



International Medical Corps staff hold a COVID-19 awareness session in Nangahar Province, Afghanistan.

Worldwide, there have been more than 22 million COVID-19 cases and more than 782,000 deaths. After months of continual growth, the last three weeks have seen a plateau in new cases, at roughly 260,000 new cases per day. Though the majority of new cases are coming from a handful of countries, numerous countries are seeing what could be the beginning of a second wave.

In line with an ongoing trend, India, the United States and Brazil continue to account for the most cases on a day-to-day basis. Together, these three countries routinely make up 50% of the daily confirmed cases across the globe. Still, other countries that previously experienced severe COVID-19 outbreaks are beginning to see their caseloads rise again, with France, Spain, the Netherlands, Germany and other European countries all experiencing rebounds after months of low numbers. Other European countries, such as Romania, Ukraine and Poland, are seeing higher numbers of confirmed cases than they did in the first wave of the virus. Africa recently confirmed its millionth case, with more than half of those cases located in South Africa.

In the United States, *Kaiser Health News* and *The Guardian* released a database showing that more than 900 frontline healthcare workers had died of COVID-19 in America since the beginning of the pandemic¹. This number includes nurses, physicians, pharmacists, first responders and hospital technicians, among others. According to the report, a significant percentage of the deceased were unable to locate proper personal protective equipment (PPE) to protect themselves from the virus.

FAST FACTS

- According to the Johns Hopkins University tracker, which consolidates data from a range of sources, as of August 19, there have been 22,179,934 confirmed cases of COVID-19 reported in 188 countries and regions.
- In the US, we are supporting 32 hospitals across the country, including in Boston, Chicago, Detroit, Los Angeles, New York and Puerto Rico, with a range of services and equipment, including emergency medical field units, supplies and volunteer staff.
- We have screened more than 920,821 people for COVID-19 at our global missions and have distributed more than 11.6 million pieces of personal protective equipment and infection prevention and control items to supported health facilities.
- We have trained more than 12,281 frontline healthcare professionals on COVID-19 prevention and control measures.

¹ <https://khn.org/news/exclusive-over-900-health-workers-have-died-of-covid-19-and-the-toll-is-rising/>

International Medical Corps Response






International Medical Corps is continuing to provide essential medical assistance and training in the 30 countries where we operate. Highlights from our global response include the following.

United States Response

In the US, International Medical Corps has partnered with hospitals, clinics and nursing homes in Boston, Chicago, Detroit, Los Angeles and the Central Valley of California, New York and Puerto Rico to respond to COVID-19. To date, we have distributed more than 2 million items of PPE, including 1 million KN95 masks, 700,000 surgical masks, 200,000 isolation gowns and 100,000 face shields. Additionally, International Medical Corps has focused on increasing critical-care capacity by donating medical equipment such as ICU monitors, high-flow nasal oxygen units, portable ultrasounds, defibrillators and several other types of equipment. International Medical Corps has also provided hospitals with emergency medical field units and clinical volunteers to strengthen emergency and critical-care capacity throughout the pandemic.

Though the daily number of new cases nationwide appears to be decreasing—after reaching a peak of more than 60,000 cases in July—new hotspots are emerging in the Midwest, while case counts remain stubbornly high in southern states and California. This trend does not appear to be changing for the better any time soon, as lab positivity rates are still higher than the recommended 5% in more than 30 states. In California, the state has averaged 9,138 new infections and 124 deaths per day over the past week.

In response to the growing number of cases and increased community transmission in local hotspots, International Medical Corps has partnered with eight additional hospitals in the Central Valley to increase their capacity to respond to and care for COVID-19 patients. The counties in the Central Valley—to which California Governor Newsom has deployed the state’s COVID-19 Strike Team—have some of the highest poverty rates in California, and average 50% or more Hispanic in population. In California, Hispanics make up 59.0% of all COVID-19 cases, though they account for only 38.9% of the state’s population. This is in contrast to whites, who account for 17.0% of COVID-19 cases and 36.6% of the state’s population. In addition to our work in Central Valley, the team is continuing to work with long-term care facilities throughout Los Angeles County to provide healthcare workers and residents with PPE, adequate training on the usage and management of PPE, and proper infection prevention and control (IPC) measures. These efforts remain critical, as COVID-19 spreads most aggressively in nursing home facilities. More than 40% of California’s COVID-related deaths are estimated to come from nursing home facilities.

United States Response			
 Locations	States/Territories: 7	Hospitals: 32	Nursing homes: 51
 Volunteers	MDs: 16	Nurses: 44	EMTs: 3 Paramedics: 8
 Infrastructure	Field Units: 56	HVACs: 42	Generators: 4 Trailers: 4 Containers: 2
 Equipment	Beds: 150	Ventilators: 7	Portable ultrasounds: 12
	Pulse oximeters: 105	Suctions: 9	Defibrillators: 2
	Medical consumables:	Anesthesia pumps: 1	Patient monitors: 126
 PPE	K95 masks: 1,430,680	Surgical masks: 700,000	Surgical Gowns: 281,000
	Face Shields: 108,000		Nitrile Gloves: 2,100

In Texas, daily cases appear to be on a slow decline, but remain high, ranging from 6,000 to 8,000 new COVID-19 cases per day. The five metro areas in the US with the highest rate of new infections relative to their population are all in South Texas, and include communities that lie along the border with Mexico or on the Gulf Coast: Brownsville-Harlingen, Eagle Pass, Rio Grande City, Corpus Christi and Laredo. The south Texas region continues to see more than 50 new cases per 100,000 people, more than twice the infection rate in Houston. The demographics of this region are similar to other hard

hit areas in the US, with high levels of poverty and more than 50% Hispanic populations. In response, International Medical Corps is in initial talks to partner with the Christus Health System, supporting six facilities across South Texas. Planned activities include expanding surge space with emergency medical field units, PPE, respiratory critical-care equipment and surge staffing.

Global Response

International Medical Corps is focused on ensuring continuity of operations in its existing programming in nearly 30 countries while taking decisive action to respond to COVID-19 cases. We are continuing to distribute PPE and IPC items to our supported healthcare facilities, while providing training and support to frontline healthcare workers on the proper use of such equipment and the epidemiology of COVID-19. Additionally, our facilities are continuing to screen patients for COVID-19 and raise awareness—through traditional and remote activities—throughout communities.





International Medical Corps also is participating with global, regional and local coordination bodies to support their COVID-19 response and ensure that our staff can respond to the outbreak while continuing to deliver critical healthcare services. Highlights from our response this week include activities in the following countries.



International Medical Corps is responding to COVID-19 around the world, including in Yemen, Iraq and Mali, shown on the map above.

- In **Yemen**, our healthcare team is sharing COVID-19 case management and education guidelines with health facility staff. We have trained 431 frontline health workers and staff on COVID-19 case management and prevention methods, and provided 23 health facilities with cleaning materials—including gloves, waterproof overalls and soap—to strengthen infection control. In collaboration with the Ministry of Public Health, we also have trained community health volunteers (CHVs) on how to prevent and treat COVID-19. For example, our team has provided CHVs with materials on how to prevent and treat COVID-19, for them to distribute in their communities (reaching more than 750 residents), as well as to health facilities that we support in Sana'a. Despite the global shortage of protective equipment, our team in Yemen has been able to source and distribute more than 700,000 PPE and IPC items—including masks, gloves, gowns, sanitizers and soap—to health facilities, health workers and other staff members. Following a request from the Danish Refugee Council, we are supporting its efforts to implement an innovative concept, called community shielding, to mitigate the spread of COVID-19 in crowded conditions. It is based on social isolation principles that recognize the challenges of complying with social distancing and prevention measures in over-populated displacement sites.
- The **Iraq** team is securing additional PPE and delivering training for frontline health workers on COVID-19 prevention and management, to ensure the safety of staff as well as beneficiaries as program activities continue. The team also is seeking funding to cover pandemic-response activities and integrating them into our existing healthcare and water, sanitation and hygiene (WASH) programs. The aim is to support hospitals in targeted locations by helping people living in displacement camps in Mosul, as well as vulnerable people living in Ninewa, Salah Al-Din and Anbar, to access essential healthcare services. In addition, the community outreach team is using in-person sessions, social media and radio broadcasting to raise awareness about the risks of COVID-19 and how to prevent it. While households are on lockdown and movement restrictions are in place, affected residents may experience increased mental and emotional distress, so our mental health and psychosocial support (MHPSS) team is conducting case management and follow-up remotely. With the increased risk of gender-based violence (GBV) for women and girls who may be confined at home with abusers, the Women and Girls' Safe Spaces in the camps that we support in Mosul have remained open for case management, with physical distancing and hand-hygiene measures in place to help prevent transmission of COVID-19. GBV case management also is being provided remotely via the phone or WhatsApp to survivors who consent to such follow-ups.
- Though **Mali** has seen a recent reduction in new COVID-19 cases in recent weeks, civil unrest due to the country's ongoing political crisis, as well as the presence of the disease in insecure and hard-to-reach locations (such as Mopti and Timbuktu) remain serious risks for spread of the pandemic. International Medical Corps has been responding to the COVID-19 pandemic in places where we have active programming, including Timbuktu and Ségou, by training health staff, disinfecting key public places and health facilities, and distributing medicine and WASH supplies. We have so far reached 53 health facilities with COVID-19 activities and trained 99 frontline staff on COVID-19 treatment and prevention. As part of the national COVID-19 Task Force of the Health Cluster, International Medical Corps' Mali team meets regularly with governmental counterparts in capital, Bamako, to

determine needs and provide technical support, collaborating with such partners as ECHO, OFDA, WHO and UNICEF. The team also has worked with the Ministry of Health to fully disinfect 10 mosques, six community health centers, one referral health center and one regional hospital in Timbuktu. Subsequently, we provided WASH kits to these 18 facilities, as well as to two women’s centers that provide GBV support. Over the past two weeks, we supported the organization of a mass COVID-19 awareness campaign in Timbuktu with the local youth council, reaching more than 5,000 people. In Ségou, our Mali team has distributed handwashing materials to 19 health clinics and 39 public sites, and launched COVID-19 activities in 19 communities in the San health district, including prevention education and the distribution of hygiene supplies. International Medical Corps health volunteers have reached 8,947 people with COVID-19 information since March. To ensure the safety of volunteers and frontline health staff in Mali, International Medical Corps also has provided more than 4,564 PPE and hygiene items.

International Medical Corps’ Impact at a Glance				
Number of Supported Facilities Provided with COVID-19 Activities	429 Primary Health Facilities	63 Hospitals	9 COVID-19 Treatment Centers	34 Mobile Medical Clinics
	 1M Traditional		 349K Remote	
Community Members Reached Through COVID-19 Awareness-Raising Activities	 11.3M PPE		 374K IPC	
PPE and IPC Items Distributed				