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Konu : ICS COVID-19 Güncel Duyurusu

Sirküler No: 78

Sayın Üyemiz,

Uluslararası Deniz Ticaret Odası (International Chamber of Shipping-ICS) tarafından gönderilen 18 Ocak 2021 (Ek-1) ve 11 Ocak 2021 (Ek-2) tarihli yazılarda, Dünya Sağlık Örgütü'nün (World Health Organization-WHO) yayınladığı, bütün ülkeler tarafından bildirilen "Yeni Koronavirüs" (Covid-19) akut solunum yolu hastalık vaka tablosunu içeren güncel istatistik bilgileri Odamıza iletilmiştir.

Bahse konu yazılarda Covid-19 vakalarının, hastaneye yatan hasta ve vefat sayılarının Avrupa ve Amerika'da önemli ölçüde artmaya devam ettiği, 18 Ocak 2021 tarihi itibarıyla toplam 93.194.922 Covid-19 vakası tespit edildiği, birçok ülkenin halihazırda uygun test ekipmanına sahip olmadığı için tüm vakaların rapor edilemediği ve bu nedenle sayıların artacağı belirtilmekte olup, rapor tarihi itibarıyla en fazla Covid-19 vakası tespit edilen ilk 12 ülke, Covid-19 salgını vaka ve vefat sayılarının olduğu tablo ve ülkeler hakkında güncel bilgiler bulunmaktadır.

Ayrıca yazılarda, Covid-19 salgınıyla mücadele kapsamında ülkeler tarafından sürdürülen aşı programları hakkındaki gelişmelere ait bilgiler ile aşağıdaki hususlar yer almaktadır:

- UN COVAX programında aşılardan bulunabilirlik durumunu özetleyen ve günlük olarak güncellenen veri tabanına UNICEF web sitesinden erişilebilmektedir. Anlaşma yapıldıkça güncellenen tabloyla birlikte, hangi ülkelerde sözleşmelerin olduğu, satın alınan miktarların bulunduğu ve şu anda piyasada bulunan aşılardan **Aşı Piyasası Gösterge Tablosu'nda** ana hatlarıyla açıklanmaktadır.

- Yeni test gereklilikleri İngiltere Hükümeti tarafından nihai hale getirilmekte olup, bilgi edinildiği takdirde üyeler ile paylaşılacağı belirtilmektedir.

- Ülkelere ait ayrıntılı bilgi **WHO-Covid-19** tablosunda yer almaktadır.

- Yaygın kullanım ve geri bildirimlerin ardından, Uluslararası Bağımsız Tanker Sahipleri Birliği (The International Association of Independent Tanker Owners-INTERTANKO) tarafından yayınlanan **Gemi Personeli Sağlık Yönetimi ve Mental Sağlık** (Ek-3) yayını ikinci baskısı çıkarılarak güncellenmiştir. Bahse konu yayın denizcilerin duygusal stresle başa çıkmalarına ve olumsuz duyguların üstesinden gelmelerine yardımcı olacak tavsiyeleri içermektedir. Ayrıca, pandemi sırasında elektronik ortamda iletişimin kilit role sahip olduğu kanıtlandığı için siber mecra kullanımı ile ilgili olan önemli konular hakkında ek bilgiler yayına ilave edilmiştir.

Bilgilerinize arz/rica ederim.

Saygılarımla,

İsmet SALİHOĞLU
Genel Sekreter

Bu belge, 5070 sayılı Elektronik İmza Kanuna göre Güvenli Elektronik İmza ile İmzalanmıştır.



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**Ek:**

- 1- ICS'in 18.01.2021 Tarihli Yazısı (10 sayfa)
- 2- ICS'in 11.01.2021 Tarihli Yazısı (14 sayfa)
- 3- INTERTANKO'nun Yayını (18 sayfa)

Dağıtım:**Gereği:**

- Tüm Üyeler (WEB sayfası ve e-posta ile)
- İMEAK DTO Şube ve Temsilcilikleri
- Türk Armatörler Birliği
- S.S. Gemi Armatörleri Motorlu Taşıyıcılar Kooperatifi
- GİSBİR (Türkiye Gemi İnşa Sanayicileri Birliği

Derneği

- VDAD (Vapur Donatanları ve Acenteleri Derneği)
- TÜRKLİM (Türkiye Liman İşletmecileri Derneği)
- KOSDER (Koster Armatörleri ve İşletmecileri Derneği)
- Yalova Altınova Tersane Girişimcileri San.ve Tic.A.Ş.
- UTİKAD (Uluslararası Taşımacılık ve Lojistik Hizmet Üretenleri Derneği)
- Türk Uzakyol Gemi Kaptanları Derneği
- GEMİMO (Gemi Makineleri İşletme Mühendisleri Odası)

Bilgi:

- Yönetim Kurulu Başkan ve Üyeleri
- İMEAK DTO Şube YK Başkanları
- İMEAK DTO Çevre Komisyonu
- İMEAK DTO Meslek Komite Başkanları

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18 January 2021

COVID19(21)09

**TO: LABOUR AFFAIRS COMMITTEE
ALL MEMBERS & ASSOCIATE MEMBERS
BIWEEKLY MEMBERS MEETING PARTICIPANTS
INTERNATIONAL ASSOCIATION GROUP PARTICIPANTS**

COVID-19 UPDATE AS OF 18 JANUARY 2021**Action Required: *Members are invited to note:***

- *Information below provided by WHO for 17 January 2021 and general epidemiological information regarding Covid 19 issued by WHO. Covid case numbers, hospital admissions and deaths continue to substantially increase across Europe and the Americas.*
- *93,194,922 Confirmed cases of COVID-19 (%) 4811151 additional cases have been confirmed since the last report nearly a month ago. 5.16 % last week. There has also been an increase in fatalities over the period with 2,014,729 deaths recorded which is 95603 additional deaths 4.7 % growth last week. However, many countries still cannot report all cases due to insufficient testing equipment, so numbers will be considerably higher. There are 220 Countries, areas or territories with cases.*
- *A database outlining availability of vaccines under the UN COVAX programme is being held on the UNICEF website and is constantly being updated and available from The online Vaccine Market Dashboard ([click here](#)) outlining vaccines currently available, who & which countries have agreements in place, and quantities purchased, along with a table updated as more agreements are made.*
- *Following extensive use and feedback, Intertanko's Crew Welfare Management and Mental Wellness has been updated to a second edition. This includes advice on helping seafarers handle emotional stress and to overcome negative feelings. Additional guidance on cyber-related issues have been included which is important as electronic communication has proved to be key during the pandemic. While the guidance was written during Covid, the key principles apply at any time. See Annex A*

To get specific information for a country please visit the WHO-Covid-19 dashboard. [Link](#).

SITUATION IN NUMBERS BY WHO REGION

Region	Cases	Deaths
Global	93,194,922	2,014,729
Africa	2,313,130	52,905

Americas	41,329,493	954,545
Eastern Mediterranean	5,334,724	127,790
Europe	30,488,064	666,036
South-East Asia	12,462,338	191,196
Western Pacific	1,266,428	22,244

TOP 12 COUNTRIES WITH CASES AS AT YESTERDAY (Top first)

		LAST REPORT	Status
1	USA	USA	The Same
2	India	India	The Same
3	Brazil	Brazil	The Same
4	Russia	Russia	The Same
5	UK	UK	The same
6	France	France	The same
7	Turkey	Italy	Changed
8	Italy	Spain	Changed
9	Spain	Germany	Changed
10	Germany	Columbia	Changed
11	Columbia	Argentina	Changed
12	Argentina	Mexico	Changed

TOP 12 COUNTRIES

	INCREASED CASES YESTERDAY	HIGH FATALITIES YESTERDAY
1	USA	USA
2	UK	Mexico
3	Brazil	UK
4	Russia	Brazil
5	Mexico	Russia
6	Columbia	Italy
7	France	Columbia
8	India	Germany
9	Italy	South Africa
10	South Africa	Indonesia
11	Germany	Turkey
12	Indonesia	Portugal

WHO - Vaccine nationalism puts world on brink of 'catastrophic moral failure

According to the head of the WHO, the world is on the brink of “catastrophic moral failure” in sharing COVID-19 vaccines, urging countries and manufacturers to globally spread doses more fairly. WHO Director-General Tedros Adhanom Ghebreyesus said prospects for equitable distribution were at “serious risk” just as its COVAX vaccine-sharing scheme aimed to start distributing inoculations next month. He noted 44 bilateral deals were signed last year and at least 12 signed this year.

This could delay COVAX deliveries and create the scenario COVAX aimed to avoid, with hoarding, a chaotic market, an uncoordinated response and continued social and economic disruption. A “me-first approach” left the world’s poorest and most vulnerable at risk. “Ultimately these actions will only prolong the pandemic,” he added, urging countries to avoid making the same mistakes as during the H1N1 and HIV pandemics.

The global scramble for shots has intensified as more infectious virus variants circulate.

Dr Tedros said more than 39 million vaccine doses were administered in 49 higher-income countries whereas just 25 doses were given in one poor country. A delegate from Burkina Faso, on behalf of the African group, expressed concern that a few countries had “hoovered up” most of the supplies. Observers say the board meeting which last until next Tuesday, is one of the most important in the U.N. health agency’s more than 70-year history and could shape its role in global health long after the pandemic ends.

Australia

Brendan Murphy, a senior Australian health official says it is unlikely Australia will fully open its borders in 2021, even if most of its population is vaccinated this year. Airlines had hoped that flights would resume this year. Qantas, Australia’s national carrier reopened bookings earlier this month, after saying it expected international travel to begin to restart from July 2021. Mr Murphy said he believed quarantine requirements for travellers would continue for some time. Citizens, permanent residents and those with exemptions can enter Australia if they complete a 14-day hotel quarantine at their own expense.

At least nine infected people, including a tennis player, are in quarantine in Melbourne after arriving for the Australian Open tournament. The staging of the international event has been debated in Australia given the country’s very low virus numbers and strict entry rules.

Players have also expressed frustration about being confined to hotel rooms full-time while many rivals are not.

Austria

Austria has extended its lockdown to 7 February and introduced tougher measures such as increasing social distancing guidelines to 2m.

Brazil

Brazil, which has the world's second-highest Covid-19 death toll, has started its vaccination roll-out, as infections continue to surge. On Sunday, regulator Anvisa gave the green light to vaccines from Oxford-AstraZeneca and China's Sinovac. Moments later, Monica Calazans, a 54-year-old nurse in São Paulo, became the first person to be inoculated with CoronaVac, developed by Sinovac. About six million CoronaVac doses have already been produced in Brazil while the government is waiting shipments of the AstraZeneca vaccine from a laboratory in India. The news comes after revelations that a new coronavirus variant has emerged in Brazil, with several cases traced back to Amazonas state, where a state of emergency exists. Manaus, has been hit especially hard, with beds and life-saving oxygen running low.

President Bolsonaro has been heavily criticised for his handling of the pandemic and has played down the virus severity from the start, promoted an unproven treatment and gone against measures such as mask-wearing and social distancing. Over 209,000 Covid-

related deaths have been recorded, a figure only exceeded by the US. Over 8.4 million infections were confirmed since the start of the pandemic - the third-highest global tally.

China

The world's second biggest economy has recovered after Covid took its toll during the first quarter of the year. It has confirmed its bounce-back from the coronavirus crisis as official figures revealed its economy grew by 2.3% last year. The expansion was the weakest since 1976 after the pandemic sent GDP into reverse at the start of 2020. China, where COVID-19 was first identified will be the only major global economy to have avoided contracting during a year defined by the catastrophic impact of the outbreak. Economists expect China's expansion to pick up further pace this year with growth of over 8%.

Figures from the national bureau of statistics showed GDP shrank by 9.7% in the first quarter before recovering to 11.6% in the April-June period then growing by 3% and 2.6% in quarters 3 and 4. Retail sales growth slowed towards the end of 2020 below analysts' expectations and leaving them 3.9% lower for 2020 in the first decline since 1968. Exports have picked up pace as manufacturers stepped up production to supply goods to many countries crippled by the pandemic.

A World Health Organization team has arrived in Wuhan to start its investigation into the origins of the Covid-19 pandemic. The long-awaited probe comes after months of negotiations between WHO and Beijing. Ten scientists are set to interview people from research institutes, hospitals and the seafood market linked to the initial outbreak first detected in Wuhan in late 2019.

The team's arrival last Thursday coincided with a resurgence of new coronavirus cases in the north of China, while life in Wuhan is relatively back to normal. They will undergo two weeks of quarantine before beginning their research, which relies upon samples and evidence provided by Chinese officials. Team leader Peter Ben Embarek explained before the trip that it could be a very long journey before we get a full understanding of what happened". He did not think we will have clear answers after this initial mission, but we will be on the way. The probe aims to investigate the animal origin of the pandemic and looks set to begin after some initial hiccups. China resisted this investigation as it doesn't want to reflect. It sees the potential for more blame, from a group of foreigners. It has its official version of what happened already. The government paper published months ago declared "victory" in the war against Covid , but it didn't have a verdict made public on where the new virus came from nor how it passed to humans. There's been global pressure to answer that, to prevent repeat pandemics. The WHO team will heavily rely on their Chinese hosts to access key places in Wuhan and beyond and to research material, human and animal samples and data gathered by China's authorities. WHO are open minded no theories are off limit. All sides have discussed the importance of the science but the investigators arrived as a propaganda effort by China's state media is in full swing to question where the pandemic originated. China has reported for months that it was in Spain, Italy or maybe the US before China. Earlier this month WHO said its investigators were denied entry into China after a team member was prohibited and another got stuck in transit. Beijing said it was a misunderstanding as investigation arrangements were still being discussed. China has said for months that although Wuhan is where the first cluster of cases was detected, it is not necessarily where the virus originated.

Professor Dale Fisher, chair of the global outbreak and response unit at the WHO, told the BBC that he hoped the world would view this as a scientific visit and not about politics or blame but getting to the bottom of a scientific question. He added that most scientists believed that the virus was a "natural event".

The visit comes as China reported its first Covid-19 fatality in eight months. News of the death in northern Hebei province prompted anxious chatter online and the hashtag "new virus death in Hebei" trended briefly on Weibo. The country has largely controlled the virus through quick mass testing, stringent lockdowns and tight travel restrictions but new cases have resurfaced in recent weeks, mainly in Hebei and Heilongjiang provinces.

Europe

Pfizer will temporarily reduce deliveries of its vaccine to Europe while it boosts its production capacity. Deliveries are expected to return to normal by 25 January. They want to do more, which is why they're reconfiguring to add volume to the whole world," UK vaccines minister Nadhim Zahawi told the BBC earlier today.

France

France expanded its vaccination rollout to include those over the age of 75 and those with serious medical conditions. The country has been criticised for the programme's slow start. France also tightened its entry restrictions, with all non-EU arrivals now required to show a negative coronavirus test to gain entry. It also said full medical face coverings - not just fabric masks - must be worn on public transport from 25 January.

Germany

Bavaria has introduced a similar measure regarding face coverings as in France.

The German foreign minister has called on people not to refer to the Covid mutation first detected in the UK as the English variant. Just as we didn't refer to the 'Chinese virus' last year, now we shouldn't talk about the 'English variant', he said. Last month, officials said the new strain of the virus has been in Germany since November. It was found in an elderly man who later died. His wife also caught the virus but later recovered. His daughter had flown to Frankfurt from London and tested positive for the virus.

Guatemala

Guatemala's government has said 21 people within a group of thousands of migrants trying to reach the US, have tested positive for Covid-19. The cases were confirmed after they sought medical assistance, following clashes between the group (caravan) and Guatemala's security forces at its border with Honduras. The security forces pushed the migrants back with truncheons and tear gas when trying to enter Guatemala. Several people were injured. The group has an estimated 7,000 people who stated they were fleeing violence and poverty, exacerbated by devastation wrought by two huge hurricanes that battered Central America in November.

Officials said those who tested positive would remain in Guatemalan isolation centres.

Covid-19 has badly hit Latin America and efforts to combat its spread are hampered in many countries by insufficient medical infrastructure, overcrowded cities and poverty.

Israel

2.1 million Israelis have already received at least their first dose of a Covid vaccine: Details have been published of a deal to trade data with Pfizer in return for a steady supply of the coronavirus vaccine, after concerns were expressed over possible privacy violations.

Under the arrangement, Israel will send weekly updates on numbers of confirmed cases, hospitalisations, patients in a serious condition and those on a ventilator, and the number of vaccinations performed. They will be listed by age, gender and demographic background, but no identifiable health information will be shared. Prime Minister Netanyahu said earlier this month that he hoped the Pfizer deal would mean Israel became the first country to emerge from Covid.

Israel's coronavirus czar has said people will no longer have to self-isolate after exposure to someone testing positive if a week has elapsed since receiving the second vaccine dose. Other experts have said insufficient information is available to determine if getting a vaccine prevents someone from spreading Covid-19 to other people.

Malawi

Malawi is closing schools for at least 15 days in a bid to combat a surge in cases. President Chakwera also announced a night-time curfew from 21:00 local time. All gatherings will be restricted to 50 people. The restrictions come into effect today. The country is currently in national mourning following the deaths of two senior cabinet ministers from Covid-19. A third of Malawi's 300 Covid deaths were this month.

Nigeria

Nigerian Schools have reopened despite calls for them to remain closed for several months due to the increase in Covid cases. Nigeria has recorded over 10,000 infections in the last week and has recorded more than 110,387 cases and 1,435 deaths. It is the first time students are back in school since mid-December, when the country declared a second wave of new infections. University students are also returning to in-person learning. They have been at home for almost a year due to a strike by lecturers.

Singapore

ICC has announced the first ever use of a digital travel pass by a national immigration authority to verify Covid-19 status of inbound travellers, following a pilot in partnership with International SOS and the Government of Singapore.

Singapore becomes first government to use a digital health certificate to verify the Covid-19 status of inbound travellers for immigration purposes; ICC AOKpass used by a Singapore citizen returning from Japan on 21st December to present a negative COVID-19 digital test result for arrival verification at Changi Airport;

Following the successful pilot, all travellers from Malaysia and Indonesia will be able to use ICC AOKpass to digitally authenticate COVID-19 test results from 23rd December reducing reliance on paper-based test certificates which have been vulnerable to fraud;

Dedicated immigration lanes now established at Changi Airport for passengers using ICC AOKpass app; ICC says breakthrough shows growing maturity of readily available solutions to safely restore global mobility and to guard against supply chain disruptions.

On 21st December, a Singapore citizen returning from Japan on Singapore Airlines flight 637 used the ICC AOKpass to officially present a negative COVID-19 polymerase chain reaction ("PCR") digital test result for arrival verification at Changi Airport's immigration counters. This was the first time an immigration authority has used a blockchain based, digitally verifiable health certificate. The originating health records from Shinagawa East Medical Centre were scanned by Affinidi's Universal Verifier solution at Changi Airport.

Following the successful pilot all travellers from Malaysia and Indonesia can now use ICC AOKpass to digitally authenticate their COVID-19 test results as well as any other necessary health credentials during immigration checks at Changi Airport.

Paper certificates were previously used for border crossing but digitally verifiable certifications will advance the security and safety of international travellers. Digital verification of COVID-19 health status was difficult due to a need to incorporate a network of testing labs, airlines and immigration processes in a single technology.

From 23 December, travellers from Malaysia and Indonesia will have dedicated immigration lanes at Changi Airport, to digitally verify their health credentials using the ICC AOKpass app. Before departure to Singapore, passengers will need to check the Singapore SafeTravel website for travel requirements, then book a pre-departure COVID-19 PCR test at healthcare providers that issue digital health credentials via secure mobile apps like the ICC AOKpass. Travellers will receive their test result with a unique QR code in their ICC AOKpass app, authenticating and securely storing COVID-19 test results.

Upon arrival at Changi Airport, they can use the dedicated immigration counters to swiftly verify their health credentials by scanning the given QR code in their ICC AOKpass app. This facilitates faster immigration checkpoint clearance for travellers, enables more hassle-free travel, and reduces risks of crowds at the airport. Authorities will be able to combat incidents of COVID-19 test fraud and implement a global standard for travelling, to further enhance efforts to ensure safe resumption of global travel.

The pilot programme will progressively roll out to other international travellers allowing for quicker, hassle-free travel and strengthening efforts to stop virus spread.

Switzerland

Swiss Officials quarantined two hotels and closed ski facilities to try and stem an outbreak in St Moritz. The new highly infectious variant is believed to be behind the spike.

United Kingdom

England

Ten more mass vaccination centres are opening in England today as the roll-out continues as vaccine invitations are being sent to over-70s and clinically extremely vulnerable people, the vaccine minister, Nadhim Zahawi, has confirmed the roll-out is only being extended in areas where most over-80s have already received a first dose. He said restrictions could gradually ease from March when immunity starts to take effect in the 15 million people in the top four priority groups receiving the vaccine by February.

- of people in a migrant caravan heading from South America to the US. Guatemala's government said 21 people had tested positive, after security forces beat back the caravan at the border.
- Ten hospital trusts in England have reported they have no adult critical care beds remaining, while doctors in Northern Ireland said they would face pressures "unlike any other they have faced before" over the next week.

Labour will use a House of Commons debate today to pressurise the government to extend an increase to Universal Credit of £1,000 a year to low income families and was introduced due to the pandemic.

Georgina Spray explained she is afraid she will face abuse if she uses her mask exemption. As many major supermarkets crack down on people not wearing masks, people with medical exemptions for mask-wearing are increasingly concerned they have no proof. Her exemption is due to sensory issues experienced with autism, she wears a mask as she is afraid of confrontations but when she wears it her heart races, she gets really hot and starts sweating and shaking, all the noise in the shop seems to get louder and lights are getting brighter. She had seen videos of people being abused for not wearing masks and added she couldn't stand up for herself. People are requesting the sunflower lanyard an established way for people with invisible disabilities to signal their impairment to be recognised for mask exemptions.

With the UK on course to vaccinate 15 million of the most vulnerable people by mid-February, Vaccine Minister Nadhim Zahawi has said they would start to receive some protection two or three weeks later. He told the BBC that 88% of deaths were people in the top four priority groups. Once they were protected, it could allow a gradual easing of restrictions. But he said there were a "number of caveats" to reopening because scientists do not yet know how effective the vaccines will be at preventing the virus from spreading, as well as stopping serious illness. He said that immunising all nine priority groups - the target for the spring - would address 99% of all mortality. "Then we really can begin to have the confidence to reopen," he said.

Other vaccines currently being developed will hopefully be approved and included in the UK's vaccination programme the NHS England national medical director Prof Stephen Powis has said The Johnson & Johnson vaccine is one of a number of vaccines that are currently in development. "He said the UK's independent regulator had already approved the Pfizer and AstraZeneca jabs, which are currently being delivered, as well as the Moderna vaccine which "we expect to come to the UK for use in the coming months. So as these vaccines become available, they will hopefully be approved and delivered to the NHS so that we can get jabs to people as quickly as possible," he said.

Some passengers at London's Heathrow Airport reported queues of over an hour as new travel rules on testing and quarantine came into effect this morning. Exemptions on quarantine from some countries have been scrapped and people now must produce proof of a negative test up to 72 hours before travel.

UK Passengers arrivals have faced queues of over an hour as quarantine rules started at 04:00 GMT this morning. The ban aims to exclude new variants, with travellers required to self-isolate for 10 days.

A passenger from London, who arrived into London Heathrow's Terminal 5 with his partner this morning from Nairobi, said he was shocked and disappointed to see queues at passport control. They also felt unsafe and even though everyone was masked they were far too close together for an hour and 10 minutes.

Another passenger who arrived from Nairobi with his son after a Christmas break with family, described the queue at passport control as pretty substantial.

The over 70s and clinically extremely vulnerable are now being invited for a jab this week. Over 3.8 million UK nationals have been vaccinated with at least one vaccine dose. Broadly, vaccines are being given to the most vulnerable first, outlined in a list of nine high-priority groups, covering about 25 million people representing 90-99% of those risking death from Covid-19. Currently the first four groups are being vaccinated. They are:

Residents in care homes for older adults and their carers.

- 80-year-olds and over and frontline health and social care workers.
- 75-year-olds and over.
- 70-year-olds and over and clinically extremely vulnerable individuals.

The plan is then to

- vaccinate every care home resident by the end of January.
- everyone over 70, NHS frontline staff, care workers and anyone who is clinically extremely vulnerable by mid-February.
- the remaining priority groups and over-50s after that, possibly by May.
- every adult in the UK by September.

Scotland

The serious outbreak of coronavirus on the Scottish island of Barra in the Outer Hebrides is "escalating", the NHS says. Covid-19 cases have increased to 39, according to NHS Western Isles. On Sunday the health board said there had been 12 new positive tests related to the Barra outbreak, which first emerged more than a week ago. On Barra, those who have tested positive along with more than 100 close contacts are self isolating. The number in isolation represents about a 10th of the island's total population.

Separately, two new cases were also identified in a smaller outbreak on Benbecula Island which has a total of four cases including a member of the US defence services who arrived for a naval exercise at the Hebrides Range, a military rocket firing facility. The US Missile Defence Agency said all US and UK Covid protocols were followed.

Taxi drivers affected by a huge drop in passenger numbers due to Covid can claim a £1,500 grant. Councils will contact 38,000 drivers directly inviting them to claim the cash. Following criticism about the level of support given to the industry. The grant will cover costs including licence fees and insurance payments for taxis off the road. Taxi journeys have fallen significantly since the start of Covid, with a Union claiming 80% of taxi drivers have lost up to three quarters of their usual incomes. While taxis can still operate, they have seen passenger numbers drop as bars, restaurants and schools closed.

Wales

First Minister Mr Drakeford told the BBC today that supplies of the Pfizer vaccine had to last until February and were being deployed steadily. He defended the Welsh vaccine roll-out after claims of being slower than in other parts of the UK. He said doses of the Pfizer vaccine were being retained to balance the supply but differences with other nations were very marginal.

Covid-19 was the leading cause of death in Wales in 2020, according to provisional data. figures for December showing it was the leading cause of death for the second successive month being 27.4% of all registered deaths. The mortality rate rose significantly for a third month, to 374.4 deaths per 100,000 people. December figures showed it being the highest rate since last April and also higher than any English region, where Yorkshire and the Humber had the highest mortality rate (320.5 deaths per 100,000). The English average was 233.6. Just over 88,000 people have received a first dose in Wales, about 2.6% of the population compared to 5.8% across the whole UK.

United States

A man too afraid to fly due to Covid lived undetected in a secure area of Chicago's international airport for three months, according to US prosecutors. Aditya Singh, 36, arrived after a flight from Los Angeles on 19 October. He allegedly survived on handouts from other passengers. He was arrested on Saturday after showing an identification badge that allegedly belonged to a staff member who lost it in October.

Natalie Shaw
Director Employment Affairs

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11 January 2021

COVID19(21)03

**TO: LABOUR AFFAIRS COMMITTEE
ALL MEMBERS & ASSOCIATE MEMBERS
BIWEEKLY MEMBERS MEETING PARTICIPANTS
INTERNATIONAL ASSOCIATION GROUP PARTICIPANTS**

COVID-19 UPDATE AS OF 11 JANUARY 2021**Action Required: *Members are invited to note:***

- *Information below provided by WHO for 10 January 2021 and general epidemiological information regarding Covid 19 issued by WHO. Covid case numbers, hospital admissions and deaths continue to substantially increase across Europe and the Americas.*
- **88,383,771 confirmed cases of COVID-19 17553916 (19.86%) additional cases have been confirmed since the last report nearly a month ago. If we divide this by 4 = 4.96% growth on average each week. There has also been an increase in fatalities over the period with 1,919,126 deaths recorded which is 314,035 additional deaths (16.36%) = 4.09% growth on average each week.. However, many countries still cannot report all cases due to insufficient testing equipment, so numbers will be considerably higher. There are 220 Countries, areas or territories with cases.**
- *A database outlining the availability of vaccines in the UN COVAX programme is being held on the UNICEF website and is being updated on a daily basis this is available from The online Vaccine Market Dashboard ([click here](#)) outlines vaccines currently on the market, who & which countries have agreements in place, and quantities purchased, along with a table updated as more agreements are made.*
- New Testing requirements for the UK are still being finalized by the UK government and members will be advised of any information gained once provided.

To get specific information for a country please visit the WHO-Covid-19 dashboard. [Link](#).

SITUATION IN NUMBERS BY WHO REGION

Region	Cases	Deaths
Global	88,383,771	1,919,126
Africa	2,135,878	47,905
Americas	38,861,668	910,741
Eastern Mediterranean	5,149,132	124,836

Europe	28,794,000	626,726
South-East Asia	12,257,684	187,786
Western Pacific	1,184,664	21,119

TOP 12 COUNTRIES WITH CASES AS AT YESTERDAY (Top first)

	THIS REPORT	LAST REPORT	Status
1	USA	USA	The Same
2	India	India	The Same
3	Brazil	Brazil	The Same
4	Russia	Russia	The Same
5	UK	France	Changed
6	France	UK	Changed
7	Italy	Italy	The same
8	Spain	Spain	The same
9	Germany	Argentina	Changed
10	Columbia	Columbia	The Same
11	Argentina	Germany	Changed
12	Mexico	Mexico	Changed

TOP 12 COUNTRIES

	INCREASED CASES YESTERDAY	HIGH FATALITIES YESTERDAY
1	USA	USA
2	UK	Mexico
3	Brazil	UK
4	Russia	Brazil
5	Italy	Russia
6	South Africa	Germany
7	Mexico	Italy
8	India	South Africa
9	France	Columbia
10	Columbia	Indonesia
11	Germany	Poland
12	Indonesia	Turkey

What do we know about China's coronavirus vaccines?

As the global race to produce a Covid-19 vaccine continues, China appears to have made huge strides, with vaccines from two front-runners - Sinovac and Sinopharm - already making their way abroad. But what do we know about China's vaccines and how do they compare to those being developed elsewhere?

How does the Sinovac vaccine work?

The Beijing-based biopharmaceutical company Sinovac is behind the CoronaVac, an inactivated vaccine. It works by using killed viral particles to expose the body's immune system to the virus without risking a serious disease response.

By comparison the Moderna and Pfizer vaccines being developed in the West are mRNA vaccines. This means part of the coronavirus' genetic code is injected into the body, triggering the body to begin making viral proteins, but not the whole virus, which is enough to train the immune system to attack.

"CoronaVac is a more traditional method [of vaccine] that is successfully used in many well known vaccines like rabies," Associate Prof Luo Dahai of the Nanyang Technological University told the BBC.

MRNA vaccines are a new type of vaccine and there is currently no successful example of them being used in the population," Prof Luo adds.

On paper, one of Sinovac's main advantages is that it can be stored in a standard refrigerator at 2-8 degrees Celsius, like the Oxford vaccine, which is made from a genetically engineered virus that causes the common cold in chimpanzees. Moderna's vaccine needs to be stored at -20C and Pfizer's vaccine at -70C. It means that both Sinovac and the Oxford-AstraZeneca vaccine are a lot more useful to developing countries which might not be able to store large amounts of vaccine at such low temperatures.

How some of the Covid-19 vaccines compare

Company	Type	Doses	How effective*	Storage	Cost per dose
 Oxford Uni-AstraZeneca	Viral vector (genetically modified virus)	x2 	62-90%	Regular fridge temperature	£3 (\$4)
 Moderna	RNA (part of virus genetic code)	x2 	95%	-20C up to 6 months	£25 (\$33)
 Pfizer-BioNTech	RNA	x2 	95%	-70C	£15 (\$20)
 Gamaleya (Sputnik V)	Viral vector	x2 	92%	Regular fridge temperature (in dry form)	£7.50 (\$10)

*preliminary phase three results, not yet peer-reviewed

Source: Respective companies, WHO

BBC

How effective is it?

It's hard to say currently. According to The Lancet we currently only have information from the first and second phase trials of CoronaVac. Zhu Fengcai, one of the authors, said the results based on 144 participants in the phase one trial and 600 in the phase two trial - meant the vaccine was "suitable for emergency use". CoronaVac had undergone phase three trials in Brazil, Indonesia and Turkey. Earlier last week, interim data from a late-

stage trial in Turkey showed that the vaccine was 91.25% effective. However, researchers in Brazil had said the vaccine was more than 50% effective - but withheld full results, raising questions about transparency.

The vaccine began late-stage trials in Brazil which has reported the second-highest global death toll earlier in October. The trials were briefly halted in November after the reported death of a volunteer, but resumed after the death was found not to be linked to the vaccine. Sinovac has been approved for emergency use in high-risk groups in China since July. In September, Mr Yin of Sinovac said tests were performed on over 1,000 volunteers, of which some only showed minor fatigue or discomfort less than 5%.

Prof Luo had said ahead of the phase three results that it was difficult to comment on the vaccine's efficacy at that point in time as limited information is available. Based on the preliminary data... CoronaVac is likely an effective vaccine, but we do need to wait for the results of the phase three trials," he said. "These trials are randomised, observer-blind, placebo-controlled with thousands of participants. This is the only way to prove a vaccine is safe and effective to be used at the population level.

Sinopharm

Sinopharm, a Chinese state-owned company, is developing two Covid-19 vaccines, which, like Sinovac are also inactivated vaccines. Sinopharm announced on 30 December that phase three trials showed that it was 79% effective - lower than that of Pfizer and Moderna. However, the UAE, which approved a Sinopharm vaccine earlier this month, said the vaccine was 86% effective, according to interim results of its phase three trial.

A company spokeswoman declined to explain the discrepancy, and said detailed results would be released later, according to Reuters. But even ahead of the phase three trial results, the vaccine had already been distributed to nearly a million people in China under an emergency programme. Professor Dale Fisher, of the National University of Singapore, said then that it was unconventional to ramp up a vaccine programme without first going through last stage trials. It is normal to wait for an analysis of phase three trials before ramping up a vaccine programme through emergency use authorisation," he told CNBC. Earlier in December, Peru suspended trials for the Sinopharm vaccine due to a serious adverse event affecting a volunteer. It later said that it lifted the suspension. A pause in a clinical trial is not unusual. In September, the UK paused trials for another Covid-19 vaccine after a participant had a suspected adverse reaction, resuming after the vaccine was ruled out as the cause. The spread of coronavirus within China has mostly been contained and life is slowly but surely returning to a "new normal".

Other vaccine candidates?

At least two other Covid-19 vaccines are under development in China, according to a recent article in The Conversation. One is CanSino Biologics, which is reportedly in phase three clinical trials in countries including Saudi Arabia. The other is being developed by Anhui Zhifei Longcom. Its vaccine uses a purified piece of the virus to trigger an immune response, and has recently entered phase three trials, according to the report.

Which countries are signing up for China's vaccines?

In early December the first batch of Sinovac vaccines arrived in Indonesia in preparation for a mass vaccination campaign, with another 1.8m doses due to arrive by January. A few days later two Arab nations, including the United Arab Emirates, approved a Sinopharm vaccine.

Bahrain also approved the Sinopharm Covid-19 vaccine, saying adults could register online to receive the jab for free.

And Singapore said it had signed advance purchase agreements with vaccine makers including Sinovac, Moderna and Pfizer-BioNTech.

Sinovac is also known to have secured other deals with Turkey, Brazil and Chile.

Sinovac should be able to produce 300 million doses a year in its newly built 20,000 sq m production plant, its chairman told state media outlet CGTN. Like all the other vaccines, it requires two doses, which means it is currently only able to inoculate 150m people a year - just over a tenth of China's population. Analysts point to China's bid to win the vaccine diplomacy race, which has also reportedly seen China's President Xi Jinping pledge to set aside \$2bn for the African continent, while also offering Latin American and Caribbean countries a \$1bn loan to buy vaccines. It's unclear what the terms of such a deal might be. "Beijing... will surely leverage the provision of this life-saving technology for commercial and diplomatic profit," Jacob Mardell, an analyst from MERICS, told ABC news. It has something countries dearly need and will paint the vaccine's provision as an act of charity."

It's not clear how much it might cost, but earlier this year, a BBC team in Yiwu saw nurses administering the injections for a fee of around 400 yuan (\$60; £45). Bio Farma, a state-owned firm in Indonesia said it would cost around 200,000 rupiah (\$13.60; £10) locally far higher than the Oxford vaccine, which costs \$4 a dose, but lower than Moderna's at \$33 per dose. Moderna said it aims to ship 500 million doses in 2021 and AstraZeneca has said it will produce 700 million doses by the end of Q1 2021.

Belgium

The first person in Belgium to receive a Covid jab lived in the place where the world's first approved Covid vaccine is being produced. Jos Hermans, a 96-year-old from Puurs, was given the injection on 28 December, in his care home. A further **700** elderly residents were also administered a dose in what was a small, initial trial. The mass vaccination programme in Belgium began on 5 January, but has been criticised for starting slowly. Federal Health Minister Frank Vandenbroucke had promised in November that the rollout would be "seamless and fast", tweeting: "If that does not work, shoot me." The first phase looks to vaccinate up to 200,000 nursing home residents by the end of this month, or early February. Healthcare professionals will be next in line and the aim is for all the population to be inoculated by the end of September.

The country may be thought to be at an advantage as the epicentre of the Pfizer-BioNTech production. While this clearly assists distribution, Belgium cannot receive more doses relative to its population than other EU countries under strict Commission rules. That didn't stop the minister-president of the Flanders region, who admitted this week that he had contacted Pfizer directly trying to procure more doses, only to be rebuffed.

After getting a guarantee from Pfizer over supply of the jab, federal Belgian authorities have adapted their strategy and now propose giving as many available doses to as many people as possible and no longer reserving vials for patients' second dose, given three weeks after the first. In general, the federal government, rather than the European Commission has faced any criticism for a delay and defended its "careful" approach. There appears to be an interesting regional or cultural discrepancy regarding whether people wish to take the vaccine. Of the Flemish population polled, half have said they wanted the vaccine immediately. Among French speakers it was 20% fewer, which chimes with the deeper scepticism over the French border. In a country with fractious and

notoriously complicated politics - they've only recently agreed a government, after a 500-day vacuum - the Federal Coalition currently appears unified on its Covid vaccine strategy.

China

After months of negotiations, 10 virus-hunters from four continents were to fly into the central Chinese city of Wuhan last Thursday on a mission that the world would be watching. Then, on Tuesday, officials at WHO were surprised to be told by the Chinese government that the foreign experts could not enter after all. Word came through late and two scientists were already flying to the first rendezvous in Singapore. It was the latest obstacle for a team investigating the origins of the coronavirus. It is already over a year since the first cases were reported in Wuhan. The Times spoke to two team members, who were as surprised as anyone that they were not spending this weekend in quarantine there. "We were all ready to go, then we got the call from Geneva saying we didn't have visas," said Hung Nguyen-Viet, a Vietnamese biologist. Dominic Dwyer, an Australian virologist, was due to fly on Wednesday morning from Sydney, only for the trip to be cancelled the previous night.

Tedros Adhanom, the WHO director-general, who has gone to great lengths to praise China's "transparency" and response to the crisis, expressed frustration and disappointment.

Is this just a short delay or a plan to pull the rug from the investigation whilst Beijing is intensifying claims that the virus did not originate in China?

There was a customary mix of obfuscation and opacity in seeking answers from the ministry of foreign affairs. Hua Chunying, the chief spokeswoman, played down events as a misunderstanding but also said that as origin-tracing is very complicated, negotiations about the team's arrival were still ongoing. She suggested the experts had tried to arrive unannounced.

It's clear WHO thought they had agreed the specific time after months of talks about dates, locations, documents and interviews. Though, given Tedros's previous praise and China's record of giving earlier WHO teams the runaround, Beijing may have thought it could push the UN agency around with ease.

So what changed in the past few days? Well, Hua noted that China's health experts "are devoting themselves to intense anti-epidemic work". China is struggling to contain its most serious coronavirus outbreak in five months in Hebei province, bordering Beijing. Two cities an-hour train ride from the capital with a joint population of 18 million are in full lockdown this weekend after over 300 new infections were recorded last week. The numbers are a fraction of the UK or America but enough to cause alarm in Beijing.

The foreign experts were heading for Wuhan, 550 miles away but it would be an awkward distraction at a time when China has trumpeted the narrative that Xi Jinping has led the country to victory over the virus while other countries flail.

Another complication looms on the calendar: lunar new year on February 12, when China will close down for its biggest holiday. The supposed arrival of the WHO team last week was timed to allow two weeks in quarantine, three weeks for research and then departure on the eve of the Year of the Ox. This timeframe is now not achievable. So the question is whether Beijing push for a shorter visit to wrap up before February 12? Will it order its

officials and scientists to work through the holiday? Or will it put the trip back to the second half of February at the earliest?

Beijing insisted yesterday its commitment to the visit. "The specific time is being determined, and we are ready," said the national health commission vice-minister. WHO said on Friday that it expected to hear new mission dates this week.

Czechia

The Czech vaccination effort began on 27 December, when prime minister Babis, became the first citizen to receive the jab. Mr Babis, 66, had previously questioned if he would be eligible, as he'd had his spleen removed as a teenager. But the country's programme has got off to a sluggish start. Mr Babis - a billionaire businessman dogged by both European and Czech investigations into alleged misuse of EU funds lost no time venting anger at the European Commission over the delay. We believed when we contributed €12m to the European fund in November that we'd receive the vaccine, he told a newspaper last week.

France

France's boast of a big, effective state apparatus was badly exposed by the sluggish start to the Covid vaccination programme. After the first week, when neighbouring Germany inoculated around 250,000 people, France was on 530. By Friday, the figure had gone up to **45,500** still so small as to be statistically meaningless. So why has it taken so long for France to put the plan into action? It is not as if the authorities did not have time to prepare. And it is certainly not a question of a lack of vaccine. In fact, more than a million Pfizer doses are already in cold storage, waiting to be used.

The primary reason for the delay seems to be the cumbersome, over-centralised French health bureaucracy. A 45-page dossier of instructions issued by the Paris ministry had to be read and understood by old people's homes staff. Each recipient had to give informed consent in a consultation with a doctor, held no less than five days before injection. The lengthy procedure is in theory to save lives those of patients who might have an adverse reaction. But as critics have argued, delay in inoculating the population also costs lives.

Another problem is the high level of scepticism towards vaccination product of a more general suspicion of government. Polls suggest as many as 58% of citizens do not want the jab. The effect critics say has been to make the government unduly cautious. When urgency was required, the authorities were reluctant to move fast for fear of galvanising the anti-vaxxers. After President Emmanuel Macron communicated his anger at the delays last weekend the pace is picking up. The procedure for consent is being simplified. By the end of January, the plan is to have 500-600 vaccination centres open across France either in hospitals or other big public buildings. Politically much is at stake. The government has already been criticised for failings to provide masks and tests. With opposition voices call the vaccine delay a state scandal, President Macron needs a fast problem-free rollout.

Germany

German scientists developed the first effective Covid vaccine the source of great national pride and mostly Germans appear reasonably comfortable with the idea of immunisation. A recent survey found 65% were prepared to have the vaccine. Other research indicates that less than a quarter of those surveyed would not. But politically and perhaps unsurprisingly, given this is an election year Germany's vaccination programme has become a battleground. Vaccinations began two weeks ago and prioritise the over 80s and care home workers. By last Thursday, over **477,000** first doses were administered.

Some hundreds of specially prepared vaccination centres are still not in use and even the government has admitted there simply isn't sufficient. Angela Merkel and her health minister Jens Spahn have been accused of failing to secure enough doses. Much criticism has come from her own coalition partners but some within the scientific community have echoed concerns that Germany put European interests above its own by insisting on a joint EU procurement process. The scientists who developed the vaccine have said publicly that the EU originally declined an offer for a further order. Germany's share of the EU order amounts to 56 million doses. So far, 1.3 million doses were delivered and it's thought that by the end of January a further 2.68 million will follow.

Mr Spahn, whose assured performance through the pandemic led some to wonder if he might succeed Mrs Merkel, has blamed the shortage on the manufacturers of the Pfizer-BioNTech vaccine inability to meet global demand. Germany has now ordered an extra 30 million doses and following the European approval of the Moderna vaccine, expects to start rolling that out next week. The government is pledging that the vaccination programme will be complete by the end of the summer.

The country has received 30,000 doses of the Pfizer vaccine. So far, it has managed to administer it to **19,918** people. The government says it is ready to roll out the jab en masse once supplies arrive from the manufacturers. It has also published a strategy, envisaging a three-stage process. 1. To see targeted vaccination of high-risk groups. 2, to do mass vaccination in 31 centres, using an online reservation system open to all from 1 February. 3. Using the country's GPs hopefully to administer the Oxford-AstraZeneca and other jabs, which unlike the other two can be stored and transported at fridge temperature. However, the original timing in the strategy document appears optimistic. The health minister conceded that immunising the higher-risk groups all health and social care staff, teachers, everyone over 65, all those with serious health conditions will take months. GPs may not begin vaccinating young, healthy members of society until late spring, or summer.

Japan

ICS have received the following information from JSA with regard to changes in operation in Japan.

On-signers

Seafarers that have stayed in the UK or South Africa in the last 14 days must stay in the designated facility for three (3) days. They must take a COVID-19 test on the third day and will be released on the 4th day if the result is negative.

All seafarers (including Japanese nationals) from any country (except the UK and South Africa) are requested to submit a certificate of the negative test result of the pre-entry COVID-19 test conducted within 72 hours before boarding.

If seafarers may not have an effective negative certificate, they shall take the same process to the seafarers from the UK and South Africa.

In case seafarers can embark on a vessel within a quarantine period, seafarers can move to the vessel.

Off-signers

If vessels arrive in Japan within 14 days after departure from a foreign port, seafarers planning disembarkation shall take a Covid-19 test on-arrival. Seafarers must stay on

board, to await the result. The port where the COVID-19 test is available may be limited. Disembarkation in Japan is still not easy (especially for a short-voyage-vessel).

In any case above, seafarers cannot use public transportation.

Russia

Russia registered its main Covid vaccine for domestic use last August, prior to mass safety and efficacy trials. In December, with trials still underway, it began rolling out Sputnik V to the public ahead of mass vaccination launches elsewhere in Europe. The rush was driven by national pride and medical necessity. Sputnik was initially offered to front line health and education workers but early take-up of the two-dose vaccination was slow and the list of those eligible soon expanded.

A poll by the Levada Centre in late December showed only 38% of respondents were willing to get the jab wary of domestic healthcare and medicines, Russians were sceptical of bold early claims made for the vaccine and nervous about possible adverse reactions. Even so, and despite similar delays scaling-up production as in other countries, Sputnik's backers announced last week that over **a million people** had been vaccinated.

Vladimir Putin is still conspicuously absent from the list of the vaccinated, despite the Kremlin saying he will eventually get the jab. Currently, those who meet him in person must test for Covid first and even quarantine. The president may need to lead by example,. He has said repeatedly that protecting the economy is his priority so he's banking on mass vaccination to avoid a return to national lockdown. Russia has built giant, temporary hospitals since the start of the pandemic and the health minister said this week that 25% of Covid beds remain free. There's also been a fall in new daily cases reported around 25,000 for the last week. This is not down to the vaccine yet. The country is nearing the end of a 10-day New Year holiday period and Covid tests have also dropped.

Spain

Spain started administering the vaccine on 27 December. So far, 743,925 doses have been distributed to regional administrations, with **277,976** people vaccinated, according to the health ministry. The objective of the coalition government is to immunise 2.3 million people within 12 weeks. Priority is being given to elderly residents of care homes, those who look after them, and healthcare personnel.

Each of the country's 17 regions has a high degree of control over healthcare and should receive the number of doses that corresponds to their populations. However, already there has been substantial geographical disparity.

Government data showed, for example, that while the northern region of Asturias had used 55% of the doses it had received by 3 January, the Madrid region had only administered 5% by the same date. Some regions are holding back doses to administer a second follow-up jab to the same person in several weeks' time, and some have been vaccinating on national holidays while others have not.

Although vaccination is voluntary, the government has said it is making a register of those who do not wish to be inoculated. That initiative has generated controversy, although the government has insisted the register will merely seek to clarify why people refuse the vaccination. However, the pandemic has caused constant political conflict, with the right-wing opposition accusing the leftist government of incompetence, lack of transparency and using coronavirus to accumulate power. Arrival of a vaccine has not stopped the rancour. Alberto Núñez Feijóo, the conservative Popular Party (PP) president of Galicia, warned the

number of doses being distributed to each region was dictated by "political affiliations or parliamentary needs", a claim central government has rejected.

Four people have died in Spain's heaviest snowfall in decades. Convoys containing food and the coronavirus vaccine are being sent by the Spanish government to reach areas cut off by record snowfall. Army emergency brigades are clearing access to Madrid's main fresh food distribution centre and to hospitals as COVID-19 infections rise across Spain.

Interior minister Fernando Grande-Markaska said the government will take extra steps to ensure that the country's weekly shipment of the Pfizer/BioNTech vaccine, arriving on Monday, can be distributed to regional health authorities via police-escorted convoys.

After recording 20 inches of snow in Madrid between Friday night and Saturday, Madrid and a large swathe of the country remained impassable, with roads, rail lines and air travel disrupted by the storm. A 54-year-old man was also found dead under flurries in Madrid. Transport secretary Jose Luis Abalos said over the weekend that convoys would be used to transport food and vaccinations after 20,000km of road were revealed to have been affected by the snowfall in Spain.

Mr Abalos said crews had cleared two runways at Madrid's Adolfo Suarez Madrid-Barajas International Airport and that departures had restarted on Sunday. He said arrivals would slowly begin again sometime soon, weather permitting.

Trains traversing the capital gradually restarted on Sunday afternoon, but Mr Abalos said the important high-speed line linking Madrid with Barcelona remained out of operation. Over 150 roads were still impassable yesterday. People trapped in their cars were rescued but hundreds of cars needed to be recovered after being abandoned by drivers.

Storm Filomena has lost strength as it moved eastwards but authorities are still urging people to remain at home to limit the risk of falls on icy streets as a cold front moves in. Mr Grande-Markaska said: "The danger is not over. A week of extreme cold is coming and that will transform all the snow on the ground into ice, thereby multiplying the risk. The storm is bringing with it a cold wave that could push temperatures down to record levels. Spain's weather service forecasts temperatures to drop as low as minus 14C (6F) in the eastern province of Albacete by Tuesday.

Sweden

Almost two weeks since 91-year-old Gun-Britt Johnsson became the first Swede to get the initial dose of a Pfizer jab, there is still **no official tally** of how many others have received the vaccination. The Public Health Agency of Sweden says it's currently compiling data from the country's 21 regional health authorities tasked with vaccinating the entire adult population around eight million people by 26 June. The date isn't arbitrary, it's the biggest public holiday weekend of the year, when Swedes traditionally hold Midsummer celebrations. A senior manager at the agency, says the date remains "feasible". But she says it depends on the delivery of vaccines to the country.

Alongside 4.5 million doses of the Pfizer-BioNTech vaccine, Sweden has ordered 3.6 million jabs from Moderna, the first are expected to arrive next week. The country also plans to roll-out the Oxford-AstraZeneca vaccine as soon as possible after approval by the EU ideally by February.

Swedes initially appeared lukewarm to the idea of taking a speedily-developed coronavirus vaccine, although a poll in late December found 71% would take one. A key driver for

initial scepticism is thought to be the failure of a voluntary mass vaccination programme for swine flu in 2009. Hundreds of Swedish children and young adults under 30 developed narcolepsy, found to be a side effect of the Pandemrix vaccine. A successful vaccination programme will be crucial, not least as it comes at a time when Swedish authorities struggle to maintain public confidence. After months of high trust levels in the country's no-lockdown approach, support for the health agency has dwindled as Sweden has struggled with the second wave. Meanwhile, several high profile officials have faced heavy criticism for breaching their own recommendations including the head of the civil contingencies agency who resigned after spending Christmas with his daughter in the Canary Islands.

The Philippines

According to Sky News, the government in the Philippines has reportedly signed a deal to secure the supply of 30 million doses of the Covovax vaccine from Serum Institute of India (SII), the latter's local partner has said. The agreement was signed on Saturday by Carlito Galvez, a former military general in charge of the Philippines' strategy to fight COVID-19, according to a statement issued by Faberco Life Sciences Inc and reported by Reuters. The country's health department has yet to issue its own statement.

Health secretary Francisco Duque posted on Twitter: "We're in the final stages of closing agreements with various manufacturers to vaccinate at least 60-70% of the (population)". The vaccine will be available locally by the third quarter of 2021 and used to inoculate 15 million vulnerable and poor Filipinos, Faberco said.

Galvez said the Philippines was negotiating with seven manufacturers to procure at least 148 million COVID-19 shots as it aims to inoculate around two-thirds of its population this year. The Philippines has a total of 487,690 confirmed infections and deaths reaching 9,405 - the second highest number of cases and fatalities in Southeast Asia.

United Kingdom

Emergency patients will be turned away from hospitals, causing "avoidable deaths", unless the public starts obeying the lockdown, England's chief medical officer warned today. In a stark intervention, Professor Chris Whitty warned that everyone who meets friends and family unnecessarily is a "link in a chain" that threatens the lives of vulnerable people. Writing in the Times he said people should "not act" as if vaccination had protected them already. We must stay home except for work, exercise and essential activities. Every unnecessary interaction you have could be the link in a chain of transmission which has a vulnerable person at the end." The NHS risked being overwhelmed within a fortnight, he said, and in some areas was facing "the most dangerous situation anyone can remember". He said patients would then face "unsafe" waits for treatment. "Hospitals won't have room to take redirected emergency cases. staff-to-patient ratios, already stretched, will become unacceptable even in places like intensive care. There will be avoidable deaths."

Tracy Nicholls, CEO of the College of Paramedics, told Sky News there have been ambulance delays of "up to 10 hours" in high-pressure areas. She added some ambulance crews are waiting up to nine hours to transfer a patient to hospital staff. She said: the ambulance service is under unprecedented pressure. "We are very used to seeing ambulance services take some strain over the winter months due to the normal pressures we would see any particular year. But this year particularly has seen incredible pressure because of the clinical presentation of patients. They are sicker."

Whitty spoke as Professor Neil Ferguson, said patient numbers in hospital with Covid would soar by another 20%. "It will be quite difficult to avoid another 20,000 deaths," he

said as a further 1,035 were reported yesterday taking the total above 80,000. Most people will have to wait many months to get the jab. Ferguson, a member of the government's NERVTAG advisory group on viruses, said the alarmingly high level of infections in London where it was reported last week that one in 30 people had Covid could, perversely, see Britain recover fully by the autumn, helped by the vaccine. "I think we will see growth rates slow and we may see a decline which may be slightly aided as there is quite a lot of herd immunity in places like London."

Senior government figures are concerned that people continuing to meet friends and family in breach of the rules are "complacent" about risks to themselves and others.

The Health Secretary told Sky News pressure on the NHS is very bad and "the single biggest thing that anybody can do is to follow the stay at home guidance." In response, police in England and Wales will start fining people immediately if they ignore a request to follow the rules. Until now they have made several attempts to encourage people to do so. "Enforcing the rules saves lives. It is as simple as that," said the home secretary.

March 23 the anniversary of the start of the first UK lockdown is the date being circulated in Whitehall as the moment coronavirus restrictions might realistically begin to ease.

Some government scientific advisers warned yesterday that lockdown measures were "too lax", with people openly meeting friends for drinks in parks and massing at food markets.

Professor Robert West, a member of the Scientific Pandemic Influenza Group on Behaviours, said the lockdown allowed a lot of activity which is spreading the virus".

Susan Michie, of the Sage advisory group, added: "It is definitely too lax. We should have a stricter rather than less strict lockdown than in last March." Downing Street sources said they did not plan to close nurseries or remove support bubbles the principal differences from the first lockdown but stressed people must obey the rules.

Every adult in the UK will be offered a vaccine by the autumn, Mr Hancock the UK Health Secretary promised today as he claimed the inoculation programme was on track to meet its first target by February 15. Figures to be updated daily from tomorrow would show a third of those aged over 80 had already been offered a Covid jab. Take-up of the vaccine has so far been "fantastic" ahead of tomorrow's data, which is expected to provide the first detailed breakdown of progress to date. It comes as pressure grows for teachers to be prioritised for the second phase of the vaccination programme that will follow the inoculation of the nine most vulnerable groups already detailed.

The top four groups, the over-80s, care-home residents, frontline health workers and those deemed clinically extremely vulnerable, are being promised jabs before February 15. Mr Hancock declined to give a total ahead of tomorrow's release but said that it would show the current pace at close to 200,000 a day as it continues to accelerate. Vaccination will continue through the spring and summer and set a target of covering the entire adult population by autumn. This followed warnings by the chairman of a key scientific advisory body that restrictions would be needed even after the most vulnerable were protected.

Professor Peter Horby, stated "There will still be many people being infected, and although the absolute risks of someone under 80 dying or ending up in hospital are low, with a large number of infections that still translates into a lot of people and so we will have to manage the virus, with social distancing measures and vaccination for the coming months." Asked about the likelihood of social distancing measures being required next winter, he said: he

thought that's likely. I think it very much depends on how well we can scale up the vaccine programme and how quickly we can get it out to a substantial proportion of the population."

He said the current measures might have to be tightened further if it becomes evident they do not work against the virus. We are in a situation where everything that was risky in the past is now more risky so we are going to have to be very strict about measures.

"Whether the current restrictions are enough remains to be seen. It will be a week or two before it becomes clear. They may be sufficient but we have to be very vigilant and if there's any sign that they're not, then we're going to have to be even stricter I'm afraid."

Professor Adam Finn, of the Joint Committee on Vaccination and Immunisation (JCVI) said the vaccine rollout will already have prevented thousands of people from requiring admission to hospital with the virus. He said the body would provide a plan by mid February prioritising who should be vaccinated next. He told Sky News: "JCVI will discuss over the coming month phase two of who should be prioritised next." As you can appreciate these considerations start to be social values in a way more than the criteria normally used, which is pressure on the health service. "There are broader considerations regarding people with different occupations and their relative importance in society."

After six tries injecting a plastic training pad resembling an arm, Benjamin Fellows believes that he can administer the coronavirus vaccine to members of the public. "After the first one it felt quite easy and quite natural," he said. "With a bit of practice there's not much to it. You get into a routine. It's quite exciting I would say." Mr Fellows, 30, an ICT consultant from Maidstone in Kent, is one of St John Ambulance's volunteer army of vaccinators.

About 10,000 people have signed up to administer the vaccine, with St John Ambulance also getting about 6,000 volunteers to reassure and help those receiving injections and a further 14,300 focusing on administration and supporting the vaccinators.

Zainab Yasmin, 42, became a volunteer after a bad bout of Covid-19 last March. Her mother and siblings were hospitalised with the virus. She works as a public health programme manager in the London borough of Tower Hamlets. "You're doing a service to your community and your country by vaccinating them."

The first volunteers went today to seven sites, including the Nightingale field hospital in London's ExCel conference centre and Millennium Point in Birmingham. Vaccinators are also working at venues in Manchester, Bristol, Newcastle, Surrey and Stevenage. St John Ambulance volunteers are expected to work in 100 sites by early March.

Catherine Moulton, 47, from London, who was unable to see her parents over Christmas helped her decide to volunteer. "The scale of the effort required made me want to be a part of it and to help. I'd been sitting at home for ten months not really able to do anything practical." Ms Moulton said she had not seen her parents in nearly a year as they were shielding. She will work her first shift on Friday at the London Nightingale field hospital.

Volunteers can sign up for as many shifts as they wish but should do a minimum of two six-hour shifts per month. As well as practice using the needles and gauze, they are trained on how to handle difficult situations if people are anxious about vaccination.

After reports of rising Covid-19 cases Jeff Surprenant, 25, volunteered to give the vaccine.

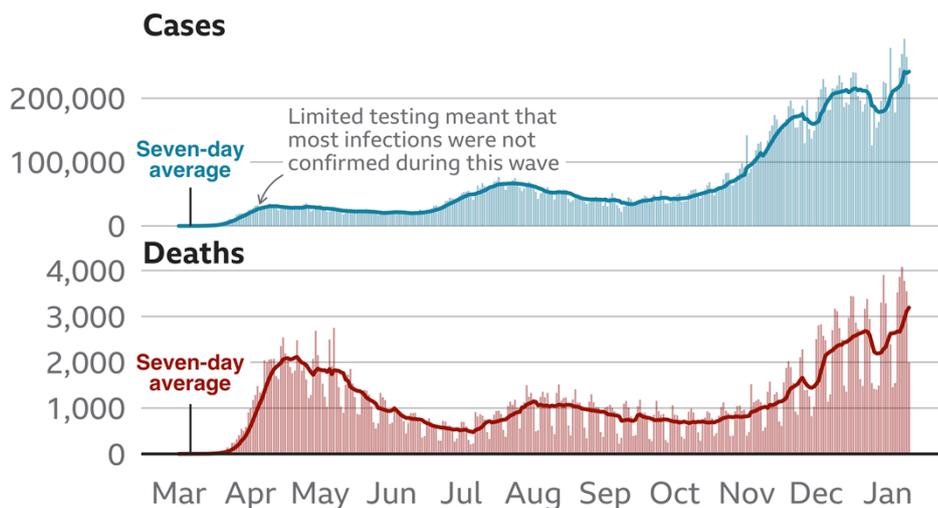
Richard Lee, St John Ambulance chief operating officer, said that about 600 first aid volunteers signed up to teach the syllabus to tens of thousands of applicants. "What I like about this is it's communities vaccinating communities," he said. "For instance, people in

Hull are banding together, getting trained and participating in running of the area vaccination centre. This is real communities supporting communities which is fantastic and really humbling to watch.”

United States

The US has recorded over 20 million cases and about 375,000 deaths from coronavirus, the highest global figure. Daily cases have been at record levels since early November and over 125,000 people are in hospital, double in either of the two previous waves.

Number of daily reported cases and deaths in the US



Source: COVID Tracking Project

BBC

Natalie Shaw
Director Employment Affairs



INTERTANKO



**Crew Welfare
Management and
Mental Wellness
2nd Edition**

**TWENTY
21**



INTERTANKO

Crew Welfare Management and Mental Wellness

2nd Edition

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Introduction

The Covid-19 pandemic has led to widespread concerns over its effects on people's lives and employment, while seafarers are also anxious about their families and loved ones back home.

Anxieties about how worrying events may evolve can affect the wellbeing of seafarers. Unpleasant thoughts and feelings can escalate quickly, making it difficult for those on board to find the energy to follow their daily routine and to concentrate on their work tasks. Although seafarers access news and hear stories from home, they may feel disconnected and unable to engage. The resulting impact on their mental wellness and welfare should not be ignored.

If left undetected, or if seafarers do not have the opportunity to process these thoughts and feelings, or have not had the opportunity to develop coping strategies, it is feasible that they can become overwhelmed and potentially suffer from depression or psychosis.

This pandemic has highlighted a need for more guidance on how to manage crew welfare and mental wellness management and, with this in mind, INTERTANKO's Human Element in Shipping Committee (HEiSC) prepared these recommendations, which are written especially, but not exclusively, for crewing managers and shore-side staff.

The guidance includes advice on helping seafarers to deal with emotional stress and overcome negative feelings. While this guidance has been written during the Covid-19 global pandemic, the key principles are applicable at any time.

We would like to extend particular thanks to Eaglestar for allowing HEiSC to use its internal guidance in the development of this document.

This Document

The advice and recommendations that follow have been developed for the consideration of shore-side staff when providing practical guidance to leadership teams on how to manage crew that may be experiencing stress as a result of prolonged service onboard.

While this guidance is aimed at non-healthcare professionals, if in any doubt, guidance from health professionals should always be sought.

This guidance considers three key areas:

- Understanding Seafarers' Needs
- Advice on Addressing Seafarers' Needs
- Special Focus on Cyber Wellness

In addition to this advice, HEiSC members have provided examples of practices that they have adopted to help ease the hardship associated with the Covid-19 pandemic. This advice can be found in the last section on additional best practices.

Understanding Seafarers' Needs

In order to prevent emotional and psychological distress in our seafarers, it is useful to understand what their needs might be. Seafarers, like all human beings, need three things: recognition, stimulation and certainty. The graphics in Figures 1 and 2 explain briefly what these needs are and the consequences if such needs are under- or over-fulfilled.



Figure 1. Human Needs (Source: Illsley-Clarke and Dawson, 1998)

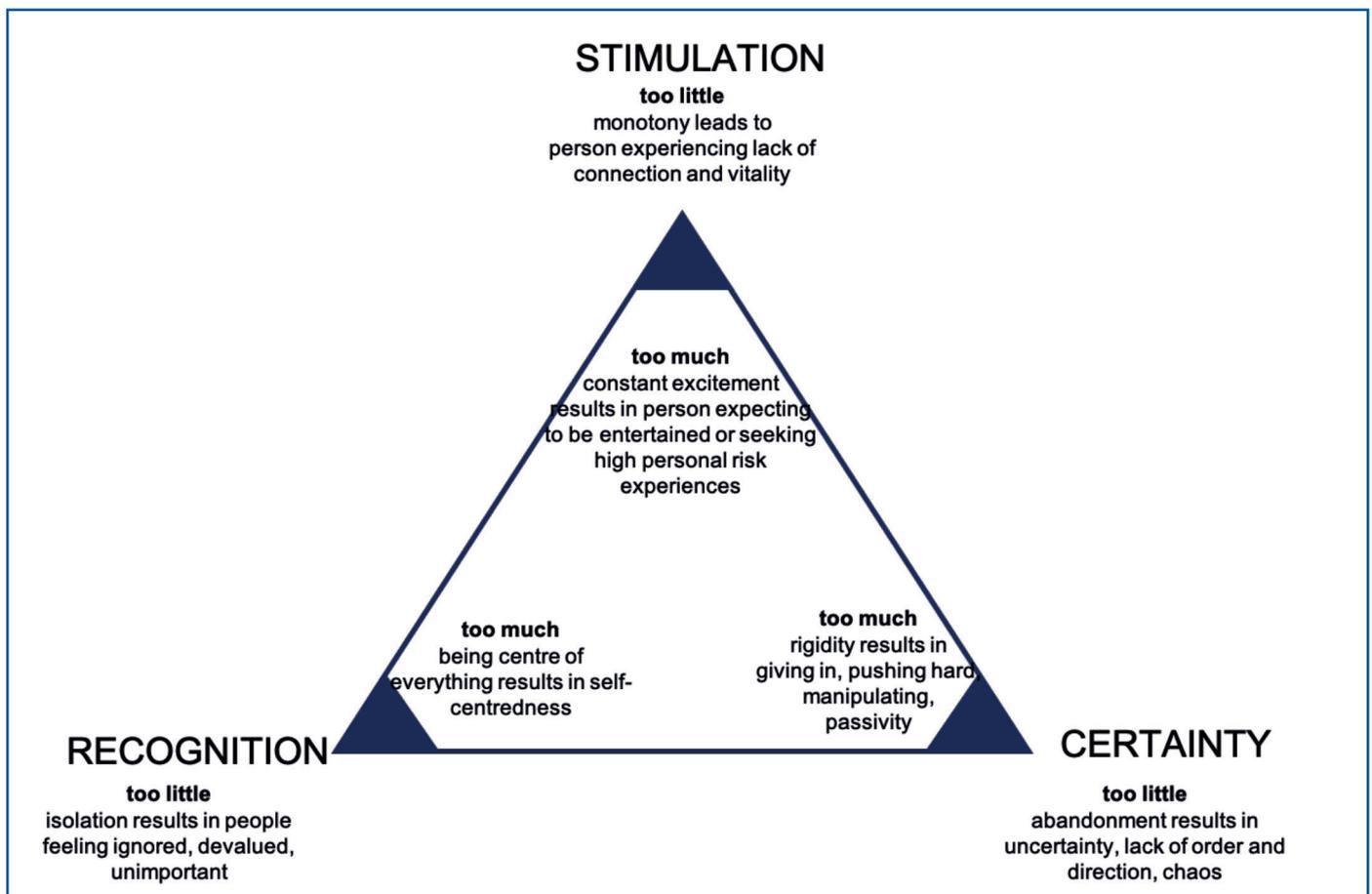


Figure 2. Consequences of over and under-fulfilment of human needs (Source: Illsley-Clarke and Dawson, 1998; p. 18)

Risks associated with seafaring

Seafaring is an occupation which, by its very nature, is associated with risks to the welfare and mental wellness of the job incumbents. Using the framework of human needs as depicted and considering the situation under normal circumstances and with the added pressure of the global Covid-19 threat, the following identifies the hazards to individuals' welfare and mental wellness associated with seafaring.

Too little recognition

As a consequence of their working patterns and being at sea, seafarers will have reduced contact with society, their communities, their employer, shore-side management, their loved ones and even their colleagues on-board. Being *out of sight* in this way can also lead to seafarers being *out of mind*.

With a lack of contact, there is a danger that people important to seafarers' wellness will fail to recognise their special circumstances, fail to take into account the difficulties they face, will find it difficult to empathise or understand their wants, and as a result, will fail to make meeting seafarers' needs a priority; for example, granting timely relief to enable a seafarer to be present at the birth of their child.

Too little recognition of seafarers' needs will lead to seafarers feeling a sense that they are unimportant, not valued or even ignored. In the current crisis, their remoteness is heightened, their need for recognition increased and without appropriate attempts to meet their needs, these feelings are likely to be exacerbated.

Too little stimulation

On-board ship, it is very difficult to recreate the kind of social life that people working ashore enjoy; for example, going to a concert, taking part in a sports team, or meeting with friends for dinner in a restaurant. It is also difficult to pursue many hobbies, although reading, painting and playing music are all possible. A social life is an important source of stimulation and provides variety as well as recuperation from work activities, and having a range of activities to pursue other than work is important for seafarers' welfare.

Nowadays, many ships are 'dry' ships with no or very limited alcohol on-board. In addition, many ships are multi-culturally crewed and so people from vastly different backgrounds are put together. Both factors have reduced the amount of social interaction that takes place on ship, making contact with family through social media increasingly precious and runs ashore an important pressure-release valve.

Without social interaction being encouraged and poor internet communication on-board, the addition of a lack of shore-leave due to the coronavirus means seafarers will be denied access to crucial sources of stimulation. This lack of stimulation may lead to feelings of boredom and a sense that life is becoming increasingly monotonous, which ultimately can lead to a lack of energy and a loss of interest in things, activities and people.

Too much and too little certainty

Ordinarily, life at sea might be viewed as containing too much certainty, with the working environment being highly proceduralised with many rules and regulations governing what seafarers can and cannot do. However, with *too much* certainty, a lack of personal control and discretion can result – this is not necessarily a good thing. A lack of control can lead to learned helplessness on the one hand and intense frustration or anger on the other.

In contrast to their working environment, seafarers' personal lives, particularly in the current situation, are likely to be associated with *too little* certainty. The coronavirus has had a huge impact on the ability of companies to repatriate their seafarers at the end of their contracts and to give work to those on shore. Consequently, it is very hard to plan and enact crew exchanges, leading to seafarers experiencing a lack of predictability and control over when they will be home, or, when they will be earning.

In addition, the insidious nature of the virus makes it very difficult to know who has been infected and who has not and thus to know the risk posed by visitors to the ship such as pilots and port officials. Undoubtedly, this will increase seafarers' sense that life is becoming increasingly chaotic, leading to fear and anxiety about what the future holds.

Advice on Addressing Seafarers' Needs

This section considers four key actions that shore management can take that address seafarers' needs. These key actions focus on the interactions between shore management and shipboard personnel and are as follows:

- Effective communication
- Look out
- Reach out
- Lead by example.

Effective communication

It is especially important at this time to convey to seafarers that they are not alone and reassure them that they have not been abandoned. This can be achieved through increased, effective communication.

Make communication part of the regular routine to check on the wellbeing of the crew onboard; do not mix these checks with work/operations issues.

Effective communication begins with the way that messages are delivered and how care is conveyed towards the people you engage with.

Frequent communication will harness familiarity, trust, commitment and an appreciation of being on the same team. Do not assume.

Prepare messages in advance

Keep to known facts, for example, if seafarers were to ask about their status about signing off:

"We are sorry that this has happened. We are extremely concerned about what you are going through. I wish we had more definitive answers for you. Rest assured, management is highlighting the issues with the relevant authorities for seafarers at national and international level so that we can develop amicable and practical solutions."

Tips for effective communication

Be compassionate, empathetic, courteous and considerate. It's not easy to do this under pressure when many questions are asked or repeated, but shore-side staff need to adopt a patient approach.

Do not over-assure. The objective is not to soothe, but to convey accurate information and calm concern. In fact, it is better to over-estimate the problem and then be able to say that the situation is better than first thought.

Acknowledge uncertainty. Say only what is known, show concern and acknowledge the concern of your crew.

Emphasise that a process is in place to resolve the issue.

Be regretful, not defensive. Say, "We are sorry..." , or "We feel terrible that..." when acknowledging the issue.

Acknowledge people's fears and concerns. Don't tell the crew they should not be afraid. They are afraid and have a right to share their fears/concerns.

Express wishes. Say, "I wish we knew more," or "I wish we had more definitive answers from the government/authorities".

As far as possible, the Ship Management team can share with the seafarers the details of the outcomes of the company's attempts to address the plight of the crew, e.g. repatriation attempts, for seafarers to be as informed as they can be. The timely flow of information to seafarers helps to prevent seafarers from forming the perception that the company is doing little or nothing to address their plight.

When prevalent, the spread of such perceptions amongst the shipboard crew and the families of the seafarers, it becomes more challenging for the company to manage. For example, at each port call, seafarers naturally assume this as a window of opportunity for repatriation. However, often companies fail to share the details on why it is not possible to do so; for example, when flights are cancelled due to contradictory information provided by airlines on flight availability; situations that are outside the company's control.

Be willing to address the 'what if' questions. These are the questions that everyone is thinking about and they want your answers. "What will happen to us if the Covid-19 issue doesn't resolve in the next one or two months?" **Empathetic Listening** – One basic principle is to "seek to understand, before being understood."

People will only feel comfortable to share their true feelings and thoughts when they are convinced that they will be heard appropriately, without judgment from the listener.

In summary

Do

- Be non-judgmental – allow people to express their worries or stress.
- Give the person your undivided attention.
- Listen carefully (to feelings and facts).
- Show concern by asking about their families and their wellbeing.
- Follow up, especially with those who show signs of weak coping ability.

Most importantly, firmly assure that worrying events will pass and everyone will be safe at home with their families again.

Avoid

- Belittling people's worries or concerns.
- Offering solutions or advice.
- Sounding repetitive and giving out the same information.

Why is effective communication important?

Effective communication can help to foster a good working relationship between you and your crew onboard, which can in turn improve the team's morale, productivity, commitment and efficiency.

How people are treated and managed on a day-to-day basis is central to their mental well-being and motivation, as well as the level of trust they put in the Ship Management team.

The behaviours of the Ship Management team will largely determine to what extent the crew onboard stay resilient under pressure during periods of prolonged shipboard service and remain loyal to the company during tough times.

Potential questions that you may face

Q: How can people, who are confined to vessels under quarantine, stay safe and well at this difficult time?

"You have developed a skill that the general population needs to learn in order to better manage Covid-19. You have developed a skill to work for long periods onboard, where you can circulate freely and manage boredom by making sure that you stay connected with your loved ones. You also know how to manage boredom by staying connected with people around you. So, please stay connected remotely and enjoy the activities onboard i.e. exercise, recreation activities etc. Please draw on these strengths and share them with others so that we can all manage the pressure and boredom of the coming weeks." Source ISWAN helpline

Q: My family needs me, therefore please find ways to sign me off immediately

"These are difficult situations that seafarers are facing globally, with port closures and travel bans imposed by many countries. We know that you are feeling anxious, especially with regard to those countries with high cases of Covid-19. Rushing back home may put your family at risk, so it would be wiser to stay onboard and stay connected to them remotely." Source ISWAN helpline

Look out

It can be very easy to focus on our own immediate concerns in times of high stress and consequently we can unintentionally overlook the pressures on sea staff. Taking time to look out for your crew's welfare and signs of distress means that you can intervene early to help them manage their worries at this time.

Worrying situations may not go away overnight and your crew will be facing similar pressures to you.

Sea staff could experience what is known as "anxious distress" in addition to low mood. People with anxious distress often feel tense, restless, and have trouble concentrating because they worry so much. Therefore, it is important that the Ship Management team takes a more caring and compassionate approach in dealing with their team onboard.

Early intervention: spotting the signs of stress and poor mental health

Like physical health, everyone can have mental health issues and it can fluctuate along a spectrum of good to poor. Good ship management support is crucial in assisting wellbeing, spotting early signs of distress and initiating early interventions. Stress can take a toll on people physiologically and in the long run, it can affect the immune system of a person. Look out for the following signs during your engagement with the team:

Impact	Psychological	Behavioral
Fatigue	Anxiety or distress	Increased smoking and drinking
	Tearfulness	Using recreational drugs
Headache	Feeling low and/or lonely	Withdrawal syndrome
Appetite and weight changes	Mood changes	Resigned attitude
Joint and back pain	Indecision	Irritability, anger or aggression
Changes in sleep pattern	Loss of motivation	Overexcitement or euphoria
Visible tension or trembling	Loss of humour	Restlessness
Nervous trembling speech	Increased sensitivity	
Chest or throat pain	Distraction or confusion	
Sweating	Difficulty relaxing	Intense or obsessive activity
Constantly feeling cold	Lapses in memory	Repetitive speech or activity
Psychological	Illogical or irrational thought	
Psychological	Difficulty in concentration	Uncharacteristic errors
Psychological	Suicidal thoughts	Uncharacteristic problems with colleagues
Psychological	Slowing down of thought process	Apparent over-reaction to problems
Psychological	Feelings of guilt and/or worthlessness	Disruptive or anti-social behavior

Reach out

Reaching out early can signal to your onboard teams that you are concerned for their welfare. Following the advice regarding effective communication will also help to ensure that you come across as sincere and caring rather than simply concerned about performance.

Always keep in mind that the current situation may not go away overnight and you should focus on longer-term working capacity rather than repeated short-term crisis responses.

Empathy is an essential leadership skill. It helps to build bonds and without it you will not be able to reach your people. When you show empathy and care about the crew onboard, you can create a stronger bond with them; you can connect and understand their interests and perspectives. Once you have developed this trust and bond, you will be able to play an effective part in reducing the stress levels within your team.

Demonstrating empathy is hard; it takes time and effort to show awareness and understanding. When it comes to building teams and earning trust, you must take an interest in your people to show that you care. You must show curiosity by asking questions about their challenges and their families.

It's not always easy to understand why someone feels or thinks the way that they do. People often react in ways that are surprising, and it may leave you clueless about how to respond. But with empathy in your

leadership toolkit, you don't have to worry about how to respond, because the goal is not to respond but to listen, not to reply but to understand. Empathy allows you to understand others without passing judgment or making assumptions.

Here are some tips to guide your conversation:

Questions to ask	Questions to avoid
How are you doing at the moment? How is your family doing?	You're clearly struggling. What's up?
You seem to be a bit down/ upset/ under pressure/ frustrated/ angry. Is everything okay?	Why can't you just get your act together? What do you expect me to do about it?
Is there anything I can do to help?	Your performance is unacceptable right now – what's going on?
What support do you think might help?	Everyone else is in the same boat and they're okay, why aren't you?

Tips to facilitate your conversation:

Choose an appropriate place

It's important to make people feel comfortable. Choose somewhere private and quiet to have the conversation. This applies specifically to shipboard conversations.

Avoid making assumptions

It can be difficult for people to disclose information relating to their problems, so make it easier by keeping an open mind and giving them space to talk it out.

Embed confidentially

People can understandably be anxious about disclosing information, so be prepared to assume responsibility for confidential and sensitive details. Reassure the individual that any private information they disclose will not be leaked to their colleagues.

Encourage people to talk

It's important to have an open dialogue when discussing personal problems.

Be understanding and honest

It's important to recognise that a person's performance or behaviour can be affected if they are experiencing any personal problems/ mental health issues.

Reassure people

People may not always be ready to talk straight away, so it's important that you outline the support that is available. Reassure the individual that there are always people available and they can speak to you at any time. Let them know that you'll ensure they will get the possible support that they need.

Encourage people to seek support

Provide details of your organisation's Employee Assistance Programme (EAP) if you have one, and inform the crew onboard of any arrangements for online counselling.

Companies can reassure seafarers and refresh seafarers on the avenues of sharing their concerns apart from their shipboard superiors. Many seafarers (especially non-officers) are not aware of their rights under the Maritime Labour Convention (MLC), and tend to feel trapped in that they have no one beyond their shipboard superiors to turn to.

Under Standard A5.1.5-4 of the MLC, all seafarers shall be provided with a copy of the on-board complaint procedures applicable on the ship. This shall include contact information for the competent authority in the flag State and, where different, in the seafarers' country of residence, and the name of a person or persons on board the ship who can, on a confidential basis, provide seafarers with impartial advice on their complaint and otherwise assist them in following the complaint procedures available to them on board the ship.

You can direct them to **www.seafarerhelp.org**, which provides a free, confidential, 24/7 helpline service for seafarers and their families around the world. The SeafarerHelp team speaks a wide range of languages including Filipino, Russian, Hindi, Chinese, Spanish and Arabic and can be contacted via several different methods including telephone (with a callback option), email, live chat and WhatsApp.

Lead by example

The Ship Management team plays an important role in creating and ensuring the right culture for the company. Hence, treat your crew with respect, praise good work, offer support if there are any skill gaps, and try to use a positive coaching style of management.

Ask for feedback about the support that you have provided and what support they need to help them achieve their goals.

Encourage seafarers to overcome this storm by exploring the following interventions, which may help to lower anxiety and stress levels:

Reach out

Encourage staying connected remotely with loved ones to check on their wellbeing. This is extremely effective and creates a positive impact on both the seafarer onboard as well as the family at home.

Events onboard

Organise regular events and engagement activities for the crew onboard to help them bond and ease stress levels. Example activities that you can organise with your crew include:

- Movie nights
- Karaoke nights
- Dance parties
- Thematic parties
- Indoor team-building games

Workout

Exercise is the all-natural treatment to fight stress and depression. Practicing yoga can also be an effective way of alleviating stress and boosting positivity.

Healthy lifestyle

Adopt a healthier working style by managing the work/ rest hours well and by taking proper healthy meals and breaks.

Breathing exercises

Manage stress by using a breathing exercise such as the following:

Exhale deeply for eight seconds and then inhale through the nose for four seconds. Hold the breath for seven seconds, then repeat the steps.

Good sleep

Sleep deprivation can affect the psychological and mental state of people onboard. Keep an eye out for signs of stress, depression and anxiety among crew members.

Look out

Ensure that seafarers are working together to look out for each other.

A Special Focus on Cyber Wellness

'Cyber wellness' refers to the positive wellbeing of internet users. It requires a clear understanding of positive and constructive behaviour and awareness to protect oneself online.

Cyber wellness also ties into the general concept of wellness for all seafarers and involves an understanding of healthy online behaviour and awareness of how to use the internet and mobile devices responsibly whilst onboard a vessel. Accordingly, this section provides advice and recommendations on promoting seafarers' cyber wellness. A more detailed discussion of the topic can be found in INTERTANKO's guidance document *Cyber Wellness at Sea*.

Three primary principles of cyber wellness, when adhered to, will help get the most benefit from the internet while at sea:

1. 'Respect for self and others';
2. 'Safe and responsible use'; and
3. 'Manage non-work screen time'.

(1) Respect for self and others

- Seafarers should respect themselves by only sharing appropriate content and participating only in legal online activities;
- respect other people online (e.g. putting themselves in others' shoes, accepting diverse views and opinions, giving credit when using other people's work, seeking permission where necessary, avoiding sharing hurtful materials);
- be a positive role model online (e.g. sharing healthy and positive content); and
- advocate positive online behaviour (e.g. standing up for peers online, reporting cases of cyber bullying to a trusted adult/authority, posting encouraging remarks on social media).

(2) Safe and Responsible Use

Seafarers should:

- Understand that the safe and efficient completion of the important work they do onboard requires full concentration and awareness. This means that they should get sufficient rest every day (as per the company's work/rest policy) and ensure that they are free from unnecessary distractions whilst at work;
- Understand that internet-connected mobile devices increase one's social connectedness but can also be a constant source of distraction; and
- Understand and apply basic best practices for internet security.

(3) Manage Off Work Screen Time

“Screen time” is the time spent each day using devices with screens. These devices include televisions (TVs), video consoles, smartphones and tablets. Screen time can be:

- *interactive* – for example, playing video games, communicating;
- *not interactive* – for example, sitting still and watching movies, TV programmes or YouTube videos;
- *educational* – for example, doing personal or professional development online; or
- *recreational* – for example, playing games or watching videos for fun.

There are both benefits and risks to using these devices. A healthy cyber usage lifestyle includes limits on daily screen time. Limits mean making sure that usage doesn't get in the way of sleep and activities that are also good for seafarer's overall wellbeing.

Seafarers should take personal responsibility to self-manage how and when they access their devices as well as make wise and healthy choices (e.g. maintain a healthy balance of online and offline activities).

This can be achieved by limiting non-work screen time, making mealtimes free of TVs, smart phones and other screens, using the time during TV ads to be physically active, engaging fellow crew mates in conversation or activities whilst onboard and limiting socialising on social media or messaging.

Summary

As shipboard technology evolves, so will the human factors and related challenges in managing their associated risks. As most companies recognise, the benefits can outweigh the risks if seafarers are guided on how to assure cyber wellness by following the three steps outlined previously.

Additional Best Practices

The principal advice for assisting seafarers in difficult circumstances is described in the following. The table below provides some concrete examples of practices adopted by INTERTANKO Members to ameliorate the stresses and strains associated with the Covid-19 pandemic and they are organised according to whether they help with the human needs of Recognition, Stimulation or Certainty.

Human Needs	Best Practice
<p>Recognition: Practices that communicate value, understanding and empathy</p>	<ul style="list-style-type: none"> • Consideration of the payment of bonuses from the day the seafarer completed the contract. • Contracts end when seafarers get home after quarantine finishes. • Sending flowers and presents to families of seafarers over their time. • Senior staff have produced videos thanking seafarers. • Provided prescribed medications to all crew on-board whose medicines are getting over. • Weekly call with the Senior Leadership Team ashore with ship staff.
<p>Stimulation: Practices that facilitate social contact and introduce variety into seafarers' lives on-board</p>	<ul style="list-style-type: none"> • Supply of additional board games to ships and set up tournaments. • Increased data and download time for the internet. • Increasing the amenities on board, this includes providing extra recreational equipment, organising special events, arranging extra half-day off on board etc. • Reducing of the workload and relaxation on non-critical PMS items. • Adopting of extra dietary measures with our catering partner aimed at keeping crew healthy and fit by increasing their immunology and mental well-being. • Ensuring onshore senior teams are in regular contact with the vessels crew and with their families back home to keep morale up. • Refurbishing of crew smoke room of all ships, with live TV and streaming apps and organise film screenings as a group to promote bonding through "shared experience". Also, the increasing of data usage for crew by 50%.

<p>Certainty: Practices that help give a sense of control and reduce uncertainty</p>	<ul style="list-style-type: none"> • Virtual town hall meetings to improve the flow of information. • Continuation of financial support to cadets when their studies have been interrupted. • Setting up of a dedicated Special Crew Operations team to find solutions to issues faced due to Covid-19. • Creation of a solidarity fund to provide cash advances to crew ashore who were delayed in joining back. • Providing of remote access to wellbeing support, mental health line and medical support. An in-house psychologist in constant contact with the fleets. • Deviated vessels to perform crew changes where possible. • Ran mental health/wellbeing questionnaire campaign in cooperation with external psychological consulting contractor for all crew on board ships that had tendered their resignation and could not disembark. This was followed up with feedback on mental health state and one-to-one sessions with psychologist where necessary. • Communication on a weekly basis to all the fleet of all crew change initiatives that have taken place in order to keep informed/aware of actions from the office side, as well as hope that things will improving over time. • Sharing of details regarding the outcomes of the company's attempts to address the plight of the crew, e.g. why the repatriation attempt at a port call was unsuccessful, in order for seafarers to be as informed as they can be. • Persons on-leave to be provided with 50% wages every month until they join back. • Medical coverage and pension to continue for persons who have exceeded the leave and cannot join back. • Holding of the ship in anchorages / ports to complete the crew changes.
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Summary

This document provides guidance and recommendations for non-mental health professionals. In writing this guide, the authors have focused on providing a better understanding of seafarers' emotional and psychological needs along with practical tips on how to address those needs.

This guidance is not intended to be exhaustive or to provide specialist or detailed education and advice for all mental wellness issues that might arise. Readers are advised to consult appropriately qualified professionals should they be concerned about meeting the needs of their seafarers or feel that they are out of their depth in any way.

The most important point to remember is that it is better to take definitive action rather than to hope a problem might resolve itself. We hope this guidance will give the reader confidence to take the first steps in protecting seafarer mental well-being whether during the Covid-19 pandemic or when a more normal situation has returned.

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