



An international Medical Corps' staff member prepares to administer a vaccine in Juba, South Sudan.

Today, more than two years since SARS-COV-2 was first discovered in Wuhan, China, the world has endured more than 335 million confirmed cases of COVID-19 and 5.5 million confirmed deaths from the virus. Over the past month, caseloads have skyrocketed, with the last two weeks seeing more than twice as many daily confirmed cases of COVID-19 than ever before. This rising caseload is attributed to the Omicron variant—a highly contagious but less virulent variant of the virus.

Scientists are working rapidly to gather information about Omicron. Although the new variant is potentially four times more contagious than the original virus, it is much less likely to lead to hospitalization or death than previous variants. For example, a recent study that has not yet been peer-reviewed showed that the variant is 53% less likely to lead to hospitalization due to respiratory issues, 74% less likely to lead to ICU admission and 91% less likely to lead to death.1

Omicron is also more likely to evade immunity from vaccination or previous infection. However, though existing vaccines are less effective against Omicron at preventing infection, they appear to provide strong protection against severe disease. Also, if the need arises, both Pfizer and Moderna claim they can have an Omicron-specific vaccine by March.<sup>2,3</sup>

Though less virulent, Omicron still can overwhelm healthcare systems across the globe with a flood of new cases and could lead to a massive spike in deaths due to the sheer number of infections. For example, in the United States, there are currently a record number of hospitalized COVID-19 patients. However, these statistics can be misleading, because many hospitalized COVID-19 patients are not hospitalized due to virus symptoms but are testing positive upon admission to the hospital for other causes. This leads to them being included in the national stats for COVID-19 hospitalizations.<sup>4</sup>

According to the Johns Hopkins University tracker, which consolidates data from a range of sources, as of January 19, there have been 335,187,252 confirmed cases of COVID-19 reported worldwide.

**FAST FACTS** 

- In the US, we are supporting 43 hospitals across the countryincluding in California, Illinois, Massachusetts, Michigan, New York, Puerto Rico and Texaswith a range of services and equipment, including emergency medical field units, supplies and volunteer staff.
- We have screened more than 7.9 million people for COVID-19 at our global missions and have distributed more than 32.5 million pieces of personal protective equipment (PPE) and infection prevention and control (IPC) items to supported health facilities.
- We have trained more than 29,000 frontline healthcare professionals on COVID-19 prevention and control measures.

https://abcnews.go.com/Health/wireStory/us-faces-wave-omicron-deaths-coming-weeks-models-82329556

<sup>&</sup>lt;sup>2</sup> https://www.reuters.com/business/healthcare-pharmaceuticals/moderna-ceo-says-data-omicron-specific-shot-likely-available-march-2022-01-17/

<sup>&</sup>lt;sup>3</sup> https://www.cnbc.com/2022/01/10/covid-vaccine-pfizer-ceo-says-omicron-vaccine-will-be-ready-in-march.html

<sup>4</sup> https://www.nbcnews.com/health/health-news/omicron-hospital-many-patients-hospitalized-ailments-also-test-positiv-rcna11247

Still, hospitals in Omicron hotspots have seen a considerable spike in people seeking treatment, leading to enormous burdens on healthcare systems. In the United States alone, models are showing between 50,000 and 300,000 additional confirmed COVID-19 deaths before the Omicron wave subsides.<sup>5</sup>

## **International Medical Corps Response**

International Medical Corps continues 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 responded to COVID-19 by partnering with hospitals, clinics and nursing homes in Alabama, California, Florida, Illinois, Massachusetts, Michigan, New York, Puerto Rico, South Carolina and Texas. To date, we have distributed more than 6.6 million items of PPE, including 1.7 million KN95 masks, 1.8 million surgical masks, nearly 900,000 surgical gowns, more than 900,000 N95 masks, 131,000 face shields and 100,000 cloth face masks. We have provided support to 43 hospitals, 21 primary health centers, 56 long-term care facilities and five community centers. In addition to procuring and donating PPE, International Medical Corps has provided emergency medical field units to help hospitals expand critical-care services, and has provided surge-staffing support to ensure continuity of care for COVID-19 patients. In addition, we so far have deployed more than 140 clinical volunteers, more than 60 of whom have supported more than 200,000 vaccinations in efforts in Los Angeles, Puerto Rico and Texas.

United States Response									
Locations Locations	States/Territories: 10	Hospitals: 43		Health Clinics: 21		Nursing homes: 56			
Volunteers	MDs: 27	Nurses: 90		EMTs: 6		Paramedics: 10			
Infrastructure	Field Units: 70	HVACs: 66		Generators: 5		Trailers: 4 Containers: 2			
-∕∕\∕} Equipment	Beds: 150	Ventilators: 22		Ultrasounds: 34		Patient monitors: 143			
Equipment	Pulse oximeters: 269	Suctions: 9		Defibrillators: 51		Medical consumables: 65,000			
₩ PPE	K95 masks: 1,730,46	Surgical mask		s: 1,882,300	Surgical gowns: 882,460				
	N95 masks: 907,39	9	Face shields: 131,860		Nitrile gloves: 1,100,000				

## **Global Response**

International Medical Corps is focused on ensuring continuity of operations in existing programming in the more than 30 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 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 raising 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 Cameroon, International Medical Corps has been responding to COVID-19 by screening patients, training healthcare workers on prevention and treatment, raising awareness in refugee camps of COVID-19 and how to prevent it, and distributing PPE to frontline health staff. Since March 2020, our team has been implementing a COVID-19 response and prevention project in the Minawao refugee camp in the Far North, which hosts more

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than 60,000 refugees, and where malnutrition is widespread. Since June 2020, teams at the camp have reached 4,346 people with education on infant and young-child feeding practices in the COVID-19 context and reached 7,835 people with cooking demonstrations to help mothers and caregivers prevent malnutrition in their children during the pandemic. To further improve COVID-19 healthcare services, we rehabiliated one of the two health centers in Minawao camp, to increase the availability of consultation rooms and strengthen patient-screening capabilities. In August 2021, we began supporting the mental health of patients affected by COVID-19 through counseling, home visits, case management and referrals to



Among other countries, we are responding to COVID-19 in Cameroon, Mali and Sudan, as shown on the map above.

specialized care. Our health teams have so far screened 16,850 patients for COVID-19 and reached 331,046 people with COVID-prevention messaging. The mission has distributed 57,068 hygiene and PPE items to community health workers and frontline staff in the Far North, North and East regions. The team has worked with the Ministry of Health (MoH) to develop the communications strategy and materials for a COVID-19 vaccination campaign, and continues to support the MoH in its COVID-19 vaccination rollout and sensitization efforts by training government health staff and providing logistical support. The mission provided rental vehicles, fuel, logistics and human resource support for the "national intensification phase" of Cameroon's COVID-19 vaccination campaign in July 2021, and supported another intensification campaign, in November 2021, through which 3,972 people were vaccinated in Minawao and Mora. In 2022,our team is supporting COVID-19 vaccination efforts in the Far North and in the Northwest regions.

- In Mali, International Medical Corps' mission has carried out key activities to support COVID-19 vaccination efforts, including providing COVID-19 vaccine awareness-raising sessions for 205 health workers, 118 community leaders and 1,648 other community members; training 115 health personnel on techniques for administering the different types of vaccines deployed in Mali; and distributing materials and technical guidance on COVID-19 vaccination in 36 health facilities and within the community. During the vaccination campaign organized in August 2021, the 36 health facilities supported by International Medical Corps vaccinated 12,492 people. Meanwhile, our teams continue to respond to the COVID-19 pandemic in Timbuktu and Ségou by training health staff, disinfecting health facilities and public places, and distributing medicine and WASH supplies. We so far have reached 120 health facilities with COVID-related activities and trained 192 frontline staff on COVID-19 treatment and prevention. As part of the national COVID-19 taskforce of the Health Cluster, International Medical Corps' Mali team meets regularly with governmental counterparts in the capital, Bamako, to determine needs and provide technical support, collaborating with such partners as the 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, along with two women's centers that provide gender-based violence (GBV) support. In Ségou, our team has distributed handwashing materials to 19 health clinics and 39 public sites, and launched COVID-related 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 17,677 people with COVID-19 information since March 2020. To ensure the safety of volunteers and frontline health staff in Mali, International Medical Corps has provided 62,412 PPE and hygiene items. The mission also recently completed training-oftrainers sessions in Bamako to establish rapid response teams to improve the response to regional outbreaks of COVID-19.
- In **South Sudan**, International Medical Corps continues to lead the pandemic response, serving as co-lead of the COVID-19 Case Management and IPC Technical Working Group, which is part of the Emergency Preparedness and Response Group. We also helped develop the National Case Management Strategy, based on WHO and CDC protocols. We helped the Ministry of Health (MoH) develop its COVID-19 National Preparedness and Response Plan, and its COVID-19 National Vaccination Deployment Plan. International Medical Corps supports the MoH in managing the main COVID-19 treatment facility at Dr. John Garang Infectious Disease Unit (IDU) in Juba. We established a Level 1 intensive-care unit (ICU) at the Dr. John Garang IDU, the first ever ICU in the country accessible to the general public. Since April 2020, we have screened 1,180,741 people at health facilities and triage points in two former UN protection-of-civilian (PoC) sites, and in one current PoC, and have identified 1,511 suspected cases. We have provided facility-based medical, nutritional and psychosocial support to 256 admitted patients and 148 patients in home-based care. We have trained 1,778 healthcare workers on critical care, standard IPC precautions, safe patient transportation, psychological first aid (PFA), pharmaceutical care, rational dispensing practice, medical and PPE logistics, and COVID-19 vaccine preparedness. In addition, we

have provided 3,010 healthcare staff with supportive supervision and mentoring, and have reached 486,842 people with risk communication messages. Our team has also provided one-on-one psychosocial support to 1,741 people, including healthcare workers and other vulnerable individuals, and reached 75,544 people with COVID-19 messages, including coping strategies. We are supporting the MoH COVID-19 vaccine deployment plan—for example, our team has vaccinated 1,871 people in Malakal, 2,286 in Wau and 773 people in the Juba IDP camp. We also trained healthcare workers—49 in Juba and 16 in Wau IDP—on COVID-19 vaccination protocols. We have reached 40,907 people with vaccine promotion messages through group discussions, PA systems and educational materials.

International Medical Corps' Impact at a Glance								
Number of Supported Facilities Provided with COVID-19 Activities	1,315 Primary Health Facilities	214 Hospitals	39 COVID-19 Treatment Centers	98 Mobile Medical Clinics				
Community Members Reached Through COVID-19 Awareness-Raising Activities	6.9M Traditional		2.8M Remote					
PPE and IPC Items Distributed	⊕ 31.0	<b>M</b> PPE	1.5M IPC					