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Part 7

Approaches and practices. NATO in preparation for the second wave (01-07 MAY 2020)

This report represents a summary of open source information, gathered up to and including 07 May 2020, and was assembled on 08 May 2020. All views and opinions expressed are solely those of the author, unless otherwise stated and do not necessarily represent the official position of the CMDR COE or any government and non- government organisation or other group. The author does not bear responsibility for incomplete or incorrect facts cited or referred to herein. The majority of reference materials include official documents published by the World.

TABLE OF CONTENTS

CORELATIONS IN POST-COVID-19 WORLD
WEEKLY SUMMARY
COUNTRIES OVERVIEW
AUSTRALIA AND NEW ZELAND
AUSTRIA
BELARUS9
BELGIUM10
BULGARIA
BRAZIL12
CANADA13
CHINA
DENMARK
FINLAND
FRANCE
GERMANY
GREECE
HUNGARY
ITALY
JAPAN
MOLDOVA
NETHERLAND
NORWAY
POLAND
ROMANIA
SERBIA
SOUTH KOREA
SWITZERLAND
SWEDEN
TAIWAN
UKRAINE
UNITED KINGDOM
USA
RUSSIA

AFRICAN REGION	39
NATO in preparation for the second wave	40
EU	42
CONCLUSIONS:	43
KEY RECOMMENDATIONS:	45

CORELATIONS IN POST-COVID-19 WORLD

The coronavirus pandemic is a major shock to the world order created after World War II and in current intense situation, such analytical scenarios help to account for the range of probabilities and to increase the visibility of possible paths forward.

Recently The US Atlantic Council with the Scowcroft Center for Strategy and Security collaboration, have released a predictive analysis edited by Dr. Mathew J. Burrows and Dr. Peter Engelke on the present crisis and its impact on the global political and economic life. The forecast is based on presumed ways of developing and related geopolitical, economic and social consequences.

Based on their assumptions and supposed 3 scenarios we may consider where by the mid-2020s, deglobalization is speeding up, yielding slow economic growth everywhere. Poverty levels are rising in the developing world and there is the potential for open conflict between the Euro-Atlantic community and Eurasia.

Second scenario shows China is not fully recovered, but its leadership sees an opportunity to undermine Western liberal democracy's credibility by expanding assistance with increased soft loans and more infrastructure projects. "Belt and Road-type" deals are expanded to more states in Asia, Africa, and Latin America, giving Beijing ownership over critical infrastructure in more countries. For the many countries outside Europe, the United States appears in sharp decline. Despite China's responsibility for the outbreak, the pandemic has tilted the geopolitical balance in its favor.

The third prognosis, called New Renaissance, presents where the global economy collapses, G7 and G20 leaders at the helm rise above nationalistic impulses and forge an agreement on a coordinated recovery plan, including the lifting of border closures and relaxation of tariffs and other trade barriers. After a slow start, the recovery gains traction and the major economies see renewed growth. This will be the end of Sino-American differences, but it means that in several areas the United States and China will be working together. With the lowering of interstate tensions, economic growth resumes and, for the majority of the world's population, the Sustainable Development Goals of eliminating poverty and spreading education are once again within reach.

In concern of Russia – the Kremlin has been trying to score points, like China, against Western democracies in a public display of sending medical aid to Italy and New York. The real test for the regime is whether it can manage a raging coronavirus at home as well as the Chinese seem to have handled it. The Russian health system is notoriously fragile and a crisis that reaches the dimensions of an Italy, Spain, or China would be a test that even Russians would concede the regime would fail. Russia has been downplaying the seriousness of the mounting cases of coronavirus in the country. There is controversy over whether the government is hiding the real figures, but some experts believe that the Kremlin does not know the extent of the infections because the original tests were faulty and few Russians have been tested. Such a public display of weakness would be embarrassing just as Putin hopes to convince the Russian public to keep him in power for another decade after his current term ends in 2024. Furthermore, Putin faced an additional test. Having started an energy price war with the Saudis, Putin agreed to a face saving settlement, which may temper the economic impact of the health crisis. A prolonged shutdown, such as happened in Western Europe and the United States, could still be a test for the Russian economy.

Surely the competition and battles in the domain of IT now might decide a lot of outcomes for the years ahead. The 5G is regarded as a proxy battlefield for global technological, economic and eventually, military supremacy. 5G technologies will support next-generation digital applications. These are likely to be the building blocks of future smart villages and digital economies, which are predicted to be the next key driver of economic growth.

5G will significantly increase the speed of wireless communications. Ultrafast flowing mobile data means that whoever controls the networks, through either hardware or software, controls access to the voluminous data that passes through these networks. Second, while earlier generations of mobile technology focused mainly on connecting people in better ways, 5G connects things, even previously unconnected ones, through machine-to-machine data transmissions. Embedded with software, these devices can "talk" to each other, and can be remotely monitored or controlled. While data transmission can take place over a network connection approved by the owner of the device, it may be programmed to upload or download data wirelessly over an unregulated spectrum when it passes a receiver point. Consequently, control of the networks by undesirable actors could result in not just espionage but sabotage, significantly raising the risk of bringing down critical infrastructure.

From a geo-economic perspective, the 5G networks could become such a game-changer that the technology tilts the balance between the world's first and second most advanced economy. Whichever superpower successfully deploys 5G can claim to replicate this model in other countries and exert geopolitical,

economic, and technological influence over these states. Therefore, 5G has the potential to be the next leverage tool that can re-draw the strategic border lines between the Euro-Atlantic community and Eurasia.

WEEKLY SUMMARY

Announcing global pandemic on March 11, 2020 due to the spread of COVID-19, the World Health Organization (WHO) has launched unprecedented proposals for restrictions on the movement of people, the cessation of production and the disruption of supplies worldwide – in other words, all characteristics of globalization. The general public is yet to come on effects of imposed measures, two months after the pandemic declared, there is a growing desire and timid steps by many governments to restore some of the normal way of life. Many heads of states have backed the idea that social distance and isolation would have even more serious consequences for people's health. Rising panic can lead to growing divisions in society, and it can be at the root of a series of future crises and conflicts.

A comparative look at the development of epidemics and pandemics over the last 100 years shows that several factors are accompanying these crises - the close contact between humans and animals, climate change, the weakened human immune system and globalization. In the current pandemic, all four factors are expressed to some extent, which in turn will bring uncertainty, both in the process of its development and management. A quarantine and ban on free movement also have an impact on the person's immune system. How strong this impact will be is yet to be determined, but in recent similar epidemics, the virus has been circulating among the population for 2-3 years. Assuming that the coronavirus has the same resistance, we know for sure that we cannot afford such a long state of emergency.

Technological progress plays an essential role in the rapid and adequate joint response against the virus. Communication is instantaneous, which allows effective measures to be implemented almost simultaneously in different parts of the world. Also, thanks to communication, the authorities, medical staff and people are in constant contact, which eliminates the influence of fake news and calms the panic.

The COVID-19 pandemic is expected to have more economic than health consequences, and at this stage humanity will have to learn to live with COVID-19, just as it does with malaria (about 200 million people get sick each year and a million died) and HIV (discovered in 1981, it is still defined as a pandemic and

continues to be easily transmitted between people and according to the World Health Organization kills about 1 million people a year).

The onset of the coronavirus COVID-19 worldwide continues and at this date (May 7) the number of infected already exceeds 3.8 million people. Despite the death toll of 265,000 with coronavirus, the number of recovers exceeds 1.3 million. At this point, countries are beginning to plan and implement concrete measures for the future stabilization of their economies. The granting has started from May 1st in many countries and it will show how much the situation is under control and whether the world has learned to live in conditions of sanitary distance, which appears to be the so-called "the new normal". Each easing lockdown (or step-downs?) will be monitored and analyzed to assess its effectiveness, with the aim of preventing a new wave of infection.

Initial efforts by most governments, focusing on preserving human health by limiting sharp escalations of the disease and putting much strain on the health system, have proved successful, but the high level of uncertainty persists, especially in projected second wave of COVID-19 in the autumn and winter of 2020.

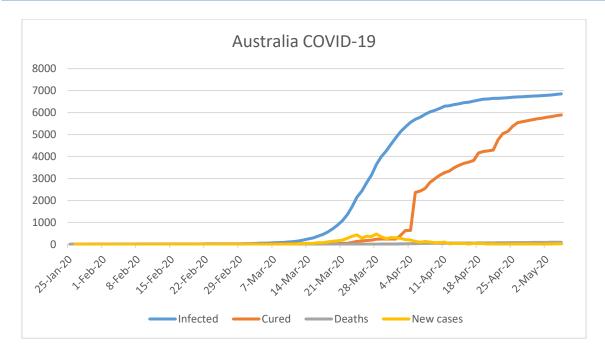
Ground on monitoring and analyzing the pandemic development as well as policies and decisions taken in a number of countries and organizations, CMDR COE presents the following information about the state as of May 6, 2020.

COUNTRIES OVERVIEW

AUSTRALIA AND NEW ZELAND

As on 5 May 2020, a total of 6,849 cases of COVID-19 have been reported in Australia, including 96 deaths and 5,889 have been reported as recovered from COVID-19. Over the past week, there has been an average of 17th new cases reported each day. Of the newly reported cases, the majority have been from Victoria State. Around 64% of cases have recent international travel history, including over 1,200 cases associated with cruise ships.

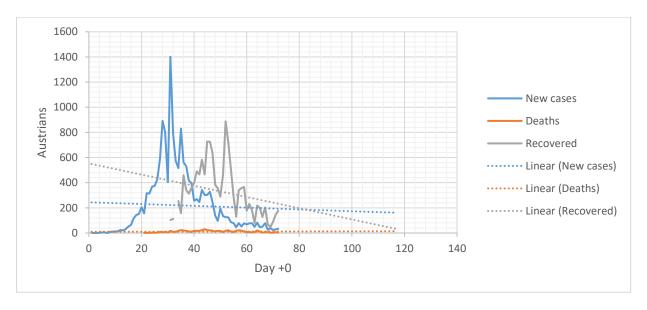




AUSTRIA

A positive trend in dealing with the coronavirus continues in Austria last week. New cases of sickness dropped to less than 80 per day and gradually decreased. In this regard, the country has taken legal measures to release the restrictions by changing several regulations. Seasonal workers in the agricultural and forestry sectors, as well as medical staff, are allowed to enter Austria, however after entering Austria, these individuals are required to immediately start a 14-day self-controlled home quarantine. Aircraft landing in Austria is prohibited for arrivals from Republic of China, Iran, Italy, Switzerland, France, Spain, the United Kingdom, the Netherlands, the Russian Federation and Ukraine. The country has 15,684 registered patients, of which 13,639 are cured, 608 died and 1437 active cases.





BELARUS

In the period, between 30 April and 06 May, cases of coronavirus in Belarus are increasing. The number of infected during the reporting period increased almost by 1.3 times. As of May 06, in Belarus were registered, the total number cases 19255, deaths are 112 and 4388 are recoveries.



While Europe is in isolation to stop the coronavirus pandemic, life in Minsk, in general, continues - the Belarusian authorities do not envisage a general quarantine despite the concern among the population. The government of the country does not impose requirements for social distance or restriction of public activities. The traditional Saturday cleaning in Belarus continues despite the pandemic. No quarantine has been introduced in the country and preparations are underway for a parade marking the 75th anniversary of the victory over Nazi Germany.

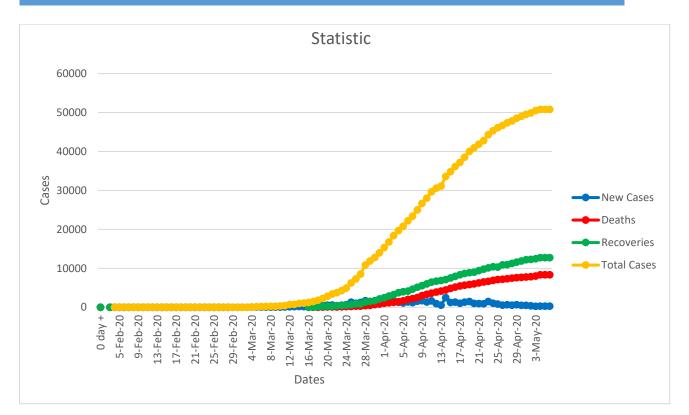
Belarus is an exception among European countries, with its heavy car traffic, overcrowded buses, crowded subways, open restaurants, shops and cafes, and in terms of sports - the football championship is played in stadiums in front of the public.

The death toll of the new coronavirus in Belarus is five times lower than the number of people who died from alcohol poisoning, said President of Belarus Alexander Lukashenko, quoted by TASS. He said this at a meeting to discuss Victory Day events and the epidemic, where it was announced that canceling the Victory Day parade - May 9 - was impossible. Belarusian citizens will not be forced to take part in the parade. In preparation for the parade, the Belarussian government launched a campaign to recruit students (who were offered to participate in the parade in exchange for academic and hostel bonuses).

On May 6, WHO representative in Belarus Batir Berdiklichev expressed concern about the Belarusian government's decision to hold a parade amid a pandemic. The WHO directly recommended that, if there is no urgent need, events related to the celebration of Victory Day be postponed or canceled.

BELGIUM

Current trend in Belgium remains stable for the reported period. On the Inter-ministerial Conference on Public Health which took place on Monday 4th of May, the government announced that in order to gradually ease the COVID-19 measures, the chain of infection must be broken. That's why the government focus will be on the testing strategy and tracing of people who have been in close contact with infected people in the last few days. It is crucial that the testing and monitoring strategies are synchronised. The coming week is a start-up phase during which these activities will be gradually implemented.

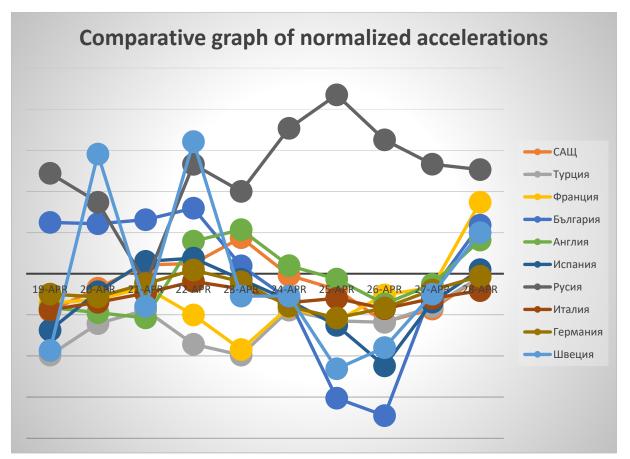


Up to May 05, a total of 50 781 COVID-19 patients were reported in Belgium (Graphic 1). To date, 12 731 of the patients have been recovered, 8 339 have died and 474 176 have been tested. The number of new hospital admissions is gradually decreasing, but remains fairly high.

BULGARIA

The acceleration of the spread of the infection in Bulgaria returns to positive values after the refraction of the exponential development. It seems that the imposed measures and the motivation of the people help to quickly suppress the effects of travel in the country on holidays. Despite the abolition of some of the measures, a large percentage of people continue to comply with them voluntarily, which will have a strong positive impact on the situation in the country. Two weeks ago, CMDR COE proposed the opening of kindergartens. This is still relevant for the conditions now.



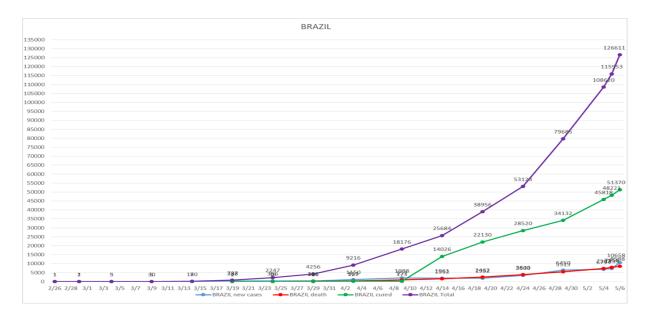


According to the CMDR COE model, we expect a temporary jump in the newly infected in the next 2-3 days and a new establishment of the rate of spread. Bulgaria is beginning to move closer to other European countries as a timetable for accelerating the spread of the disease. Russia and Sweden are very different. In Russia, the crisis came much later and is still developing dynamically, while in Sweden the lack of significant restrictive measures is decisive for the differences in the schedules compared to other Western countries.

BRAZIL

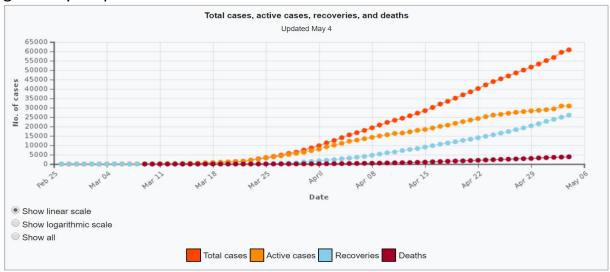
Unfortunately, the current situation shows the ineffectiveness of the measures in Brazil. Negative trends continue, and the number of new cases is growing exponentially and uncontrollably at the moment. To date, there is no indication of a peak or approaching peak in the spread of coronavirus in Brazil. The total number of infected, deaths, new cases and recoveries is as follows:

- Infected 126 611;
- Coronavirus deaths 8 588 (5,3 %);
- Recovered after illness 51 370 (40,6 %);
- Cases per 1 M of the population 596.



CANADA

The number of novel coronavirus cases in Canada has now surpassed 60,000. Across Canada, the coronavirus pandemic has claimed the lives of 4,036 people so far. Just over 26,650 have recovered from the virus, according to the latest figures. The province of Quebec accounts for more than half of the cases. Canada's hardest-hit province reported a total of 32,623 cases on 04.05, and an additional 75 deaths linked to the virus, bringing Quebec's total death toll to 2,280. In this situation some of Canada's 10 provinces have outlined plans to gradually reopen their economies.



Quebec was one of the first to announce its phased plans to reopen the economy and loosen public health restrictions. But on Monday 04.05, the provincial government announced it would be postponing part of its strategy.

Ontario's lockdown measures started to ease on 04.05 as a select number of seasonal businesses and some essential construction projects are allowed to

reopen with physical distancing protocols and other restrictions in place. These businesses will have to follow safety guidelines such as cleaning and sanitization, physical distancing for staff and customers and installing barriers. Marinas and golf courses can begin preparations to reopen later on.

The Prime Minister, Justin Trudeau, joined other global leaders to launch the Coronavirus Global Response on 04.05.2020. This online pledging event aims to initially raise more than \$8 billion (USD) to help researchers and innovators develop solutions to test, treat, and protect people, and to prevent the further spread of COVID-19. Canada has pledged \$850 million to bolster international efforts to develop a COVID-19 vaccine and treatment, as well as aid for developing countries.

Air Canada introduced mandatory pre-flight temperature checks as part of a new measures intended to curb the spread of COVID-19. The airline's passengers and staff are already required to wear face masks and personal protective equipment, respectively.

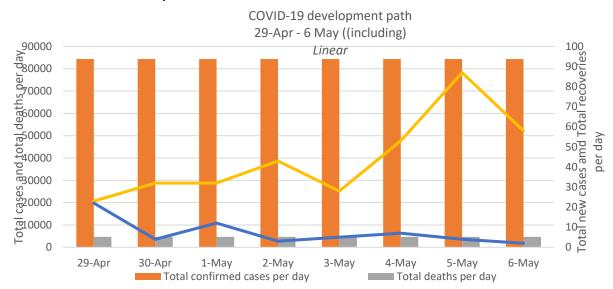
Ottawa is investing \$240.5 million in online mental health services during the coronavirus pandemic, Prime Minister Justin Trudeau said during his Sunday morning press conference. Existing online tools will be expanded, and new virtual platforms for mental health and primary care will be created, along with specialized programs for those in marginalized communities.

The prime minister also said Ottawa will establish a COVID-19 supply council, mandated to find "innovative solutions" that ensure the country has a consistent supply of personal protective equipment as demand for masks, gloves and hand sanitizer increases from the private sector.

Although cases and death tolls continue to climb, there are continual signs that undertaken public health measures have slowed the growth of COVID-19 overall in Canada.

CHINA

Lower emergency response to COVID-19 in accordance with reassessed risk levels (national risk assessment scheme). Prevention and control will nevertheless continue, relative to risk levels, to lower the risk of infection from imported cases and thus to avert a rebound of local cases. Nearly two-thirds of the Chinese mainland's imported COVID-19 cases have been cured and discharged from hospitals. However, the trend of an ongoing epidemic abroad, and the complexity of preventing infection resurgence at home are also increasing. Special attention is paid to "consistently positive" cases – patients whose nucleic acid tests keep returning positive despite not showing symptoms. Most "consistently positive" patients carry the protective IgG antibody, so there has not been reported instances of them spreading the disease to family members or people in close contacts, nevertheless, such a possibility cannot be ruled out yet, even if considered minimal, as more conclusive evidence is required. The announcement of such cases has spurred a public debate around whether COVID-19 could turn into a chronic infection similar to Hepatitis B, a lifelong dynamic disease that can be controlled with treatment but the infected will carry the virus in their body for life.



Hubei province lowered its emergency response from the top level to the second level starting on April 2. Lowering the emergency response leads to adjustments of prevention and control measures, and the reopening of schools and resumption of work and production will be advanced in an orderly manner. However, the province will maintain the same level of vigilance and prepare for long-term epidemic prevention and control efforts.

DENMARK

The Danish Health Authority follows the situation closely and adapts its strategy, recommendations and measures accordingly. It continues to follow the so-called "mitigation strategy" approach, which aims to limit the consequences of the spread of COVID-19 in society. Strategy aims to ensure to get through the epidemic without jeopardizing the Danish welfare society, allowing prevention of the spread of infection.

During last week main focus of Danish health system was put on:

• intensified focus on preventing infection chains. Expanding the testing strategy to include people with mild symptoms of COVID-19 as well as people without symptoms but at high risk of infection, clarification of requirements for COVID-19 self-isolation, including assistance to citizens who are unable to isolate themselves in their own homes.

• restructuring and increased activity in the healthcare system

• targeted communication to the population to ensure knowledge as well as continued support and commitment in the controlled reopening Information material about the reopening of schools, daycare centres, and secondary and adult education institutions.

• targeted protection of vulnerable risk groups against infection.

• detection and protection of outbreaks of infection in nursing homes, assisted living, and other institutions

• incorporating the latest knowledge and data into already implemented initiatives and efforts.

If it turns out that people who have recovered from COVID-19 become immune for an extended period, the spread of infection will be delayed when enough people eventually develop immunity. Herd immunity is not an end in itself, but will often be a natural consequence of a pandemic. Vaccines can also build immunity in the population.

It is of vital importance to keep the development of the disease under control with the fewest possible consequences for society until such a time when effective treatments and vaccines become a reality.

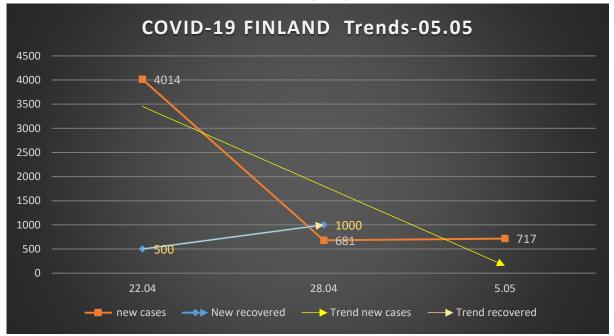
This process should be a fluent and balancing act in relation to not shutting down society at all, as this in itself can have a number of serious societal consequences, or opening up too much or too quickly so that the spread of infection gets out of control.

FINLAND

Finish government is eager to retain the possibility to order health care professionals to work and impose restrictions on internal movement if the epidemic exacerbates rapidly in some areas of Finland. Some of the countermeasures set to expire on 13 May have been put under discussion. The possible relaxation or lifting of measures adopted to slow it down, such as the closures of cafés and restaurants, and libraries and other cultural facilities. The old saying of choosing between the plague and cholera is not a bad comparison as the government tries to strike a balance between measures containing the spread of the virus and preventing the economy from collapsing. The Finnish government, will have to manage the outbreak throughout this autumn and probably also next year. The current expectations are subdued when it comes to the pace of recovery. Finland is faced especially with two challenges. If the blow to the industry is delayed, the other side of the coin is that the effects will be felt longer in the post-cyclical Finnish industry.

The second challenge, is linked to the widening budget deficit and continuing population ageing and their impact on the tools available to the government once the pandemic has been overcome.

Not many people in Uusimaa appear to have developed an immunity against the disease caused by the new coronavirus, suggests a new study conducted by the Finnish Institute for Health and Welfare (THL).



Based on the statistics, diagrams and researches (exposed below) it could be assumed Finland is on the right track to get through the crisis with minimum negative social, financial and political consequences. The government undertakes relevant steps while mulling over relaxing the measures. Despite improvements in the tracing of infections, not all transmitters are reached. The margin is very small for the epidemic bursting into growth, so caution is warranted when lifting the measures. The objective of the antibody study is to determine not only how large a part of the population have antibodies as an indicator of prior exposure to the virus, but also how long the antibodies last and whether they provide protection against serious forms of the disease.

The key going forward will be to devise a feasible exit strategy and communicating it to promote predictability. Heaps of question marks are in the air, including about the second wave of the virus, immunity and timetable for

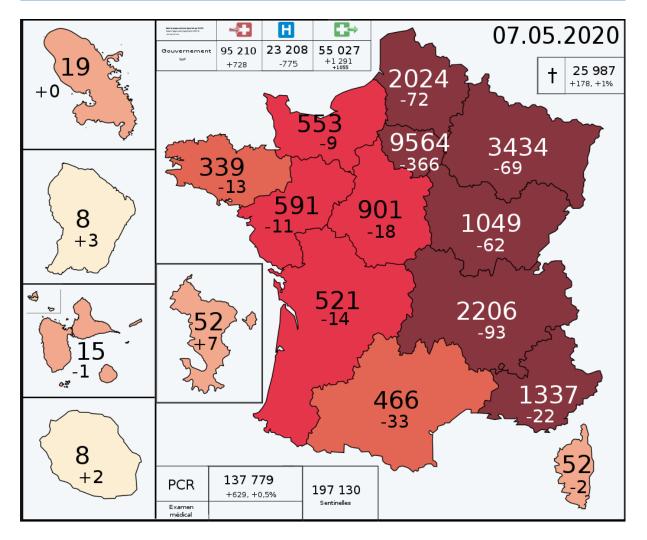
the vaccine. No matter what happens in this regard, a sound plan out of the crisis makes it possible to also take steps back if the situation doesn't develop as planned.

FRANCE

As of 7 May, France has reported over 137,779 confirmed cases, 25,987 deaths, and 55,027 recoveries, ranking sixth in number of confirmed cases overtaking China where the outbreak began.

French authorities' keeps restrictions in movement until 11 May, so citizens must not leave their place of residence except specific reasons, and with a certificate. Local authorities may take further measures regarding the confinement, particularly as regards the conditions under which people may take exercise. It is recommended to check the website of the relevant prefecture or town hall to ensure that you are in compliance.

The borders of the European space (the European Union, the Schengen Area and the United Kingdom) are shut until further notice. French citizens and nationals of the European Union, the Schengen Area and the United Kingdom are authorized, along with their spouse and children, to enter the national territory in order to travel to their homes. Please note that you will need a certificate to travel in France. Nationals of other countries, meanwhile, cannot enter France, although there are exceptions for those who reside permanently in France, for example. There is no ban on exit from French territory.



GERMANY

As of 06 May, in total, 184,807 COVID-19 cases and 6,996 deaths (fatality rate of 4.2) due to COVID-19 have been reported. 137,400 persons are estimated to have recovered and 1,884 patients are critical/serious condition.

Since 15 April the number of people who are recovering is higher than the number of the infected ones. Furthermore, Infection and hospitalization numbers in Germany have diminished significantly. On 04 May, researchers from Bonn University announced, after random antibody tests to 919 people, that about 1.8 million people (15% of the total population) in Germany may have contracted the virus, 10 times higher than the confirmed cases so far. That means that only 1 in 10 coronavirus cases have actually been diagnosed.

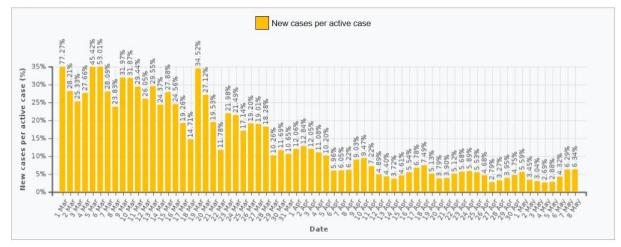
According to Robert Koch Institute, as of 06 May, the reproduction number, which indicates how quickly a disease is spreading, is at 0.65 down from 0.9 which was 28 April (last report).

Churches alongside playgrounds, hair salons, museums, and zoos can be reopened on 04 May. The federal government had recently announced that

schools would probably being reopen gradually from 04 May but only a few states have already reopened schools due to parents and students fears.

The wearing of (non-medical) face masks in public transport and in shops is now obligatory in all federal states.

Daily infection rate



On 06 May, Chancellor Angela Merkel's government has agreed on further plans to ease Germany's COVID-19 lockdown after talks on the matter with state leaders. Responsibility for easing lockdown measures will now pass to state leaders who can make their own plans.

The German strategy is to return to normality. The main goal is to continue testing hundreds of thousands of people for covid-19 per week. The country having a widespread testing system and a huge capacity in treating patients spares no efforts in increasing the number of intensive care beds.

Germany had achieved fragile intermediate success slowing the spread of the virus intensifing their efforts in order to cope with a possible second wave of COVID-19 infection as the country gradually comes out of limitations.

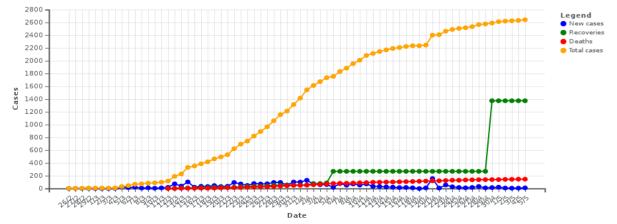
GREECE

As of 06 May, in total, 2,663 COVID-19 cases and 147 deaths (fatality rate of 5.5%) due to COVID-19 have been reported. 1,374 persons are estimated to have recovered and 36 patients are critical/serious Condition.

As of 06 May, each disease carrier infects significantly less than other person. The reproduction number, which indicates how quickly a disease is spreading, is under 0,5 according to Greek National Health Organization.

The last week, signaled the transition from phase 1 to phase 2. Greece entered a new stage from "stay home" containment policy to "stay safe". Greece took strict but necessary measures timely. The first measures were taken just one day after the first confirmed case and quite before the first death. Actions such as the lockdown and fully-quarantine vulnerable towns and villages have protected the national health system and eliminated the number of deaths.

Phase 2 has started on 04 May 2020 by the gradual rollback of covid-19 restrictions. The main goal of this phase is to gradually and safely restart social and economic activity. Greek government pointed out that the weapon for that is the full compliance with the rules (not leaving house even with light symptoms, hygiene, observe distances, pay attention during movements, social interactions). This is a bet which is going to determine the future trajectory; the further de-escalation or the re-escalation of the measures. The use of face mask usage is mandatory in all means of public transport, taxi and health premises. Highly recommended into supermarkets and stores.



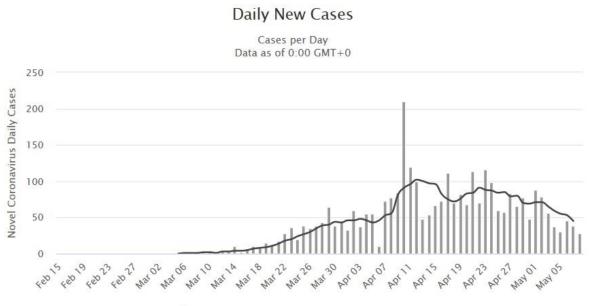
The likelihood of serious local disease spread still exists in close structures such as refugee and Roma camps. Since Greece base almost 30% of its total GDP on tourism, there are a lot of concerns and debates about what is going to happen. It hopes that travelers arriving overland may mitigate the consequences to tourism this season as traditional markets remain closed due to restrictions. Greece and Albania signed an agreement on 01 May paving the way for thousands of Albanian citizens to work in Greece's agriculture sector, despite the coronavirus restrictions.

HUNGARY

On 01 May 20, the first flights since the restrictions were introduced took off from Budapest's Liszt Ferenc International Airport, with passengers complying with precautionary measures.

In accordance with a government businesspeople from Czech Republic, Poland, the Republic of Korea, Germany, Austria and Slovakia can enter Hungary from today for business purposes only. The government has decided to allow sports events to take place throughout Hungary from Monday (04 May), as long as they are held without spectators. Training sessions both for professionals and amateurs can also be held behind closed doors. Curfew measures and shop restrictions will remain in place in Budapest and in Pest County but will be eased in the rest of the country, where it will be possible to open and visit all shops, outdoor baths, museums and zoos. For the protection of the elderly and people living in the most infected areas of the country movement restrictions in Budapest and its surroundings will stay in force. Future steps, the shops can reopen without time limitations, terraces and gardens of restaurants and cafes can reopen, and people can visit outdoor beaches. However, practicing social distancing and wearing masks will remain compulsory in shops and on public transportation. The government is consulting regularly with epidemiologists and will revisit all protection measures every two weeks.

Daily New Cases in Hungary



It is likely a new phase of protective measures against the novel coronavirus begins and respectively life can restart in Hungary, but only if people act gradually and maintain a high level of protection according to a strict timetable. Thanks to its joint effort, Hungary is ready to handle even large-scale disease, it is considered no one has to worry any longer about being left without adequate care.

ITALY

Italy is leading Europe in easing lockdown measures aimed at containing the spread of the new coronavirus, almost two months after the epidemic hit the continent. More than 4.4 million Italians went back to work on 4 May after seven weeks of extraordinary restrictive measures. The return to work came as Italy tries to cushion the economic impact of the shutdowns. Its economy, the euro zone's third-largest last year, is expected to shrink more than in any year since the global depression of the 1930s.

The long-awaited phase two includes resuming activities within factories, building sites and wholesale trade. Italians are now also allowed to visit family members and people with whom they have an "established emotional bond" in the same region. Parks are open for walking and running, and people can go for sport activities even far from home.



Social gatherings remain banned and it is mandatory to wear a mask on public transportation and in closed public spaces. Restrictions on funerals have been relaxed, with a maximum of 15 mourners allowed to attend, but masses and weddings will have to wait. Bars, hair salons and restaurants will be allowed to reopen only on June 1, if the rate of infection continues to lower.

As of 6 May 2020, Italy has 91,528 active cases, one of the highest in the world. Overall there have been 214,457 confirmed cases and 29,684 deaths (a death rate of about 491 per million population), while there have been 85,231 recoveries or dismissals. By 5 May, Italy had tested about 1,512,100 people.

JAPAN

Japan's prime minister on 04.05.2020 extended a state of emergency over the coronavirus until the end of May, as the government warned it was too soon to lift restrictions. The number of new cases has declined, but unfortunately the decrease has not reached the targeted level.

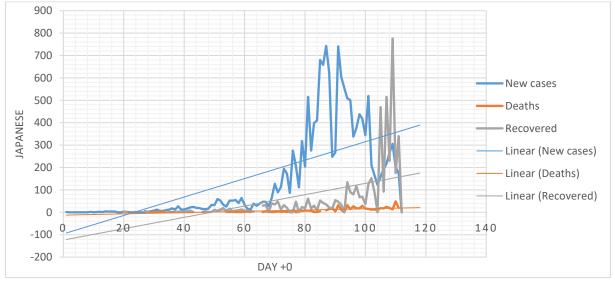
Japan's virus outbreak remains comparatively small compared to those seen in parts of Europe and the United States, with over 15,000 infections recorded and 510 deaths. But the extension was backed by both experts advising the government and regional governors, with concerns that a sudden spike in cases that would overwhelm healthcare systems remains possible.

The state of emergency falls far short of the harshest measures seen in parts of Europe and the United States. It allows local governors to urge people to stay at home and call on businesses to stay shut. But officials cannot compel citizens to comply, and there are no punishments for those who fail to do so.

The government is expected to urge residents in 13 high-risk prefectures, including Japan's biggest cities, to continue cutting person-to-person contact by 80 percent and exercise other strict social distancing measures. Museums, libraries and some other facilities are likely to be allowed to reopen so long as they take anti-virus measures.

For the rest of Japan, prefectures will be allowed to loosen restrictions on business closures and small gatherings but residents will still be asked not to travel outside their home regions. Bars and nightclubs will be asked to remain shut.

It remains unclear when and whether schools, many of which have been closed since March, will be able to reopen, with officials recently suggesting a possible phased reopening with certain key grades resuming before others.



Prime minister said experts would review the situation around May 14, and the measures could be lifted at that time depending on the situation in a given region. Hospitals feeling the strain despite so far avoiding the devastating tolls seen in places like Italy and New York, there have been persistent fears that Japan's healthcare system could be quickly overwhelmed by a sudden spike in infections.

There are just five ICU beds per 100,000 people in Japan, less than half the number in Italy, and doctors' associations have warned that hospitals are already stretched thin. Measures have been implemented to try to ease the pressure, including sending coronavirus patients with mild symptoms to hotels for

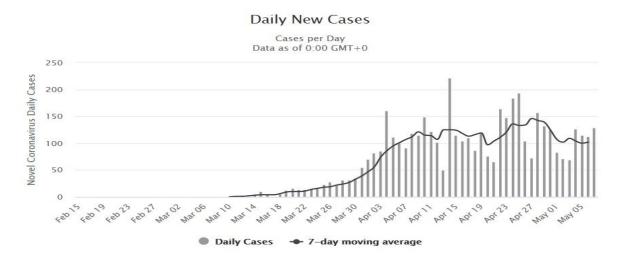
quarantine rather than keeping them in overcrowded hospitals. The government has also said it is increasing testing capacity but continues to face criticism for the relatively low numbers of tests being carried out, in part because of stringent criteria.

At the same time, the Prime Minister disclosed plans to lift the emergency before May 31 should an expert panel deem it possible. He said members of the group will undertake a comprehensive analysis of the circumstances around May 14. Japan begins distributing cash handouts for virus relief. But the handouts of 100,000 yen (\$938) per person may begin later in big cities because of the amount of paperwork, including processing the applications. Japan has pledged about \$234 million dollars towards the development of a coronavirus vaccine.

MOLDOVA

As of 04.05.2020, the number of people infected with the new coronavirus in the Republic of Moldova reached 4248 cases. Since the last report, this has made 351 new cases. To date, 1423 people have been healed and 132 have died from COVID-19.

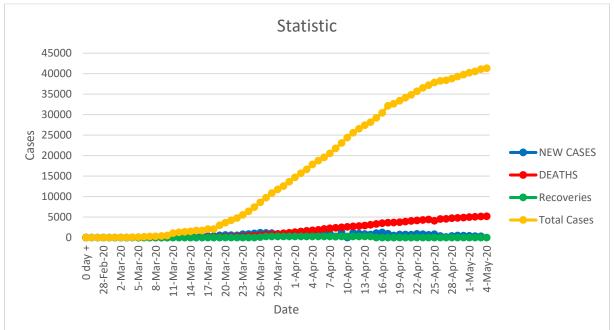
Daily New Cases in Moldova



NETHERLAND

The Dutch approach has worked well in bringing coronavirus under control. The government will start by relaxing restrictions at local level. After that the government will relax restrictions at regional level and finally at national level. First small gatherings will be allowed, and later larger gatherings, so that everything remains as manageable and orderly as possible. The details will be worked out in the weeks ahead.

Up to and including May 05, a total of 41 319 COVID-19 patients were reported by National Institute for Public Health and the Environment (RIVM) in the Netherlands. The Dutch government is not reporting on Covid-19 recovery cases explaining that getting recovered from the virus is a long and hard period not always easy to track. To date, 5 204 have died. RIVM monitors the distribution of COVID-19 in the Netherlands.



From 11 May the following measures will apply in Netherlands:

- Primary schools, including special primary schools, and childcare providers will reopen;
- Children aged 12 and under will be allowed to play sports and take part in other activities together outdoors under supervision;
- Young people aged 13 to 18 will be allowed to play sports together outdoors under supervision, but must stay 1.5 meters apart;
- Adults can play sports outdoors from 11 May as long as they can stay 1.5 meters apart. Matches and competitions are not allowed, and nor is the use of shared changing rooms.
- Most people in contact-based roles will be allowed to perform their jobs again. This includes driving instructors, medical and paramedical professionals (dieticians, massage therapists, occupational therapists, prosthodontists, etc.), hair and beauty professionals (hairdressers, beauticians, pedicurists, etc.) and alternative medicine practitioners (acupuncturists, homeopaths, etc.).

NORWAY

Some of Norway's restrictive emergency measures are in process of being relaxed. This includes the reopening of kindergartens and schools for the youngest children. Businesses such as hair salons are now permitted to reopen, and the controversial ban on cabin stays has been lifted.

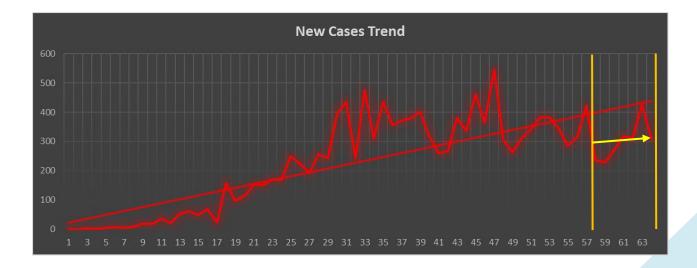
However, the Norwegian Prime Minister Erna Solberg has warned citizens not to lower their guard. She said at the latest daily press conference that much may be different for a long time to come. The next day, the Minister of Culture announced an extension of the ban on major events until 1 September.

However, the ban on smaller events is also being relaxed. Events of up to 50 people will be permitted from 7 May. This also means that cinemas will reopen, albeit with a screen limit of 50.

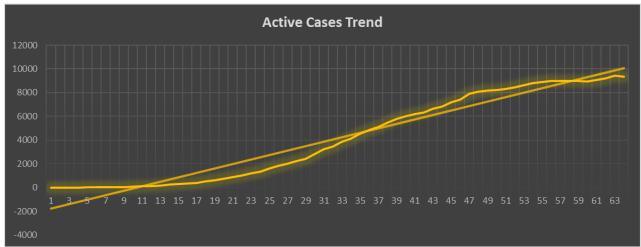
Based on the statistics, diagrams and researches (exposed below) it could be assumed Norway is on the right track to get through the crisis with minimum negative social, financial and political consequences. The disease development trends go down and likely the spread of COVID 19 is under control. It is likely the Norwegian government will keep in effect some of the measures until further notice in accordance with the disease development course.

POLAND

From the beginning of pandemic number of infected people is still growing and reached 14 740 (+ 2 522), disease growth rate is almost on the same level like week ago, however is still below linear trend line. Now average number of infected is 300 (recently 337) people a day during last week, which placed Poland on 8th place in Europe and 23rd on the world.



Active cases trend line is slightly below linear, however still very close. This is due lower number of new confirmed cases but also slowly growing number of cured people.

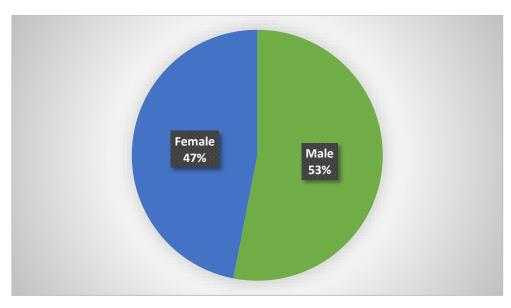


Number of tests done so far is 410 468 / +112 609 from last report, reported number of people cured from coronavirus so far -4655 / +2 000 from last report. 733 people died so far (389 men and 344 women), average age of died person is 75 years, the youngest persons who died was 18th years young man who died in Kędzierzyn Koźle Hospital. The patient had cerebral palsy and epilepsy.

Age structure of died people in Poland

0-9	10-19	20-29	30-39	40-49	50-59	60-69	70-79	80+
0	1	0	12	23	39	143	210	305
0%	0%	0%	2%	3%	5%	20%	29%	42%

Gender structure of died people in Poland



During last week Silesia District became the most affected region in Poland with almost 3000 confirmed cases. Main source of infection are coal mines located in this area where virus is transfer among miners and their families.

Prime Minister announced that Poland together with other V4 countries (Visehrad Group) will invest 3 million euro into EU program of developing inexpensive drugs and vaccines, as well as an effective test method for COVID-19.

Polish Armed Forces are still actively engaged into fight with coronavirus and during last week established 5 points for fast testing, organized according to the popular "drive thru" principle, i.e. without getting out of the car.

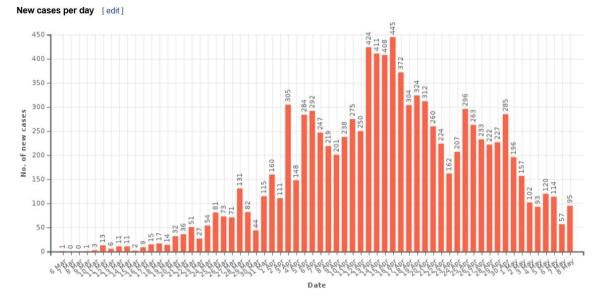
ROMANIA

Confirmed cases of COVID-19 in Romania, on May 6, increased to 14107, with 23 more fatalities, bringing the overall death toll to 864. The number of recovered people over the last 24 hours reached 5788. Daily new cases moved gradually from 165 up to 431, daily new deaths varied from 28 to 19, which is not a significant change, and active cases increased up to 7461. In general, the epidemic situation in Romania is unstable, however the government claim that the situation is under control, statistics did not confirm this statement. Another fact is that imposed measures are not relaxed yet. Romania, depending on the current pandemic toll, reconsiders relaxing of measures since May 15.

SERBIA

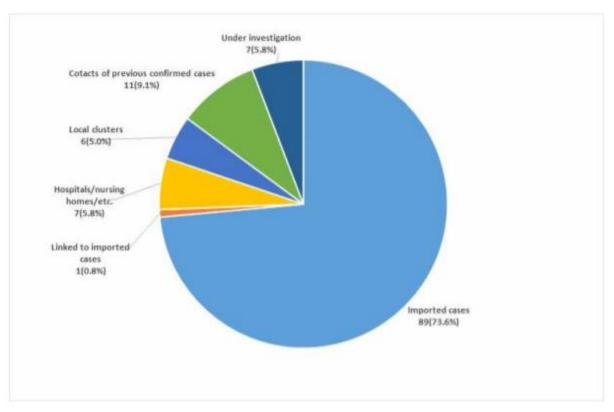
In response to improving health conditions, the Serbian government is slowly lifting restrictions on movements designed to reduce the spread of COVID-19 with certain measures still in force until further notice. Limited commercial air traffic will resume as of May 18.

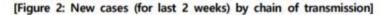
As of May 6th, Serbia has confirmed 9,791 cases of COVID-19 and 203 deaths. The total number of persons cured is 1,971, 6,196 more persons were tested during the last 24 hours, of whom 1 14 tested positive for coronavirus. The percentage of those tested positive is below 2% and it stands at 1.8%. Currently, 1,750 patients are hospitalized, 48 are on ventilator support, whereas a total of 117,474 tests have been made to date. There are no restrictions on movement for residents of all ages, but everyone is still strongly advised to spend as much time possible inside, avoid crowds, follow the physical distancing requirements, respect limitations on public gatherings and implementation of protective measures, including the use of masks, gloves, and disinfectants.



SOUTH KOREA

The South Korean Government decided as of 6th of May the restrictive measures imposed for restriction of COVID-19 to be loosen. It is planned to renew the mass gatherings in compliance with strict instructions for hygiene and disinfection. Korean Centers for Disease Control and Prevention (KCDC) have made next preventive recommendations: people to participate in religious functions via non-face-to-face methods such as online worship/meetings, nightlife entertainment venues are also recommended to refrain from operating as much as possible, precaution measures were advised for people to follow when they are travelling, stay outside and do sport outside.





Based on recent situations in relation to COVID-19 outbreak and response and discussions in Central Disaster and Safety Countermeasure Headquarters presided by the Prime Minister, the Korean Government has decided that Korea will transition into "Distancing in Daily Life" policy/campaign on 6 May. KCDC stressed that the new "Distancing in Daily Life" policy should not be interpreted as signaling a return to life before the pandemic but rather as entering a "new normal" in which infection prevention practices become a part of everyday life including social and economic activities for everyone.

It is visible from everyday briefings of the Korean Centers for Disease Control and Prevention that not completely different measures are posed. The most common information is about observing of social distance, hygiene and disinfection. The diagram above represent that 75% percent of the cases are imported or linked to them. Despite that the common picture impose almost complete control over the crisis, the government made a clear statement that transition into "Distancing in Daily Life" policy/campaign is obligatory and the near future will be linked with the virus.

SWITZERLAND

Switzerland has one of the highest per-capita rates of testing in the world with thousands of tests carried out per day. The government planned an extended testing strategy along with a contact tracing concept as it moved to ease social distancing measures. However, it decided not to impose a general obligation to wear protective face masks. Instead, it recommended that people wear them when social distancing is not possible. This may include when travelling on public transport. Also, retail customers asked to wear masks as a protective measure when visiting shops. The Swiss Federal Railways and the Postal Bus service recommend avoiding public transport at rush hour and travelling only when necessary.

The armed forces bought up to 100 million masks and sold to retailers at purchasing price. The government has a budget of up to CHF400 million (\$412 million) to provide different types of masks, but it is the responsibility of hospitals, companies and private households to ensure stock.

The country's public health authorities continued to recommend that people work from home when possible and follow hygiene and social distancing recommendations as the country re-opens shops, restaurants, and schools.

The government maintained that daily supplies of medicine and food are guaranteed. Authorities, however, have rationed some common painkiller and anti-fever drugs to prevent panic buying.

Parliament voted to approve the multi-billion-franc bailout package. The economic package provides relief for companies with liquidity problems to obtain transitional bank loans. Companies hit by the crisis can defer payment of social insurance contributions temporarily and without interest. These measures also apply to self-employed persons whose turnover has fallen.

The Swiss government imposed entry restrictions on residents of all Schengen and non-Schengen states on March 25. A first easing of the border situation was announced on April 29, to take effect from May 11.

SWEDEN

The Swedish government has announced that testing will be ramped up to reach 50,000-100,000 tests per week, with a focus on people in key roles such as police officers and emergency responders.

Everyone in Sweden is urged to stay at home if they are at all sick (even a mild cough or sore throat), practice social distancing, avoid non-essential travel within the country, work from home if possible, follow good hygiene practices, and avoid non-essential visits to elderly people or hospitals. People aged over 70 or in risk groups are advised to avoid social contact as much as possible.

It is highly likely the aim of preventing the spread of infection in other parts of the country Sweden's authorities have already begun inspections of elderly care homes, examining why the coronavirus had such a devastating impact there. If any mistakes can be avoided in parts of the country that have not yet seen a wide spread of infection, there's the possibility to save lives. Trust is a two-way process – it requires clear, comprehensible explanations when members of the public are asked to change the way we live. It is almost certain a lesson is being learned in real time because communications have improved during the course of the crisis, bringing the levels of trust at about 70 to 80 percent.

It will be important to ensure that the financial measures will benefit different groups in society as equally as possible ensuring support to those who were on insecure contracts before the crisis.

TAIWAN

Government is focused for suppression of COVID-19 transmission rate and state support for businesses leveraging on resilient systems (i.e. healthcare) and society. Focus on coordination and interagency cooperation – communication. Leveraging a strong national public health systems and a highly developed technology sector. Less strict measure of physical distancing as compared to China of a recommended character, including for mass gatherings. Stable fiscal position. Sustaining a high degree of trust in governmental institutions through, for instance, transparent and timely risk communication.

Stabilisation and recovery – two imperative: safeguarding lives and safeguarding livelihoods – targeted and precise measures according to the specific risk level (i.e. risk assessment) of the epidemic situation – phased and cautious initiation of stabilisation and recovery - focus on (virus) carriers from abroad and asymptomatic cases as possibly rebounding to an outbreak, therefore – travel restrictions and border controls (medical checks). Focus on targeted (cluster) testing and testing of asymptomatic cases. A tendency for stricter distancing measures and bans on mass gatherings. Figure 1 and 2 below trace COVID -19 development path as of outbreak monitoring (16 February) until the current weekly update – 6 May 2020. It is evident that Taiwan is moving with a steady pace on the virus' curve keeping a total of 439 (which represents an increase of 10 cases for 7 days); 6 deaths and a continuously increasing number of recoveries. A case of special attention is the cluster from a three-ship Navy flotilla, which is still being investigated to determine whether these are local or imported infections. On 3 May, the CECC announced the end of the isolation period for 713 naval personnel aboard the Dunmu fleet. After undergoing COVID-19 testing, people will be released from isolation with a requirement to conduct self-health management after returning home. The remaining naval

personnel aboard the other two vessels tested negative and will be released from isolation on May 4 and will be also required to conduct self-health management after returning home. All 345 naval personnel aboard the Panshi ship will be tested again on the morning of May 4 (24 hours after the previous testing).



Restrictive measures gradually tightening: phase one: less restrictive measure focus on case detection, contact tracing and quarantine – reliance on public understanding of the situation. Phase two – risk of rebounding after containment of transmission rate achieved – more restrictive measures – including ban on public gatherings. Slowdown in economy and production, less than in the case of China and potentially due to the less restrictive (and gradually tightening) measures for distancing, the stable fiscal position of the country and its well-developed tech sector.



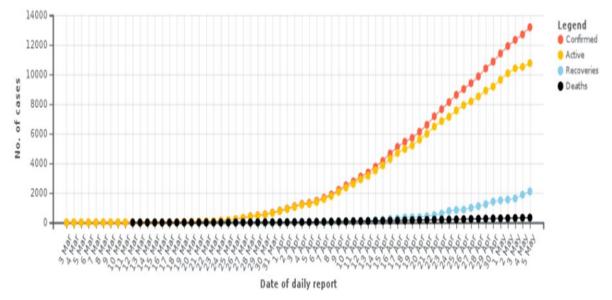
On May 6, the CECC announced that starting from May 8, Taiwanese people will be able to return from Hubei, China respecting enhanced precautionary measures during their trip back and undergoing a 14-day period of group quarantine after entry.

Taiwan is exhibiting a steady path towards full (local) suppression of COVID-19 and is therefore, directing targeted and tailored efforts towards minimising the risk of imported cases and identifying and tracing asymptomatic cases. It should

be noted that this success has been achieved with relatively less strict measure, if compared to China, or Bulgaria for that matter.

UKRAINE

In the period between April 30 and May 6, the rate of spread of the new coronavirus in Ukraine remains steady. In Ukraine, 487 new cases of infection were detected in the last 24 hours, followed by 24 children and 72 health workers. Thus, the total number of infected in the country is 13,184 people, including 905 children and 2,251 health workers, said Health Minister Maxim Stepanov. Since the beginning of the pandemic, 2097 people have recovered in Ukraine and 327 have died.

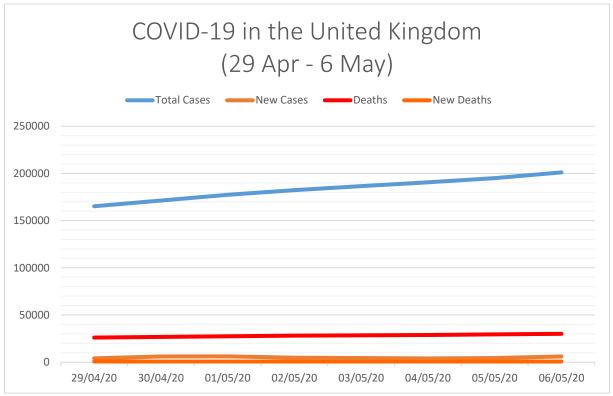


On May 5, the Ukrainian government extended the national quarantine to prevent a coronavirus pandemic until May 22, but agreed to partially lift some of the May 11 restrictions. Partial removal of restrictions includes the opening of parks and recreation areas, as well as some shops for specialized household goods, textiles and more. Cafes can also be open, but you will not be able to sit in them. The cabinet's decision comes after Ukrainian businessmen last week called for easing of restrictive measures to combat the coronavirus in a protest near the government building.

UNITED KINGDOM

The COVID-19 spreading in UK last week stabilized at the levels of the previous week reaching 201,101 total infected people. The 3% daily increase rate brought UK to the 4th place on the world chart by the total cases getting over France and just behind Italy, Spain and US. The United Kingdom registered

30,076 COVID-19 deaths (again 20% increase rate for the period) and now UK has the highest official death toll in Europe and the second highest in the world. The proportion of COVID-19 deaths which took place in care homes has risen last week and represented 59% of all COVID-19 deaths. 75% of all deaths involving COVID-19 to date were of people aged 75 or over. The number of people with coronavirus in hospitals had fallen from 15,415 to 13,168, over the past week - a decrease of almost 15%.



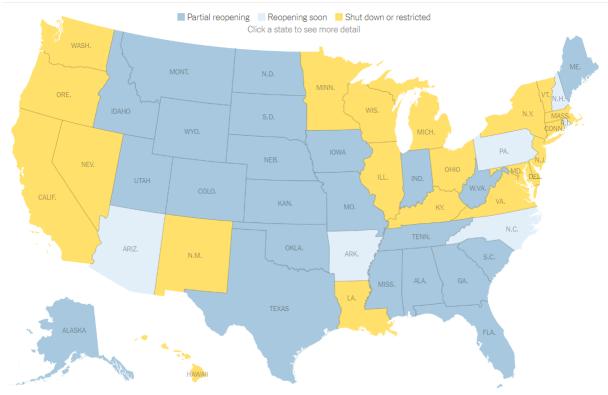
From the beginning of COVID-19 outbreak till now, 1,448,010 tests has been conducted in the UK. More than 69,000 tests were provided on Tuesday, according to figures released on Wednesday, 6 May, missing the government's 100,000-a-day target for a fourth day running.

The government has said making sure the NHS can cope with a second peak of the virus is one of the five conditions that must be met before lockdown is eased. The prime minister has said he will reveal plans to begin easing the lockdown on Sunday.

USA

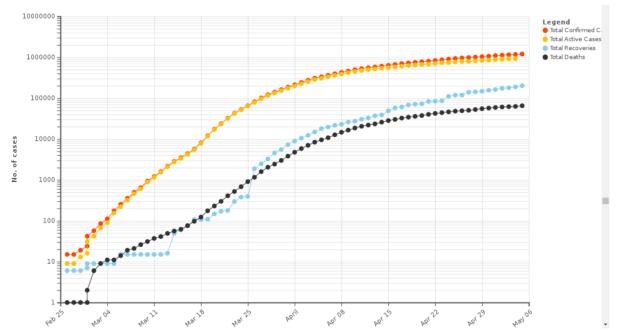
A newly-revised coronavirus mortality model predicts nearly 135,000 Americans will die from COVID-19 by early August, almost double previous projections, as physical-distancing measures are relaxed. The University of Washington's Institute for Health Metrics and Evaluation (IHME) projects 134,475 US deaths, with a range of 95,092 to 242,890, up to early August, based on a report released on 4 May.

About half of the states have begun to reopen their economies and public life in some meaningful way, though health experts have expressed concern that a premature opening could lead to a spike in coronavirus infections that would not be detected in official case counts for weeks. Businesses are almost universally reopening under restrictions, such as allowing fewer customers, requiring workers and customers to wear masks, and enforcing social distancing. Even as governors lift orders, stricter local orders may remain in place by city or county.



A conference organized by international leaders to pledge billions of dollars in funding for a coronavirus vaccine will not be attended by the US, which is facing criticism for its absence and over Trump's cutting of contributions to the World Health Organization (WHO).

The White House is looking to wind down its coronavirus task force in the coming weeks. The vice president of the United States Mike Pence said that the pandemic response may be transferred to federal agencies in late May or early June.



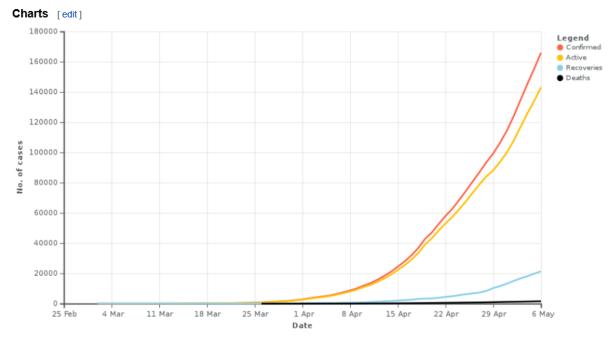
The death toll in the US continues to surge with 71670 deaths and 1,229,919 cases and more than 198,935 patients have recovered. The US continues to lead worldwide cases and deaths from the virus. As of May 4, 2020, the U.S. has the most confirmed active cases and deaths in the world and its death rate was 206 per million people, the tenth highest rate globally.

RUSSIA

In no other country is the virus spreading as fast as in Russia now. At the beginning of the epidemic, a small number of people were reported infected, but the situation has changed dramatically. For weeks now, Russian authorities have been reporting record increases. In many places, a ban on going outside has been introduced to prevent the virus from spreading.

The number of coronavirus infected in Russia has increased sharply every day since last week. On May 03, a record 10,633 new cases were registered for the country. The number of deaths from the coronavirus is already 1537, and the total number of infected since the beginning of the epidemic is 165929. Thus, Russia surpassed Germany and took fifth place in the world in the number of officially confirmed infected with the new coronavirus.

It should be borne in mind here that the spread of the coronavirus in Russia began relatively late, so the peak of the infection is yet to come, as Russian President Vladimir Putin warned last week. Four senior politicians in Russia are infected with the coronavirus - Prime Minister Mikhail Mishustin, Construction Minister Vladimir Yakushev, his deputy Dmitry Volkov and Culture Minister Olga Lyubimova.



Due to the dramatic increase in the number of infected authorities in Moscow, temporary hospitals are being built. One of them, which will have 4,000 beds for patients, will be completed in 20 days. Temporary hospitals with a total capacity of about 10,000 beds are being built in 44 places in the Russian capital.

Meanwhile, the government and regional authorities are working to prepare a plan for Russia's gradual exit from the restriction regime. A new package of urgent measures to support the economy and citizens will also be developed, as well as a nationwide action plan for income normalization and economic growth. The country is also severely affected by the economic impact of the global pandemic. Russia's central bank forecasts an economic downturn of nearly 6% this year. Currently, Russian oil Urals is trading at around \$ 20 a barrel, but last week there were shipments at \$ 8.48 a barrel. When Russian oil falls below \$ 25 a barrel, the Central Bank of Russia generally increases its sales of foreign currencies, with the idea that it will support the ruble and domestic demand. The oil sector accounts for about a third of Russia's gross domestic product. Holding prices below \$ 30 until the end of the year would mean a decline of

AFRICAN REGION

A steady increase in the number of cases has been observed in the African Region since the first case of coronavirus disease 2019 (COVID-19) was reported on 25 February 2020 in Algeria. All Member States have since been affected, with the exemption of Comoros and Lesotho where there have been no official reports of confirmed COVID-19 cases to date. Since the last report on 29 April

nearly \$ 50 billion in budget revenue for the Russian state.

2020, there has been a 52% increase in the number of confirmed COVID-19 cases and a 26% increase in the number of COVID-19 related deaths reported in the African Region. As of 28 April 2020, case fatality ratio around 4.0% has been reported across the 45 affected countries in the region. With the rising number of COVID-19 cases, the overall case fatality ratio fell from 4.7% to 4.0% during the reporting period.

The COVID-19 pandemic continues to expand in the WHO African Region, with the number of new confirmed cases and deaths continuing to increase every week. Seven countries (South Africa, Algeria, Cameroon, Ghana, Nigeria, Guinea and Côte d'Ivoire) have recorded over 1 000 cases; these countries alone account for over half (71%) of the cases reported in the region. It is essential to reinforce mitigation measures in these countries to reduce morbidity and mortality, maintain essential health services and minimize the disruption of public services and economic activities. At the same time, just under half (47%) of affected countries have reported fewer than 100 cases to date. In these countries, measures to contain or at least delay the spread of the outbreak need to be intensified, including active case finding, testing and isolation of cases, contact tracing, physical distancing and promotion of good personal hygiene practices. On 30 April, the first case was confirmed in the Comoros. On 4 May, the first death was announced. Finally, the absence of reported COVID-19 cases from Lesotho calls for a reinforcement of the alert management system in these countries, including the intensification of active case search and testing of suspected cases. Governments need to commit local resources, supplemented by the donor communities, to support the implementation of their containment and mitigation strategies.

NATO in preparation for the second wave

NATO, through the Euro-Atlantic Disaster Response Coordination Center (EADRCC), continues to assist in coordinating the delivery of assistance to affected nations and those requesting official assistance. Upp to now, 7 Allied and 7 Partner nations have sought assistance through the EADRCC. These are Ukraine, Spain, Montenegro, Albania, Northern Macedonia, Moldova, Bosnia and Herzegovina, Georgia, Colombia, Slovenia, Afghanistan, Mongolia and Bulgaria. 11 requests for assistance are currently active after Spain and Slovenia withdrew their formal requests for assistance. It turns out that it is difficult for most member states to respond to requests, as each of them needs these materials. The evolving crisis will be a prerequisite for updating or developing new concepts and doctrines in NATO.

NATO Secretary General Jens Stoltenberg, said that a more coordinated response to a second coronavirus wave would be a litmus test for credibility within the alliance.

With the announced global pandemic on 11th of March 2020 and the subsequent unprecedented changes in the way society functions, the World Health Organization has taken on the role of coordinator of the overall effort to combat the spread of the virus, but one thing has made a strong impression - at the regional level, multilateral alliances have remained ineffective, even in the shadow of individual states' efforts to counter the contagion. NATO, despite the coordination it carried out through the EADRCC, was no exception and performed mainly logistical tasks, which, although a show of solidarity, was not enough to demonstrate the real politico-military force it possessed. Under these circumstances, it is quite normal for the Alliance's political and military leaders to have some concerns about a possible next wave of a global pandemic, which has led to coordination meeting between the Allies to establish a military operational plan for a future response.

Member States' political leaders early May negotiated developing an operational plan, which have to be agreed and approved at the forthcoming meeting of defense ministers in June. Despite unnamed sources, the elite German publication "SPIEGEL politik" reports that one of the ideas of the NATO Secretary General is the common procurement of personal protective equipment and medicines via NATO's own support and procurement agency (NSPA), as well as the simplification of airspace use rules for pandemic flights.

NATO's Supreme Allied Commander Europe, General Tod D. Wolters is tasked over the next few weeks to prepare not only a Strategic assessment but also a report on Military response options.

CMDR COE comments:

- 1. It was expected that a similar step would be taken within the Alliance (preparation of operational plan / revision or development of conceptual documents / acquisition of equipment, etc.) after it was clear from the first day of the pandemic that existing policies and doctrines are not adapted to crises of this nature. Ever since the first report prepared by the CMDR COE, we have emphasized the urgent need to develop "rules" within regional alliances (NATO, EU) in order to achieve coordinated action.
- 2. Despite the increasing conspiracy about COVID-19, the development of such a plan is important for the coordination of the work of NATO

member countries in operational terms, as at this time the national authorities of the countries are united that the possibility from a second wave of infection is forthcoming, and it should aim at far greater effectiveness in actions and measures.

- 3. There is also a need to consider, not only the transportation of materials (medical equipment, masks and medicines, equipment, etc.), but also how the Alliance's aircraft could transport infected patients without endangering the health of crew members.
- 4. Another aspect of higher efficiency is the timely provision of air corridors to Allies in operations related to dealing with the consequences of the contagion. Facilitated procedures are needed to avoid wasting time, which is critical for patients.
- 5. The unpreparedness of NATO forces to act in the event of a pandemic affects the image of the organization, as the negativity is further intensified after the infection of troops from the NATO mission in Kosovo, as well as the multinational formation under German command in Lithuania.
- 6. In developing the operational plan, serious attention must also be paid to information operations and hybrid threats, which have repeatedly tried to damage the image and integrity of the Alliance.
- 7. Gen. Walters will have the serious task to prepare a strategic assessment and a report on military response options, which certainly could not be possible without specialists in infection diseases, virologists and medics. Such expertise is currently too scarce at NATO's strategic command level, which is likely to lead for serious coordination among the Allies. An additional complication will emanate from the area of responsibility Euro-Atlantic region, which in this case is quite inhomogeneous, and each country survives the pandemic, paying a different price and following different rules and regulations.

EU

The EU, together with WHO and other partners, hosted an international pledging conference on 4 May 2020 raising €7.4 billion in only a few hours, as initial funding to kick-start a global research cooperation. The pledging continues until the end of May, and funds collected will be channeled into three strands: diagnostics, treatments and vaccines.

The COVID-19 pandemic is a global challenge and requires a global response. This initiative is part of a multilateral response to the COVID-19 crisis and follows up on a commitment made by EU leaders at the G20 and G7 meetings.

In parallel, the EU has already committed over €380 million in research and innovation measures to develop vaccines, new treatments, diagnostic tests and medical systems to prevent the spread of the virus. The EU's top priority is to safeguard the health of its citizens.

The EU and its member states are working together to reinforce national healthcare systems and contain the spread of the virus. At the same time, the EU and its member states are taking action to mitigate the socio-economic impact of COVID-19.

During this crisis, EU countries are stepping up their efforts to support each other, helping those most in need and sharing resources to fight the spread of the virus. This is EU solidarity at its best.

The EU is also helping EU citizens stranded in third countries. EU delegations are working with member states' embassies to coordinate the repatriation of EU citizens. The COVID-19 pandemic is a global challenge and requires a global response. The EU has also committed to a global response package of €20 billion to support partner countries' efforts in fighting the pandemic.

CONCLUSIONS:

- 1. The unpredictability of the future development of the crisis remains. At this stage, there is no reliable forecast for a possible next wave regarding time and intensity.
- 2. Each country is going through the first phase of the crisis in its own unique way which is largely determined by the timeliness and rigor of the measures taken to limit the spread of the infection.
- 3. It is essential that the parties build resilience that will allow them to successfully confront the infection during the second phase of the crisis, as well as in the event of a possible second wave of COVID-19.
- 4. The analyzes made so far emphasize that climatic conditions and high temperatures do not have a serious impact on the development of the pandemic. This determines that physical distancing and the restriction of social contacts should be considered key to effectively counteracting the infection in the next phase of the crisis.
- 5. With a view to easing measures in many European countries, the coming weeks are expected to be crucial for the future response to the infection. The aim is to determine the specific for each country measures, which will

allow the normalization of public life on the one hand, and, on the other, not to allow the morbidity curve to exceed the capacity of their health systems

- 6. The causes for different mortality, as well as the disproportionate number of those infected in different countries have yet to be investigated. Defining the factor, which determines these large disproportions will be essential to deal with possible subsequent waves of the infection.
- 7. Many developed countries are preparing for a possible second wave of the virus. As soon as possible, the WHO, EU and NATO, together with other expert organizations, need to propose recommendations to handle the problem at national, institutional and global levels.
- 8. The emergence of fatigue in the society is partly due to the increase in disinformation campaigns aimed at taking maximum advantage of the current situation by manipulating society and creating artificial tension and opposition.
- 9. Efforts to find drugs and rapid testing tools for people continue at a varied success. At this stage it is relied on existing, tested, and the WHO-approved medicines to partially support the treatment of patients. The prospect is to create quick tests that can be used at home and at work environment.
- 10. The success in the countries with best results in the fight against the virus is due to the large number of daily tests, which allow early detection of infected people, even of those, who are asymptomatic but are carriers of the infection.
- 11. With the continuing increase in the spread of the infection and the lack of clarity about the future, citizens' discontent is expected to rise. This is a prerequisite for generating additional tensions in the countries and increasing opposition in society, which in turn may escalate into a future military-political crisis.
- 12. The ease of the measures started on 1 May in many countries will show to what extent the situation is under control and whether the world has learned to live in conditions of sanitary distance, which appears to be the so-called "The new normal". Each relieved measure will be monitored and analyzed to assess its effectiveness with the aim to prevent a new wave of infection.

KEY RECOMMENDATIONS:

- 1. The easing of quarantine measures should be approached very carefully. The mitigation of each group of measures should be analyzed and, if the effect is positive, further steps should be taken. Strict control is at the heart of limiting the infection. Everyone should be aware of the conditions they must comply with.
- 2. Decisions to move to each subsequent stage of easing the measures to be taken after meeting the necessary conditions: analysis of the trend of new cases, efficiency of health care and level of compliance with sanitary guidelines by the population.
- 3. To that end, monitoring of compliance with the measures currently in force is to be strengthened. Society has to learn to live in this situation until the crisis is finally dealt with or capacity for its successful management is built.
- 4. Against the background of the experience gained so far and the established level of resilience of the systems, to prepare a plan against a possible second wave of the spread of the infection. Particular attention should be paid to the autumn-winter period, when the situation will be significantly complicated by the appearance of other seasonal viral diseases.
- 5. In such a recurrence of the crisis, economies are unlikely to bear the measures imposed. For this reason, the overall approach needs to change.
- 6. The easing of measures at the national level should soon be transferred to the regional and global levels. Here, international organizations (social, economic and political) are to be unanimous in their decisions.
- 7. The focus in the fight against coronavirus must remain the reliable capacity for increased testing and monitoring of morbidity.
- 8. Attention is to be paid to the mental health of the population. To this end, a comprehensive approach to dealing with the crisis has to be applied and it is therefore necessary to use the expertise of specialists in many different fields.
- 9. The further development of e-government is to become a priority of the state.
- 10. Now is the right time to start the reorganization and electronization of almost every activity in each ministry and institution, as well as companies and production processes.