

# Coronavirus disease (COVID-19)

## Situation Report – 123

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### Highlights

[WHO and United Nations High Commissioner for Refugees \(UNHCR\) joined forces to improve health services for refugees, displaced and stateless people.](#) WHO and UNHCR signed a new agreement to strengthen and advance public health services for the millions of displaced people around the world. A key aim this year will be to support ongoing efforts to protect some 70 million displaced people due to COVID-19.

[WHO has supported the Smithsonian Science Education Center and InterAcademy Partnership to launch a new COVID-19 rapid-response guide](#) for young people aged 8–17 years, titled [COVID-19! How can I protect myself and others?](#). The guide, which is based on the 2030 Sustainable Development Goals, aims to help young people understand the science and social science of COVID-19 as well as help them take action to keep themselves, their families and communities safe.

[WHO has launched a new search feature for questions on COVID-19.](#) [COVID-19 webpage](#) now features an enhanced natural language processing search bar, which understands questions posed in everyday language and more accurately delivers answers to those queries.

WHO and partners have produced [guidance on laboratory biosafety related to the testing of clinical specimens](#) and [guidance on the repatriation of COVID-19 human remains by air](#), both of which are [Subject in Focus](#)

### Situation in numbers (by WHO Region)

Total (new cases in last 24 hours)

<b>Globally</b>	4 993 470 cases (100 284)	327 738 deaths (4 482)
<b>Africa</b>	71 752 cases (3 405)	1 981 deaths (71)
<b>Americas</b>	2 220 267 cases (54 264)	131 605 deaths (2 956)
<b>Eastern Mediterranean</b>	389 588 cases (13 209)	10 648 deaths (180)
<b>Europe</b>	1 966 244 cases (19 634)	171 327 deaths (1 044)
<b>South-East Asia</b>	173 159 cases (8 934)	5 347 deaths (207)
<b>Western Pacific</b>	171 748 cases (838)	6 817 deaths (24)

## Subject in Focus: Interdisciplinary and interagency collaboration for the transportation of clinical samples and human remains

It is important that the transportation of dangerous goods, in particular infectious substances, is conducted safely and in compliance with regulations. To encourage this, WHO has been in close collaboration with UN specialised agencies such as the International Civil Aviation Organization (ICAO) and other agencies in official relations with WHO under the Framework of Engagement with non-State actors, including the International Air Transport Association (IATA).

Such collaboration has been indispensable from the beginning of the COVID-19 pandemic to ensure and timely shipment of clinical samples.

of COVID-19 clinical samples and cultures, but also ensured the compliance of IATA member air operators. WHO has also published [guidance on laboratory biosafety related to the testing of clinical specimens](#) of patients that meet the case definition of COVID-19.

Building on these partnerships with ICAO and IATA, a collaborative document providing [guidance on the repatriation of COVID-19 human remains by air](#)<sup>1</sup> has also been issued. This was prepared in collaboration with US CDC, a WHO Collaborating Centre for Biosafety and Biosecurity, to which WHO provided technical expertise in relevant subject matters, including biological safety, points-of-entry, risk assessment, and infection prevention and control.

Repatriation in this context is defined as the transportation of human remains of COVID-19 infected cases from one country to another for burial purposes, at the request of the next-of-kin. The process is complex and requires careful arrangements and proper coordination. At present there is no universally applicable standard or treaty but the Strasbourg Agreement on the Transfer of Corpses of the Council of Europe, which was agreed by some 20 states, provides a good reference point.

Key issues that need to be considered when managing COVID-19 related repatriation of human remains includes:

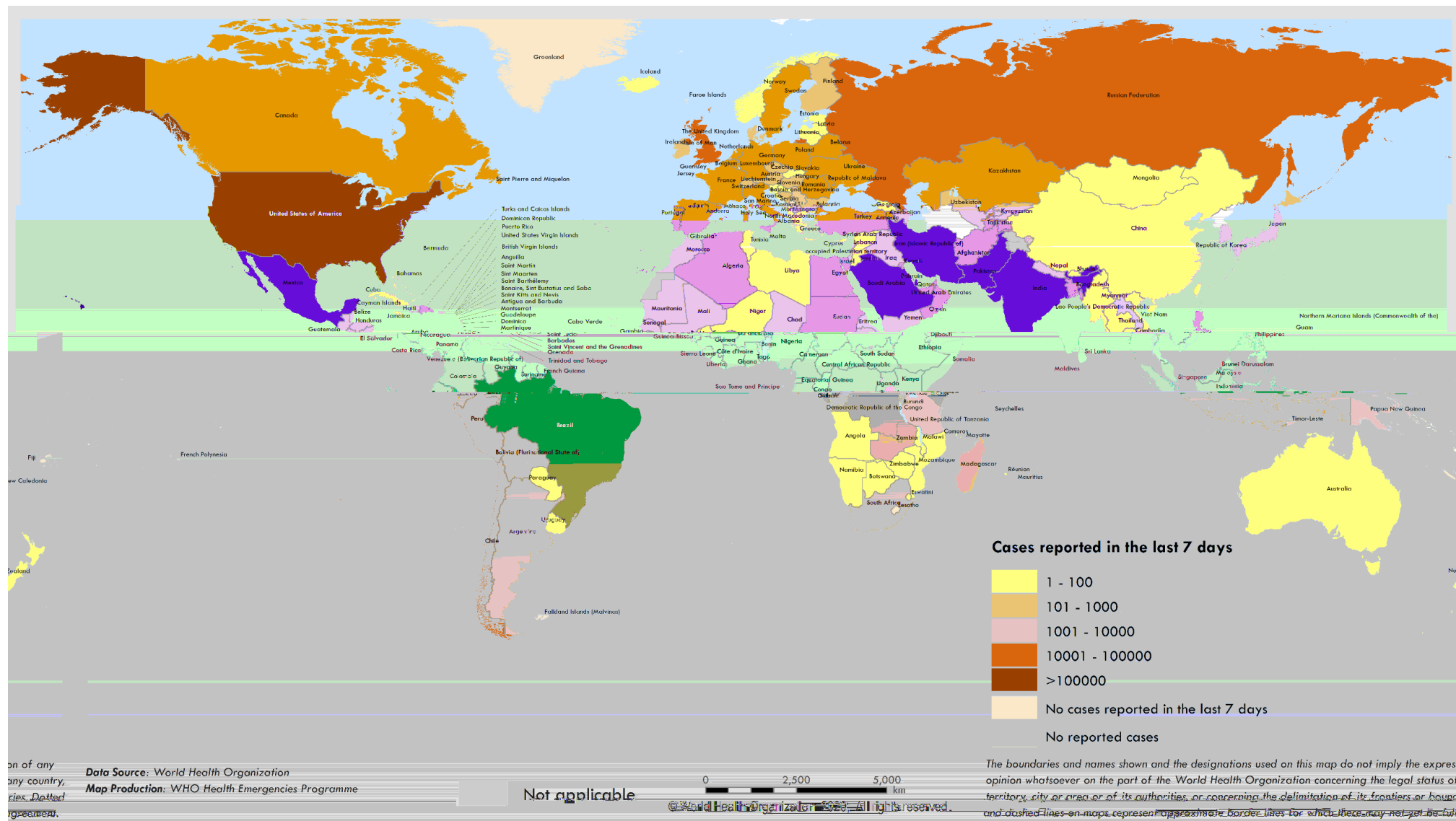
- 1) Specific guidance on PPE for mortuary workers, religious leaders or others who may have direct contact with the deceased;
- 2) Respecting the dignity of the dead and their families according to cultural and religious traditions;
- 3) Encouraging practices that balance the rights of the family with funerary practices and risks of exposure to infection on a cases-by-case basis; and
- 4) Various and sometimes competing regulations and requirements of countries of origin, transit and destination as well as aircraft operators.

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<sup>1</sup> Also see <https://www.icao.int/Security/COVID-19/EBandSL/eb027e.pdf>

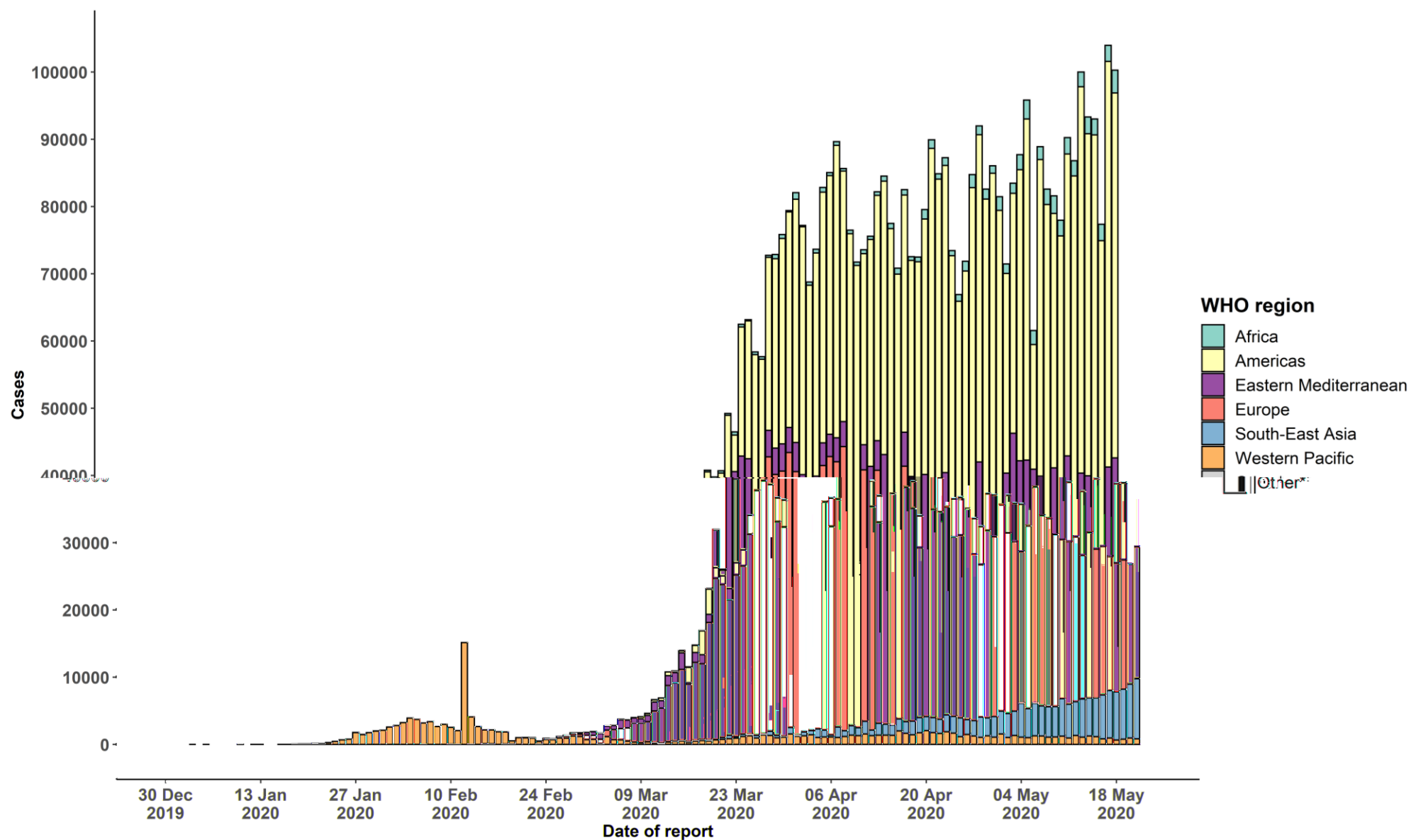
# Surveillance

Figure 1. Number of confirmed COVID-19 cases reported in the last seven days by country, territory or area, 16 May to 22 May\*\*



\*\*See [Annex 1](#) for data, table and figure notes.

**Figure 2. Number of confirmed COVID-19 cases, by date of report and WHO region, 30 December 2019 through 22 May 2020\*\***



\*\*See [Annex 1](#) for data, table and figure notes.

Table 1. Countries, territories or areas with reported laboratory-confirmed COVID-19 cases and deaths, by WHO region. Data as of 10 AM CEST, 22 May 2020\*\*

Reporting Country/ Territory/Area	Total confirmed cases	Total confirmed new cases	Total deaths	Total new deaths	Transmission classification <sup>i</sup>	Days since last reported case
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Reporting Country/ Territory/Area	Total confirmed cases	Total confirmed new cases	Total deaths	Total new deaths	Transmission classification <sup>i</sup>	Days since last reported case
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Reporting Country/ Territory/Area	Total confirmed cases	Total confirmed new cases	Total deaths	Total new deaths	Transmission classification <sup>i</sup>	Days since last reported case
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Total new deaths	Transmission classification <sup>i</sup>	Days since last reported case
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Reporting Country/ Territory/Area	Total confirmed cases	Total confirmed new cases	Total deaths	Total new deaths	Transmission classification <sup>i</sup>	Days since last reported case
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Reporting Country/ Territory/Area	Total confirmed cases	Total confirmed new cases	Total deaths	Total new deaths	Transmission classification <sup>i</sup>	Days since last reported case
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Reporting Country/ Territory/Area



Reporting Country/ Territory/Area	Total confirmed cases	Total confirmed new cases	Total deaths	Total new deaths	Transmission classification <sup>i</sup>	Days since last reported case
E						
Subtotal for all regions	4 992 758	100 284	327 725	4 482		
Grand total	4 993 470	100 284	327 738	4 482		

**\*\***See [Annex 1](#) for data, table and figure notes.

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## Technical guidance and other resources

- To view all technical guidance documents regarding COVID-19, please go to [this webpage](#).
- Updates from WHO regional offices
  - [WHO AFRO](#)
  - [WHO EMRO](#)
  - [WHO EURO](#)
  - [WHO PAHO](#)
  - [WHO SEARO](#)
  - [WHO WPRO](#)
- [Research and Development](#)
- [Online courses on COVID-19](#) and in [additional national languages](#)
- [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
- [WHO Health Emergency dashboard](#)
- [Weekly COVID-19 Operations Updates](#)

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## Recommendations and advice for the public

- [Protect yourself](#)
- [Questions and answers](#)
- [Travel advice](#)
- [EPI-WIN](#): tailored information for individuals, organizations and communities

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## Case definitions

WHO periodically updates the [Global Surveillance for human infection with coronavirus disease \(COVID-19\)](#) document which includes surveillance definitions.

### Definition of COVID-19 death

COVID-19 death is defined for surveillance purposes as a death resulting from a clinically compatible illness in a probable or confirmed COVID-19 case, unless there is a clear alternative cause of death that cannot be related to COVID disease (e.g. trauma). There should be no period of complete recovery between the illness and death.

Further guidance for certification and classification (coding) of COVID-19 as cause of death is available [here](#).



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## Annex 1: Data, table and figure notes

Caution must be taken when interpreting all data presented. Differences are to be expected between information products published by WHO, national public health authorities, and other sources using different inclusion criteria and different data cut-off times. While steps are taken to ensure accuracy and reliability, all data are subject to continuous verification and change. Case detection, definitions, testing strategies, reporting practice, and lag times differ between countries/territories/areas. These factors, amongst others, influence the counts presented, with variable underestimation of true case and death counts, and variable delays to reflecting these data at global level.

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.

they are endorsed or recommended by WHO in preference to others of a similar nature that are not mentioned. Errors and omissions excepted, 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, number of cases of Serbia and Kosovo (UNSCR 1244, 1999) have been aggregated for visualization purposes.

Counts reflect laboratory-confirmed cases and deaths, based on [WHO case definitions](#), unless stated otherwise (see *Country, territory, or area-specific updates and errata*), and include both domestic and repatriated cases.

Other\*: includes cases reported from an international conveyance (Diamond Princess).

Due to the recent trend of countries conducting data reconciliation exercises which remove large numbers of cases or deaths from their total counts, WHO will now display such data as *negative* readers in identifying when such adjustments occur. When additional details become available that allow the subtractions to be suitably apportioned to previous days, graphics will be updated accordingly. Prior situation reports will not be edited; see [covid19.who.int](https://covid19.who.int) for the most up-to-date data.

### Additional table notes

<sup>i</sup> Transmission classification is based on a process of country/territory/area self-reporting. Classifications are reviewed on a weekly basis, may be revised as new information becomes available, and are based on the highest category reported. Differing degrees of transmission may be present within countries/territories/areas. Categories:

- No cases: with no confirmed cases
- Sporadic cases: with one or more cases, imported or locally detected.

- Clusters of cases: experiencing cases, clustered in time, geographic location and/or by common exposures.
- Community transmission: experiencing larger outbreaks of local transmission defined through an assessment of factors including, but not limited to: large numbers of cases not linkable to transmission chains; large numbers of cases from sentinel lab surveillance; and/or multiple unrelated clusters in several areas of the country/territory/area.
- Pending: transmission classification has not been reported to WHO.

ii

similar status.

### **Country, territory, or area-specific updates and errata**

None