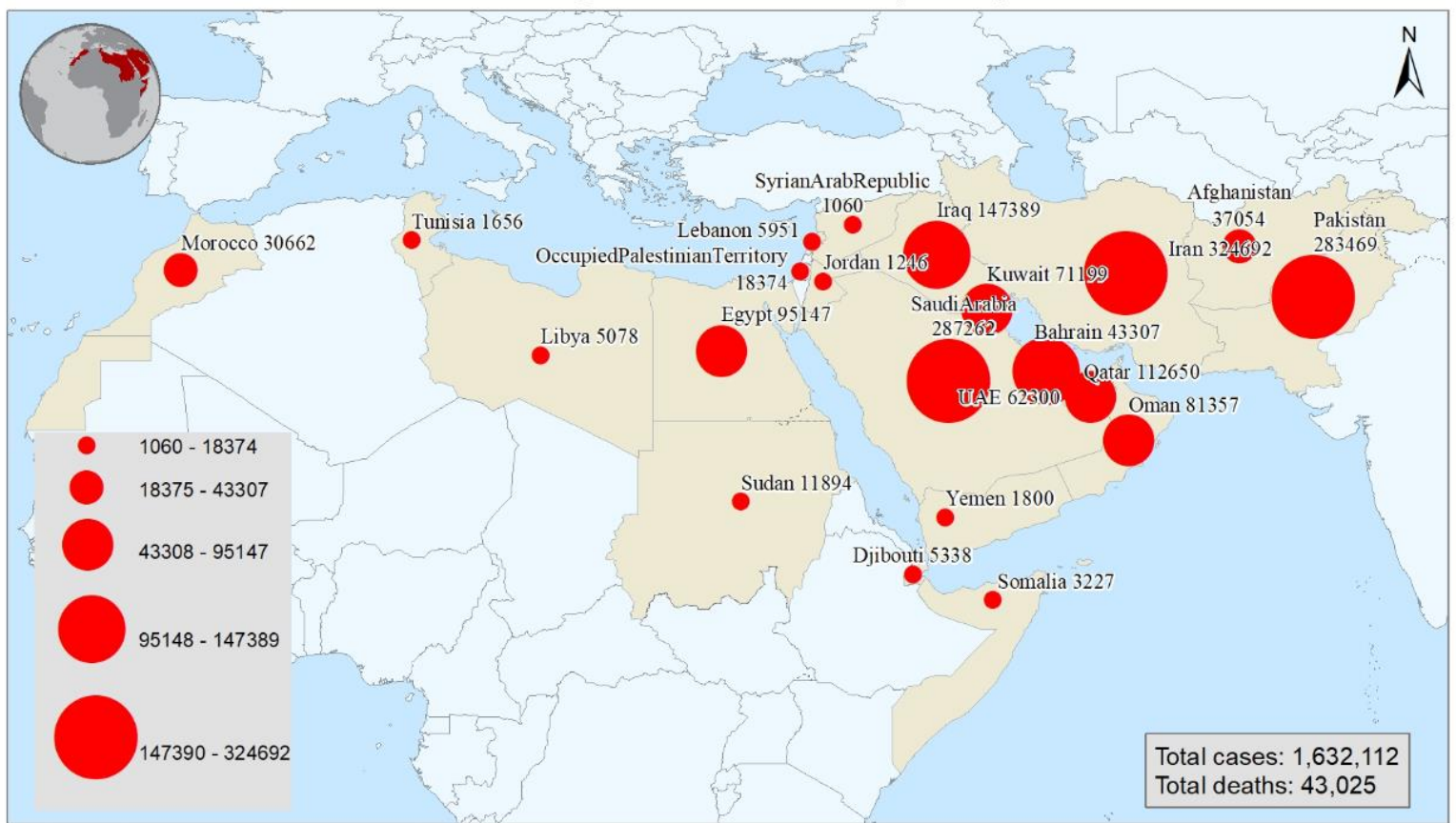




<b>22</b>	<b>1 632 112</b>	<b>43 025</b>	<b>1 367 421</b>	<b>19</b>	<b>22</b>
<b>Countries and territory reporting cases</b>	<b>Total laboratory-confirmed cases reported (5% increase from previous week)</b>	<b>Total deaths reported (6% increase from previous week)</b>	<b>Total recovered cases reported</b>	<b>Countries with Influenza surveillance networks supporting COVID-19</b>	<b>Countries with Rapid Response Teams for COVID-19</b>

**Map 1. Distribution of COVID-19 confirmed cases and deaths in EMR as of 8 August 2020 (18:00 Cairo time)**



The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization 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.

Data source: World Health Organization  
Map production: Health Emergency Information and Risk Assessment (HIM) Unit  
World Health Organization

## Key situation highlights

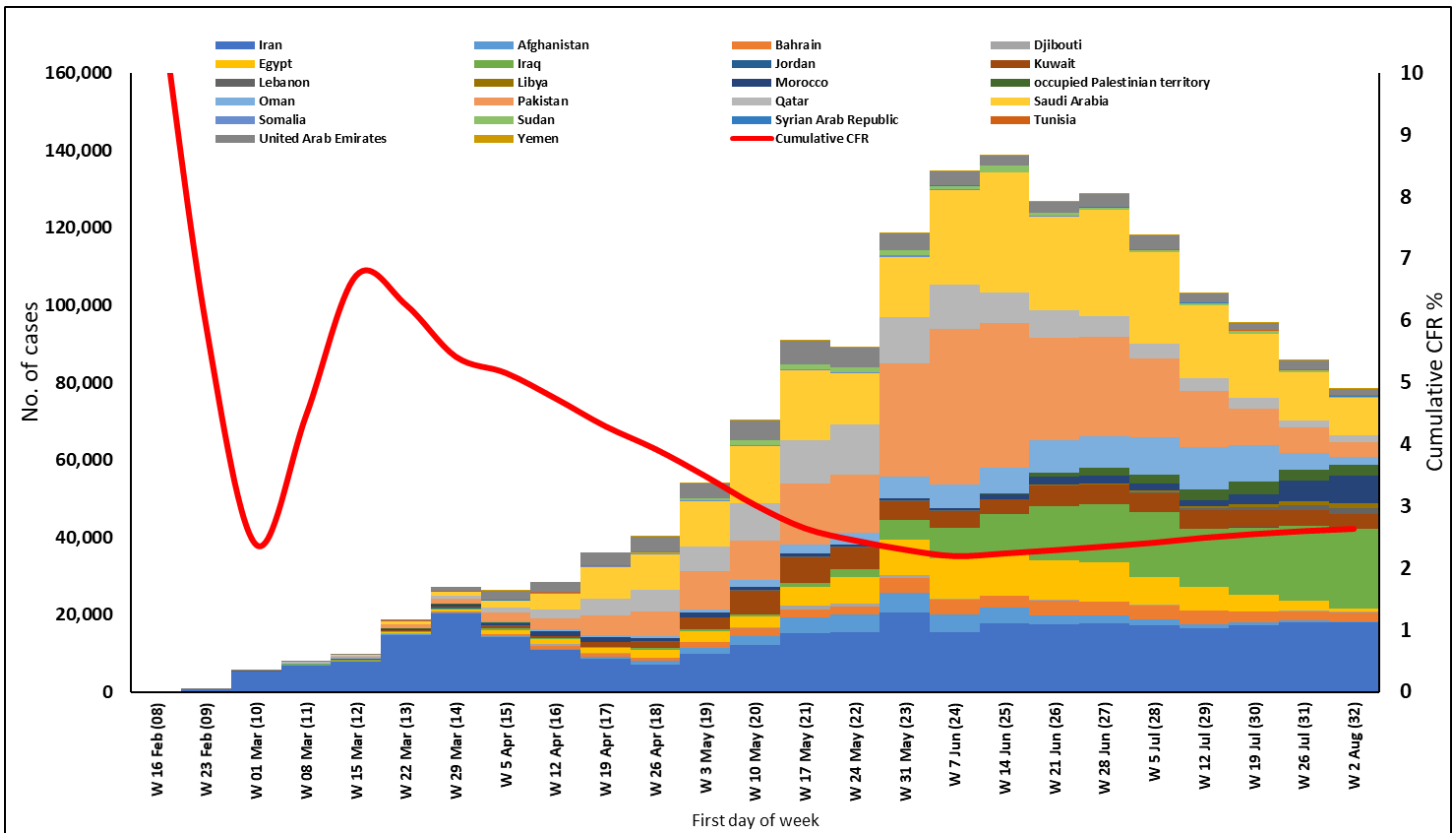
- Over the past two weeks, the overall regional trend of reported cases and deaths appears to have stabilized and is even decreasing. However, a mixed picture is observed at individual country level. Some countries are reporting a decrease in cases and stabilization in deaths; some are reporting a sharp increase in cases and others a more gradual increase; while some are reporting plateauing or stabilizing of cases.
- The Eastern Mediterranean Region represents 9.0% of the global burden of cases reported to date. Globally, Iran remains at the 10th position of countries with the heaviest case load. As Pakistan's weekly case count continues to decrease, the country is no longer included among the top 12 countries with the highest case load globally.
- Cases in the region increased from 1,555,459 to 1,632,112 (5% increase; compared to 6% previous week). 63% of cases this week were reported from only three countries (27% from Iraq, 23% from Iran; and 13% from KSA). Countries with the largest relative increase in reported cases are Libya (38%), Syria (36%), and Lebanon (26%).
- Deaths in the region increased from 40,410 to 43,025 (6% increase; compared to 8% previous week). 68% of deaths this week were reported from only two countries: Iran (49%) and Iraq (19%). Libya, Morocco, and Oman had the largest relative increase in deaths (35%, 26% and 21%, respectively).
- In Lebanon, COVID-19 remain a concern, especially following the blast that occurred on 4 August. Due to the blast, 17 containers of WHO essential medical supplies were destroyed, with personal protective equipment items completely burnt. Health care workers treating COVID-19 patients lack proper protective equipment, and hospitals receiving injured patients are overwhelmed and in need of urgent medical supplies. As the number of COVID-19 cases in Lebanon was increasing prior to the blast, WHO is also focusing its efforts on ensuring that all pillars of the response remain active and that there is a reliable supply of PPE and other supplies to replace the lost and damaged materials.

**Table 1. Regional update of COVID-19 in the Eastern Mediterranean Region as of 8 August (18:00 Cairo time)**

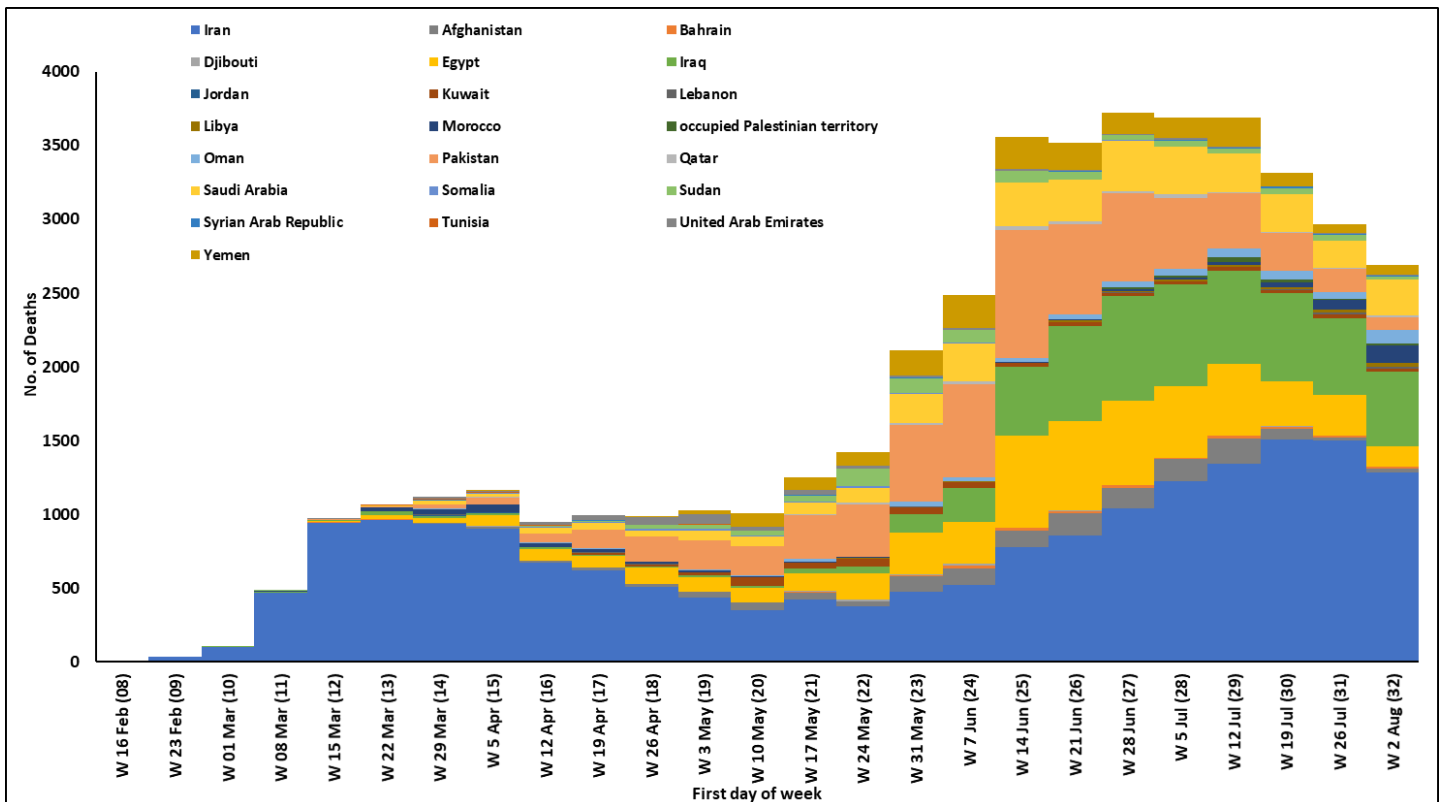
Country	New cases	New deaths	Total cases	Recovered	Total deaths	CFR	Tests/100,000	Positivity ratio %
Afghanistan	39	5	37054	25960	1312	3.5	238	40.0
Bahrain	418	3	43307	40276	161	0.4	52075	4.9
Djibouti			5338	5083	59	1.1	6063	8.9
Egypt	141	20	95147	50553	4971	5.2	441	21.1
Iran	2125	132	324692	282122	18264	5.6	3169	12.2
Iraq	3325	74	147389	105504	5310	3.6	2803	13.1
Jordan	9		1246	1178	11	0.9	6278	0.2
Kuwait	472	3	71199	62806	474	0.7	12390	13.5
Lebanon	279		5951	2042	70	1.2	5172	1.7
Libya	199	1	5078	660	108	2.1	1065	6.9
Morocco	1018	12	30662	21548	461	1.5	3807	2.2
oPt	426	6	18374	10039	103	0.6	4212	8.6
Oman	290	7	81357	73481	509	0.6	6055	26.3
Pakistan	824	14	283469	259604	6066	2.1	952	13.5
Qatar	267	2	112650	109438	182	0.2	17939	21.8
Saudi Arabia	1469	37	287262	250440	3130	1.1	10785	7.7
Somalia			3227	1728	93	2.9	57	35.5
Sudan			11894	6243	773	6.5	63	42.9
Syria	61		1060	311	48	4.5	28	21.7
Tunisia			1656	1251	51	3.1	863	1.6
UAE	239		62300	56245	356	0.6	54994	1.1
Yemen	28	4	1800	909	513	28.5	16	37.1
<b>TOTAL</b>	<b>11629</b>	<b>320</b>	<b>1632112</b>	<b>1367421</b>	<b>43025</b>	<b>Med=1.8</b>	<b>Med=3488</b>	<b>Med=12.6</b>

*New cases/deaths are reported since previous day 06 pm*

**Graph 1: Weekly distribution of COVID-19 cases in the Eastern Mediterranean Region, 29 Jan – 8 August (18:00 Cairo time)**

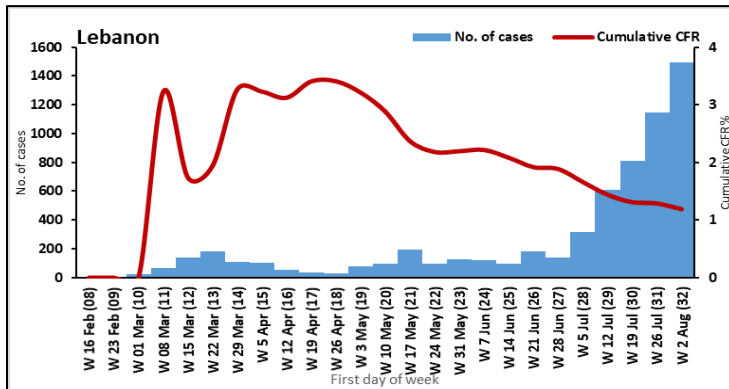
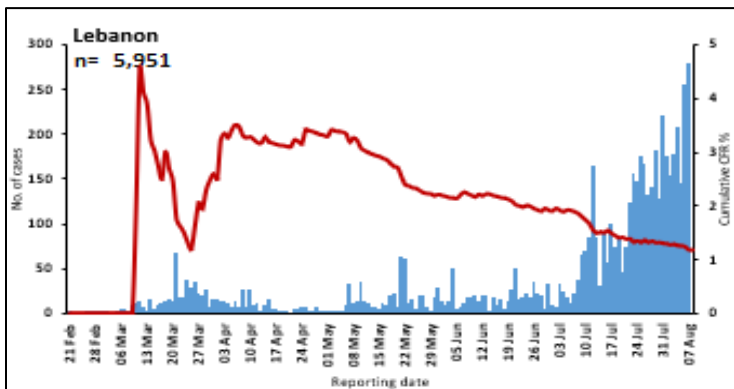


**Graph 2: Weekly distribution of COVID-19 deaths in the Eastern Mediterranean Region, 29 Jan – 8 August (18:00 Cairo time)**

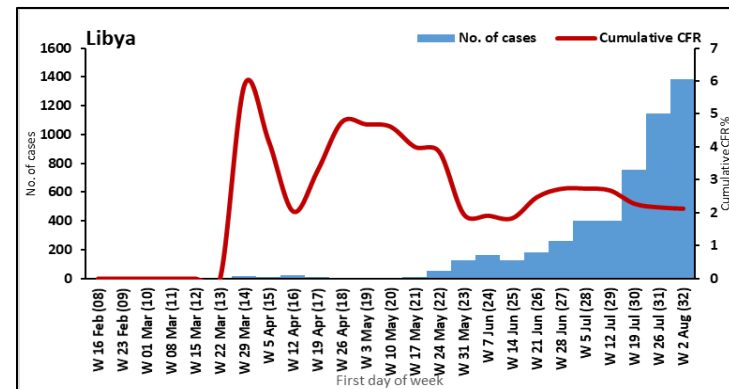
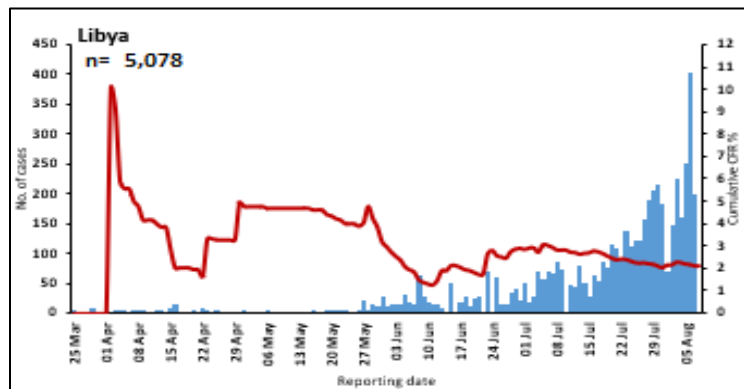


## Weekly COVID-19 trend for selective countries 29 Jan – 8 August (18:00 Cairo time)

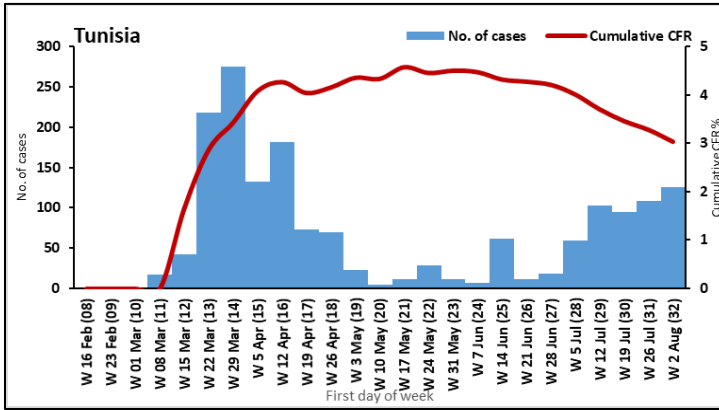
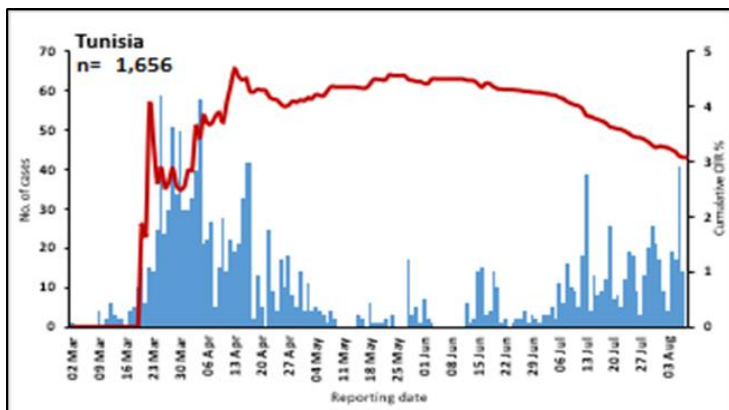
Lebanon: increasing trend due to mass testing of repatriates late June; re-opening of port starting 2 July; community transmission started with multiple clusters across the country



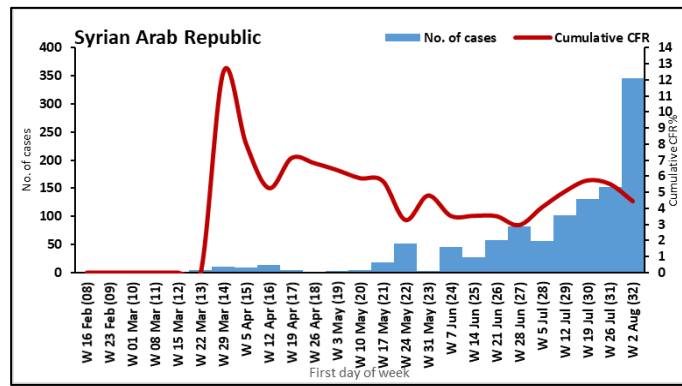
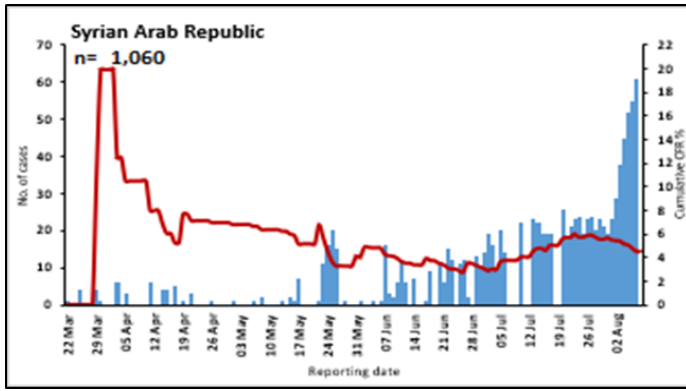
Libya: highest number of new cases and death over the weekend associated with increased testing capacity from 3 labs initially to 15 functional labs across the country



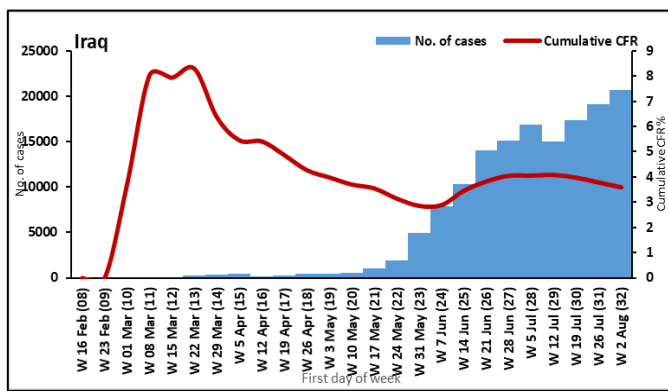
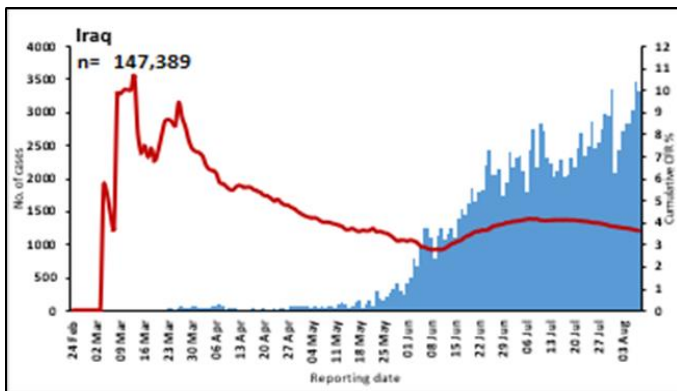
Tunisia: highest number of reported cases since April, most of them imported



Syria: highest number of reported cases since the beginning of the outbreak most of them are repatriated from Kuwait, KSA, Lebanon, Jordan



Iraq: increasing number of reported cases that attributed to lack of community adherence to lock down measures



## Regional response highlights

- A protocol was finalized for a COVID-19 sero-prevalence study to be conducted in Aden, Yemen in collaboration with University of Aden and Medicins Sans Frontieres (MSF). Awaiting final clearance by the Ministry of Health and the ethical review board.
- 30 national and subnational laboratories from the region participated in the global COVID-19 External Quality Assessment Programme (EQAP). Of these, 28 labs received the panels, of which 25 labs scored 5 out of 5, 2 labs scored 4 out of 5 and 1 lab scored 0 out of 5 (due to a reporting error). Technical support is being provided with the labs that did not score 100% to improve and strengthen their capacities in the areas that have been identified as problematic.
- WHO, UNFPA & UNICEF conducted a joint virtual meeting for the preparation of a virtual meeting with regional directors and ministers of health on the continuation of essential reproductive, maternal, neonatal, child, and adolescent health (RMNCAH) care/ services in the context of COVID-19.
- Progress on the Bill and Melinda Gates Foundation Project includes finalization of the modeling and documentation tools for RMNCAH data collection according to the five workstreams in Pakistan, Sudan, and Yemen. WHO/HQ and WHO/EMRO teams have agreed on the tools and training modalities for applying IPC & PPE to RMNCAH services.
- An assessment was conducted for Lebanon on RMNCAH services and adoption of Robson classification for optimization of cesarean section use.
- The Yemen surge mission in the area of clinical management is currently underway and the national clinical management strategy for Yemen has been developed and endorsed by the local health authorities. Coordination is taking place with Jordan to develop a tailored COVID-19 clinical management course for doctors and nurses, and with Afghanistan to facilitate training for critical care practitioners in rural areas.

- The inter-agency risk communications and community engagement (RCCE) working group conducted a regional training for communication professionals on informed coverage and responsible reporting (UNESCO-American University in Cairo-WHO EMRO). Discussions are ongoing to establish an interagency forum for national societies and local partners to share RCCE best practices and success stories (initiated by IFRC). The current literature review was updated on pan-regional norms, culture and contextual factors that will influence long term sustainability of COVID-19 prevention behaviours (UNICEF -Anthrologica – WHO- IFRC).
- The Supply Chain Working Group organized a session to brief partners on WFP's air cargo services provided for the COVID-19 response. They also discussed the Supply Chain Planning and Ordering tool developed by JSI and the possibility of linking it with the WHO forecasting tool.
- With regards to the Unity Studies, Afghanistan has completed data collection/analysis and early results will be presented next week. Pakistan and Jordan have started implementation of the sero-prevalence studies. Yemen, Lebanon, Sudan, Somalia and UAE are finalizing study protocols in collaboration with WHO/EMRO. Syria, Morocco, Libya, Qatar and Iran are in the planning phase of developing the study protocol.
- In collaboration with WHO's collaborating centre on infection prevention and control (IPC) in Saudi Arabia, 3-day online training workshop (Training-of trainers) was conducted for IPC practitioners in Iraq from 28 – 30 July, attended by 170 participants.
- Coordination is ongoing with the Egypt country office and the Egyptian Ministry of Health to strengthen response capacities for Rapid Response Teams in the country.
- The Regional Office contributed to a global review and update of the interim guidance on diagnostic testing for SARS-CoV in suspected human cases. Capacity building for RT-PCR testing for SARS-CoV-2 was supported for north and northeast Syria. As part of the WHO External Quality Assessment Project (EQAP) for COVID-19, 30 labs from the Region participated, of which 20 labs reported results (18 labs scored 5 out of 5 and 2 labs scored 4 out of 5). Overall results will be shared next week.
- Situation Report #13 on the Health of Internally Displaced Persons, Refugees, Migrants, Returnees and COVID-19 was released this week. The next partner coordination meeting is planned for next Monday where WFP is expected to present on transportation of COVID-19 supplies and operation of their platform (Marketplace) that allows partners to request transport service for COVID. The supply chain Management Working group is providing routine technical and coordination support upon request. The webinar session on forecasting tool was shared with partners. Discussions are ongoing with UN Women and OCHA to establish a Regional Gender in Humanitarian (GiHA) Working Group where initial actions would focus on COVID-19.
- Most countries are now receiving their 2nd wave of resupply shipments from the logistics hub in Dubai. The Libya Charter flight has been postponed to 08 and 09 August. The Yemen Charter flight is proposed to use UAE military aircraft. The shipment to Iraq is expected following the Eid holiday, and the shipment to the occupied Palestinian territory has been shipped to Addis Ababa and awaiting onforwarding to Jerusalem. Over all, 636 purchase orders have been processed by the Dubai hub since February at a value of USD 50,142,475.

## Challenges

- Many countries in the Region are in the process of easing social measures because of their significant economic and social impacts, with the International Monetary Fund projecting that Gross Domestic Product across the Region could decrease by 4.4% in 2020.
- New travel-related cases are reported since countries began opening airports and other points of entry for international travelers, and some countries are showing a resurgence of new community-transmitted cases after an initial dip.
- Data sharing is still a major challenge as some countries are still not sharing the basic COVID data with WHO.
- The outbreak in some countries has also spread to migrant workers, and health authorities are employing aggressive mass laboratory testing to target migrants or expatriates.
- In countries where the situation seems to be stabilizing, there are significant reductions in the numbers of people being tested, which affects the number of positive cases reported.

- Health care workers are still exposing COVID infection due poor working environment or lack of proper PPEs. This is exacerbated by new global shortages in gloves.

## Regional and country response highlights

- Regional virtual [press briefing](#).
- Regional Director press statement in [English](#) and [Arabic](#)
- RD [Eid video message](#) for social media
- Eid public health social media cards in [English](#) and [Arabic](#)
- Iraq awareness raising [campaign](#) target more than 6 million people in Baghdad
- Joint [statement](#) with IOM on protecting migrants and refugees
- Joint [press briefing](#) with RD EMRO and RD AFRO and joint [statement](#)
- Facebook Live on [Universal Health Coverage](#) in the Region.
- Frontline workers and COVID-19: coping with stress ([fact sheet](#))
- Helping frontline workers cope with stress during COVID-19: actions for peers ([fact sheet](#))
- Helping frontline workers cope with stress during COVID-19: actions for team leads ([fact sheet](#))
- Seven [English social cards](#) on “Don’t smoke or vape during Eid and always” are now available online. Also in [Arabic](#).
- Seven [English social cards](#) on “Smoking and vaping increase your chances of developing a severe case of COVID-19” are now available online. Also in [Arabic](#).
- [Tobacco and COVID-19 page](#) updated to reflect the latest products/publications (regional and global).
- 10 stories on country activities on tobacco control during COVID-19 added to [publications landing page](#) or accessed directly [here](#).

Regional COVID-19 [web site](#)

For more information, contact [emrgonCoV@who.int](mailto:emrgonCoV@who.int)