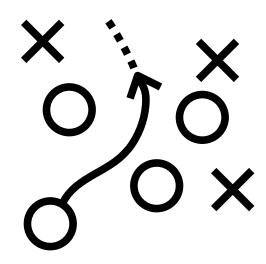
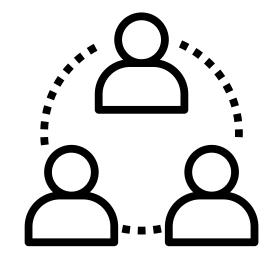
WHAT IS SHIELDING?

Shielding aims to protect people at high risk of severe illness or death from COVID-19 by limiting their contact with others.



It could be part of a wider strategy including handwashing, isolation of sick people, and some physical distancing.



Shielding models should be designed in collaboration with local actors to reflect the local or country context.



People could shield in a separate room in their home; in a designated house with other high-risk people; or in a designated facility in the community or camp setting.

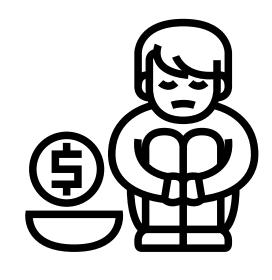


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WHY MIGHT SHIELDING BE APPROPRIATE IN SOME SETTINGS?



Shielding could protect those most at risk, while others continue with their economic activities.



Shielding can be especially important in low-income settings, where physical distancing measures can have significant negative socioeconomic consequences.



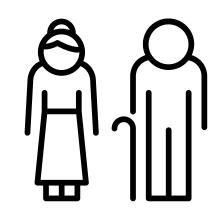
Shielding may relieve pressure on stretched healthcare systems by reducing the number of severe cases.



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WHO ARE THE PRIORITY GROUPS FOR SHIELDING?

The evidence on how COVID-19 affects people with underlying health conditions is evolving, so the criteria for shielding should be continually adapted. Community members and existing programmes can help to identify people who should be shielded.



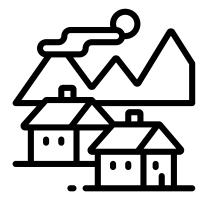
The older a person is, the more likely they are to have severe outcomes from COVID-19. People over 70 have been classified as most at risk in high-income settings.



People are at higher risk if they have an underlying health condition like cardiovascular disease, diabetes, chronic respiratory disease or cancer.



Many people in lower-income settings do not know they have an underlying health condition, so a lower age threshold could help to protect more of those people.



Criteria may differ between high- and low-resource settings, rural and urban areas, and camp or informal settlements.

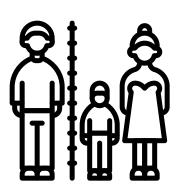


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WHY MAY IT BE DIFFICULT TO SHIELD IN LOWER-RESOURCE SETTINGS?



Many families do not have a separate space where people can isolate, and may need to leave their homes to access water and toilets.



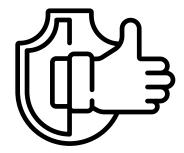
People who are separated from loved ones for a long time can become distressed or mentally ill.



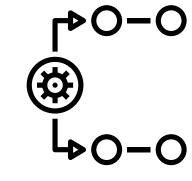
People housed in shielding locations may become associated with the disease and stigmatised by others.



High-risk people may still need to work to earn money and continue to do household duties and childcare.



People may not want to follow guidance on shielding if they do not trust authorities or response partners.



If someone in a communal shielding location is infected, the virus could infect many high-risk people.



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WHAT CAN GOVERNMENTS AND PARTNERS DO TO FACILITATE SHIELDING?

It is vital to clearly communicate the reasons for shielding and how it might work.



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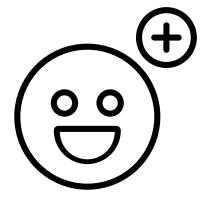
Support local actors to lead the design and implementation of shielding measures so they are locally feasible.



Provide cash, food, water, healthcare, soap and cleaning products so high-risk people can stay at home and stay healthy.



Provide psychosocial support and make sure people in shielding locations can communicate safely with family and friends.



Address stigma by communicating clearly about shielding and the virus and build on positive attitudes toward high-risk groups.



Set up an alert mechanism and immediately isolate any shielding resident who shows COVID-19-like symptoms.