



HIGHLIGHTS

- In the last 24 hours: A total of 362 SARS-CoV-2 tests were performed, 6.1% tested positive. 36 COVID-19 patients recovered, six COVID-19 fatalities and 22 new cases were reported. **The cumulative number of registered COVID-19 cases in the country is 1421 of which 229 detected among health professionals (16.1%). 71% of all cases are reported from three cities Skopje, Kumanovo and Prilep (486, 378, 143 cases, respectively).**
- **63% of the deaths are registered in Kumanovo, Skopje and Struga (17, 16 and 12 deaths, respectively).** Only 21% of the confirmed COVID-19 cases and however about 65% of all deaths occurred in people above 60 years old. 76% of death cases had comorbidities. 51 and 57 cases are registered among children ages 0-9 and 10-19, respectively. More women are infected with coronavirus than men (750 and 671 respectively). However, 69% of the death cases are male.
- **Government adjusted the curfew** during the upcoming Labor Day 1st of May holiday weekend. The ban on movement on the entire territory of the country will be from 14:00-05:00 each day (Friday, Saturday and Sunday).
- Government reallocated funds from the World Bank's funded project for infrastructure to **financially support the employers and their employees** affected by the health and economic crisis caused by COVID-19. The Constitutional Court suspended the Government decision for salary reductions.
- WHO issued a [scientific brief on the 'immunity passport' concept](#) in the context of COVID-19 as WHO continues to review evidence on antibody responses to SARS-CoV-2. **To date, no study has evaluated whether the presence of antibodies to SARS-CoV-2 confers immunity to subsequent infection by the virus.**
- On the World Day for Safety and Health of work, WHO calls for healthy, safe and decent working conditions for all health workers, amidst COVID-19 pandemic – the full article is available [HERE](#).

SITUATION IN NUMBERS

total (new) cases in the last 24 hours

North Macedonia

1421 confirmed (22)

71 deaths

589 recovered

229 health care workers

Globally

2 954 222 confirmed (76 026)

202 597 deaths (3932)

European Region

1 386 693 confirmed (27 313)

126 429 deaths (1904)

Regions of the Americas

1 179 607 confirmed (39 087)

60 211 deaths (1722)

Eastern Mediterranean Region

171 238 confirmed (5305)

7148 deaths (157)

Western Pacific Region

145 385 confirmed (1264)

5998 deaths (40)

South-East Asia Region

48 348 confirmed (2288)

1917 deaths (93)

African Region

22 239 confirmed (769)

881 deaths (16)

WHO RISK ASSESSMENT

Very high in all North Macedonia

Very High Globally

SURVEILLANCE

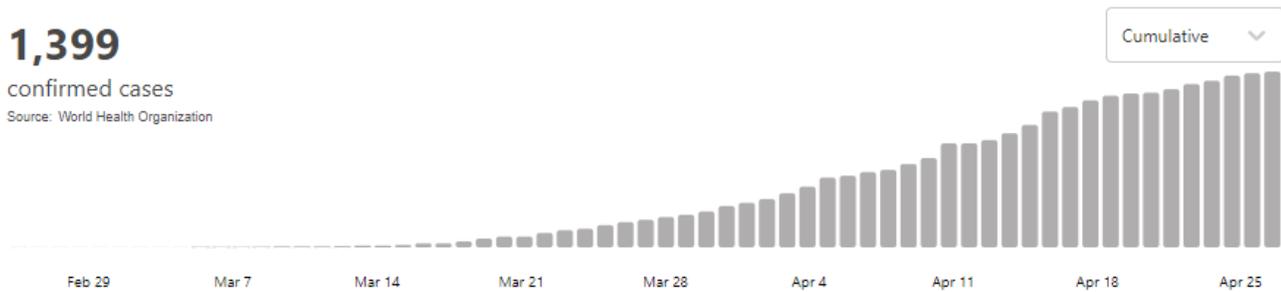
Figure 1. North Macedonia – Cumulative confirmed COVID-19 cases (n=1399) and deaths (n=65) by 28 April 2020 23:00

Confirmed Cases Over Time

1,399

confirmed cases

Source: World Health Organization



Deaths Over Time

65

deaths

Source: World Health Organization

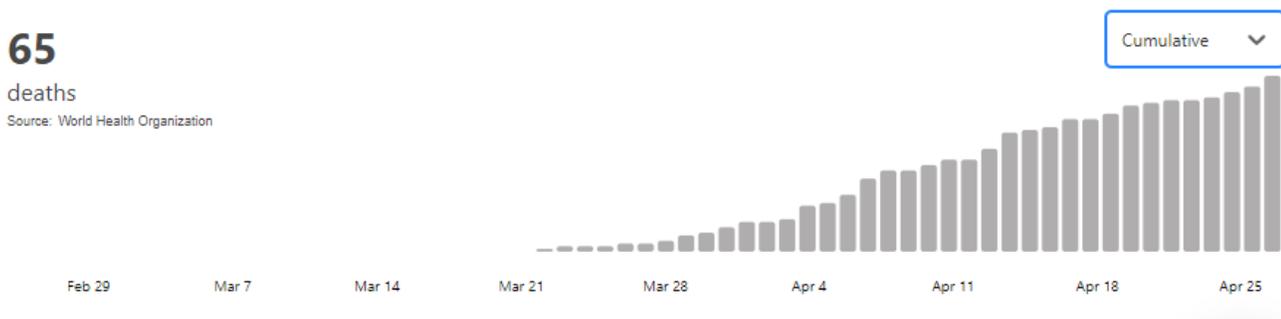
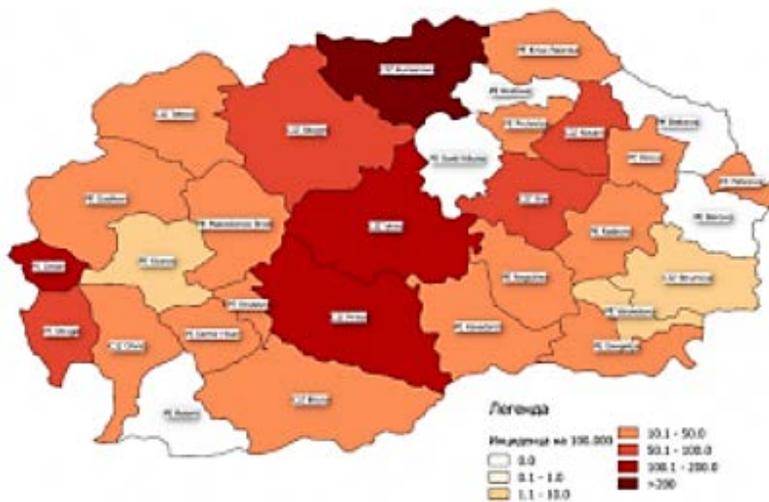


Figure 2. North Macedonia – COVID-19 incidence per 100,000 people, as of 28 April 2020



The highest cumulative incidence is in Kumanovo (264.9/100,000 people), followed by Debar (183.8/100,000 people), Prilep (150.0/100,000 people) and Veles (104.1/100,000 people). Four other cities have incidence above 50.0 cases per 100,000 people (Struga, Skopje, Shtip and Kochani).

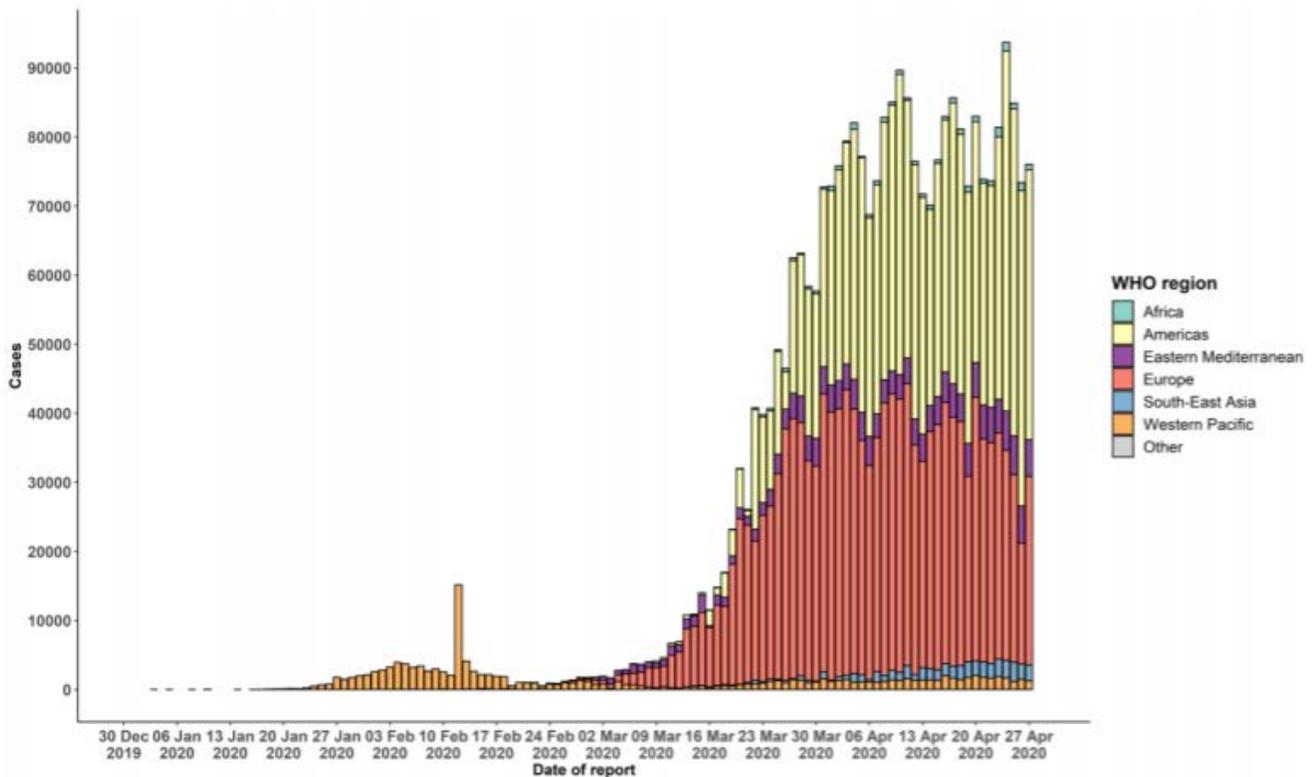
Age of patients vary from 0-91 years (average age – 44.7 years old). However, the highest risk group is between 50-59 years old.

The disaggregated data of the confirmed COVID-19 cases through 27 April 2020 which includes the cases reported on 28 April 2020 by MoH could be accessed at the www.iph.mk

GLOBAL COVID19 SITUATION

Epidemic curve of confirmed COVID-19, by date of report and WHO region through 28 April 2020

Note: Numbers in the epidemic curve have now been adjusted to reflect the data reconciliation in Spain.

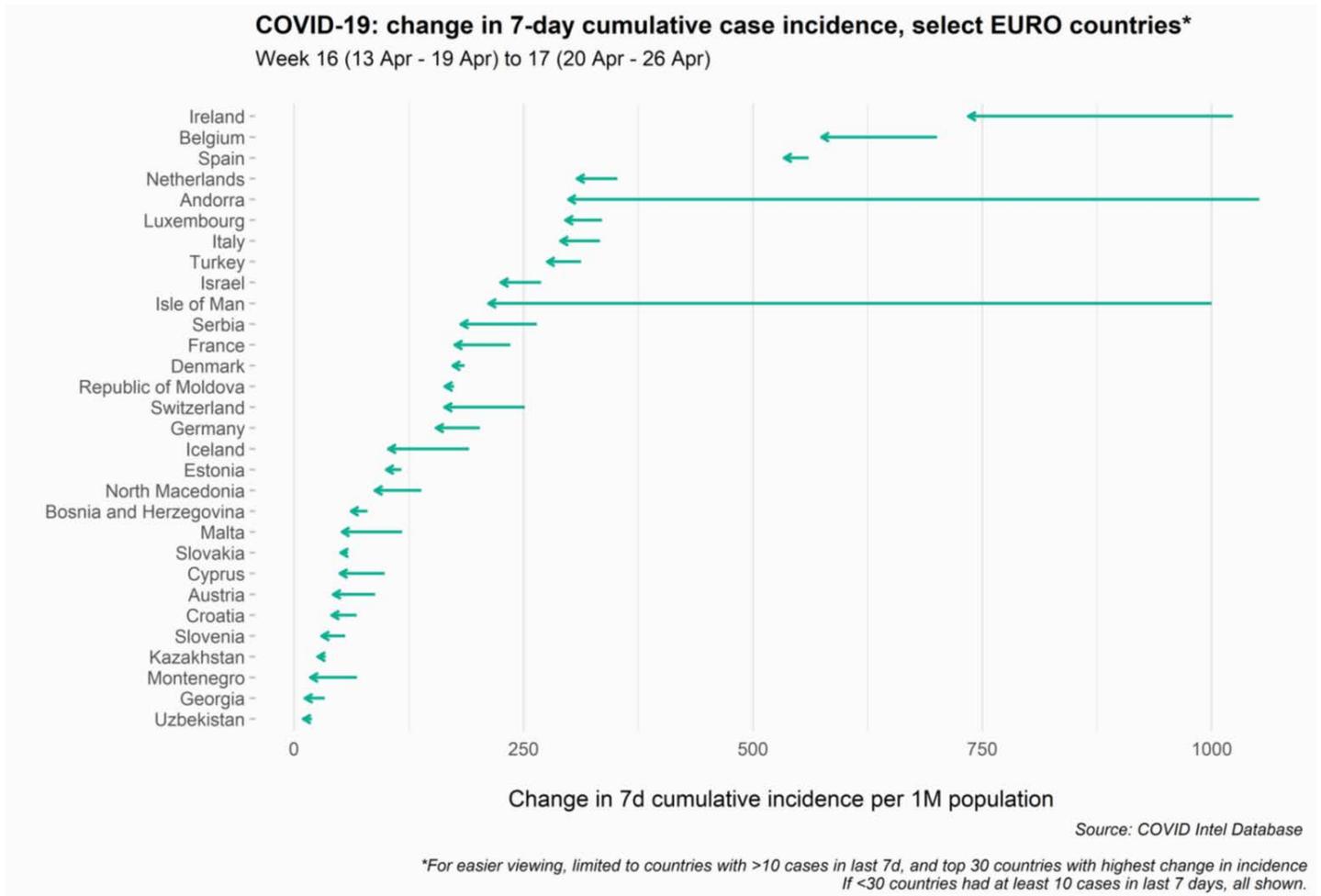


CORONAVIRUS DISEASE 2019 (COVID-2019), WHO EUROPE REGION as of 28 April 2020 10:00 CET

- Almost **half of the global burden** of SARS-CoV2 cases are reported to date in WHO Europe Region.
- Globally, **USA carries the heaviest case load** (960 916), with **Spain and Italy** concluding top-3. In addition, five more countries from the European Region are in the top-10 worldwide (**United Kingdom, Germany, France, Turkey, and Russian Federation**).
- In Europe, **six countries reported 100 000 cases or more**, with Spain (209 465), Italy (199 414), United Kingdom (157 153), Germany (156 337), France (127 008), and Turkey (112 261). Besides, twelve more countries reported 10 000 cases or more, listed in descending order (Russian Federation, Belgium, Netherlands, Switzerland, Portugal, Ireland, Sweden, Israel, Austria, Belarus, Poland and Romania);
- Cumulatively, **62% of the global burden of COVID-19 deaths** (202 597 deaths) have been reported in the European Region (126 429 deaths), with Italy, Spain, France and United Kingdom each reporting more than 20 000 deaths and jointly accounting for roughly three-quarters of all deaths in Europe.
- **Another seven countries in the Region reported 1000 deaths or more** – Belgium (7207), Germany (5913), Netherlands (4518), Turkey (2900), Sweden (2274), Switzerland (1352), and Ireland (1102).
- **After weeks of consecutive steady growth since February 2020**, the case count reached a plateau at 36-37 thousand cases by late March, fluctuating widely ever since between 31 thousand cases and over 40 thousand until averaging 32 thousand cases over the past week. The situation in countries with

the highest cumulative case count seems to be stabilizing (France, Germany, Italy, Spain) with a weekly % change in total case load less than 30%), while a continuing growth in case numbers is observed in the eastern part of Europe – Russian Federation, Belarus, Ukraine and Kazakhstan, with a weekly % change in total cases exceeding 50%.

Top thirty countries in this region showing highest changes in the last week per one million population



[New] KEY PUBLIC HEALTH MEASURES – EUROPE – Latest as reported on 29 April 2020

WHO Director-General Dr. Tedros, in his regular media briefing yesterday, highlighted “As lockdowns in Europe ease with declining numbers of new cases, we continue to urge countries to find, isolate, test and treat all cases of COVID-19 and trace every contact, to ensure these declining trends continue”. More information is available [HERE](#)

- **Austria** general lockdown measures expire at the end of April and the country plans to reopen in a more meaningful way, allowing for schools and shopping malls to reopen over the coming weeks.
- **France** will make face masks compulsory on public transport and in secondary schools easing its lockdown on 11 May with tests for 700,000 people

- **Germans** with no masks fined up to \$5,000 as wearing a face mask becomes mandatory in many public spaces across the country
- **Greece** announced lifting restrictions on citizens' movements and more shops allowed to reopen from 4 May
- **Ireland's** coronavirus taskforce will not be able to recommend easing stay-home restrictions on 5 May unless progress on the spread and impact of the disease is made this week.
- **Italy** northern region of Veneto defying the government decision will lift some lockdown restrictions a week ahead of schedule
- **Poland** will reopen hotels and shopping malls on 4 May
- **Russia** extended lockdown measures for another two weeks
- **Spain** announced a four-phase plan to lift its lockdown and return to a "new normality" by the end of June
- **The Swiss government** will restrict events with more than 1,000 people until the end of August
- **Turkey** has extended the closure of schools until the end of May,
- **UK** National Health Service will restart some vital services, including cancer care and the coronavirus contact-tracing app is set to use a different model to the one proposed by Apple and Google

[New] WHAT IS NEW ABOUT COVID-19?

- WHO continues to source millions of dollars of medical equipment and supplies to help Member States access global markets, which are overwhelmed by unprecedented demand. WHO is also supporting design and installation of COVID19 treatment centres in several countries.
- The U.N. humanitarian chief announced that \$90 billion could provide income support, food and a health response to the coronavirus pandemic for 700 million of the world's most vulnerable people — a price tag just 1 percent of the \$8 trillion stimulus package the 20 richest countries put in place to safeguard the global economy. [HERE](#)
- The UN Development System (UNDS) Socioeconomic Framework was launched this week aimed at supporting countries in the next 12-18 months. It is designed to operationalize critical areas outlined by the Secretary-General in his recent report "**Shared responsibility, global solidarity: Responding to the socio-economic impacts of COVID-19**". The 5 pillars of the socioeconomic framework include: (1) Health First: Protecting health services and systems during the crisis; (2) Protecting People: Social protection and basic services; (3) Economic Recovery: Protecting jobs, small and medium-sized enterprises, and the most vulnerable productive actors; (4) Macroeconomic Response and Multilateral Collaboration; (5) Social Cohesion and Community Resilience

The UN Development System (UNDS) is switching to emergency mode. A significant proportion of the UN's existing US\$17.8 billion portfolio of sustainable development programmes across all the Sustainable Development Goals (SDGs) will be adjusted and expanded towards COVID-19 related needs.

- **WHO provided an update on Emergency Medical Teams**, the Global Health Cluster, the Global Outbreak Alert and Response Network, and Risk Communications and Community Engagement in their daily [situation report](#) today.
- **WHO has published the 'R&D Blueprint: COVID-19 Experimental Treatments'**, which lists drug and non-drug experimental treatments for COVID-19. This can be found [HERE](#).

Public Health and Social Measures

- **“Immunity passport” in the context of COVID-19, Scientific Brief, as of 24 April** – can be accessed [HERE](#). This document addresses how some government have suggested that the detection of antibodies to the SARS-CoV-2, the virus that causes COVID-19, could serve as the basis for an “immunity passport” or “risk-free certificate” that would enable individuals to travel or to return to work assuming that they are protected against re-infection. There is currently no evidence that people who have recovered from COVID-19 and have antibodies are protected from a second infection.
- **Join WHO experts to learn more about the science behind COVID-19 immune response** and how this relates to the concept of immunity passport. It will be held on Friday, 1 May at 13:00 Geneva time – Registration is available [HERE](#).

Emergency Public Health Measures: Consideration for Easing the lockdown

- **Strengthening and adjusting public health measures throughout the COVID-19 transition phases: policy considerations for the WHO European Region** and an **accompanying infographic**. This document provides key considerations for Member States, to support decision-making on the modulation of large-scale restrictive public health measures while at the same time strengthening core public health service capacities, personal protective measures and physical distancing. Modulation of restrictive measures, such as the easing of lockdowns and closures, must be undertaken cautiously and informed by the best available emerging evidence. Access the site [HERE](#)

Infection Prevention and Control **[New]**

- **WHO is further promoting hand hygiene and infection prevention and control (IPC) though the WHO annual SAVE LIVES: Clean Your Hands** campaign to be celebrated on 5 May. The appropriate use of gloves is critical.
 - The use of gloves when not indicated represents a waste of resources and does not reduce cross-contamination.
 - The widespread use of gloves in the community as a measure to prevent COVID-19 may result in missed opportunities for hand hygiene and lead to increase the dissemination of the COVID-19 virus.
 - Medical gloves are recommended to be worn during health care in two main situations:
 - a) To reduce the risk of contamination of health-care workers hands with blood and other body fluids
 - b) To reduce the risk of germ transmission from the health-care worker to the patient and vice-versa, in particular when doing aseptic/clean tasks.

Risk Communication

- **Risk Communications and Community Engagement (RCCE)**

The tripartite partnership of IFRC, UNICEF, and WHO is leading activities on Risk Communications and Community Engagement (RCCE). The tripartite priorities and upcoming guides, research and tools include social, cultural, and behavioural insights to guide strategies and response actions. They also provide recommendations for home care, community engagement for post-lockdown, and for low-resource settings and vulnerable populations.
- A **repository of RCCE research and assessment tools** is available on the GOARN COVID-19 Knowledge Hub, ACCESS [HERE](#). Rapid literature searches and evidence reviews with 24-hour turn-around. Requests are through an online portal supported by Librarian Reserve Corps. Priority is given to GOARN operational partners and WHO technical leads. These outputs are sent directly to the requester and posted on the open access [GOARN COVID-19 Knowledge Hub](#). The Librarian Reserve Corps also curates a daily research publications list that is posted on the open access [GOARN COVID-19 Knowledge Hub](#).

Vaccines and treatments:

- **[New]** WHO has published the ‘R&D Blueprint: COVID-19 Experimental Treatments’, which lists drug and non-drug experimental treatments for COVID-19. This can be found [here](#).

- Researchers around the world are working hard on accelerating the development of vaccines and therapeutics for COVID-19. WHO has launched various [working groups](#) to accelerate various aspects of vaccine development. [A call was made by 130 scientists, funders and manufacturers](#) to help speed the availability of a vaccine against COVID-19.
 - Together with global health actors and partners, WHO launched the [Access To COVID-19 Tools \(ACT\) Accelerator](#), a global collaboration to accelerate the development, production and equitable access to new COVID-19 diagnostics, therapeutics and vaccines.
 - More than [80 vaccines are in development globally](#), including six in clinical evaluation, and several therapeutics are in clinical trials. WHO is committed to ensuring that as medicines and vaccines are developed, they are shared equitably with all countries and people.
 - WHO published [Target product profiles for COVID-19 vaccines](#) to describe the preferred and minimally acceptable profiles for human vaccines.

WHAT WHO IS DOING FOR COVID19 IN NORTH MACEDONIA?

In line with the strategic Government's approach in fighting COVID19 whereby efforts are put on increasing testing, maintaining quality COVID19 care and essential care and protecting health care workers, WHO works closely with the government and national and global health partners to enable the response.

Risk Communication

- **Translation of WHO guideline on Safe Ramadan practices in the context of the COVID-19:** in Macedonian, Albanian, Turkish and Roma languages.
- **European immunization week:** WHO supported the country to raise awareness about maintaining essential health services and importance of immunization in preventing diseases and protecting life at the time of COVID19. Activities are held during the European Immunization Week 2020, from 20-26 April 2020. Click here : [European Immunization Week](#) . WHO MKD supported translation and adaptation of the following materials for social media:
 - EIW Poster adaptation
 - Video Adaptation - How do vaccine work?
 - Video Adaptation - Why should I get vaccinated

Risk perception and behavioral change

- WHO initiated in partnership with National Institute of Public Health **COVID-19 behavioral survey** to gain an understanding of issues such as: trust in health authorities, recommendations and information; risk perceptions; acceptance of recommended behaviours; knowledge; barriers/drivers to recommended behaviours; misperceptions; and stigma. The results will be available to the policy makers to assess and modify risk communication strategies on aspects related to COVID19. The results will also inform post-pandemic actions, e.g. addressing possible family, mental health or other adverse events as a result of the crisis. The final results are expected around mid-May 2020.

WHO action in COVID-19 outbreak in North Macedonia aims at limiting the virus spread, protecting health and the health workers at the frontline, preserving the health care system capacity and its sustainability to respond and provide essential services to the population.

WHO is the lead UN agency for Health and main technical and health policy advisor to the government on COVID-19 containment and mitigation.

WHO works in coordination closely with other UN agencies as per the UN reform.

Western Balkan including North Macedonia is one of the priority countries for the WHO European Region.

Technical support, guidance and assistance are provided through the WHO Country Office from all levels of the Organization.

There is abundance of technical guidance WHO has developed in all areas of work: we are supporting the country to develop technical plans and implement priority interventions in the framework of a strong nation-wide strategic response.

<https://www.who.int/emergencies/diseases/novel-coronavirus-2019>

Identification, virus testing and contact tracing

- WHO **donated 5000 COVID tests** to the Virology Lab of the Institute of Public Health on 8 April 2020.
- With WHO/USAID support, the health **emergency operations venue at MOH** is now equipped and functional in its temporary premises, refurbished and with IT equipment.
- WHO is supporting North Macedonia as part of the **Unity Study for Sero-epidemiological studies** investigating the extent of infection in the general population, as determined by seropositivity. A standardized WHO master protocol is available that is being now tailored to country needs in terms of public health, laboratory and clinical systems, capacity, availability of resources and cultural appropriateness. Using this standardized protocol allows for comparability of data across different countries and helps to determine important epidemiological parameters (e.g. the proportion of the population that remains susceptible to infection, proportion of asymptomatic infections etc.) which inform public health action. The protocol can be accessed here: [HERE](#)

Infection control and prevention in health care settings

- **Support to the World Hand Hygiene Day "Save Lives: Clean your Hands Campaign"** on 5 May. The slogan of the campaign is "**Nurses and Midwives, clean care is in your hands**". The objective is not only to promote good hand hygiene and infection prevention and control practices (COVID-19), but also to recognize the key role of nurses and midwives in preventing avoidable infections. WHO MKD translated 2-pager about Hand Hygiene & COVID-19 to be distributed to relevant facilities and through social media channels. The WHO campaign materials have been shared with the Ministry of Health. WHO encourages engaging of Minister of Health and health authorities to participate **WHO donated PPE equipment** to two specialized university clinics in Skopje.
- WHO developed a **risk assessment tool to be used by health care facilities with COVID-19 patients**. The tool is to be completed for all health workers who have been exposed to a confirmed COVID-19 patient in a health care facility. The tool will help determine the risk of COVID-19 virus infection of all HCWs who have been exposed to a COVID-19 patient and then provides recommendations for appropriate management of these HCWs, according to their infection risk.
- WHO also held on Friday 3 April 2020, a **Zoom training session in Macedonian language** open for **all Health Care workers dealing with COVID19** for the proper practices in Infection control and prevention of virus transmission in hospitals and clinical management of severe respiratory cases.
- **WHO Webinar series on IPC & COVID 19** was promoted shared with relevant national professionals:
 - **21 April:** A model hospital for IPC and management of COVID-19 patients [Didier Pittet, University of Geneva Hospitals, Geneva, Switzerland]
 - **28 April:** The SARS-CoV-2 virus modes of transmission and related IPC measures [John Conly, University of Calgary and Alberta Health Services, Calgary, Canada]
 - **NEXT 5 May:** celebrating nurses and midwives for clean care at the age of COVID-19 [Benedetta Allegranzi, IPC Hub, WHO HQ Didier Pittet, University of Geneva Hospitals, Geneva, Switzerland]
 - **NEXT 12 May:** Corona virus infections among health care workers: what we know about COVID-19 and what we have learned from other outbreaks [April Baller, WHO Health Emergencies, Geneva, Switzerland Seto Wing Hong, University of Hong Kong Shenzhen Hospital, Hong Kong, China]

Health Professionals

- **COVID -19 courses for health professionals:** Translation and adaptation of the following WHO on-line COVID – 19 courses for Health Professionals has been initiated:
 - Clinical Care Training for Respiratory Infections (SARI) in Macedonian language;
<https://openwho.org/courses/severe-acute-respiratory-infection>
 - ePROTECT Respiratory Infections in Macedonian and Albanian languages;
<https://openwho.org/courses/eprotect-acute-respiratory-infections>

- How to put on and remove PPE in Macedonian and Albanian languages; <https://openwho.org/courses/IPC-PPE-EN>

Case management

- **Solidarity Trial:** Generating Robust data needed to show which treatments are the most effective, by North Macedonia joining the WHO SOLIDARITY Trial. This will allow also receiving WHO donation of medicines **Ramdesivir and Fapinavir** for COVID19 severe patients. **WHO held a training meeting on Solidarity trial** to all those involved in the scheme from COVID19 treating hospitals.

Planning, monitoring and evaluation of the COVID19 Response.

- **WHO is supporting the country in assessing the situation in view of eventual relaxation of restrictive public health measures.** WHO guidance is available on *“Considerations in adjusting public health and social measures in the context of COVID-19”* - [Access the publication](#) . This document provides guiding principles for adapting measures (loosening/ tightening). This will be followed by:
 - Indicators (criteria) for when measures can be adapted
 - Practical advice on how to adapt measures in key settings such as schools, workplaces etc.
 WHO emphasizes that there should be gradual alleviation, close monitoring and constant calibration of measures. **As measures are loosened, surveillance should be tightened. Different surveillance approaches (identification, confirmation, isolation, and contact identification and quarantine, event-based surveillance, sentinel ILI/SARI surveillance etc.) should be applied.**
- WHO continuing the roll out of the **Partners Platform for the Strategic Preparedness and Response Plan (SPRP)**: Onboarding has taken place supporting North Macedonia to link with international support; the Country Preparedness and Response Plan has been uploaded for increasing capacity for 2000 COVID19 cases. The country is active on the platform <https://covid-19-response.org>
- SPRP includes health systems continuity, the Platform will have a **9th Pillar** for assessment of priority actions to maintain essential health services.
- **COVID-19 Health System Response Monitor (HSRM)** has been formally launched by WHO EURO and the European Observatory for Health systems. North Macedonia is participating. <https://www.covid19healthsystem.org/mainpage.aspx>
- A Ceremony for **launching of the USAID / WHO joint support** to the country to help contain and mitigate the COVID19 virus spread <https://un.mk/ceremony-for-launching-of-the-usaid-who-support-to-the-country-to-help-mitigate-the-spread-of-covid19/> was organized on 7 April 2020. This act of solidarity is directed mainly to support the health staff at the frontline of this fight against the virus: to ensure they have the means and the skills to protect themselves and control the infection all health care settings not only in treatment centers. A large part of the grant will also help the Institute of Public Health to continue its remarkable work in tracing and testing and early identification of the cases.

WHO continues to be actively engaged in:

- In risk communication targeted messages and developed many messages and infographics in national languages for display at MOH media channels and other. *WHO [Facebook/Twitter](#) ; MoH [Facebook/Twitter](#); [WHO Europe website for COVID-19](#)*
- Providing technical advice and support to many national and international partners for stepping up everyone’s engagement in halting the virus spread and its impact on North Macedonia.
- Ensuring lab and testing tools are available for COVID19 related testing kits and PPE.

- Assisting the MOH in gaps and needs assessment and bridging those gaps for better health system coping and response.
- Establishing bilateral partnerships, resource mobilization, and joint plans to address gaps and needs of the MOH.
- Sustaining professional and technical knowledge of all health care workers in the country through the online WHO training course for COVID-19 for health care and infection control and protection (IPC) is now available in Macedonian Language on the WHO learning platform for Health workers. <https://openwho.org/>
- Tracking the epidemiological spread of the virus, supports early warning system and keep communities and frontline responders informed with the latest technical guidance.
- Contributing to the UN in the country to make sure that timely procurement takes place and supporting the newly set UN coordination mechanism for the COVID19. [1UN MK@facebook.com](https://www.facebook.com/1UNMK)

NORTH MACEDONIA STRATEGIC RESPONSE AND ACTION

North Macedonia mobilized an all-of-government action to fight this new coronavirus, including scaling up emergency response mechanisms in all sectors. Actions and readjustments of measures are continuous and monitoring of the situation is ongoing on daily basis. The country is in declared national emergency Announced by the President of the Republic on 18 March 2020 and later renewed for another month.

On the health front, the country is working hard on now to ensure its COVID19 hospitalization surge capacity with the necessary personnel are in place with the influx of additional cases in recent days.

The Ministry of Health increased public health measures, such as rapid identification, diagnosis and management of the cases, identification and follow up of the contacts, infection prevention and control in health care settings, implementation of health measures for travelers, awareness-raising in the population and risk communication and counter misinformation as well as minimizing social and economic impact through multisectoral partnerships.

IN THE PAST 24 HOURS:

➤ **Public health measures:**

- **The Government adjusted the curfew** during the upcoming Labor Day 1st of May holiday weekend:
 - The ban on movement on the entire territory of the country will be from 14:00-05:00 each day (Friday, Saturday and Sunday).
 - People above 67 years old can move between 05:00-11:00 on Friday, Saturday and Sunday.
 - Young people up to the age of 18, can move between 12:00-14:00 on Friday, Saturday and Sunday
- **Weddings** will be allowed, and directions will be provided to the economic operations, informed Minister Filipche. Protocols are already prepared for holding different courses, lectures in closed spaces and public transport, while the protocols for the work of restaurants and school and kindergartens are underway.
- 42 people are caught **breaking the curfew** in the past 24 hours – 32 are detained.

➤ **Socioeconomic measures:**

- The Government of North Macedonia had planned for 240 million MK Denars to be made available for immediate measures to address COVID-19 through reduction of the salaries of 2 600 officials, MPs, judges and directors for April and May. The government decree was however annulled by the Constitution Court.
- A Government Decree allows **financial support to employers for job saving** in the amount of up to 14,500 mkd per month per employee affected by the crisis caused by COVID-19 . The funds from the World Bank Local Roads Connectivity Project in the amount of 50 million euros to be reallocated to co-finance the government measure for financial support of the employers.

- **Italian** remaining funds from the Environmental Protection Program along the Radika Reiver Valley in the amount of 1.6 million euros are **reallocated to the fight against COVID-19 in the Southwest region** as the most affected region in the country.
- Up until now, a total of **631 loan applications have been approved for the interest-free loans in the amount of 4.7 million euros for companies** with 5,588 employees. Of those, 2.1 million euros are approved for companies in the transport, 2,4 million euros for the restaurant services and the rest of the finds are for the companies in the tourism (tourist agencies and tour-operators).
- The **Government call center** to be expanded in other institutions to strengthen the support for the companies and the citizens in providing COVID-19 related questions.
- **Deputy Prime Minister for Economic Affairs** with Education and Science Minister, Agriculture, Forestry and Water Economy Minister, and Deputy Minister of Labor and Social Policy, announced today a series of social measures mitigating the impact of COVID-19. Several measures are adopted for protection of the citizens and the companies, especially those most vulnerable to the impact of the outbreak. The Deputy Prime Minister for Economic Affairs pointed out to respecting the principles of non-discrimination and protection of human rights, which is especially important in such crisis situations. A comprehensive approach has been created. A complete description of the social measures is outlined [HERE](#)

UN, DONATIONS AND PARTNER COORDINATION- COVID-19*

To provide a comprehensive and coordinated approach in identifying and repurposing the available bilateral assistance to the COVID-19 response, all public administration bodies receiving bilateral donor assistance will report promptly to the Secretariat for European Affairs (SEA) the amount of funds available for each project. The SEA will then submit a formal request to the bilateral donors for the reuse of funds in accordance with the identified priority needs for COVID19.

**[in the past 24 hours – earlier info available in previous Flash Updates]*

- **World Bank** agreed with government on a loan for implementing project of 99 Million USD with objectives to prevent, detect and respond to the threat posed by COVID-19 and strengthen national systems for public health preparedness in North Macedonia. The component of the project: Emergency COVID-19 Response; Household Support to Enable Social Distancing and Project Implementation, Communications, Community Engagement, and Monitoring. Both Ministry of Labor and Social Policy, and Ministry of Health are the implementers and effective date of start is 12 May. Document available [HERE](#)
- **COVID-19 RESPONSE FUND:** The Ministry of Health will be procuring as of next week medical equipment including intensive care beds, ventilators, infusion pumps, mobile X-ray, etc., using funds from the COVID-19 response donation account that reached MKD 90 million collected to date.
- The **Open Society Foundation** in North Macedonia has donated 1,260 humanitarian packages to Roma families who are economically most directly affected by the coronavirus. FSOM announced today that in cooperation with the Red Cross, the humanitarian packages will be distributed to 5,000 citizens of the Roma community in nine cities: Berovo, Kavadarci, Negotino, Kichevo, Kochani, Shtip and Veles.

GAPS/NEEDS AND CHALLENGES

➤ **Technical needs at the health front:**

- Risk assessment for easing the curfews.
- Assess the socioeconomic impact on Health system during the crisis and after the crisis
- Determine the level of immunity to the virus in the population
- Review of the testing algorithms in consideration of the strategy to increase testing.
- Increase use of eHealth and telemedicine to improve and facilitate population preventive interventions

- Strengthen epidemiological capacity
- Enhance planning capacity for transition strategy after lockdown.
- **Critical needs:**
 - Laboratory Kits and reagents; Personal Protective Equipment (PPE); Mechanical Ventilators/Respirators (respirators from operating rooms are not adapted to need of respiratory diseases and cannot be used for the ICU) ;
 - intensifying risk communication;
 - socioeconomic relief for vulnerable groups and employment protection.
 - Maintaining Essential health and social services
 - Protecting health care workers whether those working in the COVID-19 designated facilities or elsewhere countrywide because of the community transmission.
 - Mental Health Support to health workers and the public especially the vulnerable ones.
- **Challenges:**
 - Procurement : Access to local or international supplies and mainly respirators for the critical needs identified because of international shortages.
 - Shortage in health workforce as the situation progresses
 - Ensuring sustainability of the health facilities and health care during and after the crisis.
 - Outreach and social support to the vulnerable
 - Ensuring continuity of treatment and access to regular health care for all citizens including the vulnerable groups with other diseases and pathologies.
 - Fighting Isolation and scaling up community engagement in the regions
 - Compliance of the citizens to instructions of the government and self-isolation