

# Weekly Operational Update on COVID-19

12 October 2021

Issue No. 75



As of 12 October 2021

For all other latest data and information, including trends and current incidence, see the [WHO COVID-19 Dashboard](#) and [Situation Reports](#)

Confirmed cases

**237 655 302**

Confirmed deaths

**4 846 981**

## WHO supports scale up genomic sequencing in Africa

To scale-up capacities to monitor the evolution of SARS-CoV-2, WHO and the [Africa Centres for Disease Control and Prevention](#) established an African sequencing laboratory network, which has produced over 43 000 sequencing data to date. To further augment capacities, WHO is collaborating with the South African



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National Bioinformatics Institute (SANBI) to set up the Regional Centre of Excellence for Genomic Surveillance and Bioinformatics in Cape Town, South Africa.

## Key Figures



WHO-led UN Crisis-Management Team coordinating 23 UN entities across nine areas of work



More than **5.7 million** people registered on [OpenWHO](#) and accessing online training courses across **38** topics in **57** languages



**20 700 072** PCR tests shipped globally



**207 026 426** medical masks shipped globally



**97 051 700** gloves shipped globally



**9 474 791** face shields shipped globally



**192** GOARN deployments conducted to support COVID-19 pandemic response



**6 364 021 792** COVID-19 vaccine doses administered globally as of **12 October**

<sup>a</sup>COVAX has shipped over **344 million** vaccines to **144 participants** as of 11 October

<sup>a</sup>See Gavi's [COVAX updates](#) for the latest COVAX vaccine roll-out data

“Genomic sequencing paves a clear path for us to track the COVID-19 virus, monitor mutations that can lead to new variants and respond effectively and in a timely manner to more infectious variants,” says Dr Nicksy Gumede-Moeletsi. “The Regional Centre will allow countries to be a step ahead of the virus.”

The regional centre will initially support 14 countries in Southern Africa to increase sequencing capacity before expanding to serve more countries. Since its initial operations in July, genomic sequencing activities have since quadrupled.

For more information about the regional centre and integration of routine genomic sequencing into national response strategies in the African region, click [here](#).

## From the field:

### Supporting health workers - the backbone of the COVID-19 response

After reassuring his mother that he would have personal protective equipment (PPE) which would minimize his exposure to COVID-19 and other deadly infectious viruses that are widespread in Yemen, Monther Haider, 30, began working in the Al Sadakah isolation unit of Aden's Al Sadakah hospital in April 2021.



*Monther began working in the Al Sadakah isolation unit of Aden's Al Sadakah hospital in April 2021 ©EMRO*

“I have been working here for almost 5 months,” he said. “In not even the past 2 months, we have received nearly 30 COVID-19 cases transferred from Al Jumhoooria hospital. Some patients were very critical and barely recovered.” He goes on to explain that “As soon as a patient is admitted we provide all necessary health care, including medicines, oxygen, antibiotics and IV (intravenous) fluids”.

WHO is partnering with the King Salman Humanitarian Aid and Relief Centre to support infectious disease prevention measures in Yemen, including COVID-19 case management and provision of medicines and other essential medical supplies to 14 isolation units across the country. Distribution of personal protective equipment (PPE) is key to protecting the lives of health workers. “I’m very happy that I have the PPE,” Monther said, recalling the promise he made to his mother. “It makes me feel much safer, so I can focus on the safety of my patients, and I can also assure my family that I am protected.”

As of 31 August 2021, 8 265 confirmed cases of COVID-19 and 3 252 associated deaths have been reported. However, this number does not reflect the reality of actual COVID-19 cases that have been under-reported and are likely much higher. Yemen’s conflict, now entering its seventh year, has led to human displacement, overcrowding, inadequate safe water and sanitation, and increased exposure to infectious and deadly diseases, including COVID 19.

Frontline health workers like Monther have shouldered a disproportionate burden of the country’s fight against these diseases. “I feel so proud to be on the frontline of this battle with COVID19, especially when I see that the patients are recovering and becoming safely healthy, and this feeling gives us the motivation to continue working and saving the lives of patients”.

For further information on health worker support, click [here](#)

## From the field:

### **WHO/Europe supports national coordination of emergency operations through support to the establishment of Public Health Emergency Operations Centers in Armenia and Kyrgyzstan: September – October 2021**

The COVID-19 pandemic has emphasized that timely information sharing, strategic coordination and efficient management of resources are critical elements of an effective response to public health emergencies.

A functioning Public Health Emergency Operations Centre or “[PHEOC](#)” plays a vital role in coordinating the response to public health threats and emergencies. During the pandemic, WHO

strengthened its support to interested European countries in building their emergency coordination and operations capacities.



*Field Mission to Armenia to support the establishment of a PHEOC ©WHO EURO*

Under the “Solidarity for Health Initiative” supported by the European Union, WHO/Europe deployed a team to work with the Ministry of Health of the Republic of Armenia from 18 September – 3 October 2021. The team provided technical advice and guidance to the national working group identified for the coordination, planning and establishment of a PHEOC.

Mission objectives included mapping essential functions for emergency preparedness and response and information flows for alerts and deliverables. Based on the [WHO Framework and Handbook for PHEOC](#), the team worked together with national experts to describe the core components and functions of the PHEOC and identified main strengths, challenges and follow up points. The mission was an opportunity to promote national discussion and identify the priorities going forward.

In Kyrgyzstan, following the opening of the PHEOC on 21 September 2021, WHO provided technical support to enhance the COVID-19 response through the center and, in particular, develop an integrated epidemiological platform to help strengthen early detection and timely response actions. During this month, WHO will support further efforts to finalize the PHEOC’s concept of operation and standard operating procedures, particularly for the immediate reporting or verification of unexpected events, investigation and risk assessment, media monitoring and for the deployment of rapid response teams.

WHO/Europe will continue to provide technical support to the national authorities and advocate for the development of PHEOCs as a critical public health function required to better coordinate health security actions, deliver emergency operations and provide readily available health intelligence for evidence-based decision-making.

## From the field:

### USAID provides US\$ 2 million to WHO and UNICEF to support COVID-19 vaccine rollout in Lao People's Democratic Republic

On 13 September, the United States Agency for International Development (USAID) announced a grant of US\$ 2 million for Lao People's Democratic Republic to help support the readiness, delivery and monitoring of COVID-19 vaccines and to enhance the country's cold chain system.



WHO and UNICEF continue to support the strengthening of the country's overall capacity to deliver safe and effective COVID-19 vaccines. USAID's support will accelerate the implementation of the National Deployment and Vaccination Plan (NDVP) for COVID-19 by ensuring the health system's readiness for vaccine delivery. This funding will also be used to support the Ministry of Health in strengthening the regulations and policies for vaccine administration and safety. It will also contribute to safe vaccine distribution and waste disposal practices; improving monitoring and evaluation of COVID-19 vaccine roll-out and expansion of pre-registration via the Government's vaccination website for better documentation.

With this support, UNICEF will work on strengthening Lao People's Democratic Republic's cold chain and logistics capacity, including the operationalization of cold chain hubs in Luang Prabang, Saravanh, Savannakhet, Oudomxay, Champasak and Vientiane.

Previous assistance from USAID to UNICEF and WHO has also supported Lao People's Democratic Republic in training for frontline workers, nurses and doctors, providing medical and laboratory equipment, and reopening schools safely and helping children throughout Lao PDR continue to learn.

“USAID's funding will greatly improve our ability to accelerate and monitor the progress in rolling out COVID-19 vaccination throughout Lao PDR, especially as we work towards the achievement of our goal of 50% coverage by the end of 2021. We appreciate the comprehensive support to accelerate the delivery of life-saving COVID-19 vaccines to reach people across the country, particularly those living in more remote areas”.

*Dr Bounfeng Phoummalaysith, Minister of Health*

For further information, click [here](#).



## Pandemic learning response

### Bringing global knowledge during the Covid-19 pandemic to Tetum-speaking frontline workers in Timor-Leste

The World Health Organization (WHO) is committed to making available for free the latest life-saving knowledge to those working on the frontlines every day, anywhere.

In June 2020, OpenWHO.org in collaboration with WHO's Timor-Leste Country Office created and launched its first course in the Tetum - one of the country's national languages



As the COVID-19 pandemic unfolded, the WHO Country Office Timor-Leste understood the intricacies of this new, evolving virus and its impact on populations and prioritized adapting tools to the local language.

“ Most of the training materials were only available in English. To bridge the gap, the use of Portuguese-language content as provided by OpenWHO then helped us to develop and establish an agreed upon standardized scientific terminology in Tetum. For example, before the pandemic, there was no word in Tetum for ‘contact tracing’. However, through the Portuguese training materials, we were able to successfully adapt new vocabulary and technical terminology related to COVID-19”

- Luis dos Reis,  
Team Lead- Planning and Programme Management, WHO Country Office

Today, through this joint effort, out of the 38 COVID-19 topical courses available on the OpenWHO.org platform, 15 were translated into Portuguese and 10 to Tetum.

### OpenWHO.org learning platform figures



Infection, prevention and control  
Clinical management



## COVID-19 Partners Platform



### **WHO Partners Platform enabling streamlined and transparent funding application processes for Vaccine Delivery Support**

To support countries to rapidly and equitably scale-up COVID-19 vaccines distribution, including the rapid roll-out of COVAX-funded doses, GAVI and UNICEF have made specific funding, known as COVID-19 vaccine Delivery Support (CDS) funding, available to all Advanced Market Commitment-eligible participants until end of 2022. To support the roll-out of CDS funding and streamline an efficient application process for countries, the Partners Platform has been adapted to offer a single, central online space for countries to find, complete, and submit all applications to facilitate information sharing and ensure transparency. All CDS funding applications are reviewed on the Partners Platform.

To visualize progress of applications, the Platform also features an interactive dashboard that details of the status of the application, including any approved or disbursed funds as well as cost per category. Since the Early Access Window was opened by GAVI and UNICEF in June 2021, 83 countries submitted requests for CDS funds, of which 82 were successfully completed. In total as of 11 October, \$US 212 million of funding support to countries has been approved out of \$US 225 requested. To date, 42 percent of approved funds have been disbursed to recipients.

To support countries to cover remaining gaps in implementing their respective National Deployment and Vaccination Plans, a second round of CDS funding will open on 13 October 2021 on the platform for GAVI-managed countries. As the second round opens, the CDS Early Access Window will then be closed.

GAVI and UNICEF continue to provide technical support in the application process, including remotely. For more information, an online training session on Covid-19 Delivery Support: Everything you Need to Know About Needs-Based Applications held October 06, 2021: [French](#); [Spanish](#); [English](#) is available.

Additionally, demonstration sessions facilitated by WHO are being organized from 13-23 October: In English: Mondays, Thursdays from 1h30 to 2h00 pm Geneva time CET/(GMT+1) & in French: Tuesdays, Friday from 1h30 to 2h pm Geneva time CET/(GMT+1). [Click here to join the meeting](#)

## Operations Support and Logistics

The COVID-19 pandemic has prompted an unprecedented global demand for Personal Protective Equipment (PPE), diagnostics and clinical care products.

To ensure market access for low- and middle-income countries, WHO and partners have created a COVID-19 Supply Chain System, which has delivered supplies globally.

The table below reflects WHO and PAHO-procured items that have been shipped as of 1 October 2021.

Shipped items as of 1 October 2021	Laboratory supplies*			Personal protective equipment**					
	Sample collection kits	Antigen RDTs	PCR tests	Face shields	Gloves	Goggles	Gowns	Medical Masks	Respirators
Africa (AFR)	5 072 925	1 316 550	2 381 538	1 553 010	35 442 300	453 536	2 373 079	54 810 400	3 654 630
Americas (AMR)	1 348 132	18 097 275	11 187 492	3 341 840	4 859 000	322 940	1 639 720	55 168 330	7 716 960
Eastern Mediterranean (EMR)	2 356 570	2 122 925	2 276 518	1 506 585	16 604 000	348 080	3 119 722	32 987 550	2 476 695
Europe (EUR)	849 600	1 197 550	654 984	1 911 220	27 997 900	627 860	3 316 548	42 101 500	7 201 550
South East Asia (SEAR)	3 630 800	3 175 000	3 002 658	385 036	8 714 500	91 470	642 300	6 950 500	2 841 695
Western Pacific (WPR)	659 450	117 000	1 196 882	777 100	3 434 000	311 927	488 710	15 008 146	3 206 035
<b>TOTAL</b>	<b>13 917 477</b>	<b>26 026 300</b>	<b>20 700 072</b>	<b>9 474 791</b>	<b>97 051 700</b>	<b>2 155 813</b>	<b>11 580 079</b>	<b>207 026 426</b>	<b>27 097 565</b>

Note: PAHO procured items are only reflected in laboratory supplies not personal protective equipment. Data within the table above undergoes periodic data verification processes. Therefore, some subsequent small shifts in total numbers of procured items per category are anticipated.

\*Laboratory supplies data are as of 24 September 2021. \*\*Personal protective equipment data are as of 1 October 2021



### Appeals

#### WHO launches the COVID-19 SPRP mid-term report

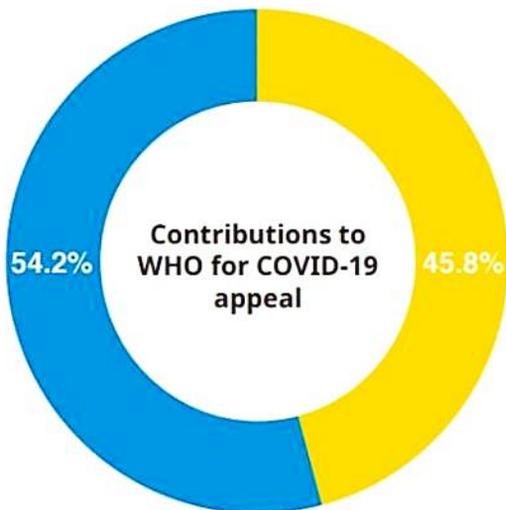
WHO has launched its COVID-19 midterm progress report, which gives a snapshot of the global scale of WHO's WHO COVID-19 preparedness and response work to put the SPRP 2021 into action from February to August 2021, and highlights some of the local impacts that the Organization has delivered for Member States. For more details, click [here](#)

#### WHO launches an updated appeal for urgent priorities and funding requirements

To operationalize the COVID-19 Strategic Preparedness and Response Plan (SPRP) published in February 2021, WHO appealed for US\$1.96 billion to fund its essential role in ending the acute phase of the pandemic. As of September 2021, WHO still faces a funding gap of almost US\$900 Million, this shortfall means that critical areas of the response are at risk.

[This updated appeal](#) is an urgent call for the international community, in particular our donors to fund the SPRP fully and flexibly to allow WHO to play its global role in tackling this pandemic and fulfill the mandate given to it by its Member State

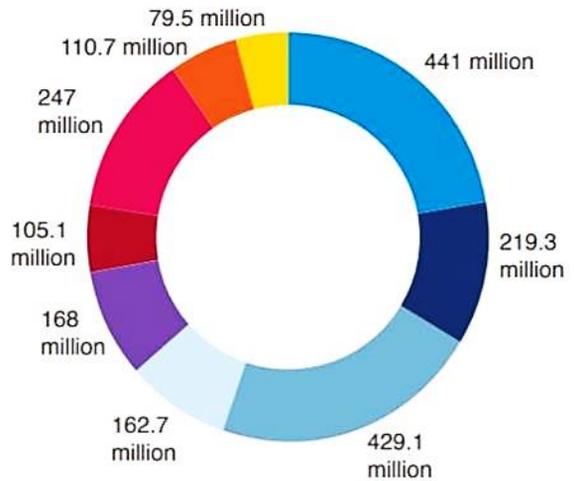
### Total requirement US\$ 1.96 billion



● Total received: US\$ 1.06bn ● Gap: US\$ 898.2m

*Of the total US\$1.96 billion WHO requirement, US\$1.22 billion (62%) counts towards WHO's requirements for the Access to COVID-19 tools Accelerator*

### Total requirement by major WHO office (US\$)



● African region ● Reg. of the Americas ● Eastern Med. region  
 ● European region ● South-East Asian region ● Western Pacific region  
 ● Headquarters ● Global research and innovation ● Global services

## COVID-19 Global Preparedness and Response Summary indicators

Progress on a subset of indicators from the [Strategic Preparedness and Response Plan \(SPRP 2021\) Monitoring and Evaluation Framework](#) are presented below.

Indicator (data as of)	2020 Baseline	Previous Status	Status Update	2021 Target
<b>Pillar 3:</b> Proportion of countries <sup>b</sup> testing for COVID-19 and timely reporting through established sentinel or non-sentinel ILI, SARI, ARI surveillance systems such as GISRS or other WHO platforms (N=69 <sup>c</sup> , as of epidemiological week 37 2021) <sup>d</sup>	22% (n=15) <sup>e</sup>	54% (n=37)	<b>52% (n=36)</b>	50%
This week (epidemiological week 38), of the 69 countries in the temperate zone of the southern hemisphere and the tropics expected to report, 36 (52%) have timely reported COVID-19 data. An additional 19 countries in the temperate zones of the northern hemisphere have timely reported COVID-19 data for this week.				
<b>Pillar 10:</b> Proportion of Member States that have started administration of COVID-19 vaccines (N=194, as of 11 October) <sup>d</sup>	0 <sup>h</sup>	98% (n=191)	<b>No change</b>	100%
<b>Pillar 10:</b> Number of COVID-19 doses administered globally (N=N/A, as of 12 October) <sup>d</sup>	0 <sup>h</sup>	<b>6 188 903 420</b>	<b>6 364 021 792</b>	N/A
<b>Pillar 10:</b> Proportion of global population with at least one vaccine dose administered in Member States (N= 7.78 billion, as of 12 October) <sup>d</sup>	0 <sup>h</sup>	45.3% (n=3.52 billion)	46.6% (n=3.64 billion)	N/A

<sup>a</sup> Quarterly reported indicator

<sup>b</sup> The term "countries" should be understood as referring to "countries and territories"

<sup>c</sup> 69 countries and territories (the denominator) is the number of countries expected to conduct routine ILI, SARI and/or ARI surveillance at the time of year

<sup>d</sup> Weekly reported indicator

<sup>e</sup> Baseline for epidemiological week for southern hemisphere season

<sup>f</sup> Quarterly reported indicator

<sup>g</sup> Baseline as of 31 December 2020

<sup>h</sup> Indicator reporting start data: start of COVID-19 vaccination used to calculate baseline

N/A not applicable; TBD to be determined; ILI influenza like illness; SARI severe acute respiratory infection; ARI acute respiratory illness; GISRS: Global Influenza Surveillance and Response System



## WHO Funding Mechanisms

### COVID-19 Solidarity Response Fund

As of 7 September 2021, [The Solidarity Response Fund](#) has raised or committed more than US\$ 254 million from more than 674 859 donors.

The Fund is powered by the WHO Foundation, in collaboration with the UN Foundation and a global network of fiduciary partners. Donations to the COVID-19 Solidarity Response Fund (SRF) support WHO’s work, including with partners to suppress transmission, reduce

exposure, counter misinformation, protect the vulnerable, reduce mortality and morbidity and accelerate equitable access to new COVID-19 tools.

The world has never faced a crisis like COVID-19. The pandemic is impacting communities everywhere. It’s never been more urgent to support the global response, led by WHO.

**More than US\$ 254 Million**



**674 859 donors**

[individuals – companies – philanthropies]

### The following amounts have already been dispersed to WHO and partners:





## Key links and useful resources



### GOARN

For updated GOARN network activities, click [here](#).

### Emergency Medical Teams (EMT)

For updated EMT network activities, click [here](#).

### WHO case definition

For the WHO case definitions for public health surveillance of COVID-19 in humans caused by SARS-CoV-2 infection, published December 2020, click [here](#).

### WHO clinical case definition

For the WHO clinical case definitions of the post COVID-19 condition, click [here](#).

### EPI-WIN

For EPI-WIN: WHO Information Network for Epidemics, click [here](#)

### WHO Publications and Technical Guidance

For updated WHO Publications and Technical Guidance on COVID-19, click [here](#)

For more information on  
COVID-19 regional  
response:



- [African Regional Office](#)
- [Regional Office of the Americas](#)
- [Eastern Mediterranean Regional Office](#)
- [European Regional Office](#)
- [Southeast Asia Regional Office](#)
- [Western Pacific Regional Office](#)

For the 5 October **Weekly Epidemiological Update**, click [here](#). Highlights this week include:

Updates on the impacts of the phenotypic characteristics (transmissibility, disease severity, risk of reinfection, and impacts on diagnostics and vaccine performance) of SARS-CoV-2 Variants of Concern (VOCs) and the geographic distribution of VOCs.

## News

- This week's episode of [Science in 5 features information on the malaria vaccine](#) with Dr Pedro Alonso
- WHO highlighted the [global shortfall in investment in mental health](#) in advance of World Mental Health Day
- Latest WHO's Disease Outbreak News (DONs), click [here](#)