the people and the medical personnel with the medical equipment and items. Provision of face mask and gloves, food parcels for the vulnerable families as well as disinfection of the public places with participation of volunteers started.

IRCS youth participated in public education to prevent COVID-19 spreading and with establishment of different campaign, encouraged the families to stay at home in order to break the chain of the transmission. Research and Education Division of the IRCS set up a study working group with participation of trainers, volunteers and staff to translate and readapt COVID-19 related scientific materials. In addition to information sharing in cyberspace, face to face teaching of public in training stations have been organized and 16 educational video clips 881 clips, videos and motion graphics have been produced and disseminated in social networks, where IRCS registered 71,900,000 visits. In total, 1,424,000 benefitted from public awareness activities and 11,600,000 people attended the COVID-19 test launched in Farsi and English web pages. Also 94,000 IRCS volunteers and 60,700 IRCS staff have participated in virtual training courses.
The IRCS under Secretary General for Health, Treatment and Rehabilitation establishing medical shelters and set up the Recovery Centres in in Qom, Qazvin, Zanjan, Golestan and Ishafan provinces to help the patients to recover from the illness. 7,898 Sahar teams affiliated to IRCS’ Youth Organization provided psychosocial support for the families of victims, patients and people in general. A total of 264,109 people benefitted from PSS campaigns and a total of 3,966, 532 people received psychosocial services.

**Iraqi Red Crescent (IRCS)**

IRCS has established an emergency committee to implement, monitor and evaluate the COVID-19 operations included in its Response Plan and to mobilize resources.

Risk communication, community engagement, and health and hygiene promotion activities are still ongoing, while additional 364,252 posters, flex and brochures have been designed and printed. In order to carry out field campaigns, IRCS has recruited additional 900 staff and volunteers in HQ and Branches.

Concerning WASH, IRCS is disinfecting the building of IRCS and its hospitals and branches on a daily basis, while distributing gloves and masks to volunteers who are carrying out the disinfections and providing strict instructions and to staff and volunteers to prevent any infection in future. Moreover, IRCS teams disinfected more than 29,760 institutions, homes, stores and buildings. To ensure provision of PPEs, cleaning and disinfection materials, IRCS increased its warehouses storage. IRCS has distributed until now 49,589 Personal protection kits PPE to local institutions and 6,100 personal hygiene kit to community members.

RCCE activities to raise awareness about how to limit the spread of the virus are implemented both face to face with community members in supermarkets, institutions, roads, and different places and cities (1,397,110 people reached) and through video and messages passed on social media (Facebook Twitter, Instagram), local television, broadcast, news agencies, or spread using speakers in public spaces in Baghdad and other governorates (10,455,279 people reached).

In addition, 89,286 beneficiaries benefitted from psychological support programs. Online training course for 900 staff and volunteers have been implemented: 117 people has been provided with medical information about COVID-19, 55 people have been trained on WASH topics during COVID-19, 75 have been trained on Psychosocial support during COVID-19, 40 people have been trained on Psychological First Aid, 65 have been trained on Volunteers management, 75 people have been trained on rumour management during COVID-19.

The IRCS DRR department distributes 13,173 food parcels and 9,266 milk bags (for 4633 families) to the most vulnerable groups in the various governorates of Iraq. A camp consisting of 200 tents has been installed at the Erbil Book Fair to be used as a quarantine centre.

The Iraqi Red Crescent Society is supporting the Iraqi Ministry of Health by providing PCR devices (and kits) to diagnose COVID-19, a CT-SCAN device, Personal protection kits and other medical supplies.

IFRC is supporting IRCS by providing guidelines and technical advice to develop the Operational and business continuity plan, by sharing PPE specifications procuring PPEs and providing guidance, by developing Health Messages in Arabic and English and by printing Health Education and Awareness material.

Outside the Movement, IRCS is coordinating with United Nations agencies and attending on a regular basis the Health and WASH cluster. The Iraqi Red Crescent Society is part of the Civil Crisis Management Cell in the Iraqi state and is heading the afflicted relief committee.

**Jordan Red Crescent (JRCS)**

During the past week, the Jordan Red Crescent (JRC) has being carrying forward its efforts in the livelihoods sector with distributions of food parcels and shopping vouchers in coordination with the Social Security Corporation (SSC) and the Jordan Hashemite Charity Organization (JHCO) on one hand and the Kuwaiti Red Crescent (KRC) on the other. From June 14th to 20th, a team of 10 volunteers carried out shopping vouchers distributions in
coordination with the SSC and the JHCO reaching 161 Jordanian households in the governorate of Zarqa. During the same reporting period, within the JRCS-KRCS cooperation efforts, 1003 households were reached with food parcels distributions in the governorates of Amman, Madaba and Ajloun of which 363 Jordanian and 640 Syrian. Since the beginning of the livelihoods operation in mid-March 2020 until June 20th, the JRCS has reached cumulatively a total of 9194 households with food parcels distributions, 20435 households with shopping vouchers and 3143 diabetes patients, helping around 151288 vulnerable individuals across the country.

Morocco Red Crescent (MRC)
The month of June has been characterized primarily by capacity building activities at headquarter and in the branches: volunteers have been trained on basic knowledge of epidemiology, public health, community health, psychological first aid, firefighting, crisis and natural disaster prevention and management, communication, photography and video editing. Awareness-raising activities implemented by Moroccan RC volunteers are still ongoing in the southern provinces and in Larache. MRC has prepared a tender to procure PPEs for volunteers.

Concerning medical service provision, MRC qualified medical staff are still supporting Ramel hospital in Tetuan by taking care of COVID-19 affected patients. Finally, MRC volunteers are mobilized to support the airport authorities for the repatriation of Moroccan citizen coming from abroad. Coordination is ongoing with Ministry of Migration to assist migrants affected by COVID-19.

Syrian Arab Red Crescent (SARC)
The Syrian government established 13 treatment centres in 11 governorates, 2 centres in each of Aleppo and Darra, one centre in the rest, while there are no treatment centres in Idleb, Ar-Raqqa and Damascus. Also, there are 32 isolation centres among Syria, 4 centres in each of Damascus and Lattakia, while there is no centre in Idleb. The total number of labs in all Syria is 5: 2 in Damascus, and 1 in Aleppo, Lattakia and Homs.

SARC has established a steering committee for COVID, with all heads of departments meeting with the President once a week. IFRC is co-chairing with SARC a weekly COVID-19 Movement partners meeting with ICRC and PNSs, the frequency of which is likely to increase in the coming days.

More generally, SARC is supported by and coordinates with the IFRC dedicated team based in Syria and is supported by IFRC regional office in Beirut which provides additional assistance to the response operation and capacity development initiatives. Also present in Syria are nine partner National Societies all of which have delegates in Syria: the British, Canadian, Danish, Finnish, French, German, Norwegian, Swedish and Swiss Red Cross Societies.

At the national level, SARC continues to engage in discussions with senior officials on the COVID-19 response, including MOFA, MoH, MoSAL and MoLAE, as well as WHO.

In addition to coordinating with the WASH, Shelter and Health Sectors, SARC is also coordinating with WFP on ongoing discussions to adapt modalities in order to decongest distribution sites.

SARC priorities responding to COVID-19 epidemic:
- **First responders’ safety through providing training, and securing safety equipment while delivering First Aid, health and sterilization services to the vulnerable people:** the total staff and volunteers involved in COVID response are 8,305, of which 1,707 have been trained on COVID-19 related interventions. The cash assistance project implemented in Homs Governorate in cooperation with the ADRA organization also carried out activities in the COVID-19 response as they distributed health baskets to the 5,000 beneficiaries in addition to masks and sterile alcohol for the volunteers.
- **Raising awareness about COVID-19 across the Syrian communities via suitable communication channels:** (251,311 beneficiaries reached until April 2020). The Media Department also designed a number of news articles, videos and info-graphs, aiming to increase COVID-19 awareness and to increase the measures to limit the spread. The Facebook educational posts reached more than 1,200,000 people and was shared by more than 225,000 people.
• **Embrace Community engagement in countering the spread of the Virus.**

• **Secure Access to clean water and distribution of hygiene items and sterilize public facilities** (4,898 sterilization activities until April 2020).

• **Ensure the continuity of providing Health services to the people in need:** medical services in 150 health facilities have been provided to 206,902 beneficiaries. Moreover, 179 medical referrals have been ensured until April 2020.

• **Monitoring food security challenges:** SARC has distributed 582,374 food items alongside 27,072 Hygiene kits.

**Yemen Red Crescent (YRCS)**

YRCS is implementing COVID-19 response operations with a focus on protecting the wider public health system, improving water and sanitation, provision of protecting equipment and risk communication and community engagement. The 16 quarantine centres established in several governorate around the country (of which 10 centres are in Sanaa Governorate, 1 in Mahrah, 1 in Shabwa) are still operative. 120 volunteers and health workers have been trained in measures to control the spread of the emerging COVID-19 pandemic and its prevention methods in eight YRCS branches. Provision of PPEs has been ensured for staff and volunteers in 15 branches (Hajjah, Amran, Dhamar, Saada, Taiz, Rima, Shabwa, Hodeidah, Ibb, Al Mahwit, Amanat Al Asimah, Sanaa Aden, Seyon and Al-Dalea Governorates) and NFIs and Hygiene kits have been distributed also to Public Health offices and community members in Sana’a, Hodeidah and Ibb governorates. YRCS has launched awareness campaigns to prevent the spread of COVID-19 in three governorates (Hadramaut, Shabwa, and Al-Mahra), where awareness sessions have been carried out through face to face meetings and posters and other awareness material have been distributed in public places and streets.

**FUNDING UPDATE**

*Donor response to the Appeal MDRCOVID19*

**CONTACTS**

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

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Contact Information</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> +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> +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> +41-79-963-91-99</td>
</tr>
<tr>
<td>Sophie Reshamwalla</td>
<td>WHO liaison</td>
<td><a href="mailto:WHOliaison.GVA@ifrc.org">WHOliaison.GVA@ifrc.org</a> +44-77-4810-6736</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> +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> +41-22-730-4495</td>
</tr>
<tr>
<td>Monica Posada</td>
<td>Risk Communication and Community Engagement</td>
<td><a href="mailto:Monica.posada@ifrc.org">Monica.posada@ifrc.org</a> +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> +01-312-952-2270</td>
</tr>
</tbody>
</table>

**IFRC Geneva Programme and Operations:**

Nelson Castano, Operations Coordination Manager, [nelson.castano@ifrc.org](mailto:nelson.castano@ifrc.org) +41-22-730-4926

Panu Saaaristo, Emergency Health Team Leader, [panu.saaristo@ifrc.org](mailto: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](mailto:diana.ongiti@ifrc.org) +41 22 730 4223
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.
## Activity overview

<table>
<thead>
<tr>
<th>Activity</th>
<th>Priority</th>
</tr>
</thead>
<tbody>
<tr>
<td>Risk communication, community engagement, and health and hygiene...</td>
<td>107</td>
</tr>
<tr>
<td>Support to volunteers</td>
<td>95</td>
</tr>
<tr>
<td>National Society readiness</td>
<td>91</td>
</tr>
<tr>
<td>Livelihoods, cash support &amp; food aid</td>
<td>83</td>
</tr>
<tr>
<td>Mental health and psychosocial support services (MHPSS)</td>
<td>83</td>
</tr>
<tr>
<td>Social care and cohesion, and support to vulnerable groups</td>
<td>81</td>
</tr>
<tr>
<td>Community engagement and accountability (CEA), including comm...</td>
<td>78</td>
</tr>
<tr>
<td>Infection prevention and control (IPC) and WASH (community)</td>
<td>72</td>
</tr>
<tr>
<td>Epidemic control measures</td>
<td>70</td>
</tr>
<tr>
<td>National Society sustainability</td>
<td>67</td>
</tr>
<tr>
<td>Infection prevention and control (IPC) and WASH (health facilities)</td>
<td>60</td>
</tr>
<tr>
<td>Maintain access to essential health services (community health)</td>
<td>54</td>
</tr>
<tr>
<td>Maintain access to essential health services (clinical and paramedical)</td>
<td>48</td>
</tr>
<tr>
<td>Community-based surveillance (CBS)</td>
<td>40</td>
</tr>
<tr>
<td>Other health</td>
<td>40</td>
</tr>
<tr>
<td>Isolation and clinical case management for COVID-19 cases</td>
<td>37</td>
</tr>
<tr>
<td>Ambulance services for COVID-19 cases</td>
<td>35</td>
</tr>
<tr>
<td>Shelter and urban settlements</td>
<td>31</td>
</tr>
<tr>
<td>Other socioeconomic</td>
<td>26</td>
</tr>
<tr>
<td>Other</td>
<td>25</td>
</tr>
<tr>
<td>Management of the dead</td>
<td>18</td>
</tr>
</tbody>
</table>

Operational Priority:  ● Health  ● National Society Institutional Strengthening  ● Socioeconomic Interventions
COVID-19 Global View
Produced 24 June 2020

(Weekly New Cases/Population)*100000
- No new data or cases reported
- Under 10
- 10 - 20
- 20 - 40
- 40 - 80
- 80 - 160
- Over 160
- RCRC Countries

This map does not imply the expression of any opinion on the part of the International Federation of the Red Cross and Red Crescent Societies or National Societies concerning the legal status of a territory or of its authorities. Produced by SIMS (2020).