Welcome...

to our September news update. CORDS is a program of Ending Pandemics, comprised of six regional networks, working to reduce and prevent the spread of diseases by exchanging information and best practice. Our vision is a world united against infectious diseases. Early detection of outbreaks helps keep disease transmission to its area of origin, which, in our increasingly mobile world, is vital to stopping life threatening diseases such as Zika, Ebola and Yellow Fever. The collective expertise of the CORDS networks and their close relationships with local communities facilitate timely detection and response to outbreaks.

Queues of trucks in East Africa. Source: East African Community Twitter

Regional responses to the Covid-19 pandemic

As the pandemic continues the six regional member networks of CORDS have continued to lead the response.

The Asia Partnership on Emerging Infectious Disease Research (APEIR) secretariat team in Indonesia have continued to support Prof. Wiku Adisamito, APEIR Coordinator, in his roles as Chair of the Expert National Task Force for the Acceleration of Covid-19 Mitigation in Indonesia, national expert on the pandemic and government advisor. They have been analysing the Indonesian data for Covid-19, categorizing each region as low, medium or high risk in order to keep the public informed and help stop the spread. The team is also due to present their research on the stigmatisation of Covid-19 in the
community in collaboration with the University of Edinburgh and Media Kernels Indonesia, a platform offering insights based on data and analysis, to the government. The project examines stigma and perceptions as well as the effect of social and mass media in Indonesia.

In the East African Integrated Disease Surveillance Network (EAIDSNet) region, there has been an increase in Covid-19 community spread in Kenya and Rwanda, whereas the transmission in South Sudan has eased a little. In Uganda in particular, there has been a rapid spread and increase in mortality after a lift in some of the earlier lock down measures and despite the initial strategy of Test, Trace and Isolate. All countries in the region have increased their rates of testing. Since the East African Community (EAC) began trialling a system of tracking truck drivers, there has been a marked reduction in the transmission of Covid-19 between countries. Most of the earlier infections in Burundi, Rwanda, South Sudan and Uganda were due to truck drivers moving amongst the main transportation routes in East Africa, resulting in a massive backlog of drivers waiting for test results before being allowed to cross countries. On 8 September, the EAC launched the Regional Electronic Cargo and Driver Tracking System (RECDTS), a mobile phone application that enables EAC Covid-19 digital certificates to be issued, mutually recognised by partner states, eliminating the need for multiple testing as well as helping to alleviate ongoing congestion. RECDTS will eventually be extended to EAC neighbouring countries. Following the provision of the Skoll Foundation Emergency Assistance Fund to help with the Covid-19 response in Africa, partner states in the EAIDSNet region have purchased items to help their efforts and a meeting of the EAIDSNet steering committee will be held shortly to discuss distribution.

The countries in the Mekong Basin Disease Surveillance Foundation (MBDS) Cambodia, China, Lao-PDR, Myanmar, Thailand and Vietnam, continue to work very hard to contain the Covid-19 pandemic and to prepare for the possibility of a second wave. An example of the work taking place is the WHO situational report for Lao-PDR for the week of 3-10 September, with details of current cases and hospitalisations, public health communications and best practice.

The table below shows the latest Covid-19 statistics in the region:

<table>
<thead>
<tr>
<th>Country</th>
<th>Total Cases</th>
<th>Active Cases</th>
<th>Critical</th>
<th>Recovered</th>
<th>Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cambodia</td>
<td>276</td>
<td>2</td>
<td>-</td>
<td>274</td>
<td>-</td>
</tr>
<tr>
<td>China</td>
<td>85,351</td>
<td>176</td>
<td>4</td>
<td>80,541</td>
<td>4,634</td>
</tr>
<tr>
<td>Lao PDR</td>
<td>23</td>
<td>1</td>
<td>-</td>
<td>22</td>
<td>-</td>
</tr>
<tr>
<td>Myanmar</td>
<td>10,734</td>
<td>7,646</td>
<td>-</td>
<td>2,862</td>
<td>226</td>
</tr>
<tr>
<td>Thailand</td>
<td>3,523</td>
<td>97</td>
<td>1</td>
<td>3,367</td>
<td>59</td>
</tr>
<tr>
<td>Vietnam</td>
<td>1,074</td>
<td>40</td>
<td>-</td>
<td>999</td>
<td>35</td>
</tr>
</tbody>
</table>

Source: https://www.worldometers.info/coronavirus/

During July and August there was a noticeable increase in positive cases of Covid-19 in the Middle East Consortium on Infectious Disease (MECIDS) region. In Palestine there have been 48,572 cases since the outbreak started, with 334 deaths, in Israel there have been 214,071 cases with 1,395 deaths and in Jordan there have been 8,061 cases and 43 deaths (source: WHO). At recent board meetings MECIDS has been discussing the situation and the measures that each country is taking to contain the virus. MECIDS is also planning a series of webinars/lectures for public health professionals and medical staff to discuss several topics such as infection control, clinical aspects of Covid-19 and other related issues. The series will continue throughout September 2020 – March 2021 with the hopes of being able to hold a physical face to face meeting, situation permitting, in the summer of 2021 in Turkey. The three countries in the region are also working on a joint publication on Covid-19.

The SACIDS Foundation for One Health (SACIDS) has been using the grant from the Skoll Foundation for Covid-19 response in Africa, to focus on four areas of work in the Democratic Republic of Congo (DRC), Mozambique, Tanzania and Zambia. They are: targeted event-based surveillance especially at ports and cross-border areas for severe acute respiratory illnesses, contact tracing, rapid diagnostic capability for covid-19 and its differentiation from other influenza like illnesses and informed risk analysis.
and improved risk communication. The National Institute for Biomedical Research in the DRC organized a workshop for response teams in Kongo Central to strengthen Covid-19 capacity, especially in remote rural areas. In Zambia event-based surveillance has been undertaken using mobile technologies at points of entry. In Mozambique colleagues have been strengthening laboratory capacity and focusing on early detection of SARI cases. The team in Tanzania has been supporting the University of Sokoine to provide expertise in preparedness and response. This has included digital surveillance tools and how to use them, community level surveillance training, establishing a digital platform for training modules and the provision of technical expertise to national authorities for guided risk-based surveillance, data analytics and communication tools. The regional office has also been assessing Covid-19 risk and mitigation strategies that are specific to Africa, such as what has and hasn’t worked, the resilience of the health system and the response of the social system.

As well as organizing a severe acute respiratory infections (SARI) and influenza-like illnesses (ILI) surveillance meeting in July (see article below) the Southeast European Center for Surveillance and Control of Infectious Diseases (SECID) has been awarded a supplemental Covid-19 funding from CDC Atlanta. This cooperative agreement is for the ‘Maintenance of Basic Surveillance System Implementation Activities and Response to Avian, Pandemic and Seasonal Influenza in Southeast European Countries’ project which includes seven of the region’s countries and runs from 1 September 2020 to 31 August 2021. The main objectives of the project are to:

1. Increase the timely and rapid detection of Covid-19 cases by increasing testing capacities in the Southeast European countries.
2. Assess the extent of undetected community transmission among patients presenting with moderate or severe respiratory illness by extending ILI surveillance to Covid-19.
3. Assess the severity of Covid-19 by leveraging SARI surveillance to the pandemic.
4. Improve data management to inform risk assessment and response activities at a country and regional level.
Thailand’s experience of the Covid-19 response

The Ministry of Public Health, Thailand, has developed a publication on their response to the Covid-19 pandemic. In early September, Dr Soawapak Hinjay, Director of the Office of International Cooperation, Department of Disease Control, Ministry of Public Health, Thailand and Dr Sopon Iamsirithaworn, Director of the Division of Communicable Diseases at the Ministry, kindly agreed to join a regular Covid-19 update meeting between CORDS and Ending Pandemics to present on ‘The lessons learnt from Covid-19 management and upcoming wave preparedness’. The presentation was both extremely informative and helpful. Dr Viengsavanh Kittiphong from the Ministry of Health, Lao PDR, was also present.

The publication aims to share Thailand’s experience and to provide policy lessons to help other countries overcome the disease. The book contains information on both the mandatory and voluntary measures that were implemented to contain the outbreak, including the cancellation of public gatherings, remote working measures, the closure of entertainment and sport venues and social campaigns to “stay home, stop the virus, save the nation”. The Thai Government provided treatment free of charge to all Covid-19 patients, including those from abroad and covered diagnostic testing and treatment expenses as a means to control the spread of the virus. Travel restrictions both nationally and internationally were also enforced during the first week of April 2020. As a result, Thailand was able to flatten the Covid-19 curve with limited local transmission by early May 2020 and has been recognized as one of the countries that has made the most progress toward curbing the spread of the pandemic, according to the Global Covid-19 Index.
SARI and ILI sentinel surveillance in South East European Countries: Uncertainties and Challenges for the next Influenza Season and Covid-19

On 22 July 2020, the countries of South East Europe (Albania, Bosnia and Herzegovina, Bulgaria, Croatia, Macedonia, Montenegro, Romania, Serbia and Kosovo*) met virtually to discuss severe acute respiratory infections (SARI) and influenza like illness (ILI) sentinel surveillance in the region and the uncertainties and challenges for the next influenza season in the context of the Covid-19 pandemic. For the last five years there has been a regional collaboration between the Ministries of Health, Institutes of Public Health and local experts as part of a cooperative agreement with the US Centers for Disease Control and Prevention (CDC). Achievements include the establishment of ILI and SARI sentinel surveillance, new databases management, laboratory diagnosis, National Influenza Centres (NIC) recognition, revised pandemic preparedness plans and the improved collaboration between the veterinary system and avian influenza surveillance. With the support of CORDS network member the South East European Center for Surveillance and Control of Infectious Diseases (SECID), CDC, the World Health Organization Europe (WHO Europe) and the European Centre for Disease Prevention and Control (ECDC) these counties want to make further improvements.

The July meeting brought together technical partners and stakeholders as well as the South Eastern Europe Health Network (SEEHN) secretariat. In addition to representatives from the eight countries, Pamela Kennedy, from US CDC, Richard Pebody of WHO EURO and Pati Penttinen from ECDC, also took part. The aim of the meeting was to discuss the functioning and challenges of SARI and ILI sentinel surveillance implementation in the region and how those systems could be strengthened. Each country presented on their current situation, sharing their progress towards ensuring existing capacities and resources for ILI and SARI systems are used in the most effective way to respond to the pandemic. Challenges discussed included how to balance the influenza response with the ongoing Covid-19 pandemic as well as potential shortages of human resources, reagents and PPE.

The meeting concluded with the commitment that the partnership between CDC and SECID will continue and that the countries in the region will receive technical and financial support from CDC and WHO EURO to help them manage the challenges this influenza season will bring. For more information on SECID visit: www.secids.com

* This designation is without prejudice to positions on status and is in line with UNSCR 1244/1999 and the ICJ Opinion on the Kosovo declaration of independence.
New Covid-19 Lab Law

A new initiative called the 'COVID-19 Law Lab' is gathering and sharing a growing number of legal documents from over 190 countries that help protect the well-being of individuals and communities especially during the COVID-19 pandemic. The United Nations, WHO, and Georgetown University in Washington DC have joined together to create a database of laws that countries have implemented in response to the pandemic.

There are many CORDS member countries - and countries within our CORDS AMR project, PARSE – represented in the COVID-19 Law Lab database. CORDS member networks can understand more about the laws in their region by searching the database that includes quarantine guidelines, emergency declarations, legal measures on mask wearing, social distancing and access to vaccines, for example. You can look up information by legal topic, by region and by country.

"Well-designed laws can help build strong health systems; evaluate and approve safe and effective drugs and vaccines; and enforce actions to create healthier and safer public spaces and workplaces. Critically, they are key to effective implementation of the WHO International Health Regulations: surveillance; infection prevention and control; management of travel and trade; and implementation of measures to maintain essential health services," says WHO.

The Partnership for Antimicrobial Resistance Surveillance Excellence (PARSE), supported by the Fleming Fund and led by Ending Pandemics, held its second global meeting in June and July 2020. Partners from Technical Working Groups (TWG's) in South Asia, South East Asia, East and Southern Africa, and West Africa presented the results from Mapping and Gap Analyses of existing antimicrobial resistance (AMR) surveillance systems in 18 countries*. The analyses identified current practices, needs, and opportunities to strengthen existing systems through the development and implementation of common protocols. These were carried out in collaboration with key regional and national stakeholders, literature reviews, and examination of existing guidelines and protocols from the Tripartite of FAO, OIE and WHO and other organizations. Despite the challenges of Covid-19, such as TWG members contributing to or leading the pandemic response in their countries as infectious disease experts and travel restrictions on planned PARSE activities, the partnership was able to hold its second global meeting virtually over four days. Each day, one region presented the findings of its Mapping and Gap Analysis findings and possible protocols that could address these gaps, then PARSE members discussed the findings, compared and contrasted between regions, and offered suggestions on how gaps might be addressed.

In addition to the presentation of results, PARSE members were fortunate to have Dr. Vishnumurthy Mohan Chadag from World Fish and Natalie Vestin from the University of Minnesota’s Center for Infectious Disease Research and Policy - Antimicrobial Stewardship Project share their experiences in the field, the value of strengthening AMR surveillance system, and how the PARSE project fits into regional and global AMR goals. Then, at the end of each session, PARSE members convened to discuss what an ideal One Health AMR surveillance system might looks like and how common protocols can contribute to progress towards such a system.

Following the meeting, regional TWG’s are using findings from the mapping and gap analyses to develop common protocols for AMR surveillance addressing issues including increasing the number and type of

*Note: 18 countries' mapping and gap analysis results are presented from different regions.
pathogens monitored, increasing the number of sentinel sites and the quality of data produced, developing an alert and response system following the detection of AMR, and supporting sharing of data between sectors and countries. Once protocol development is complete, several will be chosen to be implemented as pilots during 2021 to understand their feasibility, acceptability, sustainability, and impact.

For more information on the project contact kathryn@endlingpandemics.org

* East and Southern Africa: Kenya, Tanzania, Uganda, Zambia; West Africa: Burkina Faso, Ghana, Nigeria, Senegal, Sierra Leone; South Asia: Afghanistan, Bhutan, Nepal, Pakistan; Southeast Asia: Cambodia, Indonesia, Lao PDR, Myanmar, Papua New Guinea, Timor Leste

OpenWHO

OpenWHO is a new online learning tool from the World Health Organization that offers resources including online training in health emergencies such as Covid-19 and Ebola.

https://openwho.org

Covid-19 Resources

For Covid-19 resources including the WHO Situation reports, the John Hopkins University virus map and guidance from the Centers for Disease Control and Prevention visit the Ending Pandemics website