



COVID-19: WHO European Region Operational Update

Epi Weeks 33–34 (10–23 August)

Current global situation:

At the end of Week 34, over 23 million cases of COVID-19 and 780 000 deaths have been reported to WHO from 216 countries and territories – 200 000–300 000 new confirmed cases of COVID-19 continue to be reported daily. Several countries around the world are now experiencing fresh outbreaks after a long period with little or no transmission. Situations across the WHO regions continue to vary, with the Americas being the most affected, but Europe has recently seen an increasing trend in new cases.

Please refer to the [WHO Daily Coronavirus Disease \(COVID-2019\) Situation Reports](#) for further information.

Current situation in the Region:

In the European Region, cases have now surpassed the 4 million mark with 217 000 reported deaths.

Overall, there is an increasing trend in the Region, as the coronavirus has begun to bounce back in several countries that had shown signs of suppression before the onset of summer. Evolving situations continue to be of particular concern in several countries across western Europe (e.g. France, Spain, Germany, the United Kingdom [UK]), south-eastern and eastern Europe (e.g. Croatia, Romania, Moldova, Ukraine), and Turkey and Israel.

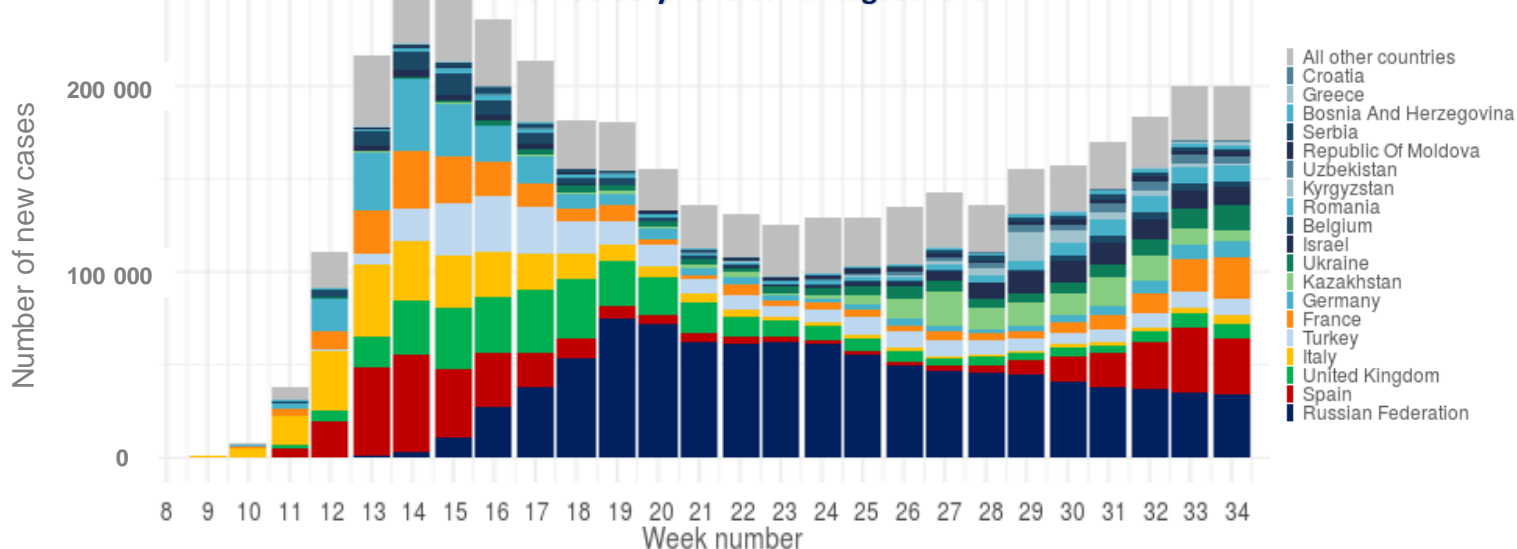
Week 34 Epi Snapshot*

- **53%** of cases were reported from **4** countries: Spain, the Russian Federation, France and Ukraine.
- **88%** of deaths were in people aged >65 years and **58%** of all deaths were in males.
- **96%** of deaths were in people with at least one underlying condition, with cardiovascular disease as the leading comorbidity (75%).

*based on total records with available data

There are an increasing number of reports of imported cases, new clusters and localized outbreaks across the entire Region. As a result, European countries are stepping up public health and social measures as cases increase in order to curb further spread, impacting summer tourism and aspects of everyday life.

Number of COVID-19 cases reported by Epi-Week in the WHO European Region, 16 February 2020 to 23 August 2020



Please refer to the [WHO Daily Coronavirus Disease \(COVID-2019\) Situation Reports](#), the [WHO European Region Dashboard](#) and the [WHO European Region Surveillance Bulletin](#) for further information.

Emergency public health measures taken across the Region:

In response to COVID-19, countries have implemented a range of public health and social measures, including *movement restrictions, wearing of masks, partial or complete closure of schools and businesses, quarantine in specific geographical areas and international travel restrictions.*

National public health and social measures:

As the epidemiology of the disease changes, countries are adjusting public health and social measures accordingly. At the end of Week 34, all countries in the Region have adjusted some of the national public health and social measures previously implemented, with most countries applying a phased approach.

12 countries are implementing partial or full domestic movement restrictions. In **32** countries, a state of national emergency has been declared due to COVID-19. In **24** countries, the state of emergency has since ended – with **2** countries (Republic of Moldova and Serbia) reinstating a state of emergency at city or regional levels. Armenia, Italy, Israel and Lithuania are currently in a state of national emergency due to COVID-19.

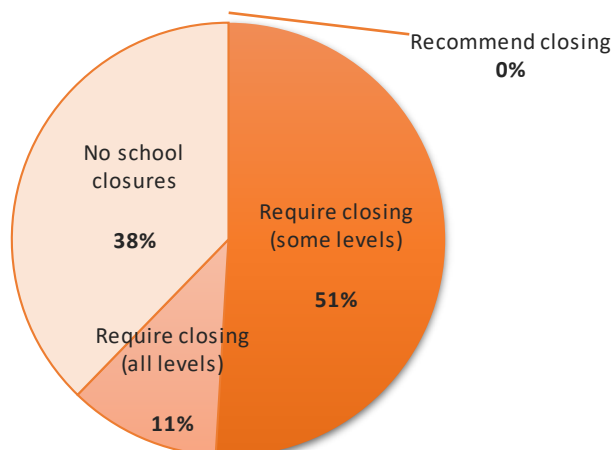
In the past month, the majority of Member States (**37 of 53**) in the Region have reintroduced public health and social measures (e.g. restrictions on mass gatherings, weekend curfews and/or closure of certain non-essential businesses) at local (**7**), regional (**7**) or national (**23**) level, either due to recent localized outbreaks or as a precautionary measure.

In some cases, this reintroduction of measures is related to schooling during COVID-19, as a majority of countries in the European Region have opened or are preparing for schools to reopen by Tuesday, 01 September. Several countries will require students to engage in distance learning while others are asking students to be physically present in schools coupled with infection prevention and control (IPC) measures (wearing of masks, temperature checks, hand hygiene and physical distancing). Additional alternative responses include rotational models (“cohorts”), traffic light system and hybrid models (in-person plus distance learning).

Turkey and Italy have both implemented distance learning, with private schools reopening on 17 August and public schools set to reopen on 31 August. Depending on the epidemiological situation, students will join physical classes from 21 September. Before the summer holidays, Greece introduced a rotational system that created groups, or “cohorts,” of students, which minimizes contact between students and teachers from different classes, and allows for a quick response and contact tracing if a case is identified in a single group. Norway and Belgium have implemented a traffic light system that assigns designated colours, either corresponding to the level of alert or different risk scenarios. Bosnia and Herzegovina, Croatia and Germany have each implemented hybrid models in order to protect students, teachers and staff from infection. Often, students will be in class certain days of the week and follow distance learning on the other days.

Proportion of Member States in the WHO

European Region by category of school closure



Please refer to the [COVID-19 Health Systems Response Monitor \(HSRM\)](#) for additional information on measures implemented across the WHO European Region in response to the coronavirus pandemic.






For further advice with regard to the reopening of schools, please refer to the [WHO Considerations for school-related public health measures in the context of COVID-19](#) and the [WHO Advice on the use of masks for children in communities in the context of COVID-19](#) for further advice on the use of masks by children (developed in partnership with UNICEF).

Additional resources from UNESCO, UNICEF, the World Bank, WFP and UNHCR are also available under the [Framework for Reopening Schools](#).

WHO Regional Office for Europe's response to COVID-19:

The WHO Regional Office for Europe continues to focus on ensuring a sustained response to the pandemic, addressing broad engagement across the Region at regional and country levels. This is built around a comprehensive strategy to prevent the spread of the pandemic, save lives and minimize impact by targeting four areas: **prepare and be ready; detect, protect and treat; reduce transmission; innovate and learn.**

Key figures: Responding to COVID-19 in the WHO European Region

WHO has sent laboratory test kits and supplies to 33 countries and territories in the Region		WHO has sent personal protective equipment to 18 countries and territories in the Region		
		4 736 100	901 448	343 040
387 300	186 806	Gloves	Gowns	Goggles
Laboratory tests (PCR)	Laboratory supplies	9 950 100	1 701 450	5 020 950
		Masks	Face shields	Respirators
WHO has conducted 119 country support missions with 21 countries and territories in the Region*				
		10		22
84	3	Hub support field missions		Partner field deployments
In-country technical support missions	Virtual country support missions			

**the data presented have been adjusted following retrospective analysis of the WHO Regional Office for Europe's records.*

Target 1: Prepare and be ready

The WHO Regional Office for Europe supported Member States as they prepared for their first cases of COVID-19 and continues to provide support in preventing clusters and second waves of transmission. To assist in this work, it has been holding virtual capacity-building webinars since the beginning of the outbreak in the areas of forecasting, calculating workforce and supply surge requirements, quality assurance, hospital readiness, IPC and clinical management of patients with COVID-19. As of Week 34, the webinars have reached half the countries in the Region and over 11 441 health-care workers with the latest training, including a COVID-19 case management workshop on the specifics of COVID-19 guidelines, clinical pathways and protocols with experts in Kazakhstan, and IPC in the context of COVID-19 with health-care workers in Ukraine.

In addition, the WHO Country Office in Kazakhstan continues to provide weekly online webinars for public health practitioners on case management, IPC and laboratories. Over 2300 public health professionals have participated in these webinars. In Week 34, two webinars were conducted on case management and biosafety and biosecurity in laboratories.

The WHO Regional Office for Europe provides guidance to Member States on strengthening health systems and rapidly reorganizing service delivery to respond to COVID-19 while maintaining core essential services across the continuum of care so that no one is left behind. On 20 August, the WHO Country Office in Ukraine, in collaboration with the Ukraine Public Health Centre (UPHC), held a webinar with the Zhytomyr AIDS centre and antiretroviral therapy (ART) sites in the Zhytomyr oblast on maintaining HIV services in the context of COVID-19. WHO recommendations were also provided on HIV diagnosis, treatment and care.

In focus: International Virtual Conference on Paediatrics in the context of COVID-19: 20 August 2020

An international virtual conference was held on 20 August in the context of COVID-19 preparedness and response. The joint WHO/UNICEF international virtual conference was hosted by Turkmenistan with the support of the WHO Country Office, which provided technical assistance to the Government of Turkmenistan. During the conference, experts in the field of child and adolescent health care discussed global, regional and country experiences in providing adequate health care for children during COVID-19. The focus was on epidemiology and clinical management of children with COVID-19, continuity of essential health services, effects of lockdown on children and adolescents, transitioning back to normal health-care services after the pandemic and addressing nutrition aspects in schools and health facilities. This conference was attended by representatives from Azerbaijan, Armenia, Germany, Kazakhstan, Kyrgyzstan, the Russian Federation, Tajikistan, Turkmenistan, the UK and Uzbekistan.



Target 2: Detect, protect and treat patients with COVID-19

WHO recommends that all countries and territories work to ensure that public health measures and health system capacities are in place to rapidly detect, test and treat all cases, and identify and isolate their contacts. On 19 August, two experts were deployed to Kosovo¹ to provide technical support for the surveillance of COVID-19 cases as well as clinical management of patients with COVID-19.

WHO continues to support countries in scaling up national and subnational laboratory capacities, ensuring their ability to detect cases of COVID-19 and effectively break chains of transmission. From 13 to 27 August, the WHO Regional Office for Europe deployed a laboratory expert in a follow-up mission to Kazakhstan in order to further support the government and Ministry of Health (MoH) in the development of a national scale-up plan for COVID-19 testing. The WHO expert will visit different levels of laboratories conducting COVID-19 testing in Almaty and Nur Sultan.

In focus: WHO-trained young epidemiologists help fight COVID-19 in the Republic of Moldova

Ten young epidemiologists from different departments at the National Public Health Agency (NPHA) in the Republic of Moldova have joined forces to review and analyse data that will allow their country to respond more effectively to COVID-19. Working together alongside other public health professionals, the team provides accurate epidemiological data insights from the Republic of Moldova for both the WHO Regional Office for Europe and the Country Office, in addition to the European Centre for Disease Prevention and Control (ECDC).

The WHO Regional Office for Europe has helped the Republic of Moldova to detect and respond to disease outbreaks by supporting an existing network of field epidemiology training programmes. Since the beginning of the COVID-19 pandemic, WHO and its partners have conducted 132 training sessions in IPC and public health emergency management for health professionals from the Republic of Moldova. Find the full story [here](#).



A team of young epidemiologists from the Republic of Moldova

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

Target 3: Reduce transmission

WHO continues to assist countries in strengthening core capacities at points of entry to help reduce public health risks associated with air travel by coordinating joint actions in the Region to ensure that effective support is provided to national authorities. A dialogue between Tajikistan public health experts and aviation stakeholders took place on 12 August. The meeting, organized by the WHO Country Office in Tajikistan, was also attended by several members of the Committee for Emergency Situations and Civil Defense of the Republic of Tajikistan. Key topics included discussions regarding the evidence of public health risks associated with air transport; an assessment of potential new mitigation measures and implications for international travel, and a description of measures taken by the aviation industry and regulatory authorities to reduce public health risks in the context of air travel.

WHO is supporting Member States in developing, adapting and reinforcing surveillance approaches to ensure comprehensive national surveillance for COVID-19, including the scale up of surveillance capacities where needed. On 21 August, the WHO Regional Office for Europe held a surveillance network call jointly with the ECDC. Eighty participants from across the Region took part in the call, which included country presentations focused on localized outbreaks, changes in surveillance and surveillance for severe acute respiratory infections.

In focus: Enabling rapid contact tracing in Albania, August 2020



One of the key tools for suppressing transmission in all communities is contact tracing. It is essential for finding and isolating cases, and identifying and quarantining their contacts. In Albania, from 17 August through December 2020, the WHO Regional Office for Europe will be supporting the MoH in equipping its surveillance and contact tracing teams with vehicles, allowing 12 of 54 teams to better reach remote communities and ensure that swabs reach the Institute of Public Health in Albania's capital more rapidly.

Target 4: Innovate and learn

A critical element of the response to the COVID-19 pandemic is understanding public behaviour and using this information to inform measures and actions taken to prevent further spread of the virus. The ongoing behavioural insights study on COVID-19 in North Macedonia focuses primarily on monitoring knowledge, risk perceptions, preventive behaviours and trust to help better inform pandemic outbreak response. The second round of the study was recently completed during Week 34 in North Macedonia and the third round has now been initiated with results being presented to the MoH.

WHO continues to support countries in ensuring that they have strong national and subnational responses to COVID-19. It is essential that countries do not miss critical opportunities for learning and improvement to better respond to the COVID-19 outbreak. On 21 August, the WHO Regional Office for Europe deployed a country support mission, in partnership with the Robert Koch Institute (RKI), to Uzbekistan. The aim of the mission is to assist the Government of Uzbekistan in conducting an intra-action review to support the ongoing response to COVID-19 in the country. The team will consist of a dozen members from RKI, Charité University Berlin, University of Frankfurt, University of Düsseldorf and experts from the WHO Europe Regional Office who will work to facilitate the review process over the 6-day mission.

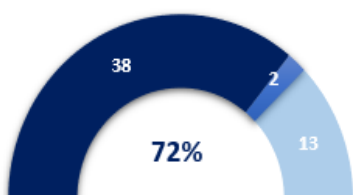
In focus: The regional WHO–UN–Red Cross coordination platform discussed migrant and refugee health in the context COVID-19

WHO, together with partners, is providing guidance and advice during the COVID-19 pandemic to help address health needs among refugees and migrants. On 13 August, the WHO Regional Office for Europe convened its regular regional WHO–UN–Red Cross coordination platform to facilitate coordination at the regional level to enhance multi-stakeholder engagement at the country level, ensuring a multisectoral response to COVID-19. In Week 33, the meeting focused on Greece, in the context of migrant and refugee settings and COVID-19, highlighting best practices and lessons learnt as points of discussion. The meeting was convened to keep international United Nations agencies, the Red Cross movement and international NGO partners informed on COVID-19-focused initiatives and activities within the country and encourage ideas for new ways forward.

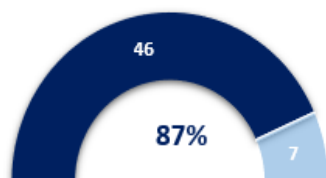
Continuously monitoring regional readiness:

The WHO Regional Office for Europe is monitoring readiness and response capacities in the Region to support strategic thinking, operational tracking and decision-making, and ensure advocacy with and transparency of donor and other agencies involved in the response. Indicators are used to monitor the global and regional situation, priority countries with operational support provided by the international community, and WHO's response.

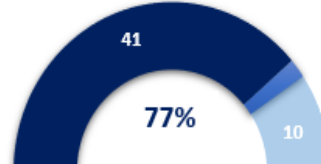
Countries with a COVID-19 national preparedness and response plan



Countries with a functional multi-sectoral, multi-partner coordination mechanism for COVID-19 preparedness and response



Countries with a COVID-19 risk communication and community engagement plan according to transmission scenario



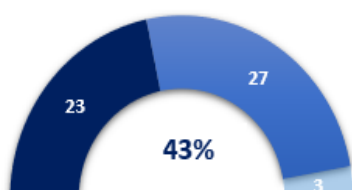
Countries with humanitarian settings which have an active COVID-19 hotline number system



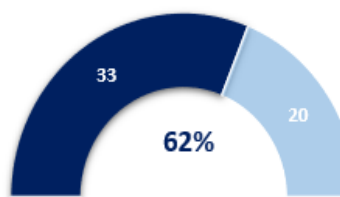
Countries with COVID-19 laboratory test capacities



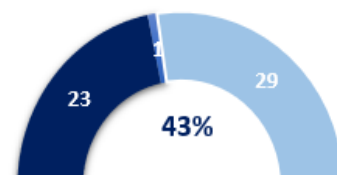
Countries with a National IPC Program and WASH Standards within all healthcare facilities



Countries with a clinical referral system in place to care for COVID-19 Cases



Countries with Long-Term Care Facilities (LTCF) that have a national policy and/or guidelines on IPC for COVID-19 in LTCF



Yes
 No
 Missing data*

*Data collection ongoing

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