Coronavirus disease 2019 (COVID-19) Situation Report – 58

Écrit par WHO Jeudi, 19 Mars 2020 11:22 - Mis à jour Jeudi, 19 Mars 2020 12:21



- One new country/territory/area (European Region [1]) has reported cases of COVID-19.

- Data presented in the COVID-19 Situation Reports has changed to reflect data reported as of 00:00 CET. As this is the first Situation Report with the new reporting period, there is overlap of data between Situation Report 57 and this report, thus the number of new cases may not equal the difference between total cases in the two reports.

- WHO COVID-19 Situation Reports present official counts of confirmed COVID- 19 cases, thus differences between WHO reports and other sources of COVID- 19 data using different inclusion criteria and different data cutoff times are to be expected.

WHO, IFRC, and UNICEF jointly released the Risk Communication and Community Engagement (RCCE) Action Plan Guidance for COVID-19 on 16 March. For more information, please see the *Subject in Focus* section below.

SITUATION IN NUMBERS

total (new) cases in last 24 hours

Globally

191 127 confirmed (15 123)

7807 deaths (786)

Western Pacific Region

91 845 confirmed (312)

3357 deaths (23)

European Region

74 760 confirmed (10 911)

3352 deaths (604)

South-East Asia Region

538 confirmed (63)

9 deaths (1)

Eastern Mediterranean Region

18 060 confirmed (1552)

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1010 deaths (140)

Regions of the Americas

4979 confirmed (2243)

68 deaths (18)

African Region

233 confirmed (42)

4 deaths (0)

WHO RISK ASSESSMENT

Global Level

Very High

SUBJECT IN FOCUS: Risk Communication and Community Engagement (RCCE) Action Plan

WHO, the International Federation of the Red Cross (IFRC) and UNICEF jointly released the <u>R</u> <u>isk Communication and</u> <u>Community Engagement (RCCE) Action Plan Guidance</u> for COVID-19 on 16 March.

The RCCE guidance is a tool to support national health authorities, responders and other partners to develop, implement and monitor action plans for communicating effectively with the public and engaging with communities, local partners and other stakeholders.

The tool includes a 7-step guidance process, which includes: collecting data and making assessments; developing coordination mechanisms; defining and prioritizing key objectives; identifying target audiences and key influencers; developing a RCCE strategy that fits into the country's response strategy; implementing the plan with partners and engaging the community; and developing a monitoring plan for evaluation purposes. The RCCE Action Plan Guidance has a planning template and practical annexes to assist with the exercise.

It allows countries and communities to:

- Adapt the elements according to country needs and the local situation.
- Revise plans according to the evolution of the situation.
- Coordinate and plan together with authorities and partners.

- Proactively communicate and promote a two-way dialogue with communities, the public and other stakeholders.

- Understand risk perceptions, behaviours and existing barriers, specific needs, knowledge gaps, and provide the identified communities/groups with accurate information tailored to their circumstances.

- Reduce stigma. See <u>WHO's Guide to preventing and addressing social stigma</u>

- Conduct early and ongoing assessments to identify essential information about at-risk populations and other stakeholders (i.e. their perception, knowledge, preferred and accessible communication channels, or existing barriers that prevent people to uptake the promoted behaviors).

- Ensure that all people at-risk of acquiring COVID-19 are identified, reached and involved.

Risk Communication and Community Engagement is an essential component of health emergency preparedness and response. This Action Plan Guidance for COVID-19 provides a strategy and tool that helps to prepare and protect individuals, families and the public's health during early response to COVID-19.

STRATEGIC OBJECTIVES

WHO's strategic objectives for this response are to:

- Interrupt human-to-human transmission including reducing secondary infections among close contacts and health care workers, preventing transmission amplification events, and preventing further international spread*;

- Identify, isolate and care for patients early, including providing optimized care for infected patients;

- Identify and reduce transmission from the animal source;

- Address crucial unknowns regarding clinical severity, extent of transmission and infection, treatment options, and accelerate the development of diagnostics, therapeutics and vaccines;

- Communicate critical risk and event information to all communities and counter misinformation;

- Minimize social and economic impact through multisectoral partnerships.

*This can be achieved through a combination of public health measures, such as rapid identification, diagnosis and management of the cases, identification and follow up of the contacts, infection prevention and control in health care settings, implementation of health measures for travelers, awareness-raising in the population and risk communication.

PREPAREDNESS AND RESPONSE

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- To view all technical guidance documents regarding COVID-19, please go to this webpage

- WHO has developed interim guidance for laboratory diagnosis, advice on the use of masks during home care and in health care settings in the context of the novel coronavirus (2019-nCoV) outbreak, clinical management, infection prevention and control in health care settings, home care for patients with suspected novel coronavirus, risk communication and community engagement and Global Surveillance for human infection with novel coronavirus (2019-nCoV).

- WHO is working closely with International Air Transport Association (IATA) and have jointly developed a guidance document to provide advice to cabin crew and airport workers, based on country queries. The guidance can be found on the <u>IATA webpage.</u>

- WHO has been in regular and direct contact with Member States where cases have been reported. WHO is also informing other countries about the situation and providing support as requested.

- WHO is working with its networks of researchers and other experts to coordinate global work on surveillance, epidemiology, mathematical modelling, diagnostics and virology, clinical care and treatment, infection prevention and control, and risk communication. WHO has issued interim guidance for countries, which are updated regularly.

- WHO has prepared a <u>disease commodity package</u> that includes an essential list of biomedical equipment, medicines and supplies necessary to care for patients with 2019-nCoV.

- WHO has provided recommendations to reduce risk of <u>transmission from animals to</u> <u>humans</u>

- WHO has published an <u>updated advice for international traffic in relation to the outbreak</u> <u>of the novel</u> <u>coronavirus 2019-nCoV.</u>

- WHO has activated the R&D blueprint to accelerate diagnostics, vaccines, and therapeutics.

- OpenWHO is an interactive, web-based, knowledge-transfer platform offering online courses to improve the response to health emergencies. <u>COVID-19 courses can be</u> <u>found here</u>. Specifically, WHO

has developed online courses on the following topics: A general introduction to emerging respiratory viruses, including novel coronaviruses (available in Arabic, Chinese, English, French, Russian, Spanish, Portuguese, Persian, Serbian, and Turkish); Clinical Care for Severe Acute Respiratory Infections (available in English, French, Russian, and Vietnamese); Health and safety briefing for respiratory diseases - ePROTECT (available in English, French, Russian, Indonesian, and Portuguese); Infection Prevention and Control for Novel Coronavirus (COVID-19) (available in English, French, Russian, Spanish, Indonesian, Italian, Japanese, Portuguese, and Serbian); and COVID-19 Operational Planning Guidelines and COVID-19 Partners Platform to support country preparedness and response (available in English and coming soon in additional languages).

- WHO is providing guidance on early investigations, which are critical in an outbreak of a new virus. The data collected from the protocols can be used to refine recommendations for

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surveillance and case definitions, to characterize the key epidemiological transmission features of COVID-19, help understand spread, severity, spectrum of disease, impact on the community and to inform operational models for implementation of countermeasures such as case isolation, contact tracing and isolation. Several protocols are available here. One such protocol is for the investigation of early COVID-19 cases and contacts (the "

First Few X (FFX) Cases and

contact investigation protocol for 2019-novel coronavirus (2019-nCoV) infection

"). The protocol is designed to gain an early understanding of the key clinical, epidemiological and virological characteristics of the first cases of COVID-19 infection detected in any individual country, to inform the development and updating of public health guidance to manage cases and reduce the potential spread and impact of infection.

RECOMMENDATIONS AND ADVICE FOR THE PUBLIC

If you are not in an area where COVID-19 is spreading or have not travelled from an area where COVID-19 is spreading or have not been in contact with an infected patient, your risk of infection is low. It is understandable that you may feel anxious about the outbreak. Get the facts from reliable sources to help you accurately determine your risks so that you can take reasonable precautions (see Frequently Asked Questions). Seek guidance from WHO, your healthcare provider, your national public health authority or your employer for accurate information on COVID-19 and whether COVID-19 is circulating where you live. It is important to be informed of the situation and take appropriate measures to protect yourself and your family Protection measures for (see

everyone

).

If you are in an area where there are cases of COVID-19 you need to take the risk of infection seriously. Follow the advice of WHO and guidance issued by national and local health authorities. For most people, COVID-19 infection will cause mild illness however, it can make some people very ill and, in some people, it can be fatal. Older people, and those with pre-existing medical conditions (such as cardiovascular disease, chronic respiratory disease or diabetes) are at risk for severe disease (See Protection measures for persons who are in or have recently visited (past 14 days) areas where COVID-19 is spreading).

CASE DEFINITIONS

WHO periodically updates theGlobal Surveillance for human infection with coronavirusdisease (COVID-19)document which includes case definitions.

For easy reference, case definitions are included below.

Suspect case

1. A patient with acute respiratory illness (fever and at least one sign/symptom of respiratory disease (e.g., cough, shortness of breath), AND with no other etiology that fully explains the clinical presentation AND a history of travel to or residence in a country/area or territory reporting local transmission (See <u>situation report</u>) of COVID-19 disease during the 14 days prior to symptom onset.

OR

1. A patient with any acute respiratory illness AND having been in contact with a confirmed or probable COVID- 19 case (see definition of contact) in the last 14 days prior to onset of symptoms;

OR

1. A patient with severe acute respiratory infection (fever and at least one sign/symptom of respiratory disease (e.g., cough, shortness breath) AND requiring hospitalization AND with no other etiology that fully explains the clinical presentation.

Probable case

A suspect case for whom testing for COVID-19 is inconclusive.

- Inconclusive being the result of the test reported by the laboratory

Confirmed case

A person with laboratory confirmation of COVID-19 infection, irrespective of clinical signs and symptoms.

- Information regarding laboratory guidance can be found here.