

CRISIS MANAGEMENT AND DISASTER RESPONSE CENTRE OF EXCELLENCE

34a, Tottleben Blvd, 1606 Sofia, Bulgaria



COVID-19

PART 36/2021

(22 APR – 12 MAY 2021)

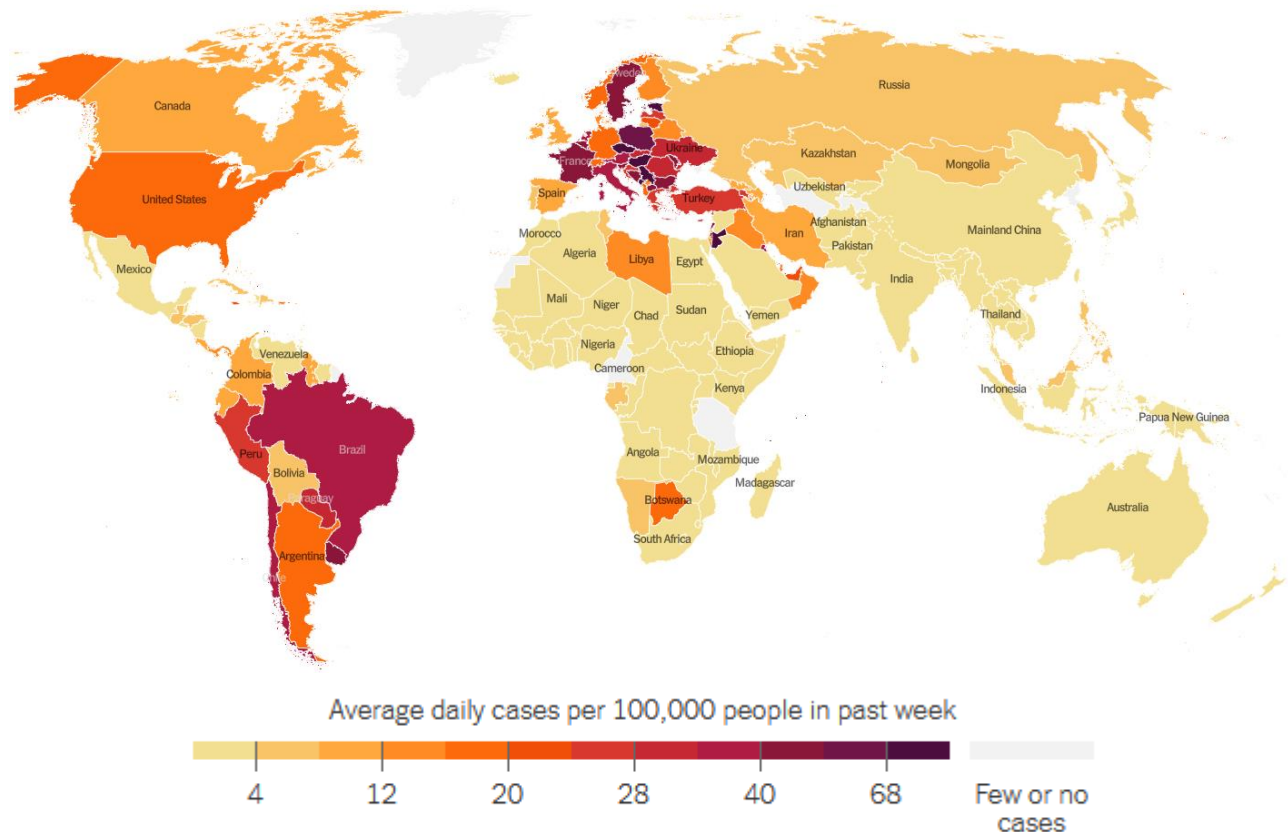
This report represents a summary of open source information, accumulated between 22 APR and 12 MAY 2021, and was assembled 13 MAY 2021. All views and opinions expressed are solely those of the author, unless otherwise stated and do not necessarily represent the official position of the CMDR COE or any government and non- government organization 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 Health Organization, governmental pages, and online statistical databases.

TABLE OF CONTENTS

OVERAL SITUATION ON THE WORLD.....	3
MONITORING.....	5
1. DENMARK	5
2. FINLAND.....	6
3. NORWAY	7
4. BRAZIL.....	9
5. HUNGARY	10
6. INDIA.....	11
7. POLAND	14
8. SWEDEN	18
9. UNITED STATES OF AMERICA	19
CONCLUSIONS.....	23

OVERALL SITUATION ON THE WORLD.

COVID-19 cases crossed 160-million mark globally during last three weeks, with USA, India, Brazil, France and Turkey occupying top five worst affected countries on the world respectively. Number of deaths crossed 3,3 million with USA, Brazil, India, Mexico, and UK among top five countries on the world.



The number of new COVID-19 cases and deaths globally decreased slightly recent weeks, with over 5.5 million cases and over 90 000 deaths. Case and death incidence, however, remains at the highest level since the beginning of the pandemic. New weekly cases decreased in the regions of Europe and Eastern Mediterranean, while the South-East Asia Region continued an upward trajectory for 9 weeks and reported a further 6% increase last week. Death incidence increased in the South-East Asia and Western Pacific regions. While India continues to account for 95% of cases and 93% of deaths in the South-East Asia Region, as well as 50% of global cases and 30% of global deaths, worrying trends have been observed in neighbouring countries. In all WHO Regions there are countries which have been showing a sustained upward trend in cases and deaths over several weeks.

The **African Region** reported over 40 000 new cases and over 1000 new deaths, a 5% decrease and 3% increase respectively compared to the previous week. This follows a long-term downward trend in case and death incidence; however, this trend may soon reverse with cases and deaths beginning to climb again in some countries. The highest numbers of new cases were reported from South Africa (11 975 new cases; a 41% increase), Ethiopia (4155 new cases; a 42% decrease), and Cameroon (4126 new

cases; a 10% decrease). The highest numbers of new deaths were reported from South Africa (318 new deaths; a 13% increase), Ethiopia (162 new deaths; a 9% decrease), and Kenya (139 new deaths; a 1% decrease).

The **Americas** reported over 1.2 million new cases and 33 000 new deaths, decreasing by 4% and 8% respectively compared to the previous week. This is the third consecutive week of decreasing case incidence across the region; however, cases and deaths continue to climb in some countries. The highest numbers of new cases were reported from Brazil (423 438 new cases; similar to previous week), the United States of America (334 784 new cases; a 3% decrease), and Argentina (140 771 new cases; an 8% decrease). The highest numbers of new deaths were reported from Brazil (15 333 new deaths; a 12% decrease), the United States of America (4940 new deaths; a 4% increase), and Colombia (3147 new deaths; a 4% decrease).

The **Eastern Mediterranean Region** reported over 280 000 new cases and over 5600 new deaths, both rates decreasing by 13% compared to the previous week. This is the first week a marked decrease in reported deaths has been reported following 11 weeks of rising numbers. The highest numbers of new cases were reported from the Islamic Republic of Iran (124 513 new cases; a 10% decrease), Iraq (38 192 new cases; a 15% decrease), and Pakistan (28 721 new cases; a 19% decrease). The highest numbers of new deaths were reported from the Islamic Republic of Iran (2434 new deaths; an 18% decrease), Pakistan (840 new deaths; a 12% decrease), and Tunisia (542 new deaths; a 6% decrease).

The **European Region** reported over 897 000 new cases and just under 19 000 new deaths, a 25% and an 18% decrease respectively compared to the previous week. Cases and deaths in the region have been decreasing for the past month. The highest numbers of new cases were reported from Turkey (166 733 new cases; a 35% decrease), France (122 487 new cases; a 26% decrease), and Germany (103 507 new cases; a 20% decrease). The highest numbers of new deaths were reported from Russian Federation (2464 new deaths; a 6% decrease), Turkey (2242 new deaths; a 10% decrease), and Poland (1944 new deaths; a 27% decrease).

The South-East Asia Region reported over 2.8 million new cases and just under 29 000 new deaths, a 6% and a 15% increase respectively compared to the previous week. This marks the ninth consecutive week the incidences of cases and deaths have been increasing in the region. The highest numbers of new cases were reported from India (2 738 957 new cases; a 5% increase), Nepal (56 997 new cases; a 79% increase), and Indonesia (36 882 new cases; a 2% increase). The highest numbers of new deaths were reported from India (26 820 new deaths; a 15% increase), Indonesia (1190 new deaths; a 3% increase), and Bangladesh (368 new deaths; a 34% decrease).

The **Western Pacific Region** reported over 127 000 new cases and just under 1700 new deaths, a 4% decrease and a 34% increase respectively compared to the previous week. The highest numbers of new cases were reported from the Philippines (48 197 new cases; a 16% decrease), Japan (35 802 new cases; a 2% increase), and Malaysia (25 350 new cases; a 19% increase). The highest numbers of new deaths were reported from the Philippines (915 new deaths; a 35% increase), Japan (527 new deaths; a 38%

increase), and Malaysia (136 new deaths; a 43% increase).

MONITORING

1. DENMARK

DENMARK EASES MORE COVID RESTRICTIONS WITH NEW 'CORONA PASS'

Gyms, theatres and cinemas welcomed Danes back thanks to a new round of Covid-19 restriction easing and a reliance on a "corona pass".

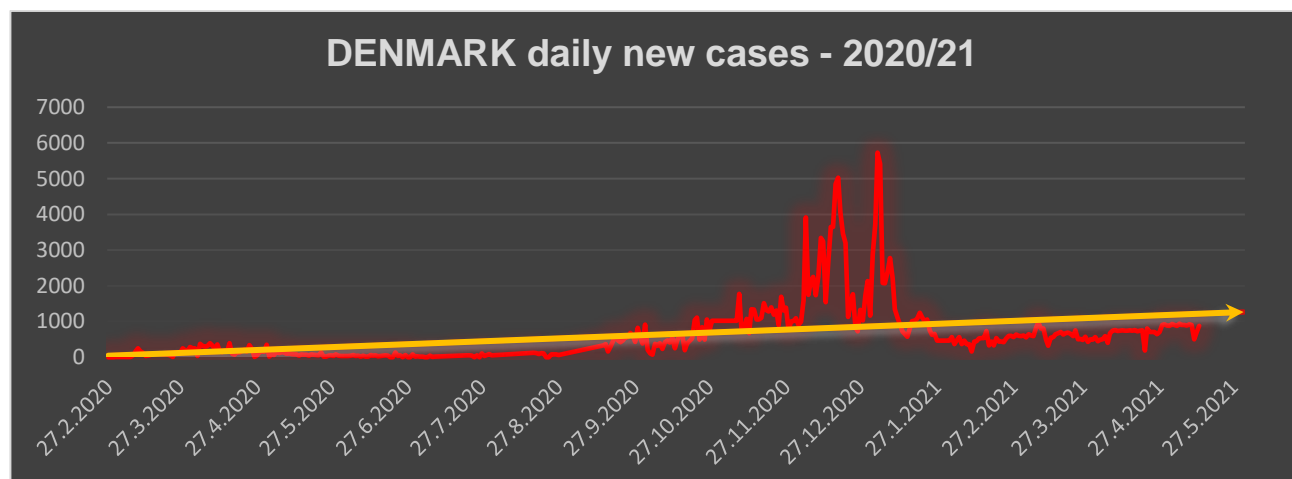
Armed with the pass people in Denmark can already visit restaurants, museums or the hairdresser. Now the new certificate -- confirming that they have either tested negative in the past 72 hours, been vaccinated, or recently recovered from Covid-19 - will also give them access to other places that have been off limits due to the pandemic.

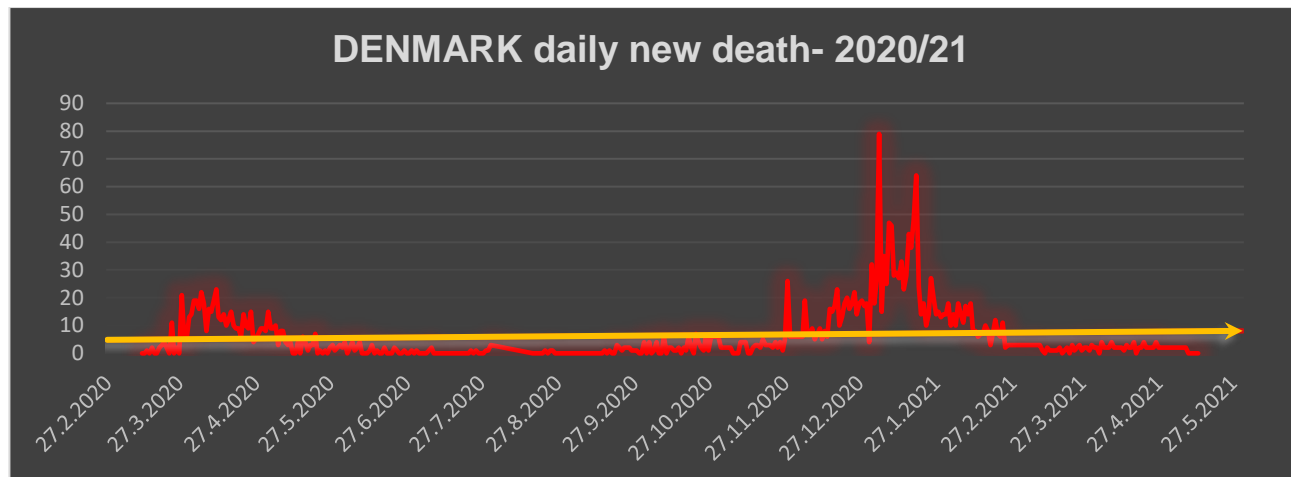
Launched in early March, as zoos reopened, the use of the pass has been a requirement for each new stage of Denmark's reopening. It could be considered a major success because it has combined the reopening of the economy and has boosted testing.

Primarily digital, the health pass is currently available through a mobile phone application which accesses your personal health data, but it also comes in a paper version.

With only 12.7 percent of Danes fully vaccinated, the pass relies heavily on testing.

In the country where trust in authorities is generally high the adoption of the corona pass has met little or no resistance. In its recommendations, Denmark's Ethics Council calls for "a gradual reduction in the use of the corona pass so that it is only used as long as it has a significant effect on the fight against the epidemic.





Sources:

1. <https://www.france24.com/en/live-news/20210506-denmark-eases-more-covid-restrictions-with-new-corona-pass>

2. FINLAND

FINNISH GOVERNMENT TO EASE CORONAVIRUS RESTRICTIONS

The government is likely to relax some of the restrictions adopted to contain the spread of the new coronavirus. It is considered that the decision would effectively re-enable the organisation of small public events in most parts of the country, by allowing concert halls, live venues and theatres to re-open to limited attendees also in areas in the acceleration stage of the epidemic. Virtually all such venues have been shut down in areas in the acceleration or community transmission stage of the epidemic due to a ban on events with more than six attendees. The decision would open the door for outdoor events with up to 50 attendees and indoor events with up to 10 attendees in areas in the acceleration stage. Private events, meanwhile, would be allowed as long as they are not attended by more than 20 people. The organisers would be required to comply with certain health security recommendations, according to the daily newspaper.

The Ministry of Social Affairs and Health, is expected to issue new instructions to municipal and regional authorities stating that areas in the acceleration stage no longer need to adhere to recommendations specified at tier two of the hybrid coronavirus strategy. Finland, thereby, is set to move to the first or lowest tier of the strategy, meaning areas in the acceleration stage no longer need to utilise measures laid down for areas in the community transmission stage.

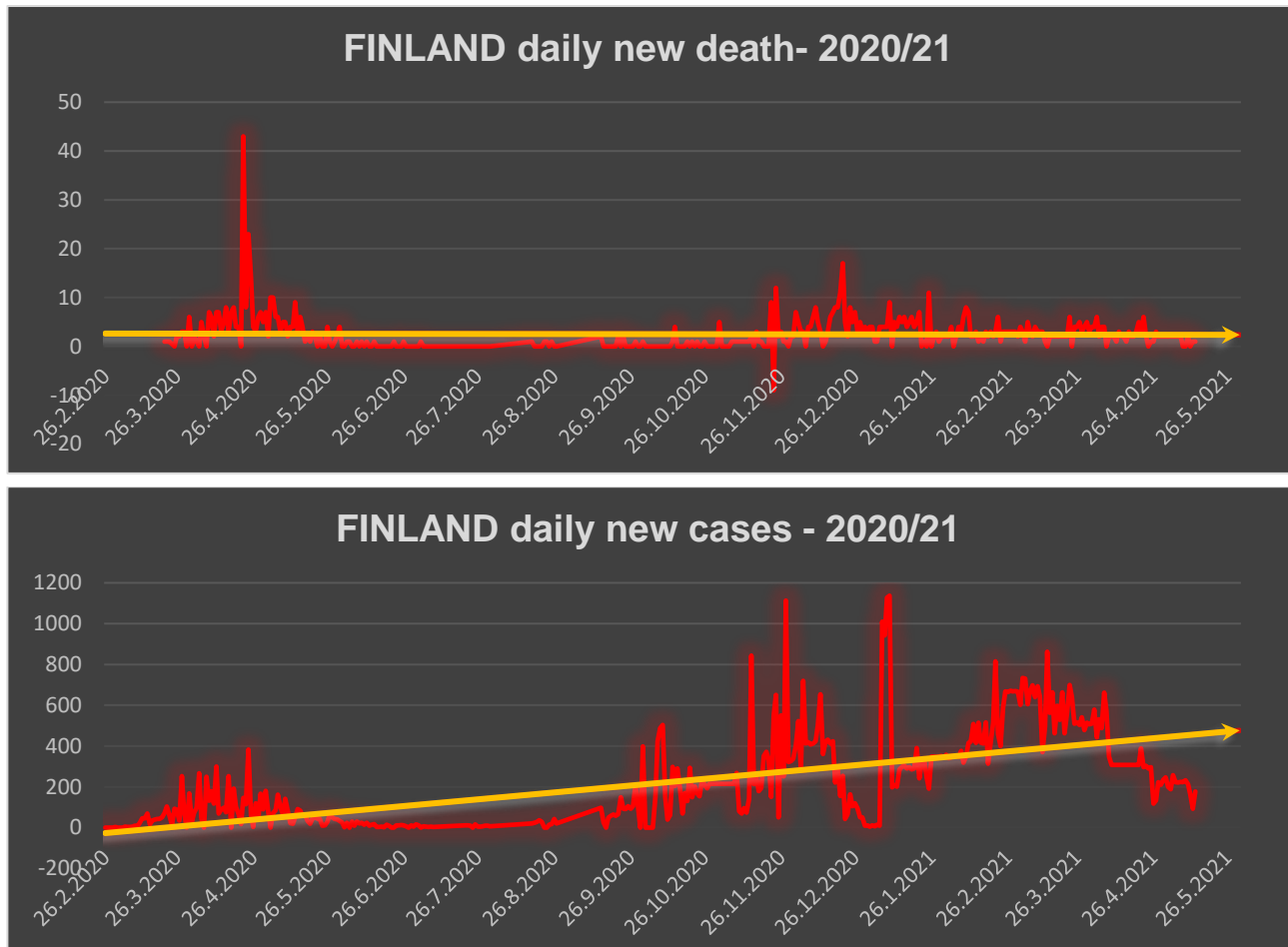
FUTURE OF FINLAND'S COVID NASAL SPRAY VACCINE UNCERTAIN

Finnish nasal spray vaccine firm continues its search for investors. Private funders had tentatively agreed to join the project if the state would ensure that clinical trials would not be interrupted due to lack of funding, has not yet signed contracts with private financiers. To date, the project has been funded with grants totalling almost 3 million euros.

Preparations for clinical trials in humans have already begun. The partner companies have invested money in the trials, but the company's coffers are now empty, making it impossible

to launch tests.

The Ministry of Employment and the Economy (MEE) has not been directly in contact with the vaccine team regarding the new guidelines it has reported to MOT regarding this matter. The Finnish research team claims their nasal spray vaccine works on different variants of the coronavirus. They said they had aimed to employ the spray in Finland's second or third round of vaccinations against Covid.



Sources:

1. [HS: Finnish government to ease coronavirus restrictions next week \(helsinkitimes.fi\)](https://helsinkitimes.fi)
2. [Future of Finland's Covid nasal spray vaccine uncertain | Yle Uutiset | yle.fi](https://yle.fi)

3. NORWAY

CURRENT RESTRICTIONS LIMIT ENTRY TO A VERY SMALL GROUP OUTSIDE OF NORWEGIAN RESIDENTS AND CITIZENS.

The Norwegian government is paying close situational awareness in the world and will always ensure that the entry restrictions are adapted to the current situation. No one wants strict entry requirements longer than necessary and all the restrictions would be lifted in line with the government's reopening plan. The government would consider exemption from measures for those with vaccine passports or corona certificates, but it is yet to finalise the details. Currently, only permanent residents and Norwegian citizens may enter Norway, with a few exceptions. Everyone arriving in Norway must also register before their arrival and

provide a negative PCR or rapid antigen test taken within 24 hours of their departure flight. They are also obliged to take a rapid test on arrival and remain at the test centre until their result is delivered.

You are exempt from quarantine if your trip abroad is considered essential. Essential trips include those taken to visit your children, go to a funeral, or to visit a relative or close relation with a severe or terminal illness, as well as strictly necessary maintenance on a holiday home in Sweden or Finland.

NORWAY TO EXCLUDE J&J, ASTRAZENECA FROM COVID VACCINE SCHEME

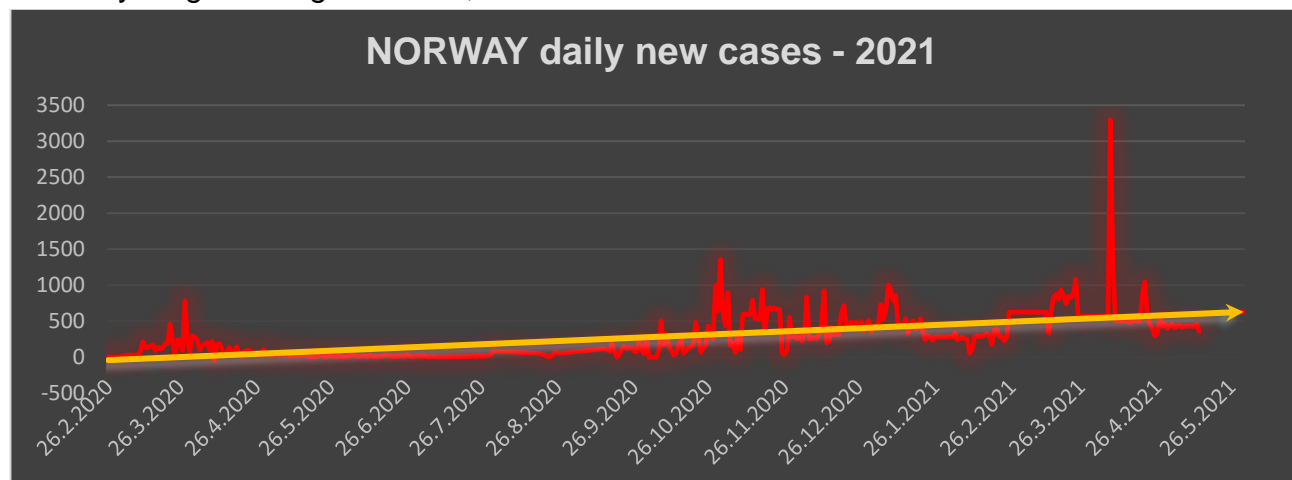
Norway would exclude the COVID-19 vaccines made by AstraZeneca and Johnson & Johnson from its inoculation programme due to a risk of rare but harmful side-effects.

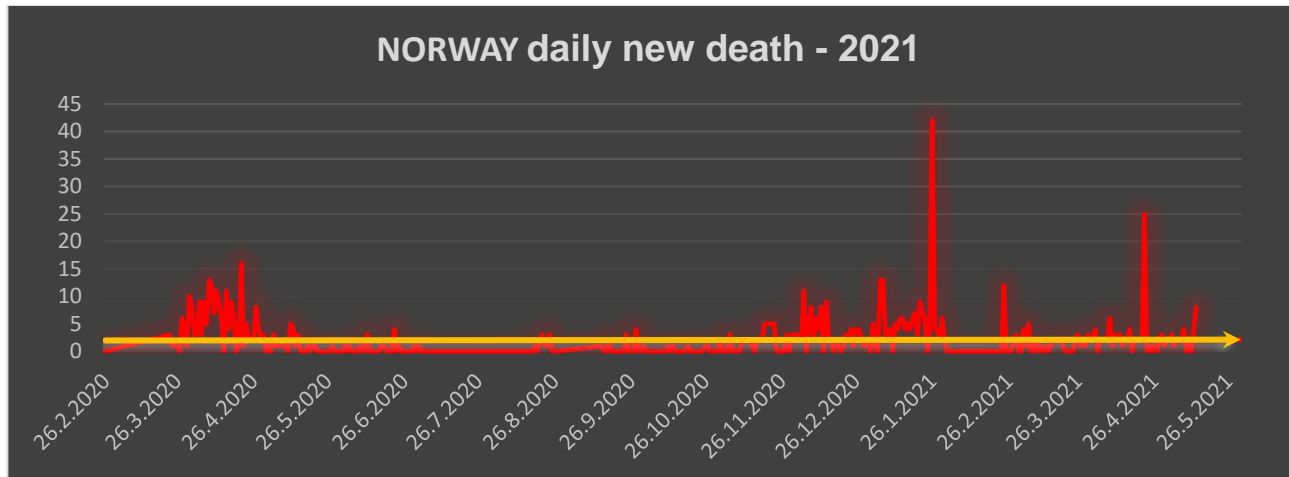
Those who volunteer to take either vaccines would however be allowed to do so in order to dispel any vaccine hesitancy.

Norway suspended the AstraZeneca rollout on March 11 and likely will do the same with the Johnson & Johnson vaccine, after a small number of younger inoculated people were hospitalised for a combination of blood clots, bleeding and a low platelet count, some of whom later died.

The government will use this as basis for its decision and is going to pay a great emphasis on maintaining confidence in the national vaccination scheme so that immunity can be established in the population in multiple potential rounds of vaccination in the coming years. Norway currently uses only vaccines made by Moderna and Pfizer/BioNTech.

The recommendation not to use AstraZeneca and J&J was in line with decisions already made by neighbouring Denmark, which became the first nation to ditch the vaccines.





Sources:

1. [Travel: Norway extends Covid entry restrictions - The Local](#)
2. [Norway should exclude J&J, AstraZeneca from COVID vaccine scheme, says commission | Reuters](#)

4. BRAZIL

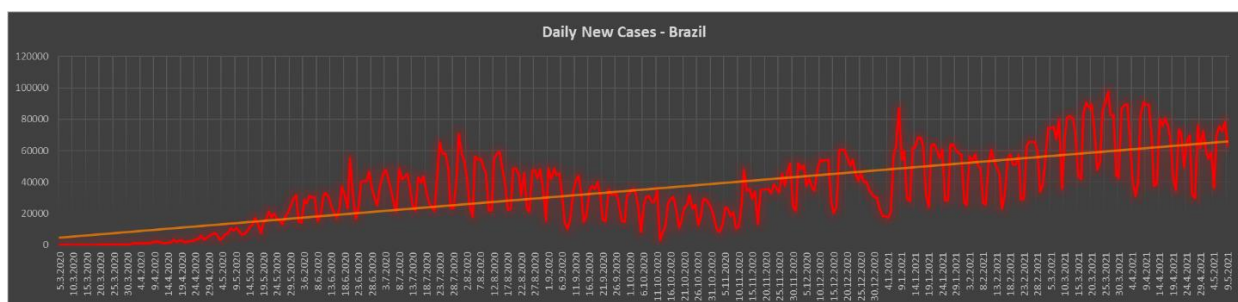
Brazil has the highest death toll in the world from COVID-19 after the United States, and third in total coronavirus infections after the United States and India.

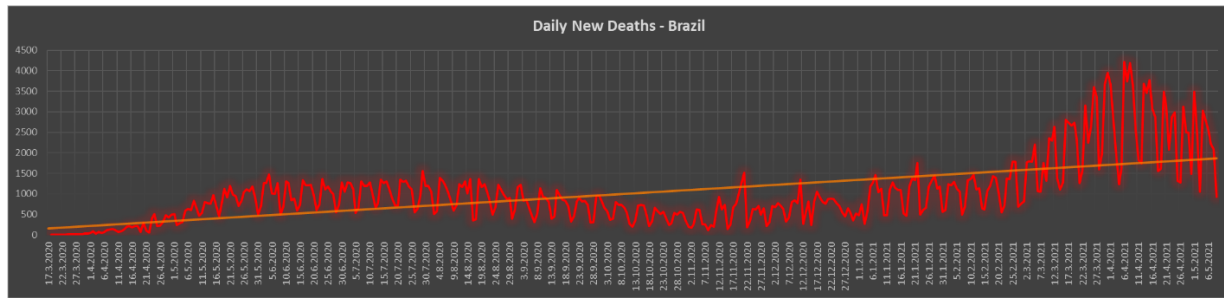
The South American country is so short of vaccine supplies that several big cities have not been able to administer second doses. Some intensive care wards have run out of oxygen and drugs needed to sedate intubated COVID-19 patients.

The United States is working to give Brazil access to \$20 million worth of medication used for patients in need of mechanical breathing assistance. The medications will come from the U.S. government's strategic stockpile and will be delivered in partnership with the Pan American Health Organization, the White House said last week.

Brazil reported 2,091 more deaths from COVID-19, raising the national count to 421,949, the Ministry of Health said.

The ministry said 63,268 more cases were detected, raising the nationwide tally to 15,150,628.





The South American country is experiencing a new wave of infections, which has resulted in an increase in cases and deaths as the number of patients overwhelms hospital capacity.

According to the ministry, Brazil now has a death rate of 198 deaths per 100,000 inhabitants and an incidence rate of 7,140 cases per 100,000 inhabitants.

The state of Sao Paulo, the most populated in the country, is the hardest hit with 99,406 deaths and 2,969,680 infections, followed by Rio de Janeiro with 45,914 deaths and 770,401 cases.

According to local media Brazil had vaccinated 50.4 million people against COVID-19 with 33.4 million having received the first dose and 17.03 million both.

Sources:

1. http://www.xinhuanet.com/english/2021-05/07/c_139929825_2.htm
2. <https://www.reuters.com/world/americas/brazil-covid-19-inquiry-told-bolsonaros-blind-faith-chloroquine-2021-05-04/>
3. <https://www.channelnewsasia.com/news/world/brazil-coronavirus-case-count-tops-15-million-health-ministry-14759828>

5. HUNGARY

HUNGARY EASES COVID-19 RESTRICTIONS FOR THOSE WHO ARE VACCINATED

Hungary will loosen coronavirus restrictions for holders of a government-issued immunity card the country is about to reach 4 million first-dose vaccinations, representing about 40 percent of the population.

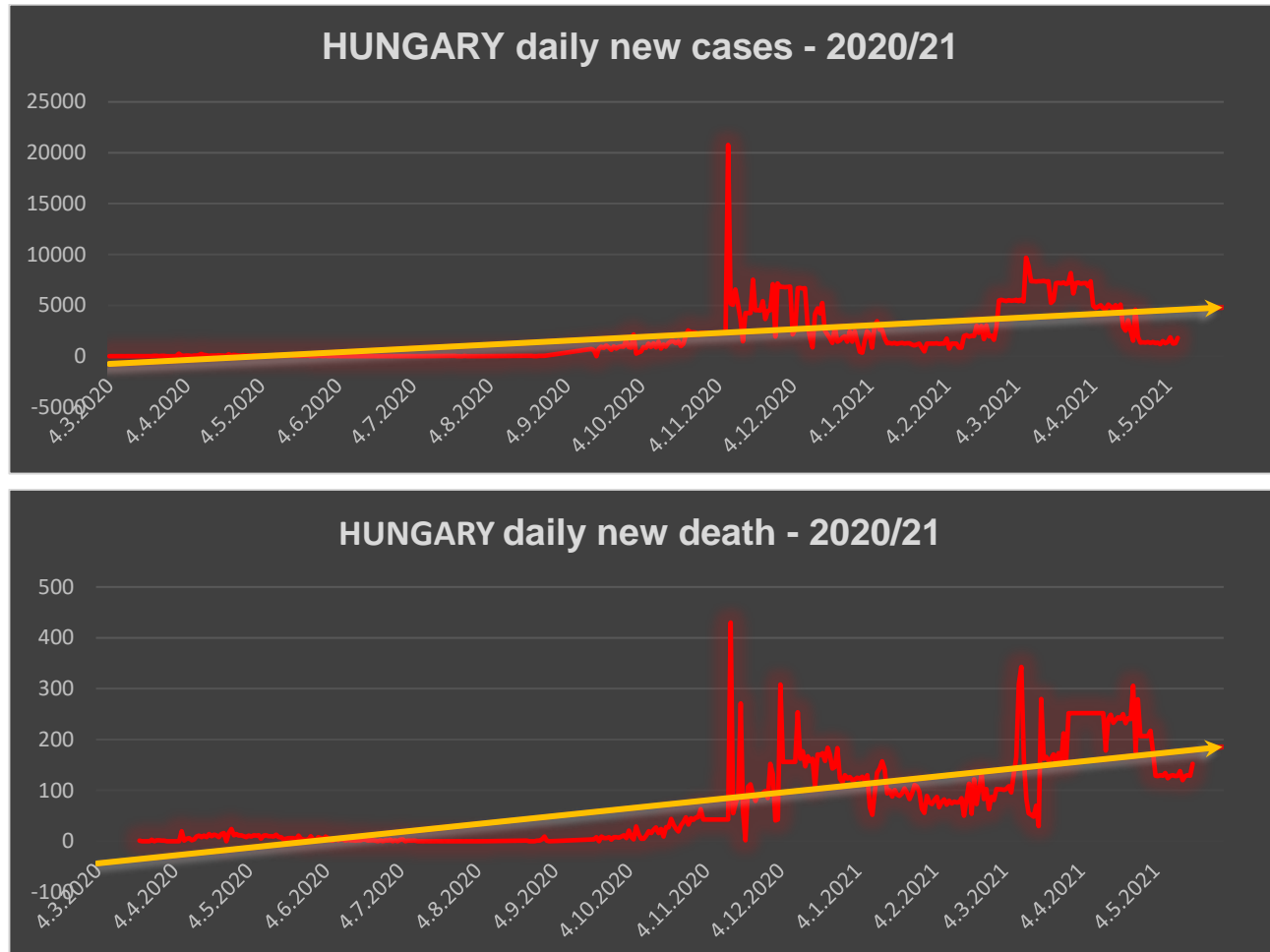
In the latest round of reopening, card holders may access indoor restaurants, hotels, theaters, cinemas, spas, gyms, libraries, museums, zoos, and other recreational venues from May 1. Opening hours for businesses will also be extended to 11 p.m.

Hungary is mainly relying on vaccines from China and Russia that have not been approved by the European Medicines Agency, alongside Western vaccines. The country has the second-highest vaccination rate in the European Union, but a pandemic surge in the spring has given it the highest total death rate in the world.

Hungary will seek to conclude a bilateral agreement with every country that is open to entering into an COVID-19 Immunity Certificates agreement, regarding the mutual recognition of the COVID-19 travel certificates. In a bid to make the travelling process easier for all persons who have taken the vaccine against the Coronavirus disease, authorities in Hungary previously introduced the immunity certificates, following the example of some other

European countries.

In this regard, an EU official told in April 2020 that once vaccines start to roll out in European Union countries, travellers would be required to follow two key requirements in order to enter Schengen Zone countries; present a negative result of the COVID-19 and later get vaccinated against the virus.



Sources:

1. [Hungary Eases COVID-19 Restrictions For Those Who Are Vaccinated \(rferl.org\)](https://rferl.org)
2. [Hungary to Reach Agreements With Other Countries on COVID-19 Immunity Certificates - SchengenVisaInfo.com](https://SchengenVisaInfo.com)

6. INDIA

As the 2nd wave of the COVID-19 pandemic is burning through India, there is a minor hope that the current crisis has reached its peak. The reason for this is that in the last few days the number of the new daily infections slightly decreased and dropped below 400,000. However, such optimism is not shared by many experts, who are certain that the tallies of the infections and deaths are drastically undercounted and suspect that the real numbers could be 5 to 10 times higher. Additionally, similar signs of flattening of the infection curve have been seen for few days at the beginning of May, only to be followed by a steep rise of

the new daily infections and deaths. Furthermore, scientists warn that even if the peak of the 2nd wave has been already reached, the decline in the numbers of the newly infected and deceased will be long and slow. As of 12 May, India has 23,340,938 COVID-19 cases, occupying the 2rd place in the world among the worst affected countries by the pandemic. The country has also registered 254,255 deaths (3rd in the world) and 3,709,551 active cases. In May India is reporting about 400,000 new cases daily but even of biggest concern is the fact that the number of daily deaths has steady and quickly increased and currently is above 4,000. One reason for the much higher mortality rate is that the healthcare system of the country is overwhelmed by the pandemic and almost everywhere across India, the local authorities report lack of oxygen, hospital space, important anti-COVID-19 drugs and vaccines. People are dying at the hospital parking lots, unable to get care, or at home, unable to get an ambulance.

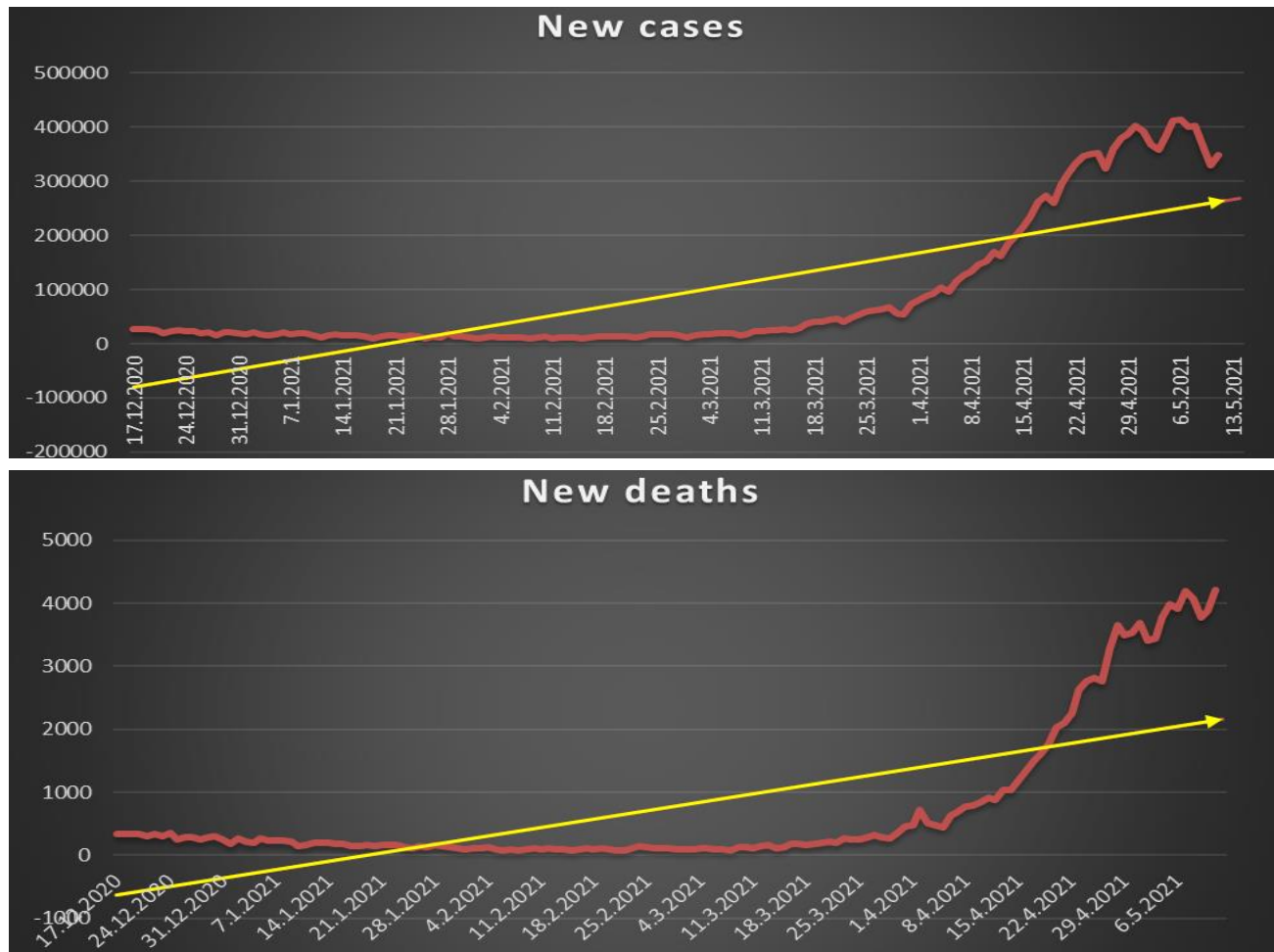
Given the huge size of the Indian territory and population, there are a few doubts that India's COVID-19 crisis is a global problem that needs a quick coordinated response. Some countries are already trying to help – USA sent oxygen concentrators and promised vaccines, while UK, Italy and Germany committed additional medical equipment. Meanwhile, Russia provided medicine, monitors and ventilators. However, at the moment the international assistance is far too little and slow and the crisis is spreading from India to the neighboring countries, which similarly to India have low vaccine supplies and weak health systems. But the bigger problem according to some experts comes from the fact, that the more the virus spreads, the higher are chances for mutations and new variants that could eventually resist current vaccines, threatening to undermine other countries' progress in containing the pandemic. The World Health Organization (WHO) already declared the local Indian Variant B.1.617 “a variant of concern”. There is information suggesting that this variant of the virus is with increased transmissibility and in accordance with WHO's reports it has been already detected in 44 other countries and in all 6 WHO regions. B.1.617 is the 4th variant declared as “a variant of concern” by the WHO, after the UK, South African and Brazilian variants, which presence has also been confirmed on the territory of India. These 4 variants are believed to be only one of the several factors contributing to the massive outbreak in infections across India. Other factors are the huge religious and political rallies in the last months, the mixed messaging by the government and the decreased cautiousness of the population.

Before its own 2nd wave of the COVID-19 crisis, India assumed a leadership position in the global effort to end the pandemic. Prime Minister (PM) Modi promised millions of doses to the COVAX initiative, and earlier this year donated vaccines to many countries. This policy, however, has not shielded the central government from public anger at home over its alleged role in exacerbating the domestic health crisis. People feel abandoned by their government and have begun to express openly their anger and frustration, which most often is directed against the PM himself. In this situation Modi ruled out a nationwide lockdown but urged Indians for discipline and precautions to halt the spread of the virus. But as thousands of Indians are dying every day, even the strongest PM's supporters are angry with him. The social media forums are buzzing with criticism. Rather than concede errors, the ruling party attempted to silence its critics, by ordering social media to block posts and by threatening to seize the property of those who publicly complain about the lack of oxygen,

antiviral drugs or other problems. Those methods seem to be backfiring as the popular support for the ruling party is fading and it lost the recent elections in several states. Despite the accusations and loss of public support, it seems unlikely at the moment that the central government will introduce harsh measures at national level in the near future. However, the local authorities in many states and union territories compensated this with short local lockdowns and curfews, travel restrictions and other measures. In some states and big cities significant decline in the number of new infections is observed but still the overall situation in the country remains critical and the predictions of different scientists are that this will last until the end of May and probably in June.

Vaccination. Given the desperate situation at the moment, a quick vaccination of majority of Indian population, in order to create “heard immunity” as soon as possible, is assessed by many experts to be the only way out of the crisis. The vaccination campaign, advertised as the largest the world has ever seen, was ongoing well in April with the average of 3 million people vaccinated per day. The scope of the vaccination was expanded, as of 1st May the 3rd phase of the vaccination campaign has begun and now everyone above the age of 18 is eligible to be vaccinated. However, in early May the demand for vaccines increased significantly and India began to experience lack of vaccines. These created a chaos with the vaccination program and significantly slowed down the pace of the vaccinations to 1,3 million per day at the moment. The government responded to this with an attempt to increase the local vaccine production, which was not very successful, due to shortage of resources. Consequently, the export of vaccines was banned and the central government and individual states are trying to secure import of vaccines to keep the vaccination ongoing. India now has 3 vaccines approved for emergency use (the Oxford-AstraZeneca, local Bharat Biotech and the recently approved Russian Sputnik V). A 4th vaccine (Covovax) is in the final phase of trial and is expected to be approved very soon. In order to increase the vaccine availability, the government may temporarily suspend the rules requiring domestic clinical trials, thus allowing shots made by Moderna and Pfizer Inc. to be imported.

As of 12 May the cumulative number of the administered COVID-19 vaccine doses in India is over 172,523,991. This translates to 11,17% of the population covered with one dose and only 1,96% fully vaccinated with 2 doses.



7. POLAND

Last weeks shown that third wave of pandemic is going to end in Poland, however is too early to celebrate success. Number of new daily cases decreases significantly comparing to previous reporting period and now is on the level of 4697 new cases per day (73% decreases). Number of deaths also decreased (36%), but still on the level of more than 2000 deaths per week.

Nevertheless, polish government decided to gradually introduce easing of restriction measures, pending current epidemic situation:

- Galleries and museums are already open with capacity restrictions;
- All kind of markets & malls can be opened with space limitations per person;
- Hotels can work but within 50% of their capacity.
- From 15 MAY there will be no need to wear masks in open area, restaurants can open their outdoor premises, cinemas & theaters.
- Next easing is foreseen from 29 MAY

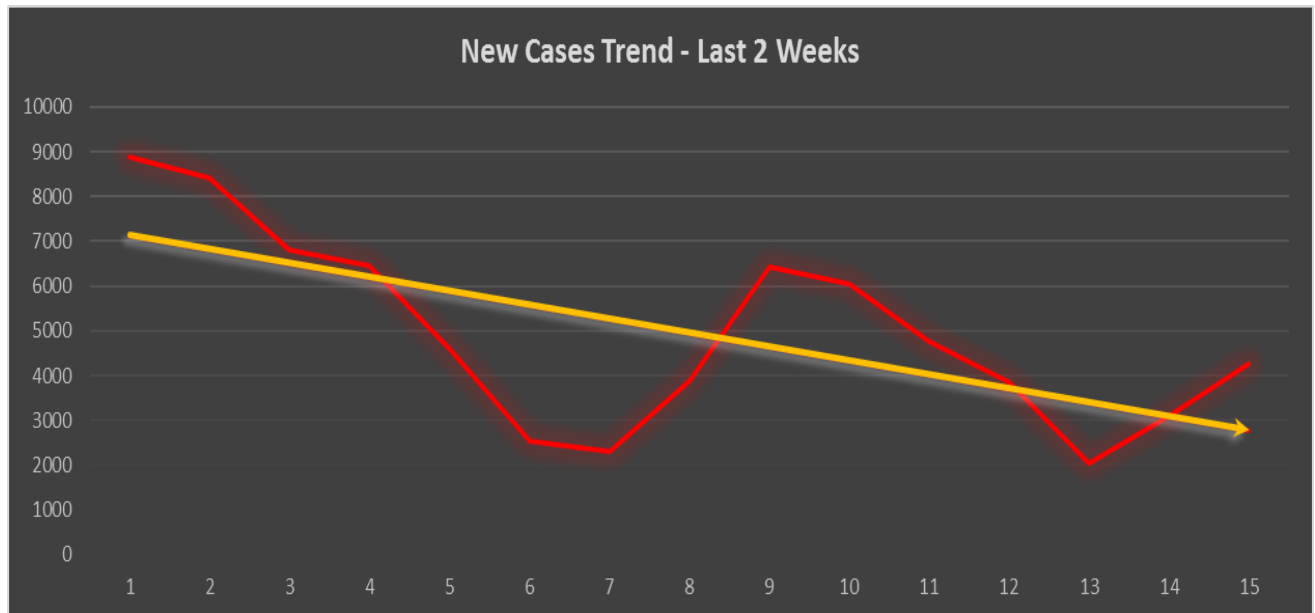


Figure 1. New cases trend during last two weeks

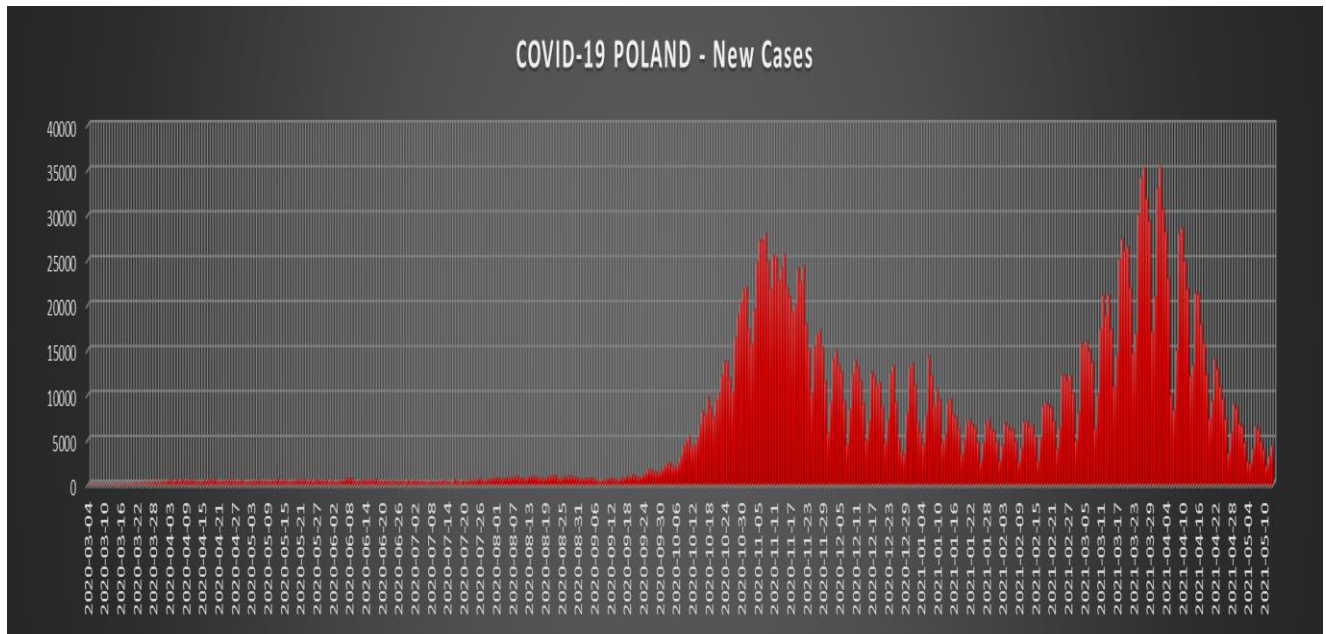











Figure 1. Total cases trend from the beginning

Statistic Dashboard

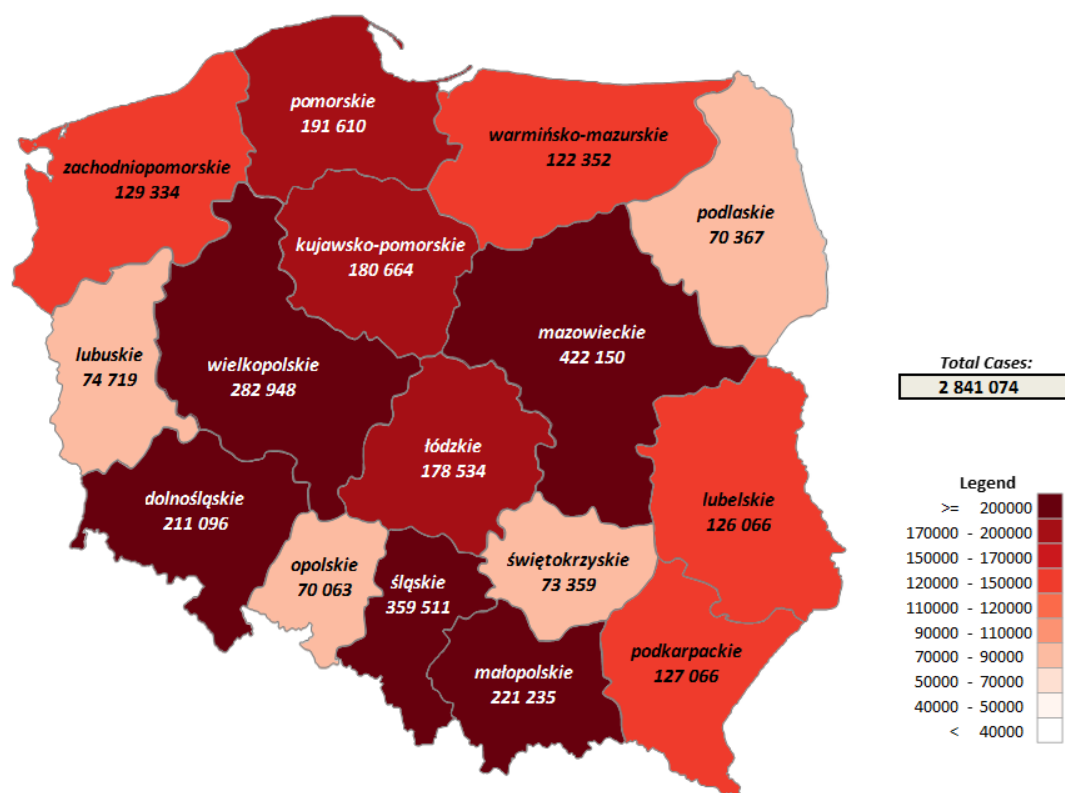
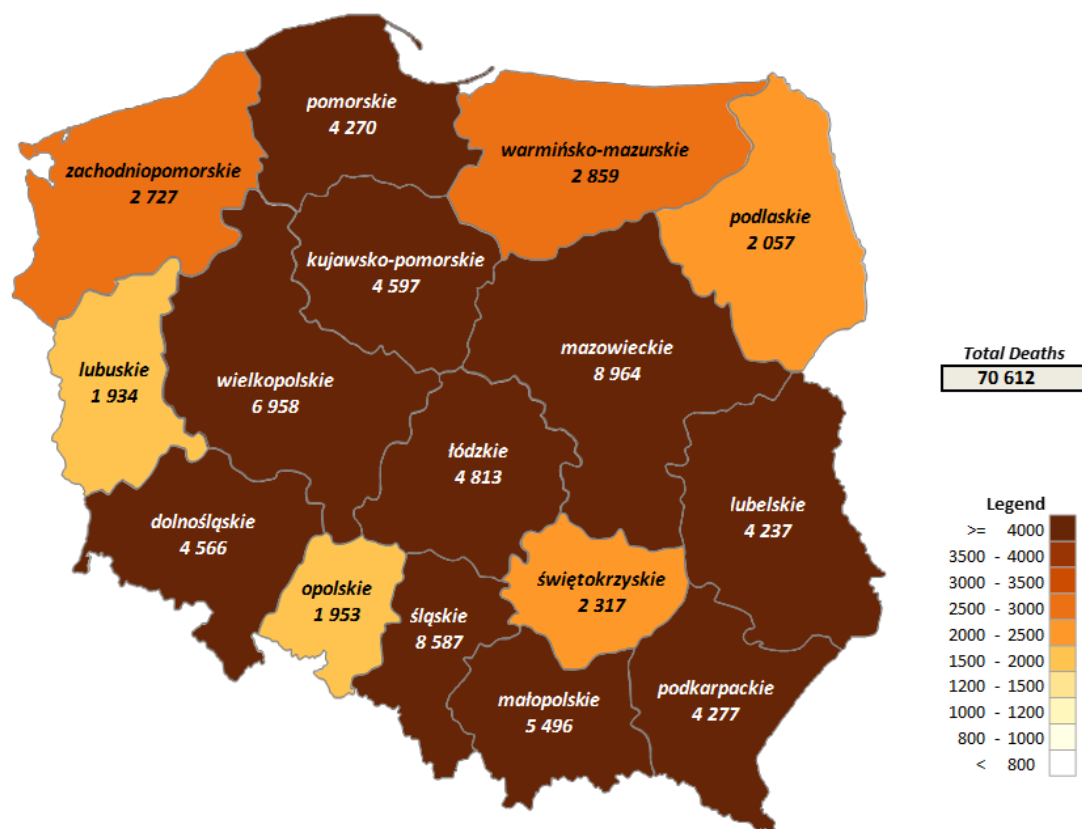
	Total	New	Trend	Percentage
Cases	2 841 074	+ 123 900	↓	-50%
Deaths	70 612	+ 7 223	↓	-7%
Recovered	2 582 519	+216 289	↓	-31%
Active Cases	287 555	-99 612	↓	-27%

Critical	1 859	- 1 406		-95%
Daily Average	4 679	- 12 950		-74%
Hospitalized	14 359	- 16 347		-75%
Quarantine	112 961	-140 114		-13%

National Vaccination Program

<i>Logistic Data</i>		
	<i>Number of delivered doses</i>	17 158 810
	<i>Doses delivered to vaccination points</i>	16 497 170
	<i>Doses in reserve medical storage</i>	103 350
	<i>Utilized doses</i>	13 495
<i>Vaccination</i>		
	<i>Number of vaccinations done</i>	14 274 291
	<i>Vaccinated with first dose</i>	10 609 955
	<i>Vaccinated with two doses</i>	3 839 390

National vaccination program is continued. Government change approach to full open vaccination and from 9 of May every citizen over 18 years can be vaccinated. As of now **28,03%** from entire population took at least 1 dose and **10,69%** of population is fully vaccinated.

Number of cases by voivodship:**Number of deaths by voivodship:**

8. SWEDEN

ONE YEAR AND ONE MILLION CASES LATER, SWEDEN STILL HAS A COVID COMMUNICATIONS PROBLEM

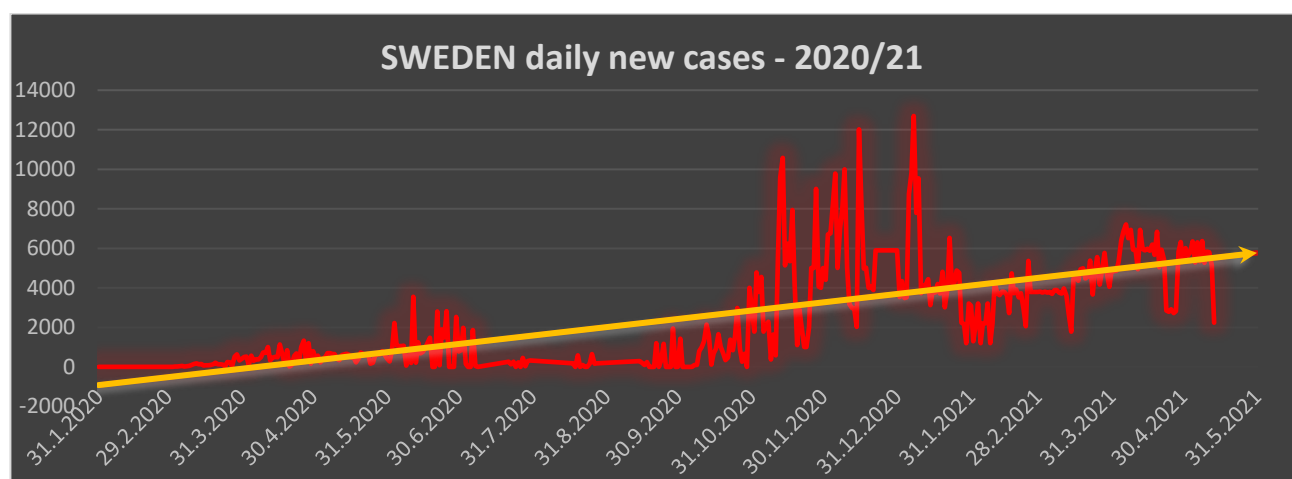
Clear, sustainable measures that would be easy for the public to understand and stick to long-term; that was supposed to be the hallmark of Sweden's coronavirus strategy.

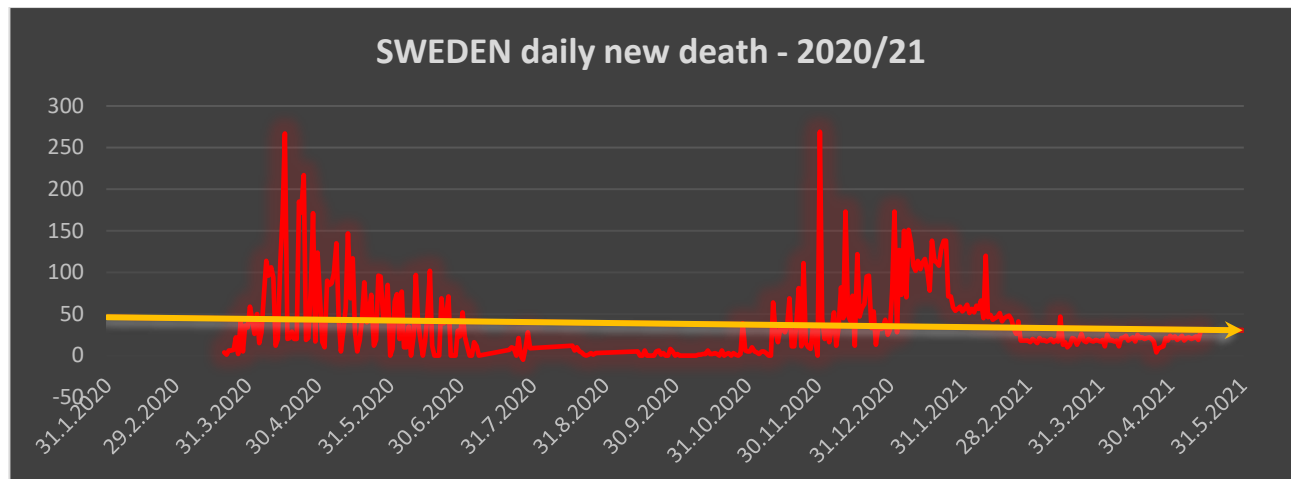
But over the past year, recommendations have often been vague or even appeared contradictory. At the time of writing, around two thirds of regions have local recommendations on top of the national ones, two of them urging people to enter a "personal lockdown", some saying that all non-essential travel and visits to shops should be avoided, but others varying. Unlike many countries, no consistent system regulating which measures are introduced at which point has been made public. This is exacerbated by the fact that its recommendations have at many times differed significantly from those elsewhere.

But despite law changes increasingly being used as part of Sweden's raft of Covid-19 measures, the recommendations for private individuals remain extremely vague, left open to interpretation and considering the answer is generally the same: "We don't need stricter measures, we need people to follow the measures and recommendations we have in place."

Sweden is certainly not the only country that has struggled to get its message across in an understandable way. Elsewhere, limits on how many people can meet and in which circumstances, when and for what purpose you can leave your home, have changed at short notice, confusing members of the public trying to keep up.

But there has to be a middle ground: clear communications, explaining simply how Covid-19 spreads, and how different measures have an impact. But for that to happen, communication from authorities about what people need to do and why needs to be much, much clearer.





9. UNITED STATES OF AMERICA

New cases of Covid-19 are dropping sharply across the U.S. as millions of people get vaccinated daily, fueling optimism that the nation may have averted the surge of infections gripping other parts of the world and is finally turning the corner on what was one of the worse outbreaks globally. The rate of daily Covid infections is declining in 30 states, and 1 in 3 Americans are now fully vaccinated. Outbreaks are subsiding in the Upper Midwest. Michigan, Minnesota and Illinois are all reporting drops in new cases. Reports of new cases are increasing in Oregon, though the state's recent infection rate is not yet among the country's worst.

	TOTAL REPORTED	AVG. ON MAY 8	14-DAY CHANGE
Cases	33.4 million	42,097	-29%
Deaths	594,911	675	-1%
Hospitalized		45,670	-6%

As of May 9, the 7-day average of daily new cases fell to under 50,000 for the first time since October and is down 17% from a week prior. Hospitalizations and deaths from the disease are also falling. The latest seven-day average of daily Covid deaths in the U.S. is 677, and the reported toll over the course of the pandemic has surpassed 594,911.

Centers for Disease Control and Prevention data published on May 7 shows 45.3% -150.4 million of the U.S. population have received at least one dose of the vaccine and more than 33.4% -93.1 million have been fully vaccinated.

The U.S. is reporting an average of 2.2 million daily vaccinations over the past week, 38% down from a peak level of 3.4 million per day on April 13.

President Joe Biden earlier this week set a goal of getting 70% of U.S. adults to receive at least one dose of a Covid vaccine by July 4, as of May 6, about 57% of adults have done so. While Biden's 70% target is for the country as a whole, a few states have already crossed

the threshold. More than 70% of adults have received at least one vaccine dose in New Hampshire, Massachusetts, and Vermont.

Vaccination	At least one shot	Two shots	Doses delivered	Shots given	Doses used
U.S. total	45.3 % - 150,4 million	33.4 %- 93.1 million	110.9 million	243,640,460	78%

The Food and Drug Administration is expected to approve Pfizer's request to amend its emergency use authorization to include kids ages 12 to 15 as early as next week.

All across the country, mask mandates are easing, restrictions are lifting and many states have gone back to business as usual. It appears much of the country will be open with few restrictions in the coming months.

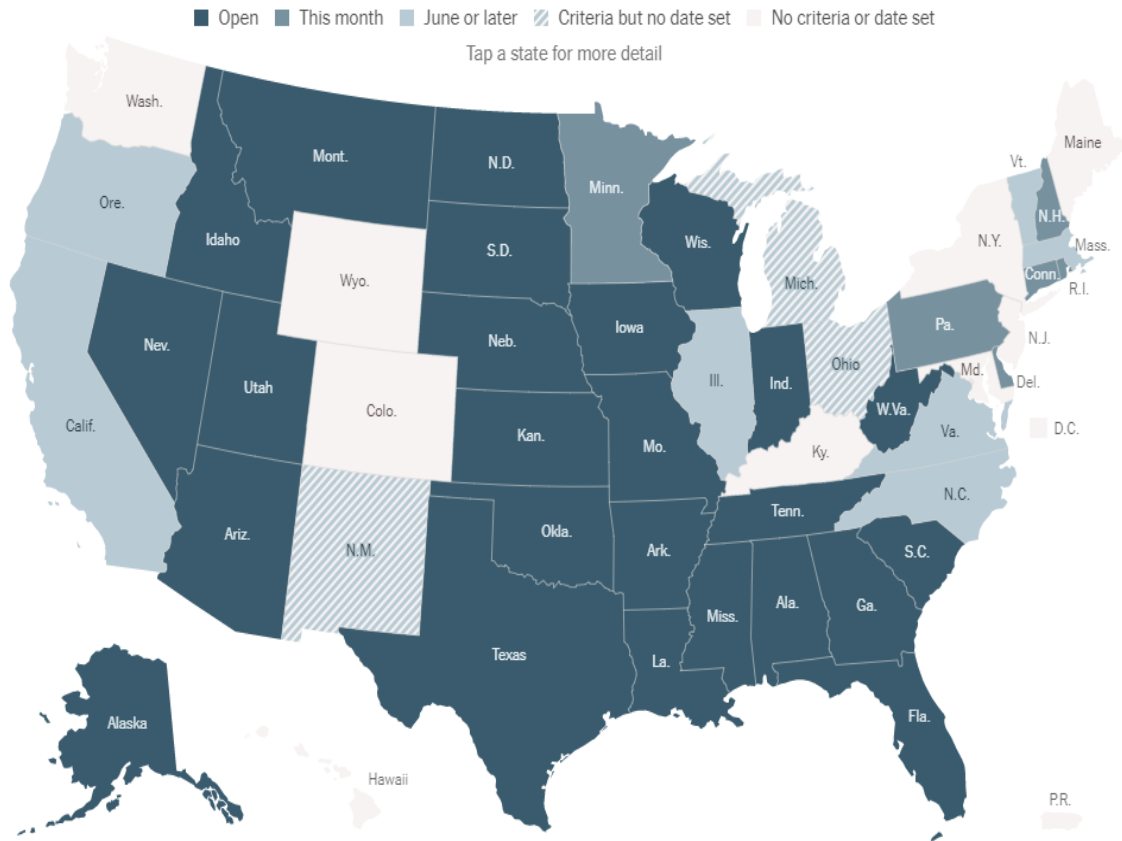
Throughout the coronavirus pandemic, it has been largely up to state and local officials to determine what restrictions, if any, to impose to slow new infections. A nationwide patchwork of rules for businesses and residents resulted over months of trial and error, as governors reopened some sectors only to later re-close and reopen them again as infection rates rose and fell.

States have moved closer to lifting all restrictions on businesses and gatherings as the vaccination campaign has progressed. In many states that have yet to fully reopen, governors have set targets for doing so based on vaccination rates or other health measures. The one exception to lifting all restrictions is the continued use of masks, which will still be required in most indoor public settings in many states. And some governors are still mandating businesses observe social distancing rules, even as they lift capacity limits.

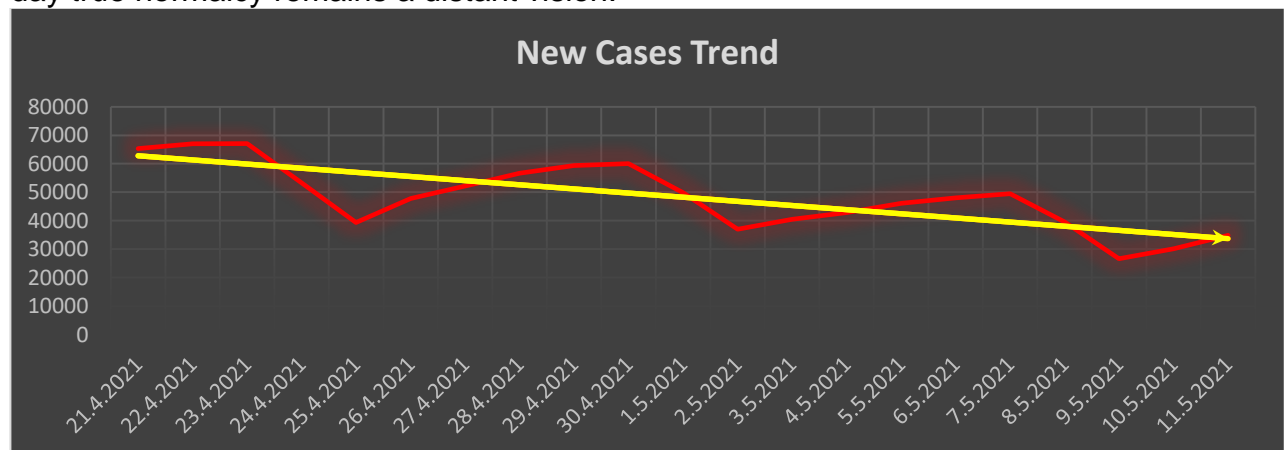
The CDC has revised its public health guidance and said fully vaccinated people can attend small gatherings outdoors without wearing a mask.

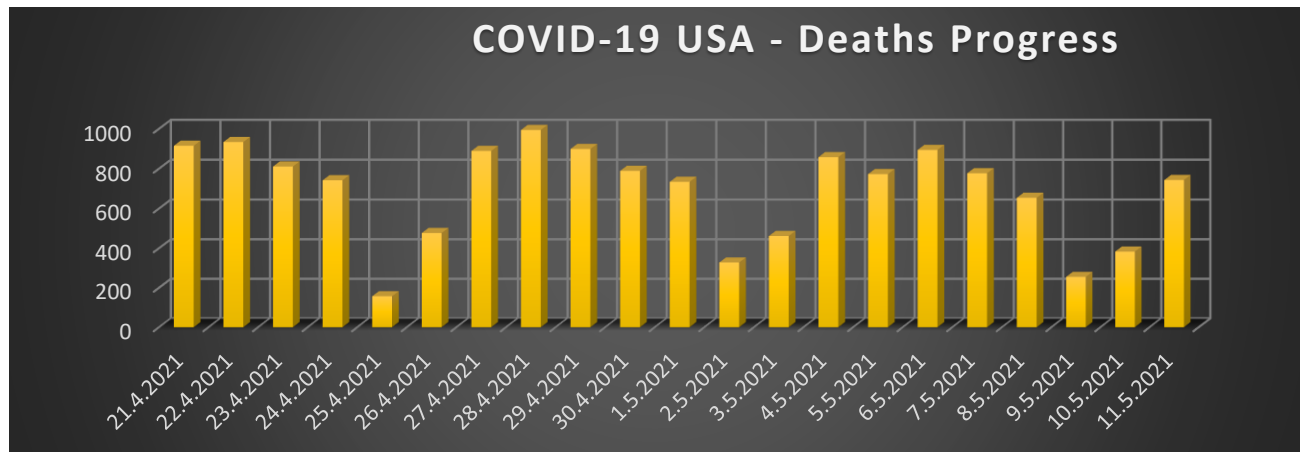
More than 30 colleges won't let students return to classes if they aren't vaccinated against COVID-19. The number of colleges and universities that will require students be fully vaccinated against Covid-19 is growing.

As experts grow concerned about a possible COVID-19 surge in the winter, the director of the U.S. Centers for Disease Control and Prevention acknowledged it's still possible seasonal vaccine boosters will be necessary.



Despite recent progress, the United States remains the most affected country, with more than 33.4 million infections and more than 594.911 deaths. As the virus continues to circulate widely within the United States and thousands of new cases are still being identified each day true normalcy remains a distant vision.





Sources:

1. https://en.wikipedia.org/wiki/COVID-19_pandemic_in_the_United_States
2. <https://www.cdc.gov/coronavirus/2019-ncov/covid-data/covidview/index.html>
3. <https://www.livescience.com/topics/live/coronavirus-news-live-updates>
4. <https://www.reuters.com/article/us-health-coronavirus-usa-trends/us-covid-19-deaths-drop-for-first-time-in-four-weeks-idUSKCN256217>.
5. <https://graphics.reuters.com/HEALTH-CORONAVIRUS/USA-TRENDS/dgkvlgrkpb/index.html>
6. <https://www.evaluate.com/covid-19-daily-update>
7. <https://www.businessinsider.com/us-new-coronavirus-cases-deaths-daily-chart-2020-7>
8. <https://www.nytimes.com/interactive/2020/us/coronavirus-us-cases.html>
9. <https://eu.usatoday.com/story/news/health/2020/09/10/covid-19-news-senate-coronavirus-los-angeles-halloween-donald-trump/5761031002/>
10. <https://www.wordstream.com/blog/ws/2020/03/23/covid-19-business-trends>

CONCLUSIONS

Globally, new cases rose for the eighth consecutive week, with over 10.8 million new cases reported in the last two weeks. The countries reporting the highest number of new cases India (5 334 736 new cases), Brazil (837 879 new cases), the United States of America (600 85` new cases), Argentina (286 682 new cases), and Turkey (321 436 new cases). The number of new deaths decreased the last week, compared to the previous week, and the number is 89 174 new deaths reported for the last week (91 735 cases previous week). Except South America, all regions reported decrease in cases.

The pandemic shows slight signs of easing, with global case and death incidence decreasing during the last week. Despite this the data shows that about a third of the global cumulative COVID-19 cases and deaths has been reported in the last three months alone, with weekly cases reaching similar levels as the previous peak in January 2021. The global infection fatality ratio (IFR) was estimated between is around 2%. Globally mortality rates continue to be higher for those over 40 years as well as for males as compared to females.

The cornerstone of treatment for coronavirus remains early detection and clinical assessment along with the use of oxygen and systemic corticosteroid therapy for those with severe or critical COVID-19. Markets for personal protective equipment (PPE), PCR tests, and medical oxygen equipment have begun to adjust to the higher demand.

As for 12 May 2021 a total number of 899.538 million doses of anti-covid vaccines have been administered worldwide. Only 14 countries – predominantly from Africa (11) and the Western Pacific (3) have not yet started vaccination. The current uneven and inequitable access and distribution of vaccines is exacerbating global inequalities risks prolonging the pandemic.

Still the misinformation remains the most serious threat to the public health globally. Because unreliable information spreads quickly, all states' organizations and responsible agencies have to collaborate with hi-tech and IT companies, especially those dealing with social media mainstream like Twitter, Google, and Facebook to address fake news and ensure the public can easily find accurate information.

Misinformation is most damaging when it fuels vaccine hesitancy. For more than a hundred years, vaccines have saved millions of lives from infectious diseases and spared generations from diseases like smallpox, polio, and measles. Today, vaccines are helping turn the tide of this pandemic. The situation becomes more difficult as the Astra Zeneca vaccine that has been banned from another country - Norway. It banned also the Johnson & Johnson vaccine. That again brings forward the question about the safety of the vaccines that are approved for use worldwide.

It is worth to mention that in the country with the highest level of vaccination in the world, Israel, there is big decrease in the new cases. For the last week there are 262 new cases and only 9 deaths.

The results of the latest studies make clear that the coronavirus vaccination is exceedingly effective, with 96% of symptomatic cases and 95% of severe cases prevented. The results also demonstrate that the vaccine is highly effective across all age ranges, with 92% effectiveness in preventing symptomatic disease in individuals 70 years and older. The vaccine effectiveness in prevention of symptomatic disease is slightly lower amongst the multi-morbid population of all ages (88% effective amongst individuals with three or more

chronic illnesses or risk factors).