



International Medical Corps' staff conduct a COVID-19 training-of-trainers session in Pakistan.

After months of lockdowns and unprecedented public health interventions, the world has begun entering a new phase of the pandemic. Daily confirmed cases and deaths are at the highest levels we have yet seen and continue to increase; at the same time, there is hope that the end of the pandemic could be in sight, as the first vaccines begin to roll out across portions of the world. Public health officials worldwide face the dual task of stifling the current outbreaks that are raging in numerous countries while planning the most complex vaccine rollout in human history.

Across the world, there have been more than 73 million cases of COVID-19, with more than 1.6 million deaths. The world is currently experiencing the fastest pace of daily new cases and daily deaths that have yet been observed, with more than 630,000 cases per day and more than 10,900 deaths per day. The vast majority of the cases and deaths are located in the Americas and Europe.

In the United States, cases appear to be peaking for the fourth time since the pandemic began, with daily confirmed cases averaging more than 218,000 per day. Deaths continue to increase at record levels, averaging more than 2,500 per day. Unlike other outbreaks in the US that were located in a handful of states, this outbreak is spread across the country, with hospitals and intensive-care units (ICUs) strained throughout the nation. According to data from the Department of Health and Human Services, many ICUs across the country are beyond 100% capacity, with many more nearing full capacity.¹

The last month has brought about significant changes in the vaccine front. Several countries—including the United Kingdom, US, Canada, Mexico and Singapore—recently approved the Pfizer-BioNTech vaccine, and some countries

FAST FACTS

- According to the Johns Hopkins University tracker, which consolidates data from a range of sources, as of December 16, there have been 73,773,321 confirmed cases of COVID-19 reported in 191 countries and regions.
- In the US, we are supporting 40 hospitals across the country—including in California, Illinois, Massachusetts, Michigan, New York, Puerto Rico and Texas—with a range of services and equipment, including emergency medical field units, supplies and volunteer staff.
- We have screened more than 3.3 million people for COVID-19 at our global missions and have distributed more than 20.1 million pieces of personal protective equipment and infection prevention and control items to supported health facilities.
- We have trained more than 22,800 frontline healthcare professionals on COVID-19 prevention and control measures.

¹ <https://www.nytimes.com/interactive/2020/12/09/us/covid-hospitals-icu-capacity.html>

have already begun to roll out the vaccine. Moderna's vaccine approval appears primed to follow closely behind, as soon as this weekend². A Chinese vaccine from Sinopharm was approved this week in the United Arab Emirates and Bahrain. The approving nations claimed the vaccine was 86% effective, but a lack of publicly available data makes the claims challenging to confirm. Sinopharm can manufacture billions of doses, but some countries remain wary due to the lack of transparency thus far exhibited by the company.³ The Russian Sputnik vaccine has also received large orders—contingent on Phase III trial data—from several countries.⁴

International Medical Corps Response

International Medical Corps continues to provide essential medical assistance and training in the 27 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 California, Illinois, Massachusetts, Michigan, New York, Puerto Rico and Texas to respond to COVID-19. To date, we have distributed more than 5 million items of PPE, including 1.8 million KN95 masks, 1.8 million surgical masks, 1 million isolation gowns, 300,000 N95 masks, 100,000 face shields and 100,000 cloth face masks. 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 during the pandemic.

United States Response				
 Locations	States/Territories: 10	Hospitals: 40		Nursing homes: 56
 Volunteers	MDs: 16	Nurses: 44	EMTs: 3	Paramedics: 8
 Infrastructure	Field Units: 56	HVACs: 66	Generators: 4	Trailers: 4 Containers: 2
 Equipment	Beds: 150	Ventilators: 7	Ultrasounds: 29	
	Pulse oximeters: 240	Suctions: 9	Defibrillators: 43	
	Medical consumables:	Anesthesia pumps: 1	Patient monitors: 143	
 PPE	K95 masks: 1,836,860	Surgical masks: 1,873,000	Surgical gowns: 1,004,500	
	N95 masks: 300,000	Face shields: 108,000	Nitrile gloves: 24,100	

In Chicago, South Texas and Puerto Rico, International Medical Corps continues to work closely with hospital leadership to provide support through innovative technical platforms, oxygen monitoring and data collection throughout the hospitals. In addition, we continue to support long-term care facilities throughout Los Angeles County by providing PPE and training on infection prevention and control (IPC) measures. In Chicago and Florida, International Medical Corps is in discussions to assist our partners with the rollout of vaccination efforts. Activities will include technical assistance, training, cold-chain management and implementation via fixed and mobile teams.

Global Response

International Medical Corps is focused on ensuring continuity of operations in existing programming in the 27 countries where we currently operate 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

² <https://www.wsj.com/articles/modernas-covid-19-vaccine-is-next-in-line-for-authorization-11608028201>

³ <https://www.nature.com/articles/d41586-020-03563-z>

⁴ [https://www.thelancet.com/journals/lanres/article/PIIS2213-2600\(20\)30402-1/fulltext](https://www.thelancet.com/journals/lanres/article/PIIS2213-2600(20)30402-1/fulltext)

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 to 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 responses. Highlights from our response this week include activities in the following countries.

- In **Burundi**, International Medical Corps has been working closely with the Ministry of Health (MoH) and other key stakeholders for a number of years to protect the country from Ebola, and has leveraged these preparedness activities to support the country's COVID-19 contingency plans. Our team activated 10 COVID-19 steering committees in 10 health districts and trained rapid response teams (RRTs), establishing district-based coordination in the provinces of Muyinga, Ngozi, Kirundo and Kayanza, bordering Rwanda and Tanzania. With support from International Medical Corps staff from the Democratic Republic of the Congo, the Burundi mission has provided training on COVID-19 for almost 600 healthcare



International Medical Corps is responding in Burundi, Central African Republic (CAR) and Venezuela/Columbia, shown on the map above.

providers, and provided training-of-trainers sessions for an additional 67 MoH personnel. The country team has helped the government conduct screening and follow-up at Bujumbura International Airport, examining incoming passengers from countries with confirmed cases of COVID-19, and it has provided training on COVID-19 risk communication to more than 1,000 health and non-health personnel at the airport and at the hotels where suspected cases are quarantined. Our Burundi team continues to help the MoH expand COVID-19 response capacity at the provincial level, strengthening training committees, setting up district RRTs, and improving IPC and water, sanitation and hygiene (WASH) conditions in health facilities, including five provincial hospitals—in Cibitoke, Ngozi, Gitega, Karuzi and Makamba—as well as refugee camps and points of entry. We have constructed COVID-19 triage units at the five provincial hospitals we serve and equipped them with hygiene materials, including handwashing stations and soap. International Medical Corps has trained 458 frontline staff, and supported 303 primary health facilities and 16 hospitals with COVID-19 supplies since late February. In addition, through a local partner, International Medical Corps continues to conduct community outreach and education programs through engagement with religious and administrative leaders, has supported the broadcast of COVID-19 prevention messages through five community radio stations, completed IPC training for 69 participants and printed 240 copies of COVID-19 policies and protocols. The Burundi team will soon begin implementing a COVID-19 response in densely populated Gitega province that will provide IPC and PPE supplies, on-the-job training, community awareness-raising and facilitation of a COVID-19 steering committee to strengthen response coordination. In total, since late February, we have reached nearly 1.8 million indirect beneficiaries, distributed 3,293 bars of soap and installed 59 handwashing stations.

- In the **Central African Republic (CAR)**, International Medical Corps was asked by the USAID Bureau for Humanitarian Assistance (BHA) to lead the Community Engagement Committee, a consortium that also includes Oxfam, the Danish Refugee Council and Concern Worldwide, to support the country's COVID-19 response. Activities began in Bangui and its major corridors that will target more than 373,500 community members. The program will strengthen response capacity for COVID-19 detection at the primary healthcare level, improve community hygiene activities and improve psychosocial support for infected patients and their communities. The program will also target children who live on the streets, benefitting a very large and vulnerable portion of CAR's urban youth. So far, we have distributed almost 69,830 bars of soap. Additionally, International Medical Corps supported three treatment centers in hospital settings and reached 599,345 community members through COVID-19 awareness-raising activities, all through traditional, face-to-face methods. We have screened 124,401 patients for COVID-19, with 691 patients identified as suspected COVID-19 cases. In addition, we have trained 531 frontline health workers and supported 14 health facilities and three response coordination bodies since the pandemic began. Activities began on a program aiming to build upon existing local-response capabilities, to ensure coordinated and complementary activities for the community and most vulnerable. Activities include preparedness and response support for COVID-19 health services at Bria, Bambari and Birao health centers and hospitals by setting up a screening room for triage and isolation of patients, providing case management through a 20-bed inpatient facility at each hospital, and procuring PPE, pharmaceuticals, and medical supplies and equipment.
- In **Venezuela**, more than 100,000 have been forced to return to their home country in recent months due to the pandemic, with some walking for thousands of miles after facing job losses and business closures while working

abroad because of national lockdowns. Hospitals continue to be understaffed, and the nurses that risk their lives to show up for work take home barely enough money to buy the day's groceries. International Medical Corps is one of only a few international non-governmental organizations to receive import licensing to support healthcare facilities in Venezuela. As concerns around COVID-19 have continued to grow, our team is participating in coordination meetings with UN agencies, INGOs, key health officials and mayors of municipalities, has been coordinating with directors of health facilities in Miranda state and will be meeting with officials in Táchira and Bolívar states. To meet growing needs, we have imported PPE—including gloves and masks—and inter-agency emergency health kits that include basic medicines, equipment and supplies to provide lifesaving services to 10,000 people for approximately three months. Our Venezuela team has provided COVID-19 training for 69 frontline staff in three health facilities. Since late February, our response has reached 63,132 beneficiaries. We have screened 10,208 patients for COVID-19 to date. As programming accelerates in Venezuela, the International Medical Corps team is continuing to provide critical donations and PPE to the overtaxed healthcare systems, with a total of 13,186 items of PPE donated to date. The team continues to actively coordinate with UN agencies, INGOs, key health officials and mayors of municipalities, and directors of health facilities in Miranda and Bolívar states.

International Medical Corps' Impact at a Glance				
Number of Supported Facilities Provided with COVID-19 Activities	906 Primary Health Facilities	160 Hospitals	32 COVID-19 Treatment Centers	44 Mobile Medical Clinics
Community Members Reached Through COVID-19 Awareness-Raising Activities	 2.8M Traditional		 1.7M Remote	
PPE and IPC Items Distributed	 19.2M PPE		 902K IPC	