



# World Health Organization

**FIFA/COVID-19 virtual press conference – 23 March, 2020**

**Speaker key:**

MH Dr Margaret Harris  
TAG Dr Tedros Adhanom Ghebreyesus  
GI Gianni Infantino  
AB Alisson Becker  
AG Agnes  
MR Dr Michael Ryan  
MI Michael  
MA Bayram  
MK Dr Maria Van Kerkhove  
NO Nobu  
PR Pranai  
PA Pang  
GA Gabriela  
KA Kai  
HE Helen

MH Good morning, good evening, good afternoon, everybody, and thank you for joining this press briefing. We've got a very special guest we're highly honoured to have with us. Dr Tedros will tell you more.

TAG Yes, thank you very much, Margaret, and good morning, good afternoon and good evening wherever you are. Less than six months ago WHO and FIFA signed an agreement to work together to promote health through football. We didn't know then what we know now; that a new virus would emerge that would bring many parts of society to a standstill including the beautiful game itself.

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Many football matches have stopped but our collaboration has become even more important during these difficult times. In fact it's given us the opportunity of working together more closely than we imagined with FIFA. Football can reach millions of people, especially younger people, that public health officials cannot.

Today it's my great pleasure to welcome my dear brother, Gianni Infantino, president of FIFA, to talk about our joint campaign to pass the message to kick out coronavirus. I will repeat that. This is a campaign we're starting jointly called pass the message to kick out coronavirus.

I would also like to take this opportunity to thank FIFA for its generous contribution of US\$10 million to the COVID-19 Solidarity Response Fund. Thank you, my brother, for your generous contribution. To date the fund has raised more than US\$70 million in just ten days from more than 187,000 individuals and organisations to help health workers on the front line to do their life-saving work, treat patients and advance research and treatment and vaccines.

I would also like to thank TikTok for its contribution of an additional US\$10 million and for its valuable support in helping to reach its large young audience with reliable health information. Speaking of which, our new WhatsApp health alert has now attracted ten million users since we launched it last Friday - this is just in four days - delivering reliable health information directly to their mobile phones. Details on how to sign up are on the front page of our website.

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The Arabic, French and Spanish versions will be launched this week and this is the best way to be connected directly with people. So thank you, Gianni, for your support and the support of the whole footballing community and I would like to give you the floor to say a few words but I would like to also recognise that it's your birthday today so I would like to say happy birthday, my dear brother, and thank you so much for joining us today. Happy birthday, Gianni, again. Thank you.

GI Thank you very much to my dear brother, Dr Tedros, thank you. My heartfelt thanks for the opportunity to be here at the WHO today. First and foremost I would like to express our deepest condolences of course to all the families of those who have lost their lives across the world as victims of the coronavirus. I would also like to thank everyone, especially those involved in the medical profession who continue to put the lives of others in front of their own in fighting this disease. We are all in their debt and their example should encourage us to follow the advice that we are given.

Now regarding the campaign, dear Tedros, dear friends, football means so much to billions of people around the world so it is clear to me that we have to show leadership and solidarity in these difficult days. When you announced, dear Tedros, on a Thursday afternoon at 5:00 that this was a pandemic, on the Friday at 9:00 I was in your office asking, how can football help, what can we do?

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So we have to get the message across the world and football wants to help. This campaign actually came to us, we didn't need to go looking for it. There are no actors in this campaign, just the players themselves and they all want to highlight the advice that is provided to all of us, to all of them by the WHO.

For that I would like to thank all these football players, all the legends who are part of this campaign for making it possible and actually the FIFA teams, dear Tedros, include of course

the greatest footballers in the world but also our 211 member countries and the six continental confederations. Together we are going to roll out this campaign in the next days in videos, in graphics and in many languages so we can really pass the message to kick out coronavirus.

I think this virus has shown to all of us two things; one is how vulnerable we are and the other how global the world has become. Exceptional situations require exceptional measures and global problems require global solutions. We have to make sure that we recover from this by bringing the entire world together as one and reminding everyone that we are all one kind, the humankind. We have to prove that we are capable of extraordinary acts of global solidarity, all together because health comes first; everything else comes after.

So now we have to be strong, we have to follow the guidance of the WHO, of our governments and after we'll have to rebuild our relations maybe and hopefully with more solidarity and understanding for each other.

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Football is ready to play its part on that and we are here for that and I am sure of one thing; that, like in football, by acting together with determination, discipline and teamwork we will win. Thank you.

TAG Thank you. Grazie mille, fratello. Grazie mille, Gianni. Now I would like to call Alisson Becker, WHO ambassador, who is online; the best goalkeeper and he plays for Liverpool and he's from Brazil. Obrigado, Alisson, for joining us and the floor is yours. Please.

AB Hi, Dr Tedros. Hi, everybody. Good morning, good evening, good afternoon. Mr Gianni, first of all, happy birthday to you. I would like to say that this is a great opportunity for me to be together with you, being part of this movement that is starting now, that is starting today, pass the message to kick out the coronavirus.

We football players used to act together, we used to work together, to train together. I know now in this tough moment, tough times everybody has changed their lives, staying home, cannot go out, cannot go in to work. In my case I'm not able to be together with my colleagues, with my team-mates to do what I love, what is my passion. I was made for playing football and now because of these tough times we are not able to do that, to bring happiness to the people through football.

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But we also understand that it is necessary to stay home, it is necessary to think on the next... to be in solidarity. I believe in this moment we have to put our solidarity out. It's the moment that we have to put our passion out and think on the next... I am glad to participate in this movement because the people need the right information. It's necessary in these moments that we have the right information and also that we follow the right information.

I would like to say to the people, follow the information from the local authorities, try to follow the information from WHO. We can trust in them, we can trust that it is the right thing to do and we understand also that health comes first in this moment. It's time, like in football,

to have teamwork; everybody doing their own job. That includes being safe, being at home, following the advice; for example washing hands properly, keeping distance from people.

But we cannot forget that we need now to work as a team so I would like to show my support for pass the message to kick out coronavirus and say to you, thank you for letting me participate in this movement now in these tough times. We also need to trust in ourselves, trust in the human capacity to go through adversity.

It is not the first time in our lives that we need to overcome something bad but now we need the participation of everybody. So I would like again to say, thank you; thank you, Dr Tedros, and thank you, Gianni.

TAG My little Portuguese; muito obrigado, meu irmão. I hope that's the right one; obrigado, my brother. Thank you, Alisson; thank you for being our ambassador.

00:13:58

AB Thanks, obrigado.

TAG Please pass my greetings to your wife also; you both as a pair are helping us as ambassadors so thank you so much. It's good to hear from you today and I look forward also to hear from Natalia some other time. Thank you so much again, thank you, Gianni, my dear brother; grazie mille. Cento anni or cinquecento anni. Thank you.

I would now like to continue with the rest of my remarks on the COVID-19 pandemic. More than 300,000 cases of COVID-19 have now been reported to WHO from almost every country in the world. That's heartbreaking. The pandemic is accelerating. It took 67 days from the first reported case to reach the first 100,000 cases; 11 days for the second 100,000 cases and just four days for the third 100,000 cases. You can see how the virus is accelerating.

But we're not prisoners of statistics, we're not left helpless by standards. We can change the trajectory of this pandemic. Numbers matter because they're not just numbers; they are people whose lives and families have been turned upside-down. But what matters most is what we do. You can't win a football game only by defending; you have to attack as well and my brother, Gianni, can tell you more.

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Asking people to stay at home and other physical distancing measures are an important way of slowing down the spread of the virus and buying time but they are defensive measures that will not help us to win. To win we need to attack the virus with aggressive and targeted tactics, testing every suspected case, isolating and caring for every confirmed case and tracing and quarantining every close contact.

We recognise that some countries are struggling with the capacity to carry out these offensive measures. Several countries have shown that mobilising resources internally from less affected regions is one way to increase capacity and help the overwhelmed health system in some regions. We are also grateful that several countries have sent emergency medical teams to care for patients and train health workers in other countries that need support.

This is an incredible example of international solidarity but it's not an accident. WHO has been working with countries for years to build a network of emergency medical teams for exactly this eventuality, to provide surge capacity of high-quality health professionals who can be deployed to care for patients and save lives.

I would like to use this opportunity to thank all countries who have contributed their emergency medical teams to support other countries. Health workers can only do their jobs effectively when they can do their jobs safely. We continue to hear alarming reports from around the world of large numbers of infections among health workers. Even if we do everything else right if we don't prioritise protecting health workers many people will die because the health worker who could have saved their lives is sick.

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As you know, WHO has been working hard with many partners to rationalise and prioritise the use of personal protective equipment. Addressing the global shortage of these life-saving tools means addressing every part of the supply chain from raw materials to finished products. Measures put in place to slow the spread of the virus may have unintended consequences of exacerbating shortages of essential protective gear and the materials needed to make them.

Solving this problem requires political commitment and political co-ordination at the global level. This week I will be addressing heads of state and government from the G20 countries. Among other issues I will be asking them to work together to increase production, avoid export bans and ensure equity of distribution on the basis of need. We need unity in the G20 countries who have more than 80% of the global GDP.

Commitment, political commitment at the G20 level means a very strong solidarity that can help us to move forward and fight this pandemic in the strongest terms possible. So while asking the three specific issues I said, the most important ask to G20 leaders is solidarity; to be one and to act as one because they have the biggest stake in the world in all respects.

We also recognise that there is a desperate need for effective therapeutics. There is currently no treatment that has been proven to be effective against COVID-19. It's great to see the level of energy now being directed to research and development against COVID-19. Small, observational and non-randomised studies will not give us the answers we need. Using untested medicines without the right evidence could raise false hope and even do more harm than good and cause a shortage of essential medicines that are needed to treat other diseases.

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That's why WHO has launched the solidarity trial, to generate robust, high-quality evidence as fast as possible. I'm glad that many countries have joined the solidarity trial. That will help us to move with speed and volume. The more countries that sign up to the solidarity trial and other large studies the faster we will get results on which drugs work and the more lives we will be able to save. Through the solidarity trial we will move faster and we will do bigger, and of course with good quality; faster, bigger and good quality.

I would like to end by reminding everyone that although COVID-19 is dominating the world's attention there is another respiratory disease that's both preventable and treatable but which kills 1.5 million people every year and that disease is the old-timer, tuberculosis. As you know, tomorrow is World TB Day, an opportunity to remind world leaders of the commitments they have made to end the suffering and death caused by this ancient and terrible disease.

The world is rightly responding to COVID-19 with urgency and purpose. We call on the global community to harness that same urgency and purpose for the fight against tuberculosis and for a healthier, safer, fairer world for everyone. The rule of the game; to kick COVID-19 out, as we have agreed with my brother Gianni; it's to kick it out and that game is solidarity.

So myself and my brother, Gianni, ask for solidarity to kick out this virus. I thank you. Grazie mille, again, my brother, for joining today.

00:26:16

MH Thank you, Dr Tedros. As Dr Tedros said, solidarity and leadership in all spheres is critical for ending this outbreak and that is exactly what the football legends involved in this are doing, leading the way. We have a video now which will show you exactly what that means.

[Video plays]

00:28:28

GI If I may, I would like to express a word of thanks to my dear brother, Tedros. Thanks very much. Thanks to Alisson as well for the birthday wishes. At least on the day of my 50<sup>th</sup> birthday I am doing something useful, I hope. Let me just say that we are really delighted to have Alisson as a WHO ambassador and being part of the team. His approach is being echoed, as you have seen, by players from all over the world. They might be rivals on the pitch but their message to tackle coronavirus is united. They are, we are all part of the same team.

I would also like to thank all the players from all over the world, all the legends who are part of this campaign, of this FIFA/WHO team and this is only the beginning of the campaign and the beginning of our fight together but we will continue. We will continue in solidarity and all together and, as you said, together we will win. Thank you very much.

00:29:48

TAG Thank you, my brother.

MH Now we move on to the second half. I don't have a whistle. Now we can open the meeting, the briefing for questions. We do have a referee here, which is a good thing. If you wish to stay you're welcome. Otherwise you're welcome also to retire. We now open it for questions from the media who are all online. The first question we have is from Pamela, Uganda Radio Network. Pamela, Uganda Radio Network, you have the floor. Can you hear me?

Looks as if we've got a problem with our line. I will remind everybody while the technicalities are being fixed that if you wish to ask a question use the raise your hand icon on your screen. If you're calling in use the hashtag nine [sic]. One question for journalists; please don't ask five questions. There are many, many, many of you and you're all waiting. The next question... It looks as if Pamela has either left the call... so the next question is from Agnes of AFP. Agnes, are you there?

AG Yes, hello. Do you hear me?

MH Very well. Please go ahead.

AG Hi, everybody. I have a question concerning Italy. The question is about the situation there. I wanted to know if Dr Tedros is recommending that supermarkets should be closed in order that people shouldn't go any more into the streets and that it should be the government who would be in charge of organising the distribution of food to people in their houses given the tragic situation the country is living in. Thank you.

00:32:17

MR Good afternoon. From WHO's perspective this is clearly a decision for national and local public health authorities. They have to obviously make decisions based on what they see on the ground. In most situations people have been able to visit the local supermarkets with proper spacing and distancing. Many have used limited access and only allowing a certain number of people to visit at one time so the arrangements are really dependent on the local transmission situation and it's really up to local authorities to decide how best to manage the physical distancing issue.

If supermarkets are closed then obviously there's a major logistics issue on how to actually get food to people so each government must make that decision on their abilities to replace that service should that service need to be curtailed so we will very much leave that to Italian authorities to make that decision.

MH Thank you, Dr Ryan. I should have said, we have our eight top team here as usual, Dr Ryan and Dr Van Kerkhove, as well as our director-general, Dr Tedros. The next question comes from Michael from CNN. Michael, are you there?

MI I'm here. Can you hear me?

MH Go ahead, please.

00:33:44

MI Thank you for taking my call; Michael [Unclear]; I'm a contributor to CNN Opinion. I'm dialling in from British Columbia in Canada, where we've now reached 424 cases, somewhere between the numbers in Hong Kong and Singapore. My question is about sport, since that's the theme of the day. Dr Tedros and colleagues, as you know, the Canadian Olympic Committee has said that it will not be sending its athletes to Tokyo for the health and welfare of their members and also I think we're getting the same message from Australia and elsewhere.

My question is, a lot of national Olympic committees are looking to WHO for guidance on this ahead of the IOC making a decision. I know it's a very sensitive topic, I know there are business and other considerations but I really think a lot of athletes who cannot go to training facilities, who are caring for loved ones even perhaps suffering from COVID-19 are looking for some kind of guidance from you as time is really ticking on. Thank you, sir.

MR Thank you for the question. The future of the Games is clearly under very, very close observation at the moment and you'll have heard, the Premier of Japan himself has spoken to this and has expressed the doubts about the games as well. We are feeding into the IOC and the Japanese Government and the Tokyo 2020 Committee's deliberations on this and I believe a decision will be made very soon regarding the future of the Games.

The decision to postpone the Games would be purely a decision of the Japanese Government and the IOC but we are obviously in the process of offering them risk advice and as we've said previously, we have every confidence that the Japanese Government and the IOC will not proceed with any Games should there be dangers to athletes or spectators.

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MH Thank you, Dr Ryan. I'll now go to Bayram from the Andalu agency in Turkey. Bayram, are you on the line?

BA Good afternoon, good evening, everybody. Mr Tedros [sic], as you know, there is a great panic in many countries in Europe as the COVID-19 pandemic is spreading rapidly. People don't know what to do and panic is at a high level. Do you have a strategy and plan to prevent psychologically traumatic situations that the COVID-19 may create or cause in humans? Thank you.

MK Thank you for that question. It's a very important one in terms of the way people are feeling as numbers increase and as, in some countries, the situation gets worse before it will get better. What is very important for everyone across the world is to know what they can do to protect themselves and what they can do to protect their families.

We need everyone too be well-informed and it's important that everyone knows where to get good, reliable information whether that's through WHO to know how to protect yourself and your family or whether that's through your national governments; not only to know how to protect yourself but know what is the plan; what are the plans of the government that are being enforced and to know what your role to play is in that.

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It's important that that fear that people have, which is normal, be used in a productive way, turning that fear, turning that energy into ways in which you can keep yourself busy if you have to stay home because of national measures. Just because we have mentioned physical distancing it doesn't mean that you have to be socially disconnected with your loved ones so find ways in which you can communicate with your loved ones and your families to keep that connection while you're still being physically apart.

Practical things; we've been mentioning washing our hands, making sure that you do good hand hygiene and if you don't have access to soap and water use an alcohol-based rub. Make



sure that you use your respiratory etiquette - you just heard the five from the video just now - making sure that you don't touch your face. These are things that everybody can do; making sure that you keep your distance from individuals especially if you're outside of your home, making sure you're keeping your distance from people and if you're feeling well [sic] stay home.

MH Thank you very much, Dr Van Kerkhove. The next question is for Nobu from GG Press [?]. Nobu, are you on the line?

NO Yes, thank you. Do you hear me? Hello?

MH Very well, please go ahead.

NO Okay, thank you very much. My name is Nobu from GG Press, Japanese news agency. My question is about Japan. If you look up the official statistics of Japan it's obvious that reported cases in Japan are much fewer than other large-population countries.

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But there are some critics saying that the scope of tests carried out there is not enough so the reality of the infection is not reflected in the official statistics. But on the other hand, the hospitals or clinics in Japan are not overloaded so there are not so many patients with suspicious symptoms so I'm a bit confused if Japan is doing well in containing the virus or what we are seeing is just the tip of the iceberg of a much bigger infection. What's your view on this topic? Thank you very much.

MK I can start with that. I just touched my face; I shouldn't touch my face. What we know works in countries is countries' aggressive actions in terms of finding cases, testing those cases, isolating those cases, treating them and making sure that there is comprehensive contact tracing. We have seen that in Japan and we've seen that in a number of countries.

We know that when contacts are identified if they are quarantined and then followed so that they are tested if they develop symptoms, we know that is a very effective way in which we can prevent onward transmission. We know that mobilising your population and getting your population to be involved in this response, performing all of these actions of personal measures and hand hygiene and respiratory etiquette, staying home when necessary; we know that that works.

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But testing is a key part of the strategy globally and you've heard the director-general emphasise and you've heard Mike and myself emphasise the need to do testing and to do this strategically, making sure you're focusing on your suspect cases and that you're testing your contacts who develop symptoms. These are fundamental actions that need to be part of a comprehensive approach all countries need to take to tackle this virus.

We have seen in several countries the effectiveness of these measures in terms of the reduction in cases. We've also seen in a number of countries they're looking for additional cases through existing respiratory disease systems, for example looking at their ILI or their influenza-like illness surveillance systems that have been established for influenza.

Several countries are looking at those individuals who have respiratory disease who show up through those surveillance systems to test for COVID-19 to see if the virus is circulating and we're gaining good insight from those countries to find out how many of those are positive and it seems to be low in several countries that are doing this.

So it's a comprehensive approach that we need all countries to take, outlining through testing, case identification, contact tracing, making sure these public health measures, these physical distancing measures, strong government leadership, an all-of-government approach have been successful in reducing transmission in several countries.

MH Now we have... Pamela managed to send us her question by text. This is Pamela from Uganda. She's got an excellent question. She wants to know, with the increasing cases on the African continent would you say that Africa is prepared to fight this disease, especially in terms of equipment? What do you think needs to be done to get Africa to the position that they need to be in to have a fair chance to fight the disease? Is this one for you, Dr Tedros?

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MR I think we've seen the evidence in this pandemic thus far that no-one has been quite ready to deal with this disease and countries in Africa are in no different a situation and some in a more precarious situation. Having said that, countries in Africa have a long history and a very recent history of dealing with large-scale epidemics. We've seen many countries in Africa deal with large-scale cholera outbreaks over the last couple of years, deal with lassa fever, deal with measles, deal with meningitis, with multiple outbreaks of Ebola.

In my more than 25 years responding to outbreaks I have found African countries and particularly communities in Africa to be exceptionally resilient and hugely creative and capable of mounting responses right from the community level up. Clearly we need strong governance, we need strong, integrated government leadership. The UN system is fully activated to support countries in Africa in preparation.

We have established laboratory diagnostic capacities in every country. We have sent personal protective equipment to nearly every country in Africa. Our country offices are deployed in all countries in Africa and have been there for years and are working very hard with government authorities on integrated national action plans for response and again all countries in Africa have those plans now in place.

00:44:24

The challenge is implementing those plans at all levels from the community right the way through to the head of government. We're seeing strong leadership from heads of government in Africa but the challenges are great. There are many large countries in Africa with high populations. Africa has become an urban continent over the last 20 years; more than 50 of people in Africa live in cities or increasingly in high-density peri-urban settings so the challenges are great.

We have seen what can happen when infectious diseases can spread very, very quickly in those situations so there's a huge need to protect populations from infection. There are highly vulnerable populations in many countries. There are large numbers of refugees which are

very kindly hosted by many countries. In fact Africa has the highest burden of refugees in the world and African countries host more refugees than any other continent.

There are large numbers of vulnerable patients who have HIV, are living with HIV and many other challenges but Africa is strong and with good leadership, with rapid implementation we can save lives too and I have every faith that African leaders are doing everything possible to prepare their countries for this disease and reacting and the United Nations system and the World Health Organization are there with them to stand and fight.

TAG Yes, thank you. Mike has already said most of it but I would just like to add a few words. With many of the countries in Africa there is alignment between WHO and African countries. One, we're very encouraged to see that many countries are following the all-of-government an all-of-society approach with strong political commitment at the highest level and mobilising all sectors because this is not about one sector or it's not about the health sector. It's about all sectors and the whole government should act in unison. That's one.

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Then on the technical side we're also very encouraged that many countries in Africa are testing although they have meagre resources. From testing they're moving into identifying contacts of confirmed cases and at the same time isolating and this is what we have been proposing and advising many countries.

I hope this will help many countries from Africa to cut the problem from the bud so that's what we would like to encourage them to continue to do; political commitment at the highest level and having a political commitment that mobilises all sectors and at the same time from testing to contact tracing and isolating; continue to do what they're doing. That will really help to suppress and ultimately control the pandemic in the continent.

Of course the number of cases in the African continent is still small but that doesn't mean that it will continue in the same way; it may change but the approach you're using can help in suppressing and controlling it and what we're saying from WHO's side is to continue to do the same but more aggressively and more aggressively, hoping, expecting that the problem could get larger. Thank you.

MH Thank you, Dr Tedros. We're running out of time so I'd really ask all the questioners to try to keep your questions short to give other people a chance. The next journalist on the line is Pranai from ABP News in India. Pranai, are you on the line?

00:49:04

PR Yes, I am online and my question is to the panel. India is seeing a surge in cases right now. You pointed out the aggressive testing and the aggressive strategy in this match against coronavirus. How do you suggest and what is the WHO's observation about the situation in India? There is a shortage of kits so how is WHO going to help the second most populous country on Earth?

MK This is a question that we receive from a number of countries that are really facing some increasing case numbers and the questions are around how we best use the resources that we have. We've been very clear in our messaging that to fight this we really need to find

all of the cases, we need to know where the virus is so that we can tailor our approach to the areas that need it most and to do so we need to find the cases so we need to be testing the suspect cases and testing those contacts, who develops symptoms.

When the outbreaks become large and resources become limited we have recently put out some guidance around how to make some choices about where testing can be used first and foremost, to really understand where that outbreak is, to find patients who are most severe so that they can have treatment.

This binder here is our binder of guidance that we have put out, that we have developed. Our first package of guidance came out on 10<sup>th</sup> January and since then we have been working across the globe with all of our member states, our regional offices, people working in labs, clinicians, IPC specialists and modellers to try to tailor our guidance to best support countries according to the four Cs; according to if they have no cases, if they have sporadic cases, if they have clustering of cases and if they're facing community transmission.

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What we're trying to do through our guidance - and we need you to look at the guidance in full. Our press conferences are ways in which we can highlight some of these key aspects to our guidance but the real detail is what's online. We know not everybody is going to read that but those that do need to read that, who are taking decisions in countries, please look at that in full because we have detailed information there that can help you make decisions, to make a tailored approach, all with the goal of suppressing transmission and ending these outbreaks.

But there are some decisions that may need to be made in certain countries where resources are scarce. At the same time we are working very hard with manufacturers who are developing test kits and the supporting supplies to be able to use those test kits. We are working with countries to increase the number of labs that can actually run these tests so there's a multi-prong approach in terms of how we can support countries through our regional offices and our country offices to build and increase that testing capacity.

MR If I could possibly add specifically on India, obviously India, like China, is a hugely populous country and the future of this pandemic to a greater extent will be determined by what happens in very large, highly populated, densely populated countries so it's really, really important that India continues to take aggressive action at the public health level and at the level of society to contain, control, suppress this disease and to save lives.

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India led the world in eradicating two silent killers or eliminating them in the country; smallpox - one of the greatest successes of mankind - a virus that killed more people on this planet than all the wars put together. India through targeted public health intervention ended that disease and gave a great gift to the world.

India also eliminated polio, another silent killer and did a tremendous job on surveillance in finding cases and vaccinating and doing all the things that need to be done. So India has tremendous capacities; all countries have tremendous capacities when communities are mobilised, when civil society is mobilised, when, as the director-general says, heads of state and government drive an all-of-society approach.

There are no silver bullets here, there are no easy answers. If there were we wouldn't be having to work so hard. We've got measures we can take now while we wait for other solutions and we must take them now so it's exceptionally important that countries like India lead the way and show the world what can be done and do as they have done before, show that aggressive, sustained public health action from community right the way through to head of state can have a profound effect on the trajectory and the outcome of this pandemic.

MH Thank you, Dr Ryan. The next person on the line is Pang Wei from the People's Daily. Pang Wei, are you on the line?

PA Yes, thank you. Can you hear me?

00:54:41

MH Very well. Please go ahead.

PA Thank you. It's [Unclear] with People's Daily, China. Some American officials including secretary of state, Mike Pompeo, criticised China for its handling of COVID-19 in its early stage and continue to call COVID-19 virus Wuhan virus or Chinese virus. What's the WHO's comment and position on that? Thank you very much.

MR I think we've spoken on this issue at a number of press conferences and I think WHO's position on this has been clear in the past and is clear now and I think at this point it's not a core issue and it's an issue that quite frankly is a distraction right now. So I think we need to focus on what we need to do now. There's no blame in this. There's only a future and we choose the future and we have capacities to fight this virus.

It is affecting, as the director-general said, almost every country on the planet, every population and it's not just communities. Everyone can look around at sons, daughters, mothers and fathers and see who's at risk. We need to fight this thing together and I will reserve any comment for later regarding blame.

MH Thank you, Dr Ryan. Now we have Gabriela from Mexico on the line. Gabriela, can you hear me?

GA Yes, thank you for taking my question. Gabriela Sotomayor, Mexico Proceso. Dr Tedros or someone on the panel, if they can answer, how far behind is testing versus the real spreading of the virus? Is it ten times, 100 times, what is your estimate? Are we only looking at the tip of the iceberg?

00:56:48

MK Thank you, Gabriela, for the question around testing and highlighting the importance of testing. With any new virus I think what is the most tremendous story here - and I don't think any of us have ever seen the speed at which testing has been developed for a novel pathogen. As you know, this new virus was identified within days, the sequence was shared a few days later and because of that testing began really across the globe.

With the sharing of the sequences on public platforms labs all over the world were able to develop assays and in doing so the amount of production for testing grew exponentially across the globe. Of course we always need more testing, of course we always need more labs but that's the case for every pathogen, especially an emerging pathogen.

What we are seeing now are countries finding ways in which they're trying to improve the production, the availability, the access, the sharing of these assays so that more testing can be done and what we need are all countries to be focusing on testing as part of a comprehensive strategy and we've mentioned what that strategy entails.

That strategy includes public health measures, it includes physical distancing, it includes a strong government approach, it includes mobilising the population, it includes every single individual knowing what they have to do to fight this pandemic and we've outlined what that is before and testing is a critical part of that but every day we are looking for ways in which production can be increased, in which more labs can be available to do those testings and that testing can be done faster so that we know where this virus is and we can fight it without being blindfolded.

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MR Just to again qualify that, the virus was isolated on January 7<sup>th</sup> and the whole genome sequence was shared with WHO and the world on January 12<sup>th</sup>. It's just ten weeks we've had the genetic sequence of this virus. The fact that so many tests are out there, the fact that there are so many testing platforms available now is a remarkable success for science, for collaboration and for public/private partnership.

So yes, of course, it is very difficult to go to absolute scale on testing while at the same time maintaining quality and maintaining the validity of these tests has been extremely important. So the question you specifically asked; there's no question in some countries that all cases have not been detected and that's been the case in most countries.

But what we've seen is a huge catch-up in testing in most countries and we want to see more. We do say and the DG has said before, test, test, test but again we're not talking here about testing everyone in the community. We need to focus on two priorities; making sure that suspect cases are tested - that is absolutely the central priority - and obviously that people presenting in hospital with clinical symptoms, the ones who are entering the system are also tested as a priority, they would also be suspect cases.

We would also like to see that contacts of cases who are unwell or are showing symptoms also be tested. The measures we have in place now or many countries have in place of movement restrictions and people staying at home and physical distancing; all of these measures are helping to, in some senses, dampen down, push down the intensity of the epidemic.

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But if we have to work our way out of this situation as we gain some success with those strategies we have to be able then to identify who is infected and be very, very quick and agile at identifying who's infected at community level and ensuring that they're isolated.

So testing is important now but testing will become even more important in the coming weeks, not less important so we all have to work hard. We're working very, very hard with both public and private-sector partners, as are all governments, to scale up and make testing more available and to push testing right down through the system but that has to be done with an eye on quality and ensuring that those tests are the best and the highest quality.

MH Thank you, Dr Ryan. We're really running out of time so only two more questions. We'll take one from Kai Kupferschmidt. Kai, are you there?

KA Yes, thank you very much for taking my question. I wanted to ask about the strategy that we're seeing in some countries - the UK has talked about it, the Netherlands are suggesting it. They're basically trying to find a balance between shutting everything down to suppress the virus and letting it spread at a very low level in order to have some semblance of normality.

01:02:07

I'm curious whether the WHO... You've talked very little about the endgame because you're concentrating on what's happening now but I'd really love you to address a little bit how you see the future for all of these countries that are in a shutdown now; how do you see this proceeding?

MR Thanks, Kai. You are correct that this is a very, very important issue because as so many countries around the world have gone into this mode of people staying at home, of movement restriction countries are obviously and justifiably concerned with the social, psychological and economic impacts of those moves.

Countries are doing their best to suppress infection and take pressure out of the epidemic and more importantly off the health system. But we do know that that is very difficult to sustain and therefore how are we going to turn that around - and the DG said it - how do we move from what is a defensive mode into an offensive mode, how do we move from trying to avoid the virus to actually going after the virus?

We've seen this in Ebola; we've seen this in polio. There is a moment at which you have to step forward and go after the virus. In order to do that - and we've seen examples in places like Singapore and Korea where governments haven't had to shut everything down, they've been able to make tactical decisions regarding schools, tactical decisions regarding movements and been able to move forward without some of the draconian measures.

01:03:45

But they've only been able to do that because they've had another weapon and the other weapon they've had is highly aggressive case finding, contact tracing, community surveillance, isolation of cases, quarantining of contacts, testing of contacts if they get sick. They've put together a comprehensive public health toolkit which they're able to match with their more society-wide measures like movement restrictions and we're working extremely hard.

Our strategic and technical advisory group for infectious hazards is working with us right now, looking at those strategies to move forward from where we are now. Governments need

to use this - to use the DG's words - second window of opportunity. All that we get from movement restrictions and people staying at home and all of these measures; we buy some time, we take the heat out of the epidemic or the pandemic, we buy some time.

But we may then need to find strategies and tactics that get us to move forward and we have to make those decisions. Each government will have to make those decisions. We're working hard to provide advice to governments on how to do that but very, very clearly in order to move forward a scale-up - and I mean a massive scale-up - in public health capacities to do case finding, isolation, quarantine of contacts and being able to go after the virus rather than the virus coming after us, is one of the key ways we can move forward and we'll be coming back to governments and in public around our advice on this to governments. There is a very, very precious window now in which we can prepare to do that.

MH Thank you very much, Dr Ryan. Last but certainly not least we have Helen Branswell.

01:05:38

HE Thank you very much for taking my question. This was probably for Maria. People are reporting a loss of sense of smell. I don't know how frequently that's being seen. Can you give us any indication of whether that is actually a reliable marker of infection?

MK Yes, we've seen quite a few reports now that people in the early stages of disease may lose the sense of smell, may lose the sense of taste but this is something that we need to look into to really capture if this is one of the early signs and symptoms of COVID-19.

We have a number of countries that are conducting early investigations where they are capturing standardised information from cases and contacts, where they're looking at signs and symptoms as one of the features they're looking at. These early investigations - we've published protocols on our website of how to conduct these and we have over a dozen countries conducting these.

It's called the first few X, the first few hundred cases where there's a systematic data collection using molecular testing, using serologic testing. As you know, these serologic assays are being developed where we systematically collect information on signs and symptoms, on clinical features, where we can capture this more robustly.

But we are reaching out to a number of countries and looking at the cases that have already been reported to see if this is a common feature. We don't have the answer to that yet although there's quite a bit of interest in this online. There are likely to be many signs and symptoms that people have. We have a good handle on what the major ones are and those are fever, dry cough and shortness of breath.

01:07:27

Of course other features would be aches and pains; some people have headache; very few, between three and 5%, will have gastrointestinal symptoms and very, very few will have a runny nose or sneezing. A loss of smell or a loss of taste is something that we're looking into and we're looking forward to the results of the early investigations that are being conducted by a number of countries so that we have a more evidence-based approach and we can add that to the list. Thanks.



MH Thank you so much, Dr Van Kerkhove. We've unfortunately run out of time but to all the people who didn't get their questions answered, please come to our website, [www.who.int](http://www.who.int) or write to [mediainquiries.who.int](mailto:mediainquiries.who.int)

We are working 24/7 and we will answer your queries. The next press briefing is scheduled for Wednesday and we've also taken note of those who did not get their questions answered. We will try to put you on top of the queue next time. Thank you so much for attending this press briefing and be well, all of you.

01:08:47