Preliminary observations

1. Applying **only** a shielding intervention does not reduce the number of deaths in the camp. However:

– It does not increase the number of deaths either. This is particularly relevant for the shielded population, since a possible outcome of the model could be that shielding together vulnerable population will increase the number of deaths if there is an outbreak within this population.

– This is true as soon as the conditions in the shielded area in terms of the number of contacts between people remain similar to the original conditions. Our model considers an increase of (FORMULA) in the number of contacts within the vulnerable population due to an increase in the proximity. We cannot foresee which would be the consequences if this number increases (e.g. shielding them within an isolation center) and we do not recommend this possibility.

2. Shielding interventions delay the spread of the virus within the population.

– Results for whole population.

– Results for shielded population only.

– A caveat is that the the virus will remain in the camp for a longer time, therefore the delay in the shielding intervention should go hand in hand with additional interventions.

3. Evacuation of symptomatic population to isolation centers significantly reduces the number of deaths.

– This result is valid even if a small number of patients is evacuated (NUMBER), and it saturates when (FRACTION WITH RESPECT TO THE INFECTED MAX NUMBER IN NULL MODEL).

– In our model the fate of evacuated population is the same than if it would remain in the camp.

– Therefore, we do not consider the consequences that the isolating people in the same isolation center will have in the development of their disease nor in the infection of carers managing this centers.

– Our model considers that the evacuation happens as soon as an individual present symptoms. We haven’t tested how a delay in the evacuation could affect the spread of the virus. However, this assumption could be approached if systematic testing is performed in the population.

4. There is no significant effect if a complete lockdown is performed in the shielded population after a first symptomatic case in the orange zone appears.

– This result is possibly an artefact of the type of simulations performed, and would also be affecting the outcome of results in 1. Moving to a stochastic framework is highly recommended.

5. We haven’t tested the effect of self-isolation but, as for Western countries, it will have positive effects if it is possible in any extent. If a maximum self-isolation value can be estimated from the field it could be tested the effect.