COVID-19



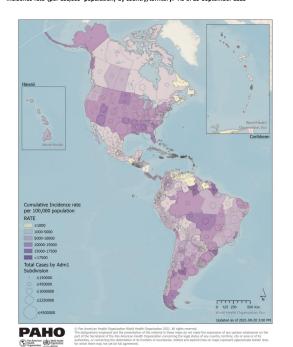
PAHO/WHO Response. 24 September 2021. Report n.60

HIGHLIGHTS

PAHO selects centers in Argentina and Brazil to develop COVID-19 mRNA vaccines. Two centers in Argentina and Brazil were selected as regional hubs for the development and production of mRNA vaccines in Latin America in a bid to tackle COVID-19 and future infectious-disease challenges. This was announced during the "Technology Transfer for the Production of mRNA Vaccines in the Americas" side event of PAHO's 59th Directing Council, by WHO's Chief Scientist, Dr. Soumya Swaminathan, and PAHO's Assistant Director Dr. Jarbas Barbosa. The Bio-Manguinhos Institute of Technology on Immunobiologicals at the Oswaldo Cruz Foundation (FIOCRUZ) was selected as the center in Brazil. Sinergium Biotech, a private sector biopharmaceutical company, was selected as the center in Argentina. Sinergium will partner with pharmaceutical mAbxience, which belongs to the same group, to develop and manufacture active vaccine ingredients. The selection is the result of an April 2021 WHO call for expression of interest inviting manufacturers and research institutions to contribute to the establishment of COVID-19 mRNA vaccine technology transfer hubs in emerging economies.

Ministries of Health from across the Americas addressed the COVID-19 pandemic and other health priorities at the PAHO Directing Council. Ministries of Health and other high-level authorities of countries and territories of the Region of the Americas participated in PAHO's 59th Directing Council, held from 20 to 24 September 2021. Discussions focused on resolutions, policies, strategies, and roadmaps aimed at increasing the production capacity of essential medicines and health technologies in the Region, reinvigorating immunization as a public good for universal health, digitally transforming the health sector in the Region, and building resilient health systems and post COVID-19 pandemic recovery to sustain and protect public health gains, among others.

Map 1. Reported number of cumulative COVID-19 cases in the Region of the Americas and correspincidence rate (per 100,000 population) by country/territory. As of 20 September 2021



SITUATION NUMBERS IN THE AMERICAS

as of 24 September 2021 (15:00)

56

Countries/territories affected

89,043,107

Confirmed cases

1,028,956,063

Vaccine doses administered

RESPONSE **PILLARS**



- 1. Coordination, Planning, Financing, and Monitoring
- 2. Risk Communication, Community Engagement & **Infodemic Management**









- 6. Infection Prevention & Control; Protection of the **Health Care Workforce**
- 7. Case Management, Clinical Operations, & **Therapeutics**
- 8. Operational Support & Logistics; Supply Chain
- 9. Strengthening Essential **Health Services & Systems**
 - 10. Vaccination

Link to PAHO's technical and epidemiological reports, guidance, and recommendations

> Link to global operational situation reports

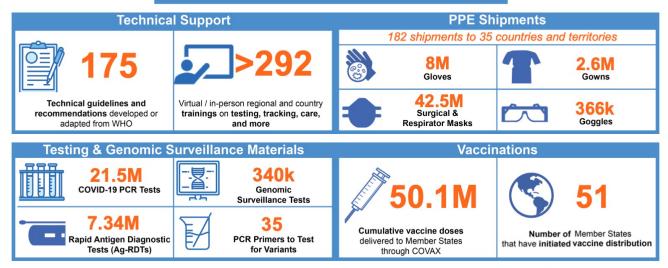








PAHO Regional Response Summary



Cumulative regional response data as of 24 September 2021.

PAHO/WHO Response (11 September to 24 September 2021)

Following an outbreak of a novel Coronavirus (COVID-19) in Wuhan City, Hubei Province of China, rapid community, regional and international spread occurred with exponential growth in cases and deaths. On 30 January 2020, the Director-General (DG) of the WHO declared the COVID-19 outbreak a public health emergency of international concern (PHEIC) under the International Health Regulations (IHR) (2005). The first case in the Americas was confirmed in the USA on 20 January 2020, followed by Brazil on 26 February 2020. Since then, COVID-19 has spread to all 56 countries and territories in the Americas. On 17 January 2020, the Pan American Sanitary Bureau activated an organization-wide Incident Management Support Team (IMST) to provide its countries and territories with technical cooperation to address and mitigate the impact of the COVID-19 pandemic. These efforts align with the ten pillars of the 2021 WHO Strategic Preparedness and Response Plan for COVID-19, PAHO's Response Strategy and Donor Appeal, and PAHO Resolution CD58.R9 approved by its Member States. Since then, the Organization has developed, published, and disseminated evidence-based technical documents to help guide countries' strategies and policies to manage this pandemic.

PILLAR 1: Coordination, Planning, Financing, and Monitoring

Support activation and operation of national public health emergency management mechanisms, as well as COVID-19 planning and response, based on a whole-of-government and inclusive whole-of-society approach

Regional

PAHO continued to collaborate with its partners within the Region and across the globe to deliver technical cooperation, evidence-based guidance and recommendations, and to advocate for the Americas on the global stage. PAHO's regional IMST also provided support and strategic guidance to country-level IMSTs as they coordinated and monitored their national response activities.

Since the beginning of January 2021 through 24 September 2021, a total of **1,377 bilateral communications** (under Article 44 of the International Health Regulations) between National Focal Points (NFPs) with





information concerning cases/contacts and travel were received. An increase in the number of bilateral communications between the NFPs was observed during the last reported week, in comparison with the previous week.

PAHO continued to review new and emerging information to build the evidence base to combat the virus. The public has access to PAHO's **COVID-19 Technical Database** for technical guidelines, scientific publications, and ongoing research protocols from the Region. This is the result of partnerships with WHO, Cochrane, McMaster University, Epistemonikos, and others.



Country

PAHO conducted joint missions with the **Brazil** Ministry of Health in the State of Acre over a period of seven days to supervise the implementation of the SARS-CoV-2 seroepidemiological survey.

In **Ecuador**, PAHO participated in a webinar that addressed the access of migrants and refugees to COVID-19 vaccines. The event was organized by the Working Group for Refugees and Migrants (GTRM) together with the Ministry of Public Health and was broadcast live on the Facebook page of Fundación de las Américas (FUDELA). More than 300 people participated in the webinar. The video recording can be accessed here.

On 22 September, the event "A comprehensive response to the prolonged COVID-19 pandemic taking into account health and the economy" was held as a side event to the 59th Directing Council, 73rd Session of the Regional Committee of WHO for the Americas. It analyzed the impact of the pandemic on health, social, and economic conditions. Other topics discussed during this event included appropriate measures to bring the pandemic under control and effective strategies and scenarios for social and economy recovery with resilient health systems, and social and health equity. The event was broadcast live on PAHO's YouTube channel and the recording is available here.









PILLAR 2: Risk Communication, Community Engagement (RCCE)

Support participatory development and implementation of RCCE plans and dissemination of risk communication information to all populations and to travelers

COVID-19 Courses Available on PAHO's Virtual Campus for Public Health (SPA-POR)

Introduction to the COVID-19 Vaccine: Guidance for Identifying Priority Groups and Developing Microplanning (SPA)

COVID-19 Vaccination Training for Healthcare Personnel – 2021 (SPA, POR)

Vaccination for COVID-19: technical protocols and procedures – Brazil 2021 (POR)

Occupational Health and Safety for Healthcare Professionals in the Context of COVID-19 - 2020 (SPA, POR)

The full list of courses is available on the PAHO website.

2.1 Weekly Press Briefings

PAHO's Director, Dr. Carissa Etienne, delivered one press briefing during this period. On **15 September 2021**, the Director focused on the impact of the COVID-19 pandemic on children and adolescents and the importance of keeping children safe. While children tend to have mild symptoms or none at all, it is possible that COVID-19 may cause severe illness in children. Additionally, the risk of passing the virus to others increases with age, so while younger children are less likely to pass the virus to others, teens are just as likely to transmit the virus as adults. In the Region, since start of 2021 to date more children have contracted COVID-19 than in 2020, with infections among children and adolescents reaching over 1.9 million in just 9 months, compared to over 1.5 million reported cases last year.

The Director stated that children who are not yet eligible for vaccinations are representing a larger percentage of COVID-19 hospitalizations and even deaths, and that the pandemic is affecting children's health in other ways. Children are missing annual check-ups and routine vaccinations; half of young people have experienced stress or anxiety during the pandemic; sexual and reproductive health services remain disrupted across more than half of the countries in the Region; lockdowns and economic disruptions have increased the risk of domestic violence; and children have missed more school days than in any other Region, with the pandemic triggering the worst educational crisis in the Region according to experts.

Dr. Etienne called on countries to do everything they can to safely reopen schools and highlighted the PAHO guidelines on school reopening and measures to protect from infection. The Director also stressed that another way to help protect students is to prioritize teachers and school staff for vaccination. Dr. Etienne emphasized that countries must act now urgently to restore health, education, and social services to minimize the impact of the pandemic, so no child or teen is left behind.

2.2 Regional & Country Updates

Regional

As the communication needs of the Region evolve, PAHO continues to disseminate key messages across multiple platforms and respond to numerous media inquiries. Communications support is provided to country offices on a variety of issues, particularly regarding vaccines and COVAX. Infographics cover a range of issues related to COVID-19, from steps for preventing infection to tips for staying healthy and protecting mental health during the pandemic.







Figure 3: "A Matter of Fact" host Nicola Barriteu with guest Prof. Peter Figueroa Chair of CITAG. Source: PAHO.

Country

PAHO released a new episode of the "A Matter of Fact" production for **Barbados** and the **Eastern Caribbean Countries**. In this episode, Professor Peter Figueroa, Chair of the Caribbean Immunization Technical Advisory Group (CITAG), explains the effectiveness of the COVID-19 vaccine and its side effects in pre-teens and teenagers.

PAHO supported **Ecuador** with the development of social media posts aimed at migrants to explain that all people have the right to access the COVID-19 vaccine, regardless of their nationality or immigration status, as well as the logistics of COVID-19 vaccination according to the National Immunization Strategy.

In **Costa Rica**, PAHO participated in the Indigenous Radio program ARIFUTE to promote vaccination against COVID-19. Vaccine fears and myths circulating among indigenous people were also addressed.



Figure 4: Social media posts for Ecuador aimed at indigenous populations to explain COVID-19 vaccination logistics.
Source: PAHO.



In **Paraguay**, PAHO disseminated messages asserting that vaccination against COVID-19 is effective at preventing serious illnesses, hospitalization, and deaths using the slogan "protect yourself and protect others." Furthermore, a social communication strategy to promote COVID-19 vaccination in indigenous populations is being implemented in the country with PAHO technical support. This strategy includes the production, and dissemination of material translated into six different languages. Additionally, video testimonies of vaccinated indigenous people were broadcasted to urge members of their communities to do the same. Click here to watch one of the testimonies.

In addition, PAHO delivered information to **Paraguay** on the different types of COVID-19 variants including topics such as the evolution of viruses and genetic mutations. The continuation of the already established protective measures such as washing hands with soap and water, keeping six feet of distance, and avoiding closed and crowded places will protect against COVID-19.

PAHO supported the Ministry of Health in **Suriname** with the development of risk communication materials emphasizing the importance of receiving the COVID-19 vaccine as well as materials that remind people of the importance of adhering to the public health measures even after being vaccinated.







PILLAR 3. Surveillance, Epidemiological Investigation, Contact Tracing, and Adjustment of Public Health & Social Measures

Strengthen the capacity of surveillance systems to detect COVID-19 cases, while ensuring continued surveillance of other diseases epidemic and pandemic potential

Regional

PAHO developed a **Geo-Hub** for the Region which includes a series of dashboards and epidemiological data updated daily. It has four sub-regional and 56 country/territory geo-hubs for the Americas. In addition, PAHO's **interactive dashboard** provides information for the public on cumulative cases, deaths, cumulative incidence rate, new cases and deaths, as well as several other epidemiological indicators reported by countries and territories.

PAHO also publishes weekly reports detailing trends in influenza and other respiratory viruses, as well as SARS-CoV-2 surveillance indicators. PAHO continues to analyze trends in the Region, particularly through the collection of COVID-19 nominal data.

Seroprevalence studies have provided the Region with invaluable data on how the virus has spread since the onset of the pandemic. PAHO maintains a **dashboard that shows seroprevalence studies in Latin America and the Caribbean**, including information on the study design, sampling method, sample sizes, and other factors.



PAHO's **Contact Tracing Knowledge Hub** publishes multidisciplinary information on contact tracing for a variety of audiences including policymakers, responders, researchers, educators, affected communities, and the public. Go.Data is one of the tools available through this platform. It is used to support case investigation and management, display transmission chains, and for contact tracing. In collaboration with GOARN, to date, PAHO/WHO has trained more than 35 countries and territories worldwide in the **Go.Data** app.



PILLAR 4. Points of Entry, International Travel, and Mass Gatherings

Support surveillance and risk communication activities at points of entry as well as implementation of appropriate public health measures

Regional

It is important that risk mitigation measures are always in place, including advice for travelers, particularly regarding the self-monitoring of signs and symptoms; surveillance and case management at the point of entry and across borders; capacities and procedures for international contact tracing; and environmental controls and public health and social measures at points of entry and onboard conveyances.

PAHO will continue to support countries to ensure that these capacities are in place. PAHO will also support countries' efforts to define a risk-based policy while resuming international traffic in the context of the COVID-19 pandemic, considering the provisions of the International Health Regulations (IHR), available scientific evidence, and the most cost-effective use of available resources.





Country

In **Chile**, PAHO supported the undertaking of a capacity assessment site visit under the International Health Regulations and COVID-19 in points of entry in the Regions of Arica and Parinacota.

Within the context of the IHR (2005), PAHO supported the assessment of the two Designated Points of Entry in **Jamaica**: the Norman Manley International Airport and Kingston Freeport Terminal Ltd.



PILLAR 5: Laboratories and Diagnostics

Enhance laboratory capacity to detect COVID-19 cases as well as to manage large-scale testing for COVID-19 domestically or through arrangements with international reference laboratories

Regional

Since the beginning of PAHO's response to the date of this report, the Organization has provided primers, probes and/or PCR kits for over **21.6 million reactions/tests**. To date, PAHO has provided over 618,550 swabs and 365 sampling kits, among other critical materials.

PAHO continued to provide technical cooperation, including data review, troubleshooting sessions, and follow-up calls on laboratory diagnostics with teams from **Belize**, **Brazil**, **Dominican Republic**, and **Honduras**.

5.1 SARS-CoV-2 variants of concern

A number of SARS-CoV-2 variants have been identified through global genomic sequencing. Since the initial identification of SARS-CoV-2, more than **3,679,438** complete genomic sequences have been shared globally through publicly accessible databases, as of 21 September 2021.

Given the significant resource requirements needed to sequence all samples in the Region to identify variants, PAHO continues to work closely with the laboratories of the countries of the Americas to help identify samples which should be prioritized for genomic sequencing. To date, PAHO has distributed **35 unique primers** to detect genetic variants using PCR.

To date, **twenty-five countries** are participating in the **COVID-19 Genomic Surveillance Network**, with reference sequencing laboratories in Brazil and Chile, visible on this **dashboard**. This mechanism will be critical to tracking the spread or appearance of new Variants of Concern (VOCs). During the reporting period, a total of 42 new SARS-CoV-2 full genome sequences from Dominican Republic were generated through the PAHO COVID-19 Genetic Surveillance Network at the PAHO Regional Sequencing Reference Laboratory for COVID-19 in Fiocruz. VOC Delta (for the first time) and Gamma, together with the Variant of Interest (VOI) Mu and Lambda were identified among other more common variants.







Support efforts to reduce human-to-human transmission within health facilities and the community, including through development and implementation of national IPC plans

Regional and Country

Implementation of national IPC plans are key to reducing COVID-19 transmission at both community and health facility levels. PAHO supports countries by procuring PPE through donations, the Revolving Fund, and training healthcare personnel.



PILLAR 7: Case Management, Clinical Operations, and Therapeutics

Improve local health system capacity and protect healthcare workers to safely deliver equitable healthcare services

7.1 Therapeutics and Clinical Management

Regional

Considering the breadth of knowledge and evidence related to COVID-19, PAHO maintains an interactive infographic to help external partners navigate PAHO and WHO's technical material and compilations of evidence from the Americas and around the globe.

The Organization worked with countries in the Region to promote the WHO Global COVID-19 Clinical Data Platform for the clinical characterization and management of hospitalized patients with suspected or confirmed COVID-19. This is part of a global strategy to gain a clearer understanding of the severity, clinical features, and prognostic factors of COVID-19. The Platform has more than 350,000 cases with contributions from the following countries: Argentina, Brazil, Colombia, Chile, Dominican Republic, Mexico, Panama, Peru, and the United States.

PAHO last updated evidence for the Ongoing Living Update of Potential COVID-19 Therapeutics: Summary of rapid systematic reviews on 14 September 2021. The study synthesizes evidence on 143 therapeutics from 407 randomized controlled trials and observational studies.

Country

PAHO translated the new OpenWHO course titled The Clinical Management of Patients with COVID-19: General Considerations into Dutch in **Suriname**. The course provides crucial knowledge necessary to provide safe, effective, quality patient care. Presentations address all aspects of clinical management, including facility preparation and surge planning; health worker infection prevention and control; interfacility transfer; clinical management of mild, moderate, and severely ill patients with COVID-19; special considerations for geriatric, pregnant, and pediatric patients with COVID-19; rehabilitation; and ethics and palliative care.

PAHO provided technical support to **Ecuador** in the process of becoming part of the WHO Global Clinical Platform for COVID-19. A total of six health facilities nationwide will be contributing to the platform. The country will now be able to participate in the global health network by exchanging knowledge and good practices for clinical management of COVID-19 patients.





7.2 Emergency Medical Teams (EMTs)

EMTs are invaluable when demands on a country's health system exceed regular capacity. Updated information on deployed EMTs and alternative medical care sites (AMCS) throughout the Americas remained available at **PAHO's COVID-19 EMT Response information hub**.

PILLAR 8: Operational Support and Logistics (OSL), and Supply Chain

Establish and implement expedited procedures to facilitate the Organization's support to countries and territories response to COVID-19 healthcare services

Regional

The regional team continued to collaborate with regional, national, and international partners (including other UN agencies) on all matters related to procurement, shipping, freight, logistics and technical specifications for PPE, oxygen concentrators, in vitro diagnostic products (IVDs), and other goods, supplies, and equipment critical to the COVID-19 response in the Americas.

Considering the multitude of suppliers and concerns about the quality of procured goods, PAHO has made quality assurance a critical component of its technical support in the procurement of goods, supplies and equipment for COVID-19 response. This involves reviewing technical specifications, ensuring correct shipping documentation for customs clearance, and supporting countries with quality assurance issues. WHO issued adapted interim guidance on the rational use of PPE for COVID-19 as well as considerations during severe shortages.

Country

In **Belize**, PAHO donated IT equipment and supplies to conduct Events Supposedly Attributable to Vaccination or Immunization (ESAVI) surveillance (laptop, scanner/printer, LED monitor, tablet, antivirus software, UPS /voltage regulator, toners and office supplies). These will support national efforts to install a situation room for ESAVI surveillance at the Ministry of Health and Wellness.

Figure 6: Delivery of IT equipment and supplies for ESAVI surveillance in Belize. Source: PAHO.

8.1 PAHO Revolving Fund for Essential Medicines and Strategic Public Health Supplies

Established in 2000, the PAHO Strategic Fund (SF) supports Member States by ensuring the quality, safety, and efficacy of medicines and other health products; improving demand planning and capacity-strengthening for supply chain systems; sustainably reducing prices of critical medications and supplies through transparent international sourcing; and a line of credit option to facilitate Member State procurement.

During the COVID-19 pandemic, the SF was rapidly mobilized to assess inventories across the Region and evaluate which medications had adequate safety stock and which needed to be prioritized, avoiding unnecessary expenses or late fees. The platform leveraged existing long-term agreements and relationships with suppliers to mitigate price inflation and better plan shipments/deliveries. The SF also coordinated alternative modes of transport (e.g., air freight versus ocean freight) to adapt to the most cost-effective and timely methods amidst continuously evolving COVID-19-related disruptions. This required direct negotiations with suppliers to absorb increases in freight costs on medicines. Finally, the SF worked with partners to support effective alternative treatment protocols to help adapt to limited supplies during COVID-19.





Since the start of the pandemic to 24 September, the SF has procured more than **\$263 million** worth of COVID-19 diagnostic tests (PCR and rapid tests), PPE and medicines for critical care, supporting more than **33 million people** throughout the Region of the Americas.¹ The Fund continues to support the procurement of medicines and public health supplies for individuals affected by HIV/AIDS, tuberculosis, malaria, diabetes, neglected tropical diseases, cardiovascular diseases, and hepatitis C. Learn more about the PAHO Strategic Fund's essential work on the PAHO website.

PILLAR 9: Strengthening Essential Health Services and Systems

Support continued operation of equitable health systems based on Primary Health Care, to protect and sustain public health gains, investing in improved response capacity in the first level of care and the health service delivery networks, including the implementation of gender and culturally sensitive actions using human rights-based approaches, to overcome barriers to access, especially in populations in conditions of vulnerability.

Regional

PAHO provides continuous assistance to its Member States on **regulatory preparedness** to expedite processes for vaccine deployment. As part of the COVAX Facility's allocation mechanism, support includes presenting information on technical documents required by Member States during bilateral and regional meetings.

Health technology assessments (HTAs) are invaluable guidance for health authorities in the use of technologies relevant to the COVID-19 pandemic. There are currently 323 COVID-19 related reports available in the Regional Database of HTA Reports of the Americas (BRISA).

The Organization collaborates with national regulatory authorities from across the Americas to share recommendations, considerations, and evaluations on products used to support COVID-19 patients and prevent transmission during the pandemic. Additionally, PAHO maintains a repository of websites and relevant information, including regulatory response on COVID-19, at the Regional Platform on Access and Innovation for Health Technologies (PRAIS).

Country

During this period, in **Belize**, PAHO met with the newly formed Sickle Cell Foundation for information exchange and discussions on potential areas of technical cooperation; assisted the Ministry of Health and Wellness to procure rapid tests for Malaria as a part of the effort to maintain zero Malaria cases; and initiated work with the Ministry of Health and Wellness to operationalize the recently constructed field hospital. Ongoing support will include training health personnel in the areas of clinical management and oxygen therapy for COVID-19 patients as well as setting up and maintaining the equipment that will be used.

In **Costa Rica**, PAHO participated in meetings with the Ministry of Health's Technical Team on Risk Management to discuss a roadmap for the implementation of health risk assessments at local and regional level. The meetings also addressed the strengthening of capacities at local level for the improvement of information management processes in situations of emergency and disasters. PAHO is currently working on the definition of areas of cooperation and support to be provided to these actions.

¹ Sum of all Strategic Fund purchase orders placed to date. Occasionally, countries will withdraw or cancel orders, causing the figure to fluctuate from one report to the next.





In addition, PAHO attended a meeting with the PHE Subregional Secretariat and the Trauma Hospital of the National Insurance System (INS), for an initial assessment of the facility and definition of the necessary measures to have it function as a reference resilient hospital in **Costa Rica**, according to PAHO standards.

In **Jamaica**, PAHO gave a presentation on "Protecting Breastfeeding during COVID-19" during the National Breastfeeding Week 2021 Webinar promoted by the Ministry of Health and Wellness in partnership with PAHO, UNICEF and the National Infant and Young Child Feeding Network. The event was broadcast live on the Ministry of Health and Wellness Facebook page, and the video recording can be accessed <a href="https://example.com/here-national-nat

PILLAR 10: Vaccination

Support the introduction, deployment, and evaluation of COVID-19 vaccines, ensuring their timely and equitable access, and strengthening vaccine safety surveillance.

Regional

As of 24 September 2021, more than 1 billion doses of COVID-19 vaccines had been administered in the Americas, with more than 430 million people having completed their full vaccination schedule. All 51 countries and territories in the Region have begun vaccination, 33 of these having received vaccine doses through COVAX. Overall, PAHO has distributed more than 48 million doses to the Americas through COVAX. Additionally, PAHO continued to provide strategic direction to countries in the Region that are pending arrival of vaccines. More details are available on PAHO's COVID-19 Vaccination in the Americas database, which reports on doses administered by country.

Successfully deploying vaccines for COVID-19 requires that countries have detailed plans which factor in considerations ranging from regulatory and logistical issues to staff needs, to ensuring equitable distribution, while targeting those most at risk of infection (e.g., frontline health workers, older persons, and those with underlying conditions).

PAHO is supporting countries throughout this planning process. **33 countries** have completed their **national vaccine deployment plans (NVDPs)**. **35 countries** have completed the **Vaccine Introduction Readiness tool (VIRAT)**, which includes a **dashboard** that provides an overview of regional readiness. Regional support also includes work with countries interested in gaining access to vaccines through the **COVAX Facility**. PAHO continues to work with all its Member States to ensure country readiness to deploy these vaccines.

PAHO provides technical cooperation to countries seeking to access the COVID-19 vaccine through the COVAX Facility, including those selected for **Advance Market Commitment (AMC)** funding to cover their doses. This includes sharing recommendations with national authorities on steps to ensure that their NVDPs meet the necessary criteria to roll out vaccines to priority populations.

In addition to written guidance, PAHO also provides training webinars to its Member States. PAHO worked with Member States to develop workshops aimed at strengthening the Events Supposedly Attributable to Vaccination or Immunization (ESAVI) surveillance in the Region of the Americas. Access the full list of past and future training sessions for all member states on PAHO's website.

PAHO maintains a public dashboard that tracks the safety of various COVID-19 vaccines during and after clinical trials.

Country

PAHO provided ongoing assistance to Member States regarding regulatory preparedness to guarantee expedited processes for vaccine deployment, including information on technical documents available as part of the COVAX Facility in bilateral and regional meetings.





In **Paraguay**, PAHO is supporting deployment of vaccination teams to different indigenous communities in the Chaco Region: Departments of Alto Paraguay, Boquerón, and Presidente Hayes. To date, 34 communities have been visited.

Gaps and Challenges

GAPS CHALLENGES

- **Surveillance systems:** additional capacity-building and equipment for analysis.
- Information systems: Data management systems are essential for case monitoring and contact tracing while protecting confidentiality.
- Strategic planning and response: Countries need enough resources to implement national COVID-19 Preparedness and Response Plan and Risk Communication Plans.
- Laboratory test kits and equipment: National laboratories need more extraction kits and other supplies to keep testing.
- IPC supplies: PPEs and supplies (including for WASH) are urgently needed for isolation and quarantine wards.
 Healthcare workers are hesitant to work without PPE.
- Health facility evaluations: Countries must undertake additional assessments to guide measures for infection prevention and control.
- Resources for and access to populations in situations of vulnerability: PPE and other supplies are needed in these communities. Logistical challenges must be overcome to deliver these critical goods.
- Risk communications: Key messages must be tailored to each country's context to resonate with intended audiences.
- Subnational-level health workers: A surge in medical personnel is needed to ensure countries can serve their whole populations and obtain more epidemiological data as it becomes available.
- Intensive care units: More ICUs will be needed to manage severe cases.
- Migrant access to health services: Countries are assessing how to serve these populations and better manage outbreaks.
- **Private sector coordination:** This is essential to ensure national protocols are followed.
- Nutritional Guidance: This is vital to ensure families maintain nutritional health during and after the COVID-19 emergency.
- Health Disaster Management Programs: Health
 Disaster Management Programs and surveillance were
 noted as priorities to enhance the COVID-19 and any
 other health emergency responses.

- Equitable Vaccine Distribution: The shortage of available vaccines limits the ability of the countries to protect their populations.
- Competitive marketplace: Countries and organizations are competing for limited supplies due to global shortages of PPE and other items.
- Border closures: This has seriously hampered the
 deployment of experts, shipment of samples for testing,
 and procurement of supplies and equipment for testing,
 case management, and infection prevention and control. It
 has also added additional pressure to countries
 undergoing complex political and socio-economic
 transitions.
- Managing infections in healthcare settings: Healthcare workers rely on PPE and other supplies to avoid infection. Global shortages are contributing to increasing cases and frontline workers losing their lives.
- Infected healthcare workers: Infected health workers who are sick or quarantined will strain health systems.
- **Test availability:** Epidemiological monitoring requires more testing. Counterfeit tests are creating risks in resources lost and incorrect analyses.
- Health workforce limitations: Insufficient human resources hamper countries' efforts to conduct contact tracing and manage patients in quarantine.
- **Risk Communication:** The perception of risk is still low in some countries/territories and many people ignore government public health measures.
- **Telephone referral systems:** Some countries are reporting overwhelming call volumes.
- Logistics systems: Many countries are still unprepared to manage the distribution of supplies and equipment.
- Continuity in other health services: The pandemic has diverted resources from other critical services for programs such as HIV, TB, and non-communicable diseases (NCDs).
- Stigma: Countries must take steps to reduce stigma towards persons returning from abroad and others associated with a higher likelihood of infection.
- Public Compliance of Public Health Protocols: Public reluctance to follow public health protocols has led to increased infection rates in many countries in the Americas.
- Variants: New COVID-19 strains present a challenge to the control of the disease.





PAHO/WHO's COVID-19 response was made possible in part due to generous contributions and in-kind donations from the following sponsors:

- Alma Jean Henry Charitable Trust
- · Government of Belize
- Government of Canada
- Caribbean Development Bank (CDB)
- U.S. Centers for Disease Prevention and Control (CDC)
- Central American Bank for Economic Integration (CABEI)
- The Government of Colombia
- Confederation of Caribbean Credit Unions (CCCU)
- Corporación Andina de Fomento (CAF)
- European Commission
- Global Fund
- Foundation for Innovative New Diagnostics (FIND)

- Fundación Yamuni Tabush
- Inter-American Development Bank
- International Organization for Migration (IOM)
- Government of Japan
- Government of Korea
- Mixed Fund for Technical and Scientific Cooperation Mexico- Spain
- Government of New Zealand
- PAHO COVID-19 Response Fund
- · Rockefeller Foundation
- The Government of Spain
- The Government of Sweden
- The Government of Switzerland
- UN Agencies consortium
- UNICEF

- Government of the United Kingdom
- UN Development Coordination Office (UNDCO)
- UN Development Programme (UNDP)
- UN Multi-Partner Trust Fund
- UN Office for South-South Cooperation (UNOSSC)
- UN Resident Coordinator Office (UNRCO)
- ÙSAID
- World Bank
- World Food Programme (WFP)
- Donations channeled through WHO
 - Member States National Voluntary Contributions

PAHO also thanks the following donors who have contributed to the response efforts in the Americas through WHO: Government of Azerbaijan, Bill and Melinda Gates Foundation, Government of Canada, the Central Emergency Response Fund (CERF), the COVID-19 Solidarity Response Fund, Germany, France, the OPEC Fund for International Development (OFID), Government of Spain, Government of the United Kingdom, and the World Bank.

In addition, the following donors have pledged further support to PAHO: the U.S. Agency for International Development (USAID) and the Wellcome Trust.

PAHO would like to also acknowledge and thank Direct Relief, Facebook, Mary Kay Cosmetics and Twitter for their generous in-kind contribution as well as Allison Becker, Salomon Beda, Sony Latin Music and Global Citizens for their strategic partnership to help fight the pandemic.

Support PAHO's efforts to fight COVID-19 in the Americas

The Region of the Americas has the highest cumulative number of COVID-19 cases and deaths.

PAHO is working with health professionals on the frontlines of this fight.

Vaccines will help save lives and eventually halt the pandemic.

Support PAHO's Response at: www.paho.org/donate

