

Coronavirus disease 2019 (COVID-19) Situation Report – 91

Data as received by WHO from national authorities by 10:00 CEST, 20 April 2020

HIGHLIGHTS

- No new country/territory/area reported cases of COVID-19 in the past 24 hours.
- The urgent need for a COVID-19 vaccine underscores the pivotal role immunizations play in protecting lives and economies. Dr Hans Henri P. Kluge, WHO Regional Director for Europe, marking the European Immunization Week 2020, stressed [‘we must not, especially now, let down our guard on immunizations’](#). WHO and UNICEF have released a joint statement to mark European Immunization Week 2020, which is available [here](#).
- WHO has published a brief on the use of non-steroidal anti-inflammatory drugs (NSAIDs) in patients with COVID-19. Concerns have been raised that NSAIDs may be associated with an increased risk of adverse effects. However, as explained in the brief, at present there is no evidence of severe adverse effects. The brief is available [here](#).
- WHO has recently published an updated strategy to help guide the public health response to COVID-19 which is available [here](#), and is one of the topics for today’s ‘Subject in Focus’ below.
- An update on Emergency Medical Teams, the Global Health Cluster, the Global Outbreak Alert and Response Network, and Risk Communications and Community Engagement is also provided in today’s ‘Subject in Focus’ below.

SITUATION IN NUMBERS total (new cases in last 24 hours)

Globally

2 314 621 confirmed (72 846)
157 847 deaths (5296)

European Region

1 149 071 confirmed (26 882)
103 586 deaths (2648)

Region of the Americas

858 631 confirmed (36 771)
40 615 deaths (2357)

Western Pacific Region

132 438 confirmed (1326)
5648 deaths (27)

Eastern Mediterranean Region

129 433 confirmed (4742)
6048 deaths (140)

South-East Asia Region

29 576 confirmed (2257)
1275 deaths (90)

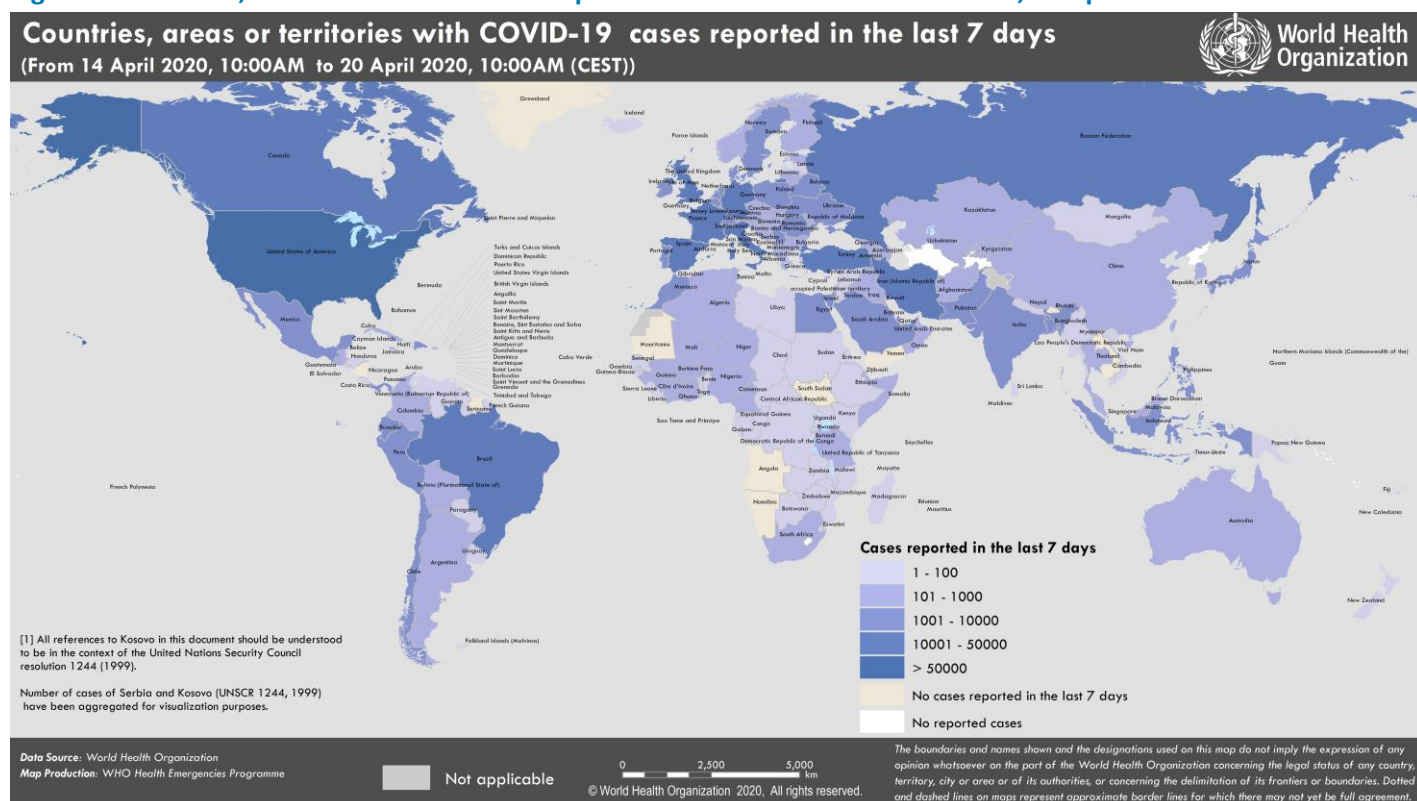
African Region

14 760 confirmed (868)
662 deaths (34)

WHO RISK ASSESSMENT

Global Level Very High

Figure 1. Countries, territories or areas with reported confirmed cases of COVID-19, 20 April 2020



SUBJECT IN FOCUS

1. Updated strategy to help guide public health response to COVID-19

WHO published the first Strategic Response and Preparedness Plan on 3 February 2020. Since then, we have learnt a huge amount about COVID-19, and how best to slow and stop it spreading through communities around the world. WHO has been rapidly translating this new knowledge into guidance for national governments, health workers, and everyone else involved in the global response to COVID-19. On 14 April, WHO published a [strategy update](#) reflecting what we have learnt to inform the next iteration of the Strategic Preparedness and Response Plan (SPRP) due in the coming weeks.

The update is intended to help guide the public health response to COVID-19 at national and subnational level. The update emphasizes the need to tailor the response to COVID-19 carefully to local contexts, however, there are some important lessons that can be applied in a broad range of situations.

One important lesson is that the faster and the more effective we are at finding all suspected cases of COVID-19, testing, isolating and treating the confirmed cases and tracing their contacts, then the harder we make it for the virus to spread. This in turn makes it easier for health systems to cope, deliver quality care, and save lives.

This principle applies in all contexts, but it can sometimes be a challenge to put into practice even in settings with ample resources. Together with the whole UN system, WHO has worked and is continuing to work closely with all partners and national governments to ensure that all populations, but especially the most vulnerable populations, including those in humanitarian settings, benefit from a coordinated and effective response. Alongside the SPRP, that applies to all countries, the COVID-19 Global Humanitarian Response Plan (issued on 25 March 2020), sets out the most urgent health and humanitarian actions required to prepare and respond to COVID-19 in the most fragile contexts.

The update also sets out key criteria and considerations for countries that are considering lifting some of the widespread restrictions on movement, often termed “lockdowns”, that have been used to suppress the spread of COVID-19 through communities. By ensuring these criteria are met, it should be possible for countries to sustain a steady state of low-level or no transition at the same time as resuming some social and economic activities. However, without careful planning, and in the absence of scaled up public health and clinical care capacities, the premature lifting of physical distancing measures is likely to lead to an uncontrolled resurgence in COVID-19 transmission and an amplified second wave of cases.

Finally, the update sets out the shift required in the international system to support countries to plan, finance and implement their response to COVID-19. The world has never faced this scale of challenge before. COVID-19 is a truly global crisis, and the only way to overcome it is together, in global solidarity.

2. Partner Coordination

Emergency Medical Teams (EMT)

- Over a hundred EMTs and focal points worldwide are working closely with the EMT Secretariat, and are continuously engaging in monitoring, guiding, and facilitating national and international COVID-19 response operations. A weekly Global Coordination Call is held, providing the network with updates on current operations, technical guidance, and sharing of current experiences and practices from various EMT responses to COVID-19.
- As of 19 April, international EMTs have deployed to fifteen countries. Thirty-two EMTs are responding nationally to support and reinforce the local health systems in all Regions.
- The EMT Secretariat met with the Regional Group for the European Region on 17 April. Following discussions, there was an agreement for the Secretariat to provide regular updates and present the types of support needed globally in order to raise awareness and facilitate deployments of available EMTs.
- Recently, Chinese EMTs were deployed to Ethiopia and Burkina Faso, and UK EMT to Zambia. Additional deployments of Chinese EMTs are under discussion to Algeria, Democratic Republic of the Congo and Zimbabwe. Requests from Botswana, São Tomé and Príncipe, and Yemen are also being processed.
- The following guidance and recommendations have been finalized: technical guidance on COVID-19 community facilities and treatment centres; recommendations on pre-hospital emergency medical services; and recommendations for medical surge capacity and deployments of EMTs. A modularized just-in-time training package on COVID-19 for the EMT workforce is currently being finalised.

Global Health Cluster (GHC)

- All 29 countries with IASC activated Health Clusters/Sectors are reporting confirmed COVID-19 cases. The 900 national and international health cluster partners are urgently responding to COVID-19 specific needs whilst maintaining essential health services for 65 million people affected by humanitarian crises.
- The GHC is collaborating with other clusters to inform adaptive approaches to implement key public health actions in complex setting (e.g. isolation in camp-like settings with Shelter and Camp Coordination and Camp Management Clusters).
- Updating of the Global Humanitarian Response Plan (GHRP) has been launched at country and global level, involving partner consultation, and consideration of including additional countries.
- A GHC COVID-19 Task Team is being established to (i) Identify & promote minimum standards for humanitarian settings; (ii) support multi-sectoral action; and (iii) intensify advocacy to address unmet needs/ operational barriers. The Task Team will build upon and strengthen existing global partner initiatives with strong field driven engagement to capture operational practice and lessons.

Global Outbreak Alert and Response Network (GOARN)

WHO continues to facilitate direct and remote technical assistance to countries through GOARN regional and global network of networks to support health operation. UNICEF, IFRC, US CDC, and OCHA are embedded in the global COVID-19 incident management team in Geneva; and are supporting all pillars of response. Work is ongoing to launch public information hub on GOARN Knowledge Platform for COVID-19 to share resources from partners and other stakeholders.

GOARN activities include:

- Operational coordination;
- Collaboration on training and capacity building, including Field Epidemiology Training Programmes, regional and global networks, and alumni networks;

- Roll out and implementation of [Go.Data](#); and
- Response research (including support to COVID-19 Research Innovation and Research Roadmap working groups).

Risk Communications and Community Engagement (RCCE)

IFRC, UNICEF, and WHO with GOARN support are strengthening coordination and collaboration among key stakeholders at the global and regional levels in risk communications and community engagement (RCCE). As the COVID-19 pandemic develops into a global humanitarian crisis, there is increasing coordination with IASC Results Group 2 on Accountability and Inclusion and its humanitarian partners to join and align efforts in regard to country operations, solutions and tools for stronger community engagement and accountability approaches on the ground.

- The RCCE global strategy has been completed, and is a 'live' document that will be revised and enhanced following the Strategic Preparedness Response Plan revision and Global Humanitarian Response Plan
- Strengthened coordination of partners with a focus on needs of migrants and vulnerable populations, community engagement in remote populations and addressing reports of stigma and xenophobia.
- Work is ongoing to a launch public information hub for COVID-19 on GOARN Knowledge Platform to share RCCE resources from partners and other stakeholders, and enable access to RCCE information.
- A rapid consultation on social, cultural, behavioural perspectives in the COVID-19 response was undertaken. Briefs were completed on information, misinformation, disinformation and on compliance with physical distancing measures for COVID-19 and implications for RCCE in Eastern and Southern Africa (April 2020). A GOARN RCCE Data Collection Tools Repository was developed for rapid access to tools for COVID-19 RCCE data collection. Africa and Asia RCCE coordination groups are triangulating community insights with the intent to inform RCCE priorities and strategies within these regions.
- A joint "live" guidance has been developed on "Community Engagement and COVID-19 Movement Restrictions: Tips for Engaging People in Low-Resource Settings Remotely and In-Person".
- Guidance and webinars on engagement with faith-based organizations and religious leaders are underway this week ahead of Ramadan. A community action guide with tips for individuals and communities to take simple actions to support and protect people around them during the epidemic is available [here](#).

SURVEILLANCE

Table 1. Countries, territories or areas with reported laboratory-confirmed COVID-19 cases and deaths. Data as of 20 April 2020*

Reporting Country/ Territory/Area [†]	Total confirmed ‡ cases	Total confirmed new cases	Total deaths	Total new deaths	Transmission classification [§]	Days since last reported case
Western Pacific Region						
China	84237	36	4642	0	Clusters of cases	0
Japan	10751	390	171	10	Clusters of cases	0
Republic of Korea	10674	13	236	2	Clusters of cases	0
Australia	6612	26	70	1	Clusters of cases	0
Singapore	6588	596	11	0	Clusters of cases	0
Philippines	6259	172	409	12	Clusters of cases	0
Malaysia	5389	84	89	1	Clusters of cases	0
New Zealand	1105	7	12	1	Clusters of cases	0
Viet Nam	268	0	0	0	Clusters of cases	3
Brunei Darussalam	138	1	1	0	Sporadic cases	0
Cambodia	122	0	0	0	Sporadic cases	8
Mongolia	32	1	0	0	Sporadic cases	0
Lao People's Democratic Republic	19	0	0	0	Sporadic cases	7
Fiji	17	0	0	0	Sporadic cases	3
Papua New Guinea	7	0	0	0	Sporadic cases	3
Territories**						
Guam	133	0	5	0	Clusters of cases	8
French Polynesia	55	0	0	0	Sporadic cases	6
New Caledonia	18	0	0	0	Sporadic cases	17
Northern Mariana Islands (Commonwealth of the)	14	0	2	0	Pending	2
European Region						
Spain	195944	4218	20453	410	Pending	0
Italy	178972	3047	23660	433	Pending	0
Germany	141672	1775	4404	110	Pending	0
The United Kingdom	120071	5850	16060	596	Pending	0
France	111463	742	19689	395	Pending	0
Turkey	86306	3977	2017	127	Community transmission	0
Russian Federation	42853	0	361	0	Clusters of cases	1
Belgium	38496	1313	5683	230	Pending	0
Netherlands	32655	1066	3684	83	Pending	0
Switzerland	27658	336	1134	24	Community transmission	0
Portugal	20206	521	714	27	Pending	0
Ireland	15251	493	610	39	Pending	0
Austria	14710	48	452	9	Pending	0

Sweden	14385	563	1540	29	Pending	0
Israel	13362	255	171	13	Pending	0
Poland	9287	545	360	13	Pending	0
Romania	8746	328	434	17	Pending	0
Denmark	7384	142	355	9	Pending	0
Norway	7068	84	154	6	Pending	0
Czechia	6787	133	188	7	Pending	0
Serbia	6318	324	122	5	Pending	0
Ukraine	5710	261	151	10	Community transmission	0
Belarus	4779	0	47	2	Clusters of cases	2
Finland	3783	102	94	4	Pending	0
Luxembourg	3550	13	73	1	Pending	0
Republic of Moldova	2472	121	67	7	Pending	0
Greece	2235	28	110	5	Pending	0
Hungary	1984	68	199	10	Pending	0
Croatia	1871	39	47	8	Pending	0
Iceland	1771	11	9	0	Pending	0
Uzbekistan	1565	70	5	0	Clusters of cases	0
Kazakhstan	1546	0	17	0	Pending	2
Estonia	1528	16	40	2	Pending	0
Azerbaijan	1398	25	19	1	Clusters of cases	0
Slovenia	1330	13	74	4	Pending	0
Lithuania	1326	28	36	3	Pending	0
Armenia	1291	43	20	0	Clusters of cases	0
Bosnia and Herzegovina	1286	18	46	0	Community transmission	0
North Macedonia	1207	37	51	2	Clusters of cases	0
Slovakia	1161	72	12	1	Pending	0
Bulgaria	915	37	43	2	Pending	0
Cyprus	767	6	17	0	Pending	0
Latvia	727	15	5	0	Pending	0
Andorra	717	13	36	1	Community transmission	0
Kyrgyzstan	568	14	7	2	Pending	0
Albania	562	14	26	0	Clusters of cases	0
San Marino	461	6	39	0	Community transmission	0
Malta	427	1	3	0	Pending	0
Georgia	399	5	4	0	Clusters of cases	0
Montenegro	308	0	5	0	Clusters of cases	1
Monaco	98	0	1	0	Sporadic cases	2
Liechtenstein	82	0	1	0	Pending	1
Holy See	8	0	0	0	Sporadic cases	11
Territories**						
Kosovo ^[1]	535	25	12	0	Community transmission	0
Isle of Man	297	6	4	0	Pending	0
Jersey	245	11	12	1	Pending	0
Guernsey	239	3	9	0	Pending	0

Faroe Islands	185	1	0	0	Pending	0
Gibraltar	133	0	0	0	Pending	2
Greenland	11	0	0	0	Pending	14
South-East Asia Region						
India	17265	1553	543	36	Clusters of cases	0
Indonesia	6575	327	582	47	Community transmission	0
Thailand	2792	27	47	0	Pending	0
Bangladesh	2456	312	91	7	Pending	0
Sri Lanka	271	17	7	0	Clusters of cases	0
Myanmar	111	4	5	0	Clusters of cases	0
Maldives	51	17	0	0	Sporadic cases	0
Nepal	31	0	0	0	Sporadic cases	1
Timor-Leste	19	0	0	0	Sporadic cases	1
Bhutan	5	0	0	0	Sporadic cases	17
Eastern Mediterranean Region						
Iran (Islamic Republic of)	82211	1343	5118	87	Community transmission	0
Saudi Arabia	9362	1088	97	5	Clusters of cases	0
Pakistan	8418	425	176	17	Clusters of cases	0
United Arab Emirates	6781	479	41	4	Pending	0
Qatar	5448	440	8	0	Pending	0
Egypt	3144	112	239	15	Clusters of cases	0
Morocco	2855	170	141	4	Clusters of cases	0
Kuwait	1915	164	7	1	Clusters of cases	0
Bahrain	1881	108	7	0	Clusters of cases	0
Iraq	1539	26	82	0	Clusters of cases	0
Oman	1410	144	7	1	Clusters of cases	0
Afghanistan	996	63	33	3	Clusters of cases	0
Tunisia	866	0	37	0	Community transmission	1
Djibouti	846	114	2	0	Clusters of cases	0
Lebanon	673	0	21	0	Clusters of cases	1
Jordan	417	4	7	0	Clusters of cases	0
Somalia	164	29	7	0	Sporadic cases	0
Sudan	92	26	12	2	Sporadic cases	0
Libya	51	2	1	0	Clusters of cases	0
Syrian Arab Republic	39	1	3	1	Community transmission	0
Yemen	1	0	0	0	Pending	9
Territories**						
occupied Palestinian territory	324	4	2	0	Clusters of cases	0
Region of the Americas						
United States of America	723605	28252	34203	1776	Community transmission	0
Brazil	36599	2917	2347	206	Community transmission	0
Canada	33909	1509	1506	160	Community transmission	0

Peru	14420	931	348	48	Community transmission	0
Chile	10088	1158	133	7	Community transmission	0
Ecuador	9468	446	474	18	Community transmission	0
Mexico	7497	622	650	104	Community transmission	0
Dominican Republic	4680	345	226	9	Community transmission	0
Panama	4273	63	120	5	Community transmission	0
Colombia	3621	182	166	13	Community transmission	0
Argentina	2839	55	132	3	Community transmission	0
Cuba	1035	49	34	2	Clusters of cases	0
Costa Rica	655	6	4	0	Clusters of cases	0
Bolivia (Plurinational State of)	520	27	32	1	Clusters of cases	0
Uruguay	517	9	9	0	Clusters of cases	0
Honduras	472	15	46	0	Clusters of cases	0
Guatemala	257	22	7	0	Clusters of cases	0
Venezuela (Bolivarian Republic of)	228	24	9	0	Clusters of cases	0
Paraguay	206	4	8	0	Community transmission	0
El Salvador	201	11	7	0	Clusters of cases	0
Jamaica	173	10	5	0	Clusters of cases	0
Trinidad and Tobago	114	0	8	0	Sporadic cases	4
Barbados	75	0	5	0	Clusters of cases	3
Guyana	63	0	7	1	Clusters of cases	1
Bahamas	58	4	9	0	Clusters of cases	0
Haiti	44	0	3	0	Clusters of cases	1
Antigua and Barbuda	23	0	3	1	Clusters of cases	6
Belize	18	0	2	0	Sporadic cases	5
Dominica	16	0	0	0	Clusters of cases	9
Saint Lucia	15	0	0	0	Sporadic cases	8
Saint Kitts and Nevis	14	0	0	0	Sporadic cases	4
Grenada	13	0	0	0	Clusters of cases	8
Saint Vincent and the Grenadines	12	0	0	0	Sporadic cases	9
Suriname	10	0	1	0	Sporadic cases	16
Nicaragua	9	0	1	0	Pending	7
Territories**						
Puerto Rico	1213	95	62	2	Clusters of cases	0
Martinique	163	0	12	0	Clusters of cases	1
Guadeloupe	148	3	11	0	Clusters of cases	0
Aruba	97	1	2	0	Clusters of cases	0
French Guiana	96	0	0	0	Clusters of cases	3
Bermuda	86	3	5	0	Clusters of cases	0

Sint Maarten	64	7	9	0	Clusters of cases	0
Cayman Islands	61	0	1	0	Clusters of cases	2
United States Virgin Islands	53	0	3	0	Clusters of cases	1
Saint Martin	37	0	2	0	Sporadic cases	1
Curaçao	14	0	1	0	Sporadic cases	11
Falkland Islands (Malvinas)	11	0	0	0	Clusters of cases	5
Montserrat	11	0	0	0	Sporadic cases	6
Turks and Caicos Islands	11	0	1	0	Sporadic cases	3
Saint Barthélemy	6	0	0	0	Sporadic cases	20
Bonaire, Sint Eustatius and Saba	5	0	0	0	Sporadic cases	2
British Virgin Islands	4	1	1	1	Sporadic cases	0
Anguilla	3	0	0	0	Sporadic cases	16
Saint Pierre and Miquelon	1	0	0	0	Sporadic cases	12
African Region						
South Africa	3158	124	54	2	Community transmission	0
Algeria	2629	95	375	8	Community transmission	0
Ghana	1042	208	9	0	Clusters of cases	0
Cameroon	1016	0	21	0	Clusters of cases	2
Côte d'Ivoire	847	105	9	3	Clusters of cases	0
Niger	648	9	20	1	Clusters of cases	0
Burkina Faso	565	18	36	4	Clusters of cases	0
Nigeria	541	168	19	8	Clusters of cases	0
Guinea	477	0	3	0	Clusters of cases	1
Senegal	367	17	3	0	Clusters of cases	0
Democratic Republic of the Congo	332	5	25	0	Clusters of cases	0
Mauritius	328	3	9	0	Clusters of cases	0
Kenya	270	8	14	2	Clusters of cases	0
Mali	224	8	14	1	Sporadic cases	0
United Republic of Tanzania	171	23	7	2	Sporadic cases	0
Rwanda	147	3	0	0	Sporadic cases	0
Congo	143	0	6	0	Clusters of cases	2
Madagascar	121	1	0	0	Clusters of cases	0
Gabon	109	1	1	0	Sporadic cases	0
Ethiopia	108	3	3	0	Sporadic cases	0
Liberia	91	10	8	1	Sporadic cases	0
Togo	83	0	5	0	Sporadic cases	2
Equatorial Guinea	79	0	0	0	Sporadic cases	1
Zambia	61	4	3	1	Sporadic cases	0
Cabo Verde	55	0	1	0	Sporadic cases	3
Uganda	55	0	0	0	Sporadic cases	4
Guinea-Bissau	50	0	0	0	Sporadic cases	2
Eritrea	39	0	0	0	Sporadic cases	1

Benin	37	0	1	0	Sporadic cases	3
Mozambique	35	4	0	0	Sporadic cases	0
Sierra Leone	35	5	0	0	Sporadic cases	0
Chad	33	0	0	0	Sporadic cases	2
Zimbabwe	25	0	3	0	Sporadic cases	1
Eswatini	22	0	1	0	Sporadic cases	1
Botswana	20	5	1	0	Sporadic cases	0
Angola	19	0	2	0	Sporadic cases	11
Malawi	17	0	2	0	Sporadic cases	2
Namibia	16	0	0	0	Sporadic cases	14
Central African Republic	12	0	0	0	Sporadic cases	3
Seychelles	11	0	0	0	Sporadic cases	13
Gambia	9	0	1	0	Sporadic cases	8
Mauritania	7	0	1	0	Sporadic cases	9
Burundi	6	1	1	1	Sporadic cases	0
São Tomé and Príncipe	4	0	0	0	Pending	13
South Sudan	4	0	0	0	Pending	8
Territories**						
Réunion	408	1	0	0	Clusters of cases	0
Mayotte	284	39	4	0	Clusters of cases	0
Subtotal for all Regions	2 313909	72846	157834	5296		
International conveyance (Diamond Princess)	712	0	13	0	Not Applicable ^{††}	35
Grand total	2 314621	72846	157847	5296		

* Numbers include both domestic and repatriated cases

[†]The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of WHO concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

[‡]Case classifications are based on [WHO case definitions](#) for COVID-19.

[§]Transmission classification is based on a process of country/territory/area self-reporting. Classifications are reviewed on a weekly basis and may be upgraded or downgraded as new information becomes available. Not all locations within a given country/territory/area are equally affected; countries/territories/areas experiencing multiple types of transmission are classified in the highest category reported. Within a given transmission category, different countries/territories/areas may have differing degrees of transmission as indicated by the differing numbers of cases, recency of cases, and other factors.

Terms:

- **No cases:** Countries/territories/areas with no confirmed cases (not shown in table)
- **Sporadic cases:** Countries/territories/areas with one or more cases, imported or locally detected
- **Clusters of cases:** Countries/territories/areas experiencing cases, clustered in time, geographic location and/or by common exposures
- **Community transmission:** Countries/area/territories experiencing larger outbreaks of local transmission defined through an assessment of factors including, but not limited to:
 - Large numbers of cases not linkable to transmission chains
 - Large numbers of cases from sentinel lab surveillance
 - Multiple unrelated clusters in several areas of the country/territory/area

** "Territories" include territories, areas, overseas dependencies and other jurisdictions of similar status

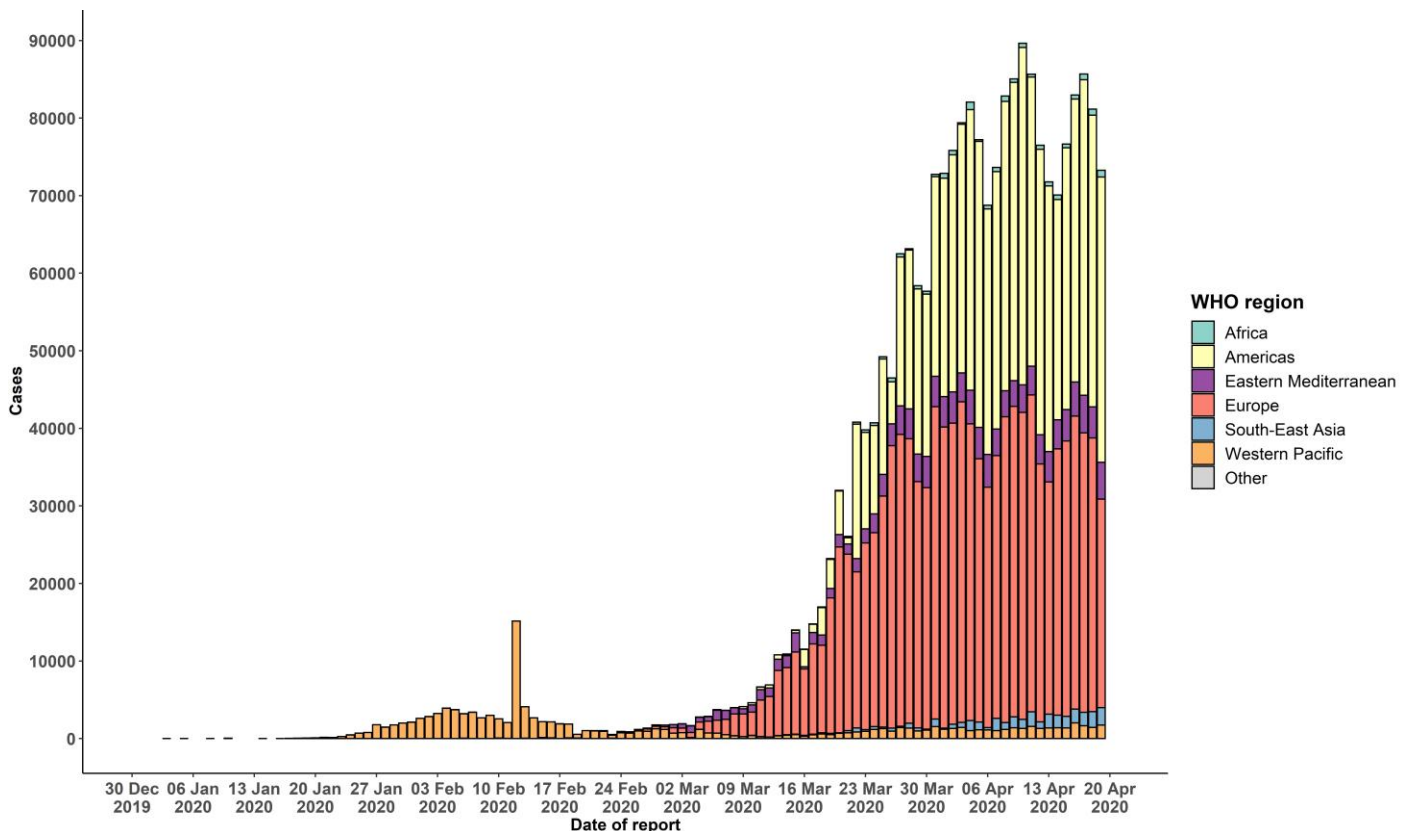
^[1] All references to Kosovo should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).

^{††} As the international conveyance (Diamond Princess) is no longer occupied, transmission classification cannot be applied.

Due to differences in reporting methods, retrospective data consolidation, and reporting delays, the number of new cases may not always reflect the exact difference between yesterday's and today's totals. 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.

Erratum 20 April 2020, Chile: The original publication of the Situation Report included an additional 800 cases. Counts have been corrected.

Figure 2. Epidemic curve of confirmed COVID-19, by date of report and WHO region through 20 April 2020



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

- 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 COVID-19 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 COVID-19.
- 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 [IATA webpage](#).
- 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 [disease commodity package](#) that includes an essential list of biomedical equipment, medicines and supplies necessary to care for patients with COVID-19.
- WHO has provided recommendations to reduce risk of [transmission from animals to humans](#).
- WHO has published an [updated recommendations for international traffic in relation to COVID-19 outbreak](#).
- 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. [COVID-19 courses can be found here](#) and courses in [additional national languages here](#). Specifically, WHO has developed online courses on the following topics:
 - Introduction to Go.Data – Field data collection, chains of transmission and contact follow-up. The Go.Data tool is available globally to WHO staff, member states and partners to support outbreak investigation, focusing on field data collection, contact tracing and visualisation of chains of transmission.
 - A general introduction to emerging respiratory viruses, including novel coronaviruses (available in Arabic, Chinese, English, French, Russian, Spanish, Hindi, Indian Sign Language, Persian, Portuguese, Serbian and Turkish);
 - Clinical care for Severe Acute Respiratory Infections (available in English, French, Russian, Indonesian and Vietnamese);
 - Health and safety briefing for respiratory diseases - ePROTECT (available in Chinese, English, French, Russian, Spanish, Indonesian and Portuguese);
 - Infection Prevention and Control for Novel Coronavirus (COVID-19) (available in Chinese, 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 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 (see [Protection measures for 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 the [Global Surveillance for human infection with coronavirus disease \(COVID-19\)](#) document which includes case definitions.

For easy reference, case definitions are included below.

Suspect case

A. A patient with acute respiratory illness (fever and at least one sign/symptom of respiratory disease, e.g., cough, shortness of breath), AND a history of travel to or residence in a location reporting community transmission of COVID-19 disease during the 14 days prior to symptom onset.

OR

B. 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 symptom onset;

OR

C. A patient with severe acute respiratory illness (fever and at least one sign/symptom of respiratory disease, e.g., cough, shortness of breath; AND requiring hospitalization) AND in the absence of an alternative diagnosis that fully explains the clinical presentation.

Probable case

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

a. Inconclusive being the result of the test reported by the laboratory.

OR

B. A suspect case for whom testing could not be performed for any reason.

Confirmed case

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

- Technical guidance for laboratory testing can be found [here](#).

Definition of contact

A contact is a person who experienced any one of the following exposures during the 2 days before and the 14 days after the onset of symptoms of a probable or confirmed case:

1. Face-to-face contact with a probable or confirmed case within 1 meter and for more than 15 minutes;
2. Direct physical contact with a probable or confirmed case;
3. Direct care for a patient with probable or confirmed COVID-19 disease without using proper personal protective equipment¹; OR
4. Other situations as indicated by local risk assessments.

Note: for confirmed asymptomatic cases, the period of contact is measured as the 2 days before through the 14 days *after the date on which the sample was taken* which led to confirmation.

¹ World Health Organization. Infection prevention and control during health care when COVID-19 is suspected [https://www.who.int/publications-detail/infection-prevention-and-control-during-health-care-when-novel-coronavirus-\(ncov\)-infection-is-suspected-20200125](https://www.who.int/publications-detail/infection-prevention-and-control-during-health-care-when-novel-coronavirus-(ncov)-infection-is-suspected-20200125)