The Pan American Health Organization (PAHO) was founded in 1902 and is recognized as the independent specialized health agency of the inter-American system, under the Charter of the Organization of American States. In 1949, PAHO agreed to serve as the Regional Office for the Americas of the World Health Organization (WHO), a specialized agency of the United Nations system. Acting in its capacity as WHO’s Regional Office, PAHO participates actively in the United Nations Country Team, collaborating with other agencies, the funds and programmes of the United Nations system, and with the United Nations Resident Coordinator to contribute to the achievement of the Sustainable Development Goals at country level.

For nearly 120 years, PAHO has developed recognized competence and expertise, providing technical cooperation to its Member States to fight communicable and noncommunicable diseases and their causes, to strengthen health systems, and to respond to emergencies and disasters throughout the Region of the Americas.

Given PAHO’s dual legal status and the difficulty of disaggregating PAHO from WHO activities, this Annual Report reflects both PAHO and WHO activities in the Americas as related to technical cooperation in 2020. Approximately 80% of PAHO’s technical cooperation in health in the Region of the Americas is funded by PAHO’s own quota and voluntary contributions, as an inter-American organization. The remaining 20% of PAHO’s integrated biennial budget includes WHO-funded activities. Further detailed financial information for this Annual Report can be found in the Financial Summary section.

### Mission
To lead strategic collaborative efforts among Member States and other partners to promote equity in health, to combat disease, and to improve the quality of, and lengthen, the lives of the peoples of the Americas.

### Vision
To be the major catalyst for ensuring that all the peoples of the Americas enjoy optimal health and contribute to the well-being of their families and communities.

### Values
- **EQUITY**
  - Striving for fairness and justice by eliminating differences that are unnecessary and avoidable.
- **EXCELLENCE**
  - Achieving the highest quality in what we do.
- **SOLIDARITY**
  - Promoting shared interests and responsibilities and enabling collective efforts to achieve common goals.
- **RESPECT**
  - Embracing the dignity and diversity of individuals, groups, and countries.
- **INTEGRITY**
  - Assuring transparent, ethical, and accountable performance.
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Forewords

The year 2020 will be remembered as the year that tested everyone’s resilience. By December, in the Americas, more than 33 million people had been infected with COVID-19 and more than 800,000 persons had died. The devastating loss of life is accompanied by an economic downturn that continues to affect everyone and threatens to derail the achievement of the Sustainable Development Goals.

The year of the COVID-19 pandemic has shed light on inequities and the barriers to universal health. Some of them – low-paid work, the informal economy, overcrowded housing, lack of social protection, and limited access to health services – have made vulnerable populations even more susceptible to COVID-19. The disease has exposed both the barriers to universal health and the profound need for it.

The pandemic has also demonstrated that the health sector acting alone cannot achieve universal health. We need leadership, good governance, the private sector, and civil society. Academia and industry must work with government to produce and share technologies, including diagnostics, therapeutics, and vaccines, as well as digital innovation. Development partners must facilitate coordination for disease surveillance, information sharing, and the response to health emergencies. Financial sectors must help make available the resources needed to ensure that health systems are adaptable, responsive, and inclusive while they address the needs of the entire population. The pandemic has irrefutably proved that we need everyone to be engaged for health and well-being that leaves no one behind.

This year, PAHO’s technical cooperation has focused not only on helping countries to respond to the pandemic but also on safeguarding progress toward universal health. This Annual Report reviews our contributions and achievements and reinforces PAHO’s core mission, through our focus on the country level, recognizing that progress toward sustainable development hinges on improved health at the local and national level.

Dr. Carissa F. Etienne
Director of the Pan American Health Organization
Throughout the year 2020, the Pan American Health Organization / World Health Organization (PAHO/WHO) Country Office (CO) delivered technical cooperation to the Bahamas and Turks and Caicos Islands, primarily for pandemic preparedness and health system response to optimize the management of the COVID-19 outbreak. Human and financial resources in the CO were reorganized to strengthen epidemiological surveillance activities, laboratory testing capacity, reporting and data management, risk communication, infection prevention and control, health leadership, and planning in the Bahamas and Turks and Caicos Islands. Despite this, the CO made noteworthy achievements in integrating activities within the programme areas of communicable diseases, noncommunicable diseases, mental health, health throughout the life course, environment and health, and health emergencies. Strategic efforts were made for the promotion of health equity and the protection of human rights, particularly among the urban poor, migrants, homeless, unemployed, older persons, persons with disabilities, and institutionalized groups.

The COVID-19 pandemic has imposed a significant burden on the health systems and the continuity of essential services and functions. Nevertheless, PAHO/WHO has supported the health authorities of the Bahamas and Turks and Caicos Islands through the unprecedented challenges by providing technical cooperation for: the development of protocols, guidelines, and risk communication materials; data management; procurement of laboratory and medical supplies; receipt of donations; case and cluster investigations; contact-tracing; health system and services planning, including planning for expanded clinical and hospital surge capacity; and adapting and maintaining essential health services. Financial and technical support from other United Nations agencies, and foreign, public, and civil agencies was mobilized and facilitated. PAHO/WHO also provided operational support to the National Emergency Operations Centre in the Bahamas.

As both the Bahamas and Turks and Caicos Islands seek to rebuild better, equity will remain a cross-cutting theme that is central to the CO’s technical cooperation across its programme areas of work. The strategic health sector plans of both countries ended in 2020, and PAHO/WHO will prioritize the development of new plans and country cooperation strategies that align with the objectives of the 2020-2024 PAHO Strategic Plan.

This report details the CO’s support to the preparedness and response efforts for the COVID-19 outbreaks in the Bahamas and Turks and Caicos Islands, and the technical cooperation delivered in 2020 across the other six programmatic areas.

Dr. Eldonna Boisson
PAHO Representative in the Bahamas and Turks and Caicos Islands
List of Abbreviations and Acronyms

AIDS - acquired immunodeficiency syndrome
CO - Country Office
HIV - human immunodeficiency virus
HRH - human resources for health
IHR - International Health Regulations
MHPSS - mental health and psychosocial support
MOH - Ministry of Health
NCD - noncommunicable disease
NEOC - National Emergency Operations Centre
NHIA - National Health Insurance Authority
PAHO - Pan American Health Organization
PHC - primary health care
TB - tuberculosis
UHC - universal health coverage
WHO - World Health Organization
Technical Cooperation Overview

The PAHO/WHO Country Office (CO) delivered technical cooperation to the health authorities in the programme areas below as defined in the 2020 biennium workplans for the Bahamas and Turks and Caicos Islands.

Table 1
Summary of PAHO/WHO 2020 Technical Cooperation in the Bahamas and Turks and Caicos Islands

<table>
<thead>
<tr>
<th>Programme category</th>
<th>The Bahamas and Turks and Caicos Islands</th>
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</table>
| **Communicable diseases** | • Increased implementation of strategies and plans for prevention and treatment of hepatitis, HIV, syphilis, and sexually transmitted infections.  
• Strengthened data management, public education, and laboratory capacity for the COVID-19 pandemic.  
• Ensured continued access to vaccine-related supplies. |
| **Noncommunicable diseases and mental health** | • Maintained surveillance and monitoring systems for NCD risk factors and supported mental health and psychosocial support activities.  
• Health promotion for management for NCD risk factors and mental health well-being with emphasis on vulnerable populations. |
| **Promoting health throughout the life course and environmental determinants of health** | • Integrated human rights norms and standards into policies, plans, and interventions.  
• Implemented the Health in All Policies Approach within priority areas of technical cooperation, integrating social determinants of health for vulnerable populations.  
• Built capacity to address environmental health and implement the PAHO/WHO strategy, plan of action, and adaptation plans on climate change.  
• Implemented interventions to improve and monitor the health of women, children, and adolescents. |
Table 1 (continued)
Summary of PAHO/WHO 2020 Technical Cooperation in the Bahamas and Turks and Caicos Islands

<table>
<thead>
<tr>
<th>Programme category</th>
<th>The Bahamas and Turks and Caicos Islands</th>
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<tr>
<td>Health systems and services</td>
<td>• Built capacity of human resources for health.</td>
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<td>• Built capacity and established sustainable mechanisms for universal health coverage.</td>
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<td></td>
<td>• Established and strengthened electronic information health systems.</td>
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<tr>
<td>Health emergencies preparedness, surveillance, and response</td>
<td>• Strengthened country capacity, coordination, and implementation of health emergency and disaster risk management.</td>
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<td></td>
<td>• Strengthened capacity to respond to and control pandemics through robust disease surveillance, data reporting and analysis, risk assessments, information sharing, and implementation of public health control measures.</td>
</tr>
<tr>
<td></td>
<td>• Strengthened health sector capacity to respond to and control pandemics through robust disease surveillance, risk communication, laboratory quality control, infection prevention and control, and vaccine logistics planning.</td>
</tr>
<tr>
<td>Leadership and management</td>
<td>• Strengthened the alignment of national health priorities, polices, plans, and strategies with the PAHO Strategic Plan for 2020–2025.</td>
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<tr>
<td></td>
<td>• Mobilized resources for priority areas and demonstrated leadership and advocacy for health.</td>
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Communicable Diseases

Overview

Communicable diseases continued to be a critical area of concern especially with the emergence of Coronavirus (COVID-19) disease. Given the limited personnel and the similar surveillance mechanisms among communicable diseases, staff were reassigned for COVID-19 response efforts. Through collaboration with national authorities, laboratory, testing, data management, and reporting services were strengthened, and this work is ongoing.

“Throughout The Bahamas and around the world, health care workers are focusing their efforts on preventing, diagnosing, containing, and treating COVID-19 patients.”
– The Honorable Renward Wells, Minister of Health, the Bahamas

“Despite the human resources challenges, the Department of Public Health continues to reassign its health human resources to strengthen the Disease Surveillance and Contact Tracing Units.”
– The Honorable Renward Wells, Minister of Health, the Bahamas
Eliminating HIV/AIDS and Sexually Transmitted Infections

In March 2020, an in-country technical mission for hepatitis C was conducted by the PAHO/WHO Hepatitis Unit. Meetings were held with the hepatitis working group to discuss the implementation of the Plan of Action for the Prevention and Control of Hepatitis, procurement of medication through the Strategic Fund, and to address identified laboratory concerns. The Bahamas was recommended to identify a hepatitis focal point, to conduct a baseline assessment, and to review and update the hepatitis treatment algorithms.

In the Bahamas, the CO supported the activities of the National HIV/AIDS Resource Committee for the observation of World AIDS Day in December 2020. The activities included a World AIDS Day School Assembly and a Candlelight Vigil. In Turks and Caicos Islands, the annual World AIDS Day activities that were conducted incorporated the launch of a media campaign in late November 2020.

The CO facilitated access by Turks and Caicos Islands to the PAHO Strategic Fund for the procurement of affordable and high-quality antiretrovirals for treatment of HIV/AIDS patients.
Increasing Capacity for Tuberculosis (TB) Testing

In April 2020, the CO donated a GeneXpert System and cartridges to the Princess Margaret Hospital in the Bahamas for the rapid detection of mycobacteria and sensitivity testing for TB. Training for the installation of the system was provided by the manufacturers in May 2020.

In April 2020, the MOH of the Bahamas shared its experiences of the TB programme amidst the COVID-19 outbreak with the CO, and this information was presented regionally. The country did not suffer a shortage in TB medication and successfully maintained its follow-up with patients via video conference calls and in-person visits to patients who were a part of the Directly Observed Therapy.

Preventing Diseases Through Vaccination

In the Bahamas, the customization of the Electronic Immunization Registry was completed in mid-2020 and entry of back-data commenced in September 2020. The registry will consolidate data on all vaccines in the immunization schedule of the Bahamas.

The COVID-19 outbreak led to disruptions in immunization services, which are an essential public health function. To address this issue, an immunization campaign was developed and launched in the Bahamas. In Turks and Caicos Islands, immunization efforts primarily focused on the under-five age group.

Toward the end of 2020, the CO provided technical support to both countries for the development of the COVID-19 vaccine plans and COVID-19 vaccine distribution exercises.
Eliminating Mother-to-Child Transmission of HIV and Syphilis

During the first quarter of 2020, the MOH of the Bahamas worked toward identifying and treating pregnant women who were diagnosed with syphilis. However, as the severity of the COVID-19 outbreak increased, postnatal care for women and newborns was disrupted and services were not delivered as usual.

Reporting Public Health Events in Compliance with International Health Regulations (IHR)

Throughout 2020, COVID-19 data were reported via the IHR National Focal Point. The first confirmed cases were reported on 5 and 23 March 2021 in the Bahamas and Turks and Caicos Islands, respectively. There was also significant progress in compliance with IHR monitoring and collaboration with stakeholders, particularly at the ports of entry. The CO provided access to updated technical guidelines, and supported data management and reporting. Support for the strengthening of disease surveillance and data management of cases and contacts by the national authorities is ongoing.

Increasing Influenza Vaccine Coverage

In January 2020, the CO supported the purchasing of laboratory supplies and the development and launching of an influenza media campaign, utilizing funds from the PAHO/WHO Public Health Emergencies Department. Due to the pandemic, additional messages were developed to educate and advocate for vaccination for both influenza and COVID-19.

An in-country visit by a PAHO/WHO laboratory specialist, was conducted in March 2020 to strengthen laboratory-based surveillance of COVID-19 and influenza in the Bahamas. As a result of the mission, in-country capacity was built for COVID-19 testing via the real-time polymerase chain reaction platform.
Overview

Noncommunicable diseases (NCDs) are the leading causes of morbidity, hospitalization, and mortality in the Bahamas and Turks and Caicos Islands. In the Bahamas, the impact of NCDs has been increasing over time, and inaction will lead to even more staggering statistics. In 2019, a STEPS Survey revealed the following in adults (18-64 years): 72% of the population was overweight, inclusive of 44% classified as obese; 38% with raised blood pressure or currently on medication for raised blood pressure; 24% with raised fasting blood glucose; and 17% currently smoke tobacco. Reducing the disease burden through health promotion and risk reduction, prevention, treatment, and monitoring of NCDs and their risk factors in the Bahamas is imperative.

“Our risk for premature deaths, disabilities and health complications due to non-communicable diseases remains high. Our eating habits, beverage and lifestyle choices continue to keep us ranked as one of the heaviest and unhealthiest nations.”

– Dr. Duane Sands, former Minister of Health, the Bahamas
Continuing NCD Care

At the beginning of the pandemic, the health system of the Bahamas reorganized its primary health care (PHC) and hospital services to effectively manage its COVID-19 response. The CO provided technical support for bed management and continuity of NCD care within the integrated health service delivery network during the COVID-19 response efforts.

Communicating about NCD Care

The CO also rolled out an aggressive health promotion campaign on the effective management of NCDs and associated risk factors, especially during the emergency stay-at-home orders. Multiple modalities and electronic platforms were used to communicate with the entire population. Messages were crafted specifically for the older persons, children, persons with disabilities; and in multiple languages to meet the needs of diverse populations in the Bahamas. These communication materials were also shared with Turks and Caicos Islands.

Planning for NCD Services in Primary Care

Given the changes in service delivery systems and the public’s reluctance to utilize the health care system, the CO began early discussions to launch the World Health Organization’s (WHO) HEARTS Initiative for cardiovascular disease risk management, including hypertension and diabetes, in PHC. The initial focus will be on the self-management of blood pressure and blood sugar utilizing telehealth modalities.

In October 2020, in the Bahamas, the CO commenced planning for the implementation of the CanScreen5 Project in collaboration with the International Agency for Research on Cancer, which aims to review and improve the performance of cancer screening programs. Under the CanScreen5 Project, information will be collected and analyzed on the characteristics and performance of the country’s breast, cervical, and colorectal cancer screening programmes, using standard indicators like screening coverage and treatment follow-up. This project will be implemented in participating countries in the Caribbean, using a harmonized approach.
Mental Health

Overview

The global mental health disease burden is enormous. Mental disorders affect a growing number of people and, if left untreated, will create a huge toll of suffering, disability, and economic loss. Adding to the already burgeoning mental burden is the increasing frequency of emergencies. Being disaster-prone, both the Bahamas and Turks and Caicos Islands are cognizant of the exacting toll natural disasters have on the mental health and well-being of their citizens. To that end, both countries have worked to expand their mental health capacity to respond to this need.

Strengthening Mental Health and Psychosocial Support Services

During 2020, PAHO/WHO’s technical guidance to the MOH of the Bahamas continued for the integration of mental health and psychosocial support (MHPSS) into the national health disaster programme. As a result of this technical cooperation, MHPSS standard operating procedures were incorporated into the all-hazards disaster plan. The plan was first implemented after the passage of Hurricane Dorian, and sustainability gaps were identified and strengthened. The MHPSS working group delivered several MHPSS training sessions for multiple stakeholder groups, which included first responders, government workers, faith-based organizations, and nongovernmental organizations.

During the pandemic, the MHPSS working group crafted mental health and physical well-being communication materials in English, Haitian Creole, Mandarin Chinese, and Spanish. These materials were shared with Turks and Caicos Islands.
In February 2020, a media forum was held to provide media journalists in the Bahamas with the background on MHPSS, its application in disaster situations, and the national MHPSS response before, during, and after Hurricane Dorian.

The CO provided technical support for the launch of the COVID-19 MHPSS call centre, including additional lines to provide services for the Haitian Creole community in the Bahamas. Twelve tablet computers were also donated to the Public Hospitals Authority and the Bahamas Psychological Association to strengthen tele-psychological services and MHPSS coordination in New Providence, Grand Bahama, Abaco, and Exuma.

**Messaging for Mental Health**

Multilanguage healthy lifestyle messages were crafted in the Bahamas, and shared with the government of Turks and Caicos Islands to support its COVID-19 communication strategy.

**Establishing Minimal Standards for Substance Use Disorders**

PAHO/WHO was embedded in the core national working group for the completion of the Draft Minimum Standards of Care for Substance Use Disorders Treatment Facilities. The standards were presented to the Minister of Health in 2020, and ratification of the same is pending.
Health Throughout the Life Course

Overview

The protection and preservation of health are priorities in every phase of life, particularly for vulnerable populations. Adolescent health is a critical area of work because it presents the opportunity to impact youth behaviours and life skills, and enhance their access to health services to improve and maintain their current well-being, and future productivity. Migrants are also a vulnerable population at risk of poor physical and mental health outcomes. The Country Office has been intentional about including the needs of migrants into its emergency response efforts to ensure equitable access to services and information needed to achieve optimal health. Impacting health throughout the life course requires partnerships within and beyond the health sector by applying the Health in All Policies Approach to meet the needs of all people in all phases of life.

Prevention of Pregnancy in Adolescents

Adolescent pregnancy is regionally a situation that has been exacerbated by the interruption of sexual and reproductive health services due to the COVID-19 pandemic. The CO partnered with Teen Life Skills, a nongovernmental organization in the Bahamas that focuses on the holistic development of youth, to conduct a multimedia campaign for the observation of the inaugural Caribbean Adolescent Pregnancy Prevention Week in October 2020. Messages highlighted the challenges of being a teen parent, the availability of health services for adolescents, and protective factors to prevent unintended pregnancies.
Protecting and Promoting the Health of Vulnerable Populations

PAHO/WHO facilitated the translation of the developed COVID-19 related communication materials into Creole, in collaboration with the International Organization for Migration.

Throughout the COVID-19 outbreak, PAHO/WHO collaborated with the MOH of the Bahamas to incorporate the human rights issues of sheltered migrants, prisoners, and detainees into national response operations. PAHO/WHO also highlighted: the need for monitoring and responding to incidences of gender-based violence; needs identified on national hotlines; and social impacts of lockdowns among migrant populations.

The CO donated face masks to the migrant community to minimize the likelihood of COVID-19 community transmission.

Applying the Health in All Policies Approach to the COVID-19 Response

The Health in All Policies Approach was adopted among the Ministries of Health, Education, Environment, Tourism, Social Services, and National Security, and other governmental agencies for the COVID-19 response. PAHO/WHO provided technical guidance and advice directly to the Ministries of Health and Environment, and remained embedded in the meetings of the National Emergency Operations Centre (NEOC) to provide technical support. Additionally, the PAHO/WHO Country Representative engaged in press briefings and stakeholder meetings in conjunction with the national health authorities.
Environment and Health

Overview

The evidence of the adverse impact of climate change on human health is growing, and it is critical for the health sector to build its resilience, implement the appropriate policies, and take mitigative action. As the intensity and frequency of climate-related disasters increase, the health sector must have the capacity to respond to and recover from such events. The WHO/UNFCCC Health and Climate Change Country Profile is a critical tool for both countries to increase awareness of the health impacts of climate change, build evidence for decision-making, and promote efforts to improve health outcomes. Furthermore, strategic plans such as the health chapter of the national adaptation plan are also critical for prioritizing activities to address the direct and indirect health impacts of climate change and maximize health co-benefits across sectors. The Country Office is committed to building country capacity to adapt and reduce the effect of climate change on public health.

“Small Island Developing States like The Bahamas always appear to be operating in a vicious recovery mode cycle, having to deal with successive exogenous shocks and climatic events.”

– Prime Minister of the Bahamas, Hubert Minnis, 75th United Nations General Assembly debate

Building Climate-resilient Health Systems

In 2020, the CO facilitated the participation of three representatives from the MOH of the Bahamas and the Department of Environmental Protection in a workshop under the European Union / Caribbean Forum project. The objectives of the workshop were: to improve regional and national synergies between health and health-determining sectors for inclusion of health issues in national climate change agendas; to strengthen the preparation of the health chapter of the national adaption plan; and to identify the needs and opportunities for technical cooperation in countries.

In response to a request from the MOH of the Bahamas for technical assistance to develop the WHO / United Nations Framework Convention on Climate Change Health and Climate Change Country Profile, the CO coordinated meetings with the PAHO/WHO Climate Change Advisor for the preparation of the profile.

Health Systems and Services

Even though the COVID-19 pandemic and previous natural disasters impacted the continuity of essential health services and highlighted gaps in the overall health system performance, the Bahamas was able to advance towards achieving universal health coverage by: finding options to improve the governance and financing of the health sector; strengthening the regulatory and legislative environment to promote equitable access to essential medicines; and undertaking activities to improve the health system’s digital transformation.

The National Health Insurance Programme has enrolled over 87,000 persons to access primary health care services.

The Bahamas has adopted the Information Systems for Health framework with PAHO/WHO technical assistance, to support its health system’s digital transformation.
Delivering Technical Cooperation for Health Governance, Policies, and Strategies

In the Bahamas, the CO gave technical advice to the National Health Insurance Authority (NHIA) on sustainable funding for universal health coverage (UHC). The CO also provided an analysis of the NHIA’s financing options, and a revision of its policy paper *The Primary Care Initiative Proposal*. Also, technical cooperation continued for the strengthening of governance and stewardship capacities of the MOH of the Bahamas.

The CO delivered technical advice on sustainable funding and for the development a capitation model of payment for the National Health Insurance Programme (NHIP) of Turks and Caicos Islands. A health finance assessment was conducted and recommendations were incorporated into the programme’s policy.

Delivering People-centred and Integrated Quality Healthcare Services to Achieve Universal Health Coverage

The CO provided technical assistance on the development and implementation of the Primary Care Transformation Initiative with the MOH of the Bahamas, NHIA and the Public Hospitals Authority to reduce fragmentation of the health care delivery system. A policy analysis was conducted and dialogue with key stakeholders was facilitated to strengthen the governance, steering role, health financing, and essential public health functions of the MOH and other health authorities.

Throughout 2020, the CO also supported the MOH of the Bahamas with monitoring the continuity of health services during the COVID-19 pandemic.

The Health Systems and Services Advisor worked closely with NHIA of the Bahamas to support the following achievements.

In the Bahamas and Turks and Caicos Islands, the CO facilitated capacity-building for UHC, integrated health delivery services, and hospital management. Activities included the facilitation of workshops to review the UHC framework and identify priority areas for implementation. Service management tools were also implemented within the hospitals of both the Bahamas and Turks and Caicos Islands.

Under the National Health Insurance Programme of the Bahamas, over 87,000 persons were enrolled and accessed primary health care services.
NHIA of the Bahamas implemented the national quality of care operational standards for family physician offices, radiology, and laboratory providers. The standards include the inspections of health care facility programmes and a performance balance scorecard for their primary health providers. These changes aim to improve service efficiency, quality of care, and accountability of providers.

Improvements were made in the safety and technical capacity of personnel providing diagnostic imaging services through PAHO/WHO’s technical assistance for site inspections, provision of access to training, and provision of recommendations on safety and standard operating procedures.

In Turks and Caicos Islands, the CO provided technical assistance to strengthen the PHC clinic services via the assessment of the human resources for health (HRH), including management, planning, analysis of the composition and distribution of health care workers, and community engagement.

In Turks and Caicos Islands, the CO supported the strengthening on the management of health care services and availability of data at the hospital level for decision-making.

**Equipping Human Resources for Health**

The PAHO/WHO CO provided MOH personnel of the Bahamas and Turks and Caicos Islands with access to the Virtual Campus of Public Health to build capacity in the areas of epidemiology, data management, health care technology, mental health, human rights, and other areas. Virtual trainings on infection prevention and control, data management, and health emergencies were also delivered through the CO.

The CO supported the preliminary monitoring of the Regional Plan of Action of Human Resources for Health in the Bahamas and Turks and Caicos Islands. Baseline information was collected to inform work on the national HRH plan.

**Accessing Medial Products and Strengthening Regulatory Capacity**

The Bahamas strengthened its regulatory and legislative environment to promote equitable access to high-quality, safe, effective, cost-effective medicines and health products. The activities included: a revision of legislations and institutional policies and plans; drafting of a proposal for the functioning of a national regulatory unit; establishment of pathways for the national system for drug registration.
Implementing Information Systems for Health

The CO provided strategic and policy recommendations to support the digital transformation of the health system of the Bahamas and adoption of the Information Systems for Health framework, which includes technical assistance to implement electronic patient records to strengthen integration of health information needs among health providers.

PAHO/WHO provided technical support on developing criteria for the selection of the electronic medical record for primary health care providers in NHIA of the Bahamas.

The CO supported the MOHs of the Bahamas and Turks and Caicos Islands with the development of the COVAX strategic plan using the WHO VIRAT tool, with a special focus on the regulatory component for emergency authorization and use of COVID-19 vaccines and pharmaceuticals.

PAHO/WHO assisted Turks and Caicos Islands with developing and implementing national policies for equitable access to quality, safe, effective, and cost-effective medicines by: supporting the drafting of the drug ordinance legislation; providing access to the PAHO Strategic Fund for purchasing of antiretroviral drugs; supporting the development of the drug registration and importation system (which is in the first stage of implementation); and drafting national post-market surveillance and pharmacovigilance systems.

The CO provided strategic and policy recommendations to support the digital transformation of the health system of the Bahamas and adoption of the Information Systems for Health framework, which includes technical assistance to implement electronic patient records to strengthen integration of health information needs among health providers.

PAHO/WHO provided technical support on developing criteria for the selection of the electronic medical record for primary health care providers in NHIA of the Bahamas.

PAHO/WHO supported the integrated health information management system rapid assessment in the Bahamas, and the initial road map is projected to be available for 2021. For Turks and Caicos Islands, technical support was delivered for developing an integrated health information management systems proposal.

The CO facilitated the installation of the Information Systems for Health steering committee and three technical committees with the participation of key health stakeholders and other sectors in the Bahamas to adopt the system.
Supporting the COVID-19 National Response

PAHO/WHO provided the national health authorities of the Bahamas with operational support for the NEOC throughout the COVID-19 pandemic. The Country Representative and the Health Systems and Services Advisor were embedded in the NEOC to provide technical guidance and support for management of the COVID-19 outbreak.

The national COVID-19 strategic plan in the Bahamas was drafted with the support of the CO in alignment with PAHO/WHO technical guidance.

The CO provided financial support to the national health authorities of the Bahamas to outfit mobile clinics in New Providence and Grand Bahama, and to purchase tents for off-site COVID-19 testing at nontraditional health facilities.

On a weekly basis, situation reports were produced by the CO detailing the number of confirmed, active, hospitalized, and recovered cases, number of deaths, and national response efforts of the national authorities in the Bahamas and Turks and Caicos Islands.

PAHO/WHO provided support for the management of cases and contact data via the WHO Go-Data platform in the Bahamas. Dashboards of key performance indicators and chains of transmission among cases and contacts were produced to support the national authorities in the decision-making. PAHO/WHO also provided support to Turks and Caicos Islands for the set-up of Go-Data and resolution of technical issues that emerged.

In collaboration with the University of The Bahamas, the CO supported the development of a contact-tracing training course. More than 400 persons participated in the contact-tracing training course.

The Health Systems and Services Advisor provided support to the surveillance unit of the MOH of the Bahamas for the management of mortality data.
The CO supported the MOH of the Bahamas with the assessments and proposed recommendations for the reorganization of hospital services, bed management, and strengthening of the PHC services to support the COVID-19 response. PAHO/WHO also supported the assessment of hospital bed capacity needs during the first and second waves of COVID-19 cases in the Bahamas. In preparation for the surges in cases, technical assistance was given for the revision of options for the expansion of hospital beds within the Princess Margaret Hospital and other alternative medical care sites in BHS. In Turks and Caicos Islands, PAHO/WHO supported the assessment of hospital bed capacity, human resources needs, medical devices and supplies needs, and exploration of alternative medical care sites for the expansion of hospital beds to accommodate surges in cases.

In the Bahamas and Turks and Caicos Islands, the CO assisted in strengthening the national laboratory capacity for COVID-19 testing through the procurement of equipment and supplies, and provision of access to PAHO/WHO protocols and technical guidelines.

The Bahamas and Turks and Caicos Islands were provided with access to multiple technical guidelines, training sessions, and webinars across numerous facets of the COVID-19 response, including clinical management, organization of health services, contact-tracing, testing, pharmaceuticals and vaccines, and infection prevention control measures.
Recovering from Disasters

Prior to the COVID-19 pandemic, in support of the Hurricane Dorian response, the CO received funding from a US$ 1 million dollar grant through WHO, and a US$ 2.6 million dollar grant through the United States Agency for International Development / Office of US Foreign Disaster Assistance. A procurement plan was implemented to provide donations of personal protective equipment and laboratory supplies, which strengthened the response capacity of the MOH and the Public Hospitals Authority. Vector control equipment was also procured for the Department of Environmental Health Services to help strengthen the capacities of the health emergency operations in Abaco and Grand Bahama post-Hurricane Dorian. The CO also continued technical cooperation with the National Emergency Management Agency’s Emergency Management Committee to finalize Hurricane Dorian after-action reviews.

The CO Disaster Focal Point attended the Caribbean Health Disaster Coordinators Virtual Meeting in October 2020. The objectives of the workshop were to understand health disaster risk management priorities, and identify opportunities and challenges for the implementation of the Plan of Action for Disaster Risk Reduction 2016-2021.
## Financial Summary: The Bahamas

### Table 2
The Bahamas: Key Figures

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Figure 1
The Bahamas: Financial Flows
### Table 3
Turks and Caicos Islands: Key Figures

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Strategic and Revolving Funds

The Revolving Fund is the PAHO fund that allows Member States to access safe and quality vaccines and at an affordable cost. The Strategic Fund is PAHO’s mechanism from pooled procurements of essential medicines and health supplies. The following table reflects the procurement of both countries using these funds.

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Looking Ahead

In 2020, a significant proportion of PAHO/WHO’s technical cooperation in the Bahamas and Turks and Caicos Islands was delivered in support of the national COVID-19 preparedness and response efforts. As both the Bahamas and Turks and Caicos Islands seek to rebuild better, the continued strengthening of surveillance, data management, and reporting systems is essential for recovery from the COVID-19 pandemic. Interruption of viral transmission greatly depends on high vaccine coverage within both populations, and governments should continue to prioritize this effort.

Mental health and psychosocial support are expected to be an area for ongoing PAHO/WHO technical collaboration as the Bahamas and Turks and Caicos Islands respond to continuing and potential adverse psychological impacts of the pandemic. Furthermore, as the Bahamas and Turks and Caicos Islands continue to navigate changes in the organization of their health systems, the complete resumption and expansion of NCD services should also remain a high priority to avoid unnecessary hospitalization due to poor disease management. The Governments of both the Bahamas and Turks and Caicos Islands should prioritize the enacting of legislation that addresses the risk factors for NCDs, such as alcohol and tobacco use, and poor nutrition.

Continued efforts should be made by the Governments of the Bahamas and Turks and Caicos Islands toward UHC through sustainable financing mechanisms, and removal of barriers to accessing health care, especially for residents of family islands. It is also important that health decision planning and monitoring in both the Bahamas and Turks and Caicos Islands involve community groups and individuals, especially vulnerable populations, to ensure equity in the delivery of services and interventions. Finally, the challenges faced by the health systems in both the Bahamas and Turks and Caicos Islands have underscored the need for continuing efforts to strengthen resilience and human resource capacity for preparation and response to pandemics and other health emergencies.
In the Bahamas, limited data collection, management, and analysis for health decision-making remains a challenge for which the CO will continue efforts to strengthen the country’s capacity for health information management. In Turks and Caicos Islands, the CO advises the health authorities to review and update their HRH plan with a focus on recruitment and retention. PAHO/WHO remains committed to maintaining strong technical cooperation in the Bahamas and Turks and Caicos Islands in partnership with governmental and nongovernmental agencies, and civil society, to improve health outcomes of populations. In collaboration with national health authorities, the CO will seek to support the development of new health sector plans and country cooperation strategies that align with the objectives of the 2020-2024 PAHO Strategic Plan.