

# Weekly Epidemiological Monitor

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## **Current major event**

## COVID-19: monitoring and evaluation of the response in the EMR

As monitoring and evaluation (M&E) is an essential component of emergency response, WHO Regional Office for the Eastern Mediterranean has developed an M&E framework for monitoring of COVID-19 activities. The objective of the M&E framework is to improve efficiency, effectiveness and timeliness of response to the COVID-19 pandemic through the monitoring of WHO and Member State activities. This will lead to better practices, adaptation of resources to needs, timely decision making, and improved resource mobilization.

#### **Editorial note**

The establishment of the M&E framework occurred with the launch of the regional preparedness and response plan in February 2020. As the pandemic evolved, WHO established M&E frameworks for the three levels of the organization: global, regional, and country levels, which are guided by the logical framework.

All regions collaborated closely with the global M&E team to develop the global M&E framework. The global framework incorporates indicators for each of the nine pillars of the global strategic preparedness and response plan (SPRP): coordination and planning, risk communication and community engagement, surveillance, points of entry, national laboratories, infection prevention and control, case management, operations supply and logistics, essential health services, as well as cross-cutting indicators. In addition to WHO, the global framework also allows other UN agencies and partners to monitor activities. A total of 44 indicators will be reported by headquarters (25 indicators), regional IMSTs (17 indicators), and partners (2 indicators).

The regional framework incorporates indicators for each of the work areas of the regional SPRP. Development of regional key performance indicators (KPIs) took into account measurability, feasibility, technical input, and alignment with global indicators. Thirty-six indicators for the regional framework will be reported by WHO headquarters or partners (5 indicators); regional incident management support team (6 indicators); and WHO country offices (21 indicators). Using the same approach, further KPIs were developed to assess country level activities, in the areas of laboratory and diagnosis; surveillance and reporting; case management, investigation, and treatment; healthcare settings; and partnership and coordination. A total of 26 indicators of

World Health

World Case Management

OSL

Health Services

### Countries with coordination

Total Confirmed

Cases

World Funding Received

### Countries with community

engagement strategies

### Countries with community

engagement strategies

### Countries with community

Engagement strategies

### Countries with IPC Focal

Points

### Points

### Points

### Countries with IPC Focal

Points

### Homepage

### Countries with IPC Focal

### Points

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Figure I

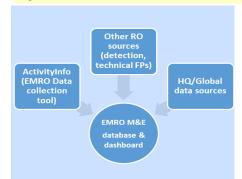


Figure 2

varying periodicities are included for the country level. Many indicators are used for monitoring at more than one organizational level. A regional dashboard has been developed in order to allow visualization of the regional data as well as a snapshot of the country situation (figure 1). This dashboard draws upon several data sources including ActivityInfo (the regional data collection tool); other regional sources such as detection or supplemental data from regional focal points; and global data sources (figure 2).

With the framework been established, the next steps will be to continue ongoing data collection; iterative revision of KPIs as during quarterly reviews; necessary continued development of communication outputs; and programme adjustments as necessary based on reported data. Challenges in implementing the framework include lack of data due to various reasons, with some countries not being able to report due to lack of human resources or capacity to do so. Other countries have disrupted health systems or are directly impacted by complex humanitarian crises that make provision of this data extremely difficult. The regional office is currently working with country support teams and individual countries to develop context-specific strategies to combat these challenges.

### **Update on outbreaks**

in the Eastern Mediterranean Region

#### **COVID-19** in 22 EMR countries

# Current public health events of concern

[cumulative N° of cases (deaths), CFR %]

## Coronavirus disease 2019 (COVID-19): 2019-2020

2017-2020	
Afghanistan	[36 157 (1259), 3.5%]
Bahrain	[38 747 (137), 0.4%]
Djibouti	[5039 (58), 1.2%]
Egypt	[91 583 (4558), 5%]
Iran (Islamic Republic of)	[288 839 (15484), 5.4%]
Iraq	[107 573 (4284), 4%]
Jordan	[1154 (11), 1%]
Kuwait	[63 309 (429), 0.7%]
Lebanon	[3582 (47), 1.3%]
Libya	[2547 (58), 2.3%]
Morocco	[19 645 (305), 1.6%]
occupied Palestinian territory (oPt)	[12 795 (78), 0.6%]
Oman	[74 858 (371), 0.5%]
Pakistan	[273 113 (5822), 2.1%]
Qatar	[109 036 (164), 0.2%]
Saudi Arabia	[264 973 (2703), 1%]
Somalia	[3178 (93), 2.9%]
Sudan	[11 385 (717), 6.3%]
Syrian Arab Republic	[627 (36), 5.7%]
Tunisia	[1443 (50), 3.5%]
United Arab Emirates	[58 562 (343), 0.6%]
T.7	[1 (50 (455) 00 00/]

Yemen

[1678 (475), 28.3%]