

# COVID-19 Weekly Epidemiological Update

Edition 85, published 29 March 2022

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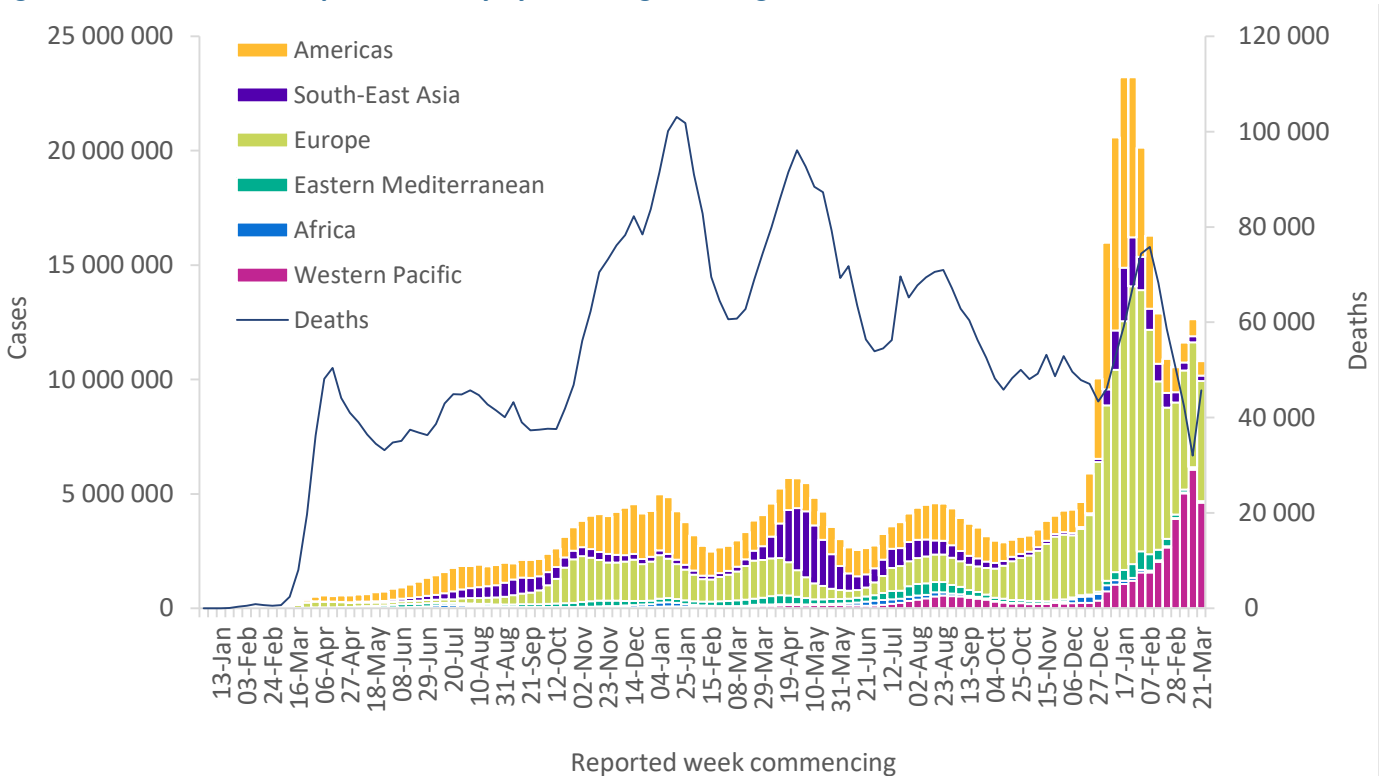
## Global overview

Data as of 27 March 2022

Between the end of January and early March 2022, there was a decreasing trend in the number of new COVID-19 cases, which was followed by two consecutive weeks of increases in cases. During the week of 21 through 27 March 2022, the number of new cases declined again with a 14% decrease as compared to the previous week (Figure 1). On the other hand, during the same period, the number of new weekly deaths increased by 43%, likely driven by changes in the definition of COVID-19 deaths in some countries in the Region of the Americas (Chile and the United States of America) and by retrospective adjustments reported from India in the South-East Asia Region.

Across the six WHO regions, over 10 million new cases and over 45 000 new deaths were reported. All regions reported decreasing trends in the number of new weekly cases and four regions reported a decreasing trend in new weekly deaths (Table 1). As of 27 March 2022, over 479 million confirmed cases and over 6 million deaths have been reported globally.

**Figure 1. COVID-19 cases reported weekly by WHO Region, and global deaths, as of 27 March 2022\*\***



\*\*See [Annex 2: Data, table, and figure notes](#)

At the country level, the highest number of new weekly cases were reported from the Republic of Korea (2 442 195 new cases; -13%), Germany (1 576 261 new cases; +2%), Viet Nam (1 127 716 new cases; -40%), France (845 119 new cases; +45%), and Italy (503 932 new cases; +6%).

The highest number of new weekly deaths were reported from Chile (11 858 new deaths; +1710%), the United States of America (5 367 new deaths; +83%), India (4 525 new deaths; +619%), the Russian Federation (2 859 new deaths; -22%), and the Republic of Korea (2 471 new deaths; +22%).

**Table 1. Newly reported and cumulative COVID-19 confirmed cases and deaths, by WHO Region, as of 27 March 2022\*\***

WHO Region	New cases in last 7 days (%)	Change in new cases in last 7 days *	Cumulative cases (%)	New deaths in last 7 days (%)	Change in new deaths in last 7 days *	Cumulative deaths (%)
Europe	5 247 550 (49%)	-4%	198 772 221 (41%)	11 320 (25%)	-17%	1 931 515 (32%)
Western Pacific	4 615 737 (43%)	-24%	43 133 218 (9%)	6 633 (15%)	-5%	207 363 (3%)
Americas	634 618 (6%)	-14%	150 335 637 (31%)	20 737 (45%)	182%	2 694 328 (44%)
South-East Asia	232 702 (2%)	-14%	56 973 754 (12%)	6 046 (13%)	116%	777 868 (13%)
Eastern Mediterranean	50 199 (0%)	-32%	21 540 822 (4%)	811 (2%)	-22%	340 045 (6%)
Africa	24 326 (0%)	-29%	8 555 173 (2%)	164 (0%)	-30%	170 986 (3%)
<b>Global</b>	<b>10 805 132 (100%)</b>	<b>-14%</b>	<b>479 311 589 (100%)</b>	<b>45 711 (100%)</b>	<b>43%</b>	<b>6 122 118 (100%)</b>

\*Percent change in the number of newly confirmed cases/deaths in the past seven days, compared to seven days prior

\*\*See [Annex 2: Data, table, and figure notes](#)

The trends reported above should be interpreted with caution as several countries are progressively changing their COVID-19 testing strategies, resulting in lower overall numbers of tests performed and consequently lower numbers of cases detected. Despite a generalized decline in the rate of SARS-CoV-2 testing observed across the six WHO regions, the number of new weekly cases increased again in early to mid-March, indicating that the virus is currently circulating at very high levels.

WHO is concerned about the recent significant reduction in SARS-CoV-2 testing by several Member States. Data are becoming progressively less representative, less timely, and less robust. This inhibits our collective ability to track where the virus is, how it is spreading and how it is evolving: information and analyses that remain critical to effectively end the acute phase of the pandemic.

Decreases in testing, unless done judiciously as part of a strategy aimed at maintaining robust surveillance where it is most impactful, may affect the capacity of countries to identify cases and enable their timely treatment or isolation, and implement other necessary control measures, with the consequent risk of increased spread of SARS-CoV-2.

This may translate in an increase in hospitalizations and deaths, and significant strains on healthcare systems, particularly in areas where public health and social measures have been lifted and where vaccination coverage

against COVID-19 is low. Furthermore, reduced testing impacts the capacity of countries to detect emerging variants early, ultimately impairing response efforts.

COVID-19 remains a Public Health Emergency of International Concern, and it is too early to reduce the quality of surveillance. The uncertainty around the characteristics of emerging variants limits our ability to confidently predict the behavior of this disease, as the evolution rate and risk of emerging variants are still high, which could undermine prevention and mitigation measures.

Until we reach the end of the acute phase of the pandemic, countries must maintain sufficient epidemiologic surveillance to inform evidence-based operational decision-making on crucial parameters, including vaccination strategies, vaccine composition, use of therapeutics, and tailored and appropriate public health and social measures.

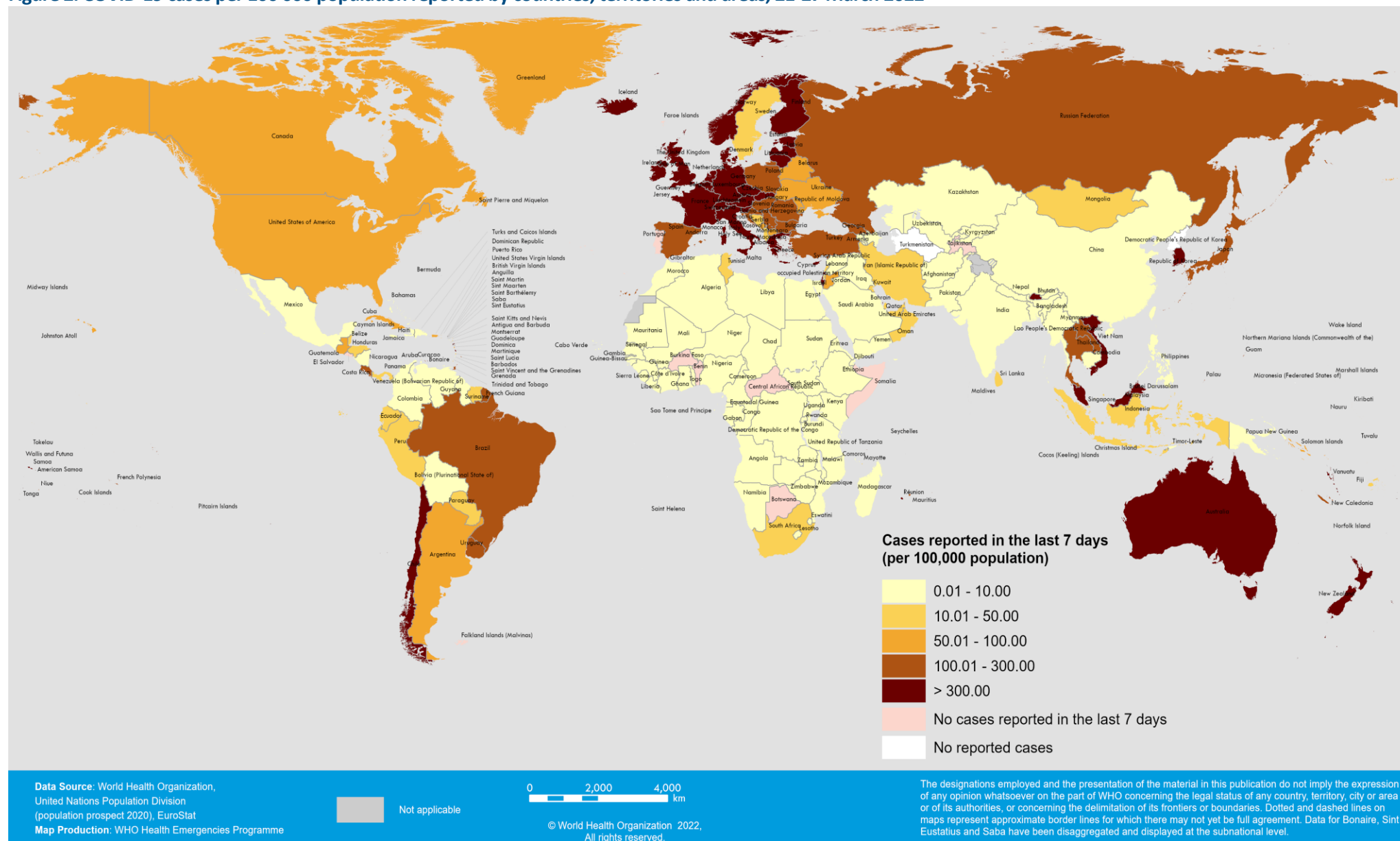
At this stage of the pandemic, WHO recommends that Member States:

- Continue representative testing financially accessible to all, providing useable and timely epidemiological evidence on the circulation of SARS-CoV-2;
- Focus on early warning and trend monitoring, which could alert to a change in the transmission dynamics of SARS-CoV-2;
- Continue with the daily tracking and reporting of cases and deaths for the duration of the acute phase of the pandemic;
- Monitor severity of COVID-19 in vulnerable groups;
- Enhance genomic surveillance to detect variants, and monitor the evolution of SARS-CoV-2.

For the latest data and other updates on COVID-19, please see:

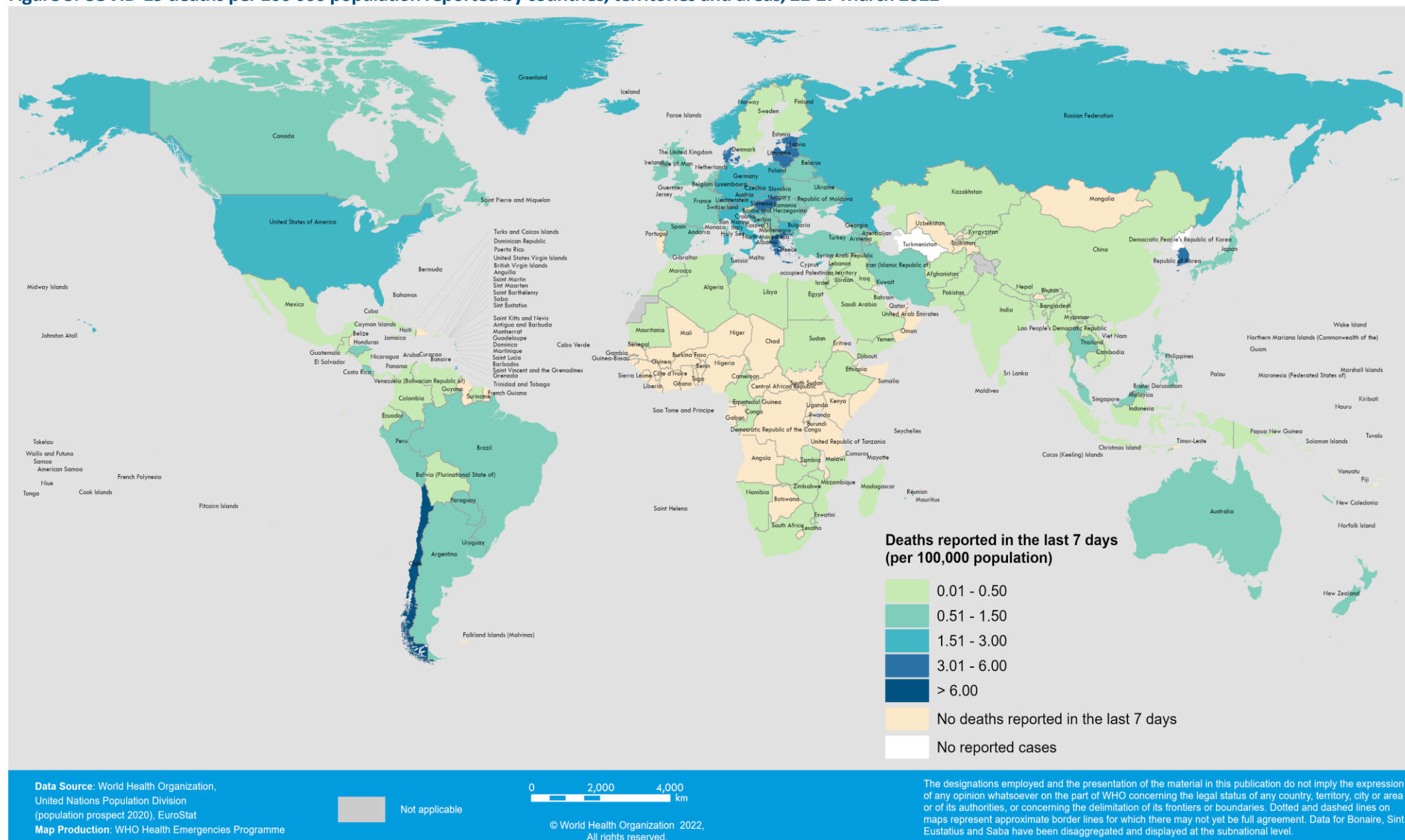
- [WHO COVID-19 Dashboard](#)
- [WHO COVID-19 Weekly Operational Update and previous editions of the Weekly Epidemiological Update](#)

Figure 2. COVID-19 cases per 100 000 population reported by countries, territories and areas, 21-27 March 2022\*



\*\*See [Annex 2: Data, table, and figure notes](#)

Figure 3. COVID-19 deaths per 100 000 population reported by countries, territories and areas, 21-27 March 2022\*\*



\*\*See [Annex 2: Data, table, and figure notes](#)

## Special Focus: Update on SARS-CoV-2 variants of interest and variants of concern

WHO, in collaboration with national authorities, institutions and researchers, routinely assesses if variants of SARS-CoV-2 alter transmission or disease characteristics, or impact effectiveness of vaccines, therapeutics, diagnostics or public health and social measures (PHSM) applied to control disease spread. Potential variants of concern (VOCs), variants of interest (VOIs) or variants under monitoring (VUMs) are regularly assessed based on the risk posed to global public health. As evidence becomes available, classifications of variants will be revised to reflect the continuous evolution of circulating variants and their changing epidemiology. Criteria for variant classification, and the current lists of VOCs, VOIs and VUMs, are available on the [WHO Tracking SARS-CoV-2 variants website](#). National authorities may choose to designate other variants and are encouraged to investigate and report on the impacts of these variants.

### Geographic spread and prevalence of VOCs

The current global epidemiology of SARS-CoV-2 is characterized by the global dominance of the Omicron variant. Among the 382 789 sequences uploaded to GISAID with specimens collected in the last 30 days<sup>i</sup>, 381 824 (99.7%) were Omicron, 175 (<0.1%) were Delta, and 649 sequences were not assigned to a Pango lineage (0.2%).

To note, the global distribution of VOCs should be interpreted with due consideration of surveillance limitations, including differences in sequencing capacities and sampling strategies between countries, as well as delays in reporting. In addition, some countries may have changed their testing and sequencing policies during the presented period.

#### *Recombinant variants*

The same process of risk assessment is applied to recombinant variants as for any other emerging variant. Since the [epidemiological update published on 22 March 2022](#), no new evidence indicates that the recombinant variant assigned XD Pango lineage (Delta-Omicron) is associated with higher transmissibility or more severe outcomes. The XE recombinant (BA.1-BA.2), was first detected in the United Kingdom on 19 January and >600 sequences have been reported and confirmed since. Early-day estimates indicate a community growth rate advantage of ~10% as compared to BA.2, however this finding requires further confirmation. XE belongs to the Omicron variant until significant differences in transmission and disease characteristics, including severity, may be reported. WHO continues to closely monitor and assess the public health risk associated with recombinant variants, alongside other SARS-CoV-2 variants, and will provide updates as further evidence becomes available.

### Additional resources

- [Tracking SARS-CoV-2 Variants](#)
- [COVID-19 new variants: Knowledge gaps and research](#)
- [Genomic sequencing of SARS-CoV-2: a guide to implementation for maximum impact on public health](#)
- [Considerations for implementing and adjusting public health and social measures in the context of COVID-19](#)
- [VIEW-hub: repository for the most relevant and recent vaccine data](#)
- [WHO Statement on Omicron sublineage BA.2](#)

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<sup>i</sup>Includes sequences submitted to [GISAID](#) with sample collected dates from 23 February to 24 March 2022 (last reported sample at the time of data extraction), excluding low coverage sequences. Proportions are estimated for countries submitting more than 100 total sequences. In the past 30 days, 44 countries submitted a total of 100 sequences and above on GISAID.

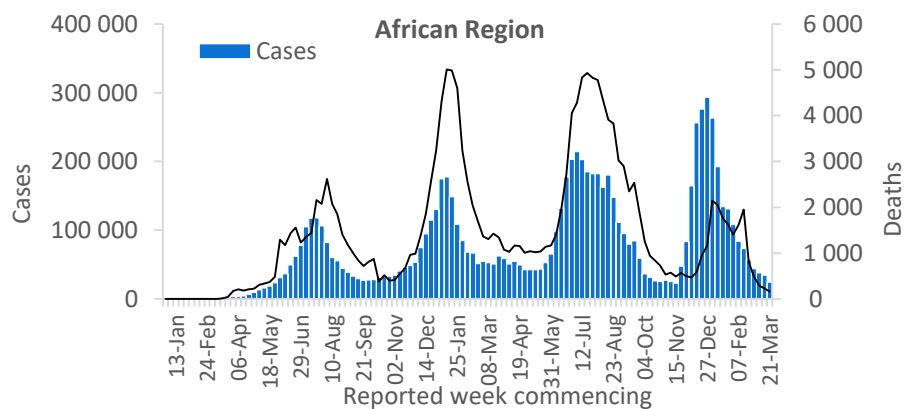
## WHO regional overviews:

Epidemiological week 21-27 March 2022\*\*

### African Region

The decreasing trend observed in the African Region since January 2022 continues, with over 24 000 new weekly cases reported, representing a 29% decrease as compared to the previous week. However, fourteen (29%) countries in the Region reported an increase of over 20% in cases, with some of the greatest proportional increases observed in Equatorial Guinea (101 vs 4 new cases; +2425%), Lesotho (105 vs 59 new cases; +78%), and Rwanda (71 vs 48 new cases; +48%). The highest numbers of new cases were reported from South Africa (8934 new cases; 15.1 new cases per 100 000 population; -9%), Réunion (8494 new cases; 948.7 new cases per 100 000; similar to the previous week's figures), and Mauritius (2410 new cases; 189.5 new cases per 100 000; -77%).

The number of new weekly deaths in the Region decreased by 30% as compared to the previous week, with over 150 new deaths reported. The highest numbers of new deaths were reported from South Africa (86 new deaths; <1 new death per 100 000 population; -49%), Mauritius (34 new deaths; 2.7 new deaths per 100 000 population; similar to the previous week's figures), and Réunion (13 new deaths; 1.5 new deaths per 100 000; +44%).

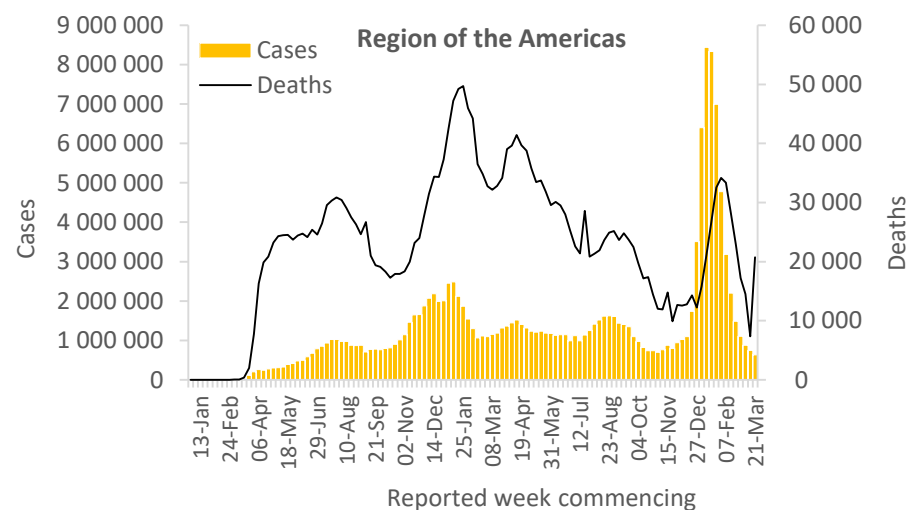


Updates from the [African Region](#)

### Region of the Americas

The Region of the Americas has been reporting a decreasing trend since mid-January 2022, with over 634 000 new weekly cases reported, corresponding to a 14% decrease as compared to the previous week. However, eleven (20%) countries in the Region reported increases in new cases of 20% or greater, with the greatest increases observed in the islands of Sint Eustatius (142 vs 13 new cases; +992%), Anguilla (39 vs 20 new cases; +95%) and Saint Pierre and Miquelon (577 vs 298 new cases; +94%). The highest numbers of new cases were reported from Brazil (229 145 new cases; 107.8 new cases per 100 000; -15%), the United States of America (207 093 new cases; 62.6 new cases per 100 000; -6%), and Chile (61 337 new cases; 320.9 new cases per 100 000; -36%).

The Region reported over 20 000 new weekly deaths, a 182% increase as compared to the previous week, which was partly due to changes in the definition of COVID-19 deaths in Chile and in one state in the United States of America. The highest numbers of new deaths were reported from Chile (11 858 new deaths; 62.0 new deaths per 100 000; +1710%), the United States of America (5367 new deaths; 1.6 new deaths per 100 000; +83%), and Brazil (1768 new deaths; <1 new death per 100 000; -21%).

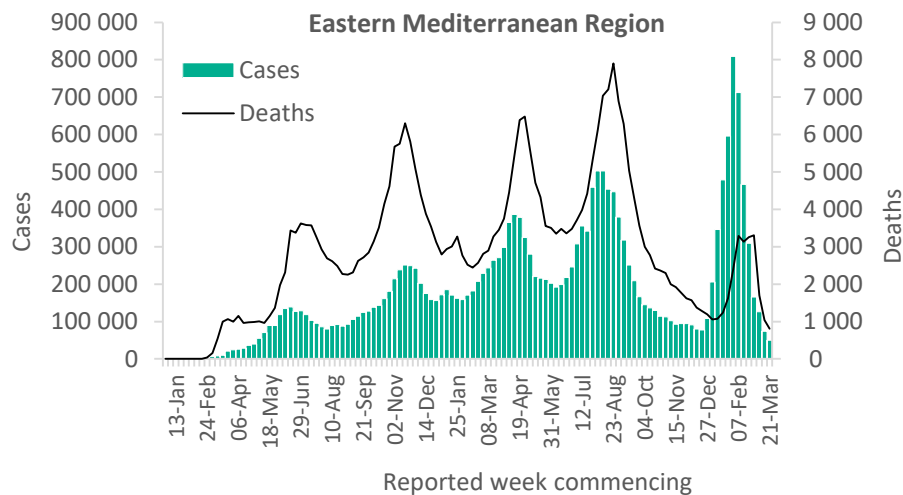


Updates from the [Region of the Americas](#)

## Eastern Mediterranean Region

In the Eastern Mediterranean Region, new weekly cases have continued to decline following a peak reached in early February 2022. Just over 50 000 new weekly cases were reported, a 32% decrease as compared to the previous week. However, two (9%) countries in the Region have reported increases in new cases of 20% or greater: Tunisia (3969 vs 534 new cases; +643%) and occupied Palestinian territory (1088 vs 718 new cases; +52%). The highest numbers of new cases were reported from the Islamic Republic of Iran (9572 new cases; 11.4 new cases per 100 000; -51%), Jordan (9135 new cases; 89.5 new cases per 100 000; -64%), and Bahrain (6527 new cases; 383.6 new cases per 100 000; -14%).

The number of new weekly deaths in the Region decreased by 22% when compared to the previous week, with just over 800 new deaths reported. The highest numbers of new deaths were reported from the Islamic Republic of Iran (421 new deaths; <1 new death per 100 000; -41%), Tunisia (100 new deaths; <1 new death per 100 000; +426%), and Egypt (84 new deaths; <1 new death per 100 000; -20%).

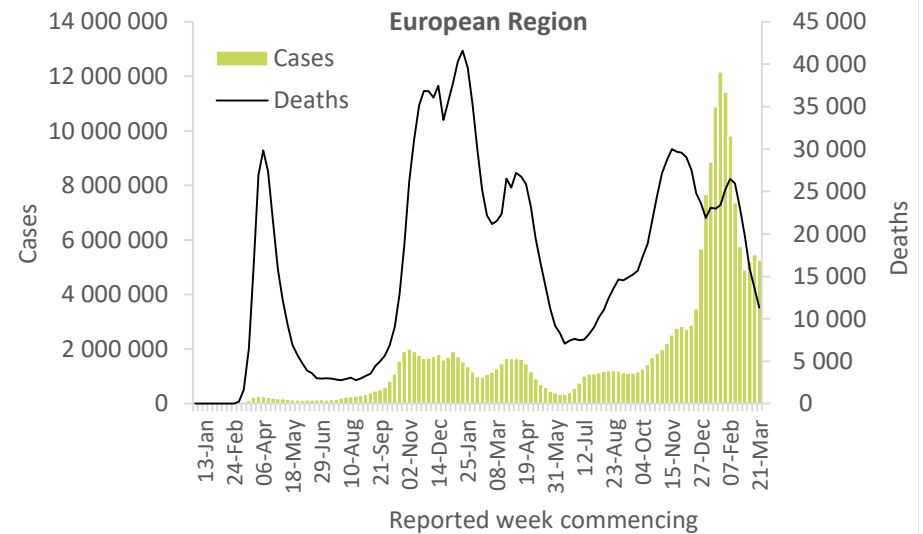


Updates from the [Eastern Mediterranean Region](#)

## European Region

The European Region reported over 5.2 million new weekly cases, representing a 4% decrease as compared to the previous week. Six (10%) countries in the Region reported increases in new cases of 20% or greater, with the largest observed in Israel (88 869 vs 47 796 new cases; +86%), Hungary (15 269 vs 9727 new cases; +57%) and Malta (2434 vs 1628 new cases; +50%). The highest numbers of new cases were reported from Germany (1 576 261 new cases; 1895.3 new cases per 100 000; +2%), France (845 119 new cases; 1299.4 new cases per 100 000; +45%), and Italy (503 932 new cases; 844.9 new cases per 100 000; +6%).

The number of new deaths has continued to decrease in the Region, with over 11 000 new deaths reported this week, a 17% decrease as compared to the previous week. The highest numbers of new deaths were reported from the Russian Federation (2859 new deaths; 2.0 new deaths per 100 000; -22%), Germany (1521 new deaths; 1.8 new deaths per 100 000; +13%), and Italy (1008 new deaths; 1.7 new deaths per 100 000; +11%).



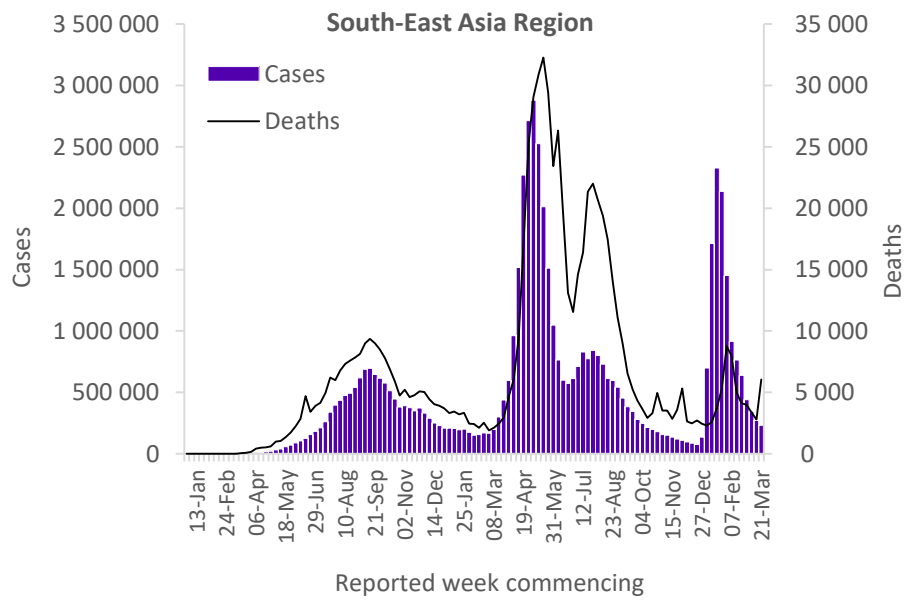
Updates from the [European Region](#)



## South-East Asia Region

The South-East Asia Region reported over 232 000 new weekly cases, a 14% decline as compared to the previous week, continuing the decreasing trend observed since mid-January 2022. However, Sri Lanka reported an increase in new weekly cases of 25% (2693 vs 2156 new cases). The highest numbers of new cases were reported from Thailand (175 116 new cases; 250.9 new cases per 100 000; +4% increase), Indonesia (36 470 new cases; 13.3 new cases per 100 000; -49%), and India (11 612 new cases; <1 new case per 100 000; -31%).

The Region reported just over 6000 new weekly deaths, representing a 116% increase as compared to the previous week. The highest numbers of new deaths were reported from India (4525 new deaths; <1 new death per 100 000; +619%) due to retrospective adjustments in some states, followed by Indonesia (932 new deaths; <1 new death per 100 000; -41%), and Thailand (553 new deaths; <1 new death per 100 000; +3%).

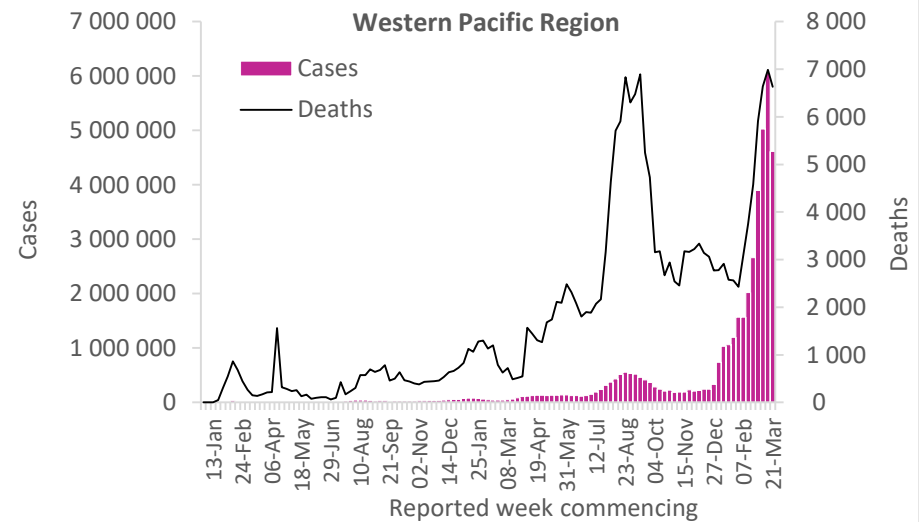


Updates from the [South-East Asia Region](#)

## Western Pacific Region

With over 4.6 million new weekly cases, the Region reported a 24% decrease as compared to the previous week, reversing the increasing trend observed since the end of December 2021. Seven (23%) countries in the Region reported an increase of 20% or greater, with some of the largest increases observed in Vanuatu (1234 vs 352 new cases; +251%), Guam (487 vs 142 new cases; +243%) and Lao People's Democratic Republic (16 037 vs 6449; +149%). The highest numbers of new cases were reported from the Republic of Korea (2 442 195 new cases; 4763.5 new cases per 100 000; -13%), Viet Nam (1 127 716 new cases; 1158.5 new cases per 100 000; -40%), and Australia (368 028 new cases; 1443.3 new cases per 100 000; -28%).

The number of new weekly deaths shows a decrease of 5% as compared to the previous week, with just over 6600 new deaths reported. The highest numbers of new deaths were reported from the Republic of Korea (2471 new deaths; 4.8 new deaths per 100 000; +22%), China (1453 new deaths; <1 new death per 100 000; -24%), and the Philippines (861 new deaths; <1 new death per 100 000; +48%).



Updates from the [Western Pacific Region](#)

## Annex 1. List of countries/territories/areas reporting currently circulating variants of concern as of 29 March 2022

Country/Territory/Area	Delta	Omicron
Afghanistan	●	-
Albania	○	●
Algeria	●	●
American Samoa	○	○
Andorra	○	○
Angola	●	●
Anguilla	●	●
Antigua and Barbuda	●	●
Argentina	●	●
Armenia	●	●
Aruba	●	●
Australia	●	●
Austria	●	●
Azerbaijan	○	●
Bahamas	●	●
Bahrain	●	●
Bangladesh	●	●
Barbados	●	●
Belarus	○	●
Belgium	●	●
Belize	●	●
Benin	●	●
Bermuda	●	●
Bhutan	●	●
Bolivia (Plurinational State of)	●	●
Bonaire	●	●
Bosnia and Herzegovina	○	○
Botswana	●	●
Brazil	●	●
British Virgin Islands	●	●
Brunei Darussalam	●	●
Bulgaria	●	●

Country/Territory/Area	Delta	Omicron
Burkina Faso	●	●
Burundi	●	-
Cabo Verde	●	●
Cambodia	●	●
Cameroon	●	●
Canada	●	●
Cayman Islands	●	●
Central African Republic	●	●
Chad	●	○
Chile	●	●
China	●	●
Colombia	●	●
Comoros	●	●
Congo	●	●
Costa Rica	●	●
Croatia	●	●
Cuba	●	●
Curaçao	●	●
Cyprus	●	●
Czechia	●	●
Côte d'Ivoire	●	●
Democratic Republic of the Congo	●	●
Denmark	●	●
Djibouti	●	●
Dominica	●	-
Dominican Republic	●	●
Ecuador	●	●
Egypt	●	●
El Salvador	●	●
Equatorial Guinea	●	-
Estonia	○	●

Country/Territory/Area	Delta	Omicron
Eswatini	●	●
Ethiopia	●	●
Falkland Islands (Malvinas)	-	-
Faroe Islands	-	-
Fiji	●	●
Finland	●	●
France	●	●
French Guiana	●	●
French Polynesia	●	●
Gabon	●	●
Gambia	●	●
Georgia	●	●
Germany	●	●
Ghana	●	●
Gibraltar	○	●
Greece	●	●
Greenland	●	-
Grenada	●	●
Guadeloupe	●	●
Guam	●	●
Guatemala	●	●
Guernsey	-	●
Guinea	●	●
Guinea-Bissau	●	-
Guyana	●	●
Haiti	●	●*
Honduras	●	●
Hungary	○	●
Iceland	●	●
India	●	●
Indonesia	●	●
Iran (Islamic Republic of)	●	●

Country/Territory/Area	Delta	Omicron
Iraq	●	●
Ireland	●	●
Israel	●	●
Italy	●	●
Jamaica	●	●
Japan	●	●
Jordan	●	●
Kazakhstan	●	●
Kenya	●	●
Kiribati	-	●
Kosovo[1]	○	●
Kuwait	●	●
Kyrgyzstan	●	●
Lao People's Democratic Republic	●	●
Latvia	○	●
Lebanon	●	●
Lesotho	●	-
Liberia	●	-
Libya	●	-
Liechtenstein	○	○
Lithuania	○	●
Luxembourg	●	●
Madagascar	-	-
Malawi	●	●
Malaysia	●	●
Maldives	●	●
Mali	●	○
Malta	○	●
Martinique	●	●
Mauritania	●	●
Mauritius	●	●

Country/Territory/Area	Delta	Omicron
Mayotte	●	●
Mexico	●	●
Monaco	●	●
Mongolia	●	●
Montenegro	○	○
Montserrat	●	●
Morocco	●	●
Mozambique	●	●
Myanmar	●	●
Namibia	●	●
Nepal	●	●
Netherlands	●	●
New Caledonia	●	●
New Zealand	●	●
Nicaragua	●	●
Niger	●	●
Nigeria	●	●
North Macedonia	○	○
Northern Mariana Islands (Commonwealth of the)	●	●
Norway	●	●
Occupied Palestinian Territory	●	●
Oman	●	●
Pakistan	●	●

Country/Territory/Area	Delta	Omicron
Palau	○	○
Panama	●	●
Papua New Guinea	●	●
Paraguay	●	●
Peru	●	●
Philippines	●	●
Poland	●	●
Portugal	●	●
Puerto Rico	●	●
Qatar	●	●
Republic of Korea	●	●
Republic of Moldova	●	●
Romania	●	●
Russian Federation	●	●
Rwanda	●	●
Réunion	●	●
Saba	●	●*
Saint Barthélemy	●	●
Saint Kitts and Nevis	●	●
Saint Lucia	●	●
Saint Martin	●	●
Saint Pierre and Miquelon	●	●
Saint Vincent and the Grenadines	●	●

Country/Territory/Area	Delta	Omicron
Sao Tome and Principe	○	-
Saudi Arabia	●	●
Senegal	●	●
Serbia	●	○
Seychelles	●	●
Sierra Leone	●	●
Singapore	●	●
Sint Maarten	●	●
Slovakia	●	●
Slovenia	●	●
Solomon Islands	●	●
Somalia	●	-
South Africa	●	●
South Sudan	●	●
Spain	●	●
Sri Lanka	●	●
Sudan	●	●
Suriname	●	●
Sweden	●	●
Switzerland	●	●
Thailand	●	●
Timor-Leste	●	●
Togo	●	●
Tonga	-	○

Country/Territory/Area	Delta	Omicron
Trinidad and Tobago	●	●
Tunisia	●	●
Turkey	●	●
Turks and Caicos Islands	●	●
Uganda	●	●
Ukraine	○	●
United Arab Emirates	●	●
United Kingdom	●	●
United Republic of Tanzania	●	●
United States Virgin Islands	●	●
United States of America	●	●
Uruguay	●	●
Uzbekistan	○	●
Vanuatu	●	-
Venezuela (Bolivarian Republic of)	●	●
Viet Nam	●	●
Wallis and Futuna	-	-
Yemen	-	-
Zambia	●	●
Zimbabwe	●	●

\*Newly reported in this update. "●" indicates that information for this variant was received by WHO from official sources. "○" indicates that information for this variant was received by WHO from unofficial sources and will be reviewed as more information becomes available. \*\*Includes countries/territories/areas reporting the detection of VOCs among travelers (e.g., imported cases detected at points of entry), or local cases (detected in the community). Excludes countries, territories, and areas that have never reported the detection of a variant of concern.

See also [Annex 2: Data, table, and figure notes](#)

## Annex 2. Data, table, and figure notes

Data presented are based on official laboratory-confirmed COVID-19 cases and deaths reported to WHO by country/territories/areas, largely based upon WHO [case definitions](#) and [surveillance guidance](#). While steps are taken to ensure accuracy and reliability, all data are subject to continuous verification and change, and caution must be taken when interpreting these data as several factors influence the counts presented, with variable underestimation of true case and death incidences, and variable delays to reflecting these data at the global level. Case detection, inclusion criteria, testing strategies, reporting practices, and data cut-off and lag times differ between countries/territories/areas. A small number of countries/territories/areas report combined probable and laboratory-confirmed cases. Differences are to be expected between information products published by WHO, national public health authorities, and other sources.

Due to public health authorities conducting data reconciliation exercises that remove large numbers of cases or deaths from their total counts, negative numbers may be displayed in the new cases/deaths columns as appropriate. When additional details become available that allow the subtractions to be suitably apportioned to previous days, graphics will be updated accordingly. A record of historic data adjustment made is available upon request by emailing [epi-data-support@who.int](mailto:epi-data-support@who.int). Please specify the countries of interest, time period, and purpose of the request/intended usage. Prior situation reports will not be edited; see [covid19.who.int](https://covid19.who.int) for the most up-to-date data. COVID-19 confirmed cases and deaths reported in the last seven days by countries, territories, and areas, and WHO Region (reported in previous issues) are now available at: <https://covid19.who.int/table>.

‘Countries’ may refer to countries, territories, areas or other jurisdictions of similar status. The designations employed, and the presentation of these materials do not imply the expression of any opinion whatsoever on the part of WHO concerning the legal status of any country, territory, or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement. Countries, territories, and areas are arranged under the administering WHO region. The mention of specific companies or of certain manufacturers’ products does not imply that they are endorsed or recommended by WHO in preference to others of a similar nature that are not mentioned. Errors and omissions except, the names of proprietary products are distinguished by initial capital letters.

<sup>[1]</sup> All references to Kosovo should be understood to be in the context of the United Nations Security Council resolution 1244 (1999). In the map, the number of cases of Serbia and Kosovo (UNSCR 1244, 1999) have been aggregated for visualization purposes.

## Technical guidance and other resources

- [WHO technical guidance](#)
- [WHO COVID-19 Dashboard](#)
- [WHO Weekly Operational Updates on COVID-19](#)
- [WHO COVID-19 case definitions](#)
- [COVID-19 Supply Chain Inter-Agency Coordination Cell Weekly Situational Update](#)
- [Research and Development](#)
- [Open WHO courses on COVID-19](#) in official UN languages and in [additional national languages](#)
- [WHO Academy COVID-19 mobile learning app](#)
- [The Strategic Preparedness and Response Plan](#) (SPRP) outlining the support the international community can provide to all countries to prepare and respond to the virus
- [EPI-WIN: tailored information for individuals, organizations, and communities](#)
- Recommendations and advice for the public: [Protect yourself](#); [Questions and answers](#); [Travel advice](#)