

COVID-19

PAHO/WHO Response. 22 October 2021. Report n. 62

HIGHLIGHTS

On 14 October 2021, PAHO and the Economic Commission for Latin American and the Caribbean (ECLAC) **released a new joint report** on the prolongation of the health crisis and its impact on health, the economy, and social development in Latin America and the Caribbean. The two United Nations agencies urged governments of the Region to accelerate vaccination processes, transform health systems, strengthen public investment, and consolidate their welfare states to control the pandemic and move towards recovery with equality and environmental sustainability. The report findings were presented by PAHO's Director Dr. Carissa F. Etienne and ECLAC's Executive Secretary Alicia Bárcena during a press conference that highlighted that the health crisis in 2020 sparked the most severe economic contraction of the past 120 years in Latin America and the Caribbean, which also saw the worst economic performance of all the developing regions. In the report, PAHO and ECLAC emphasize that global asymmetry and institutional fragmentation in the access to COVID-19 vaccines demonstrate the urgent need to strengthen regional coordination and integration mechanisms, as well as international cooperation. "The prolongation of the COVID-19 pandemic in the world's most inequitable region has demonstrated the centrality that health has for welfare, the economy and development. It is time to transform Latin America and the Caribbean's health systems based on a primary health care approach, to accelerate the post-pandemic recovery, recoup and maintain achievements in public health and resume the path towards universal health, ensuring access to health and to vaccination for all those who need it", stated PAHO's Director.

SITUATION NUMBERS IN THE AMERICAS

as of 22 October 2021 (15:00)

56

Countries/territories affected

92,766,999

Confirmed cases

2,275,650

Deaths

1,166,178,399

Vaccine doses administered

RESPONSE PILLARS



1. Coordination, Planning, Financing, and Monitoring



2. Risk Communication, Community Engagement & Infodemic Management



3. Surveillance, Epidemiological Investigation, Contact Tracing; Adjustment of Public Health/Social Measures



4. Points of Entry, International Travel & Transport; Mass Gatherings



5. Laboratories & Diagnostics



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

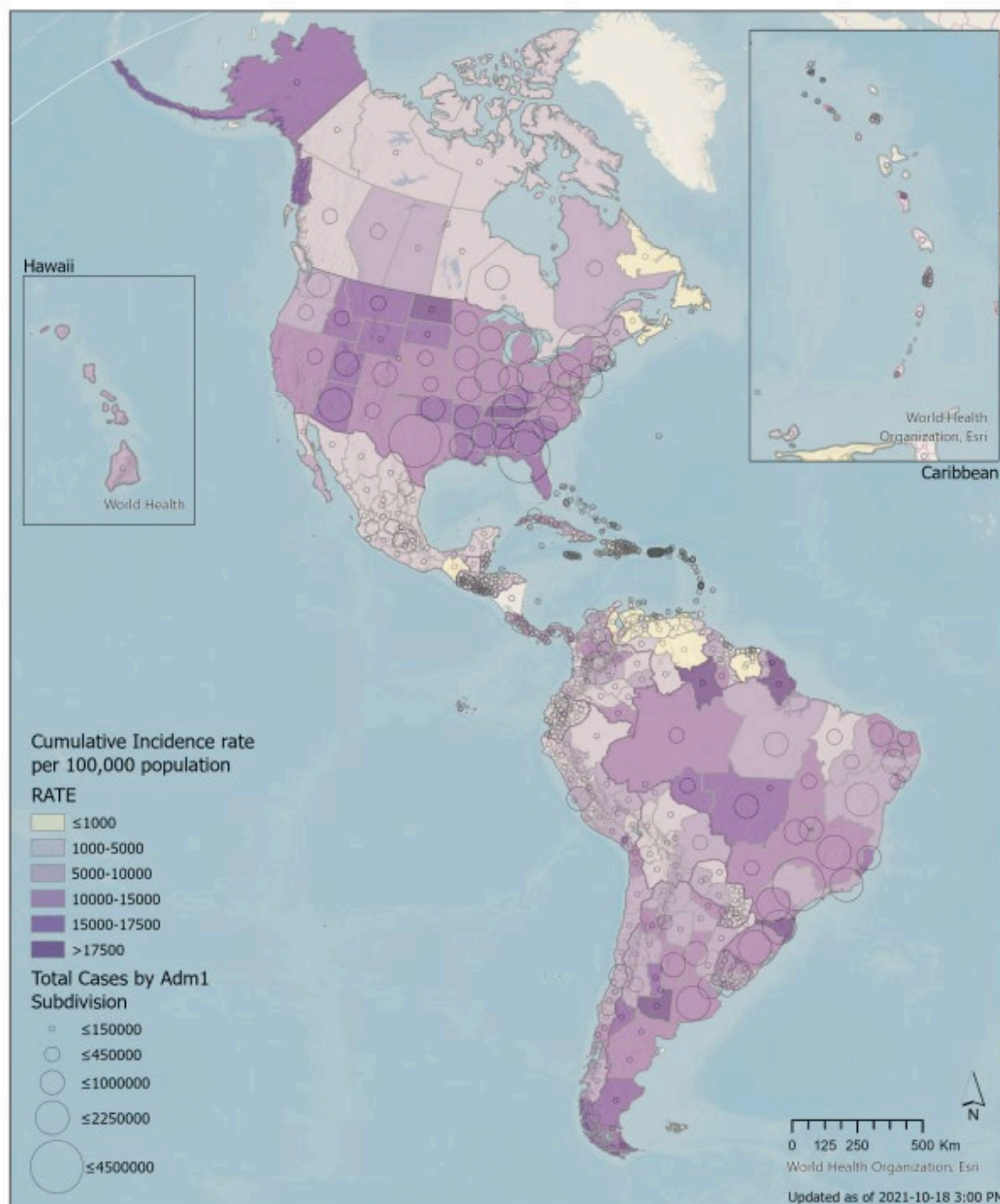
[Link to PAHO's technical and epidemiological reports, guidance, and recommendations](#)

[Link to global operational situation reports](#)

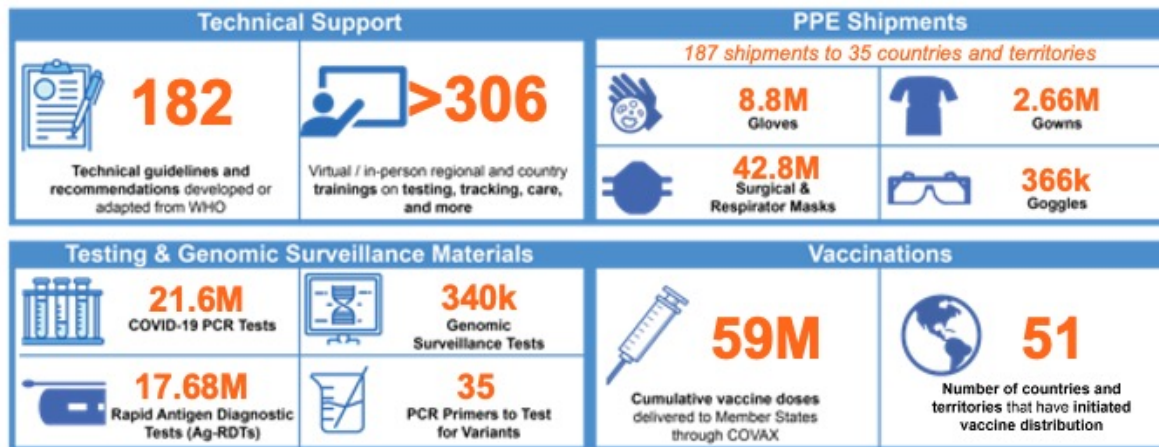


World Health
Organization

Map 1. Reported number of cumulative COVID-19 cases in the Region of the Americas and corresponding incidence rate (per 100,000 population) by country/territory. As of 18 October 2021



PAHO Regional Response Summary



Cumulative regional response data as of 22 October 2021.

PAHO/WHO Response (9 to 22 October 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 22 October 2021, a total of **1,493 bilateral communications** (under Article 44 of the International Health Regulations) between National Focal Points (NFPs) with information concerning cases/contacts and travel were received. A slight decrease 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 is supporting the implementation of an initiative in **Cuba** aimed at strengthening the production of key medical equipment and devices to support response to the COVID-19 pandemic, including to expand national diagnostic capacity at the Center for Neurosciences (CNEURO), the Immunoassay Center (CIE) and the Center for Genetic Engineering and Biotechnology (CIGB). These centers have already received materials to produce CPAP ventilators, RT-PCR and reactions for the diagnosis of SARS-CoV-2. Additionally, during the reporting period, **a joint team of experts from PAHO and the Ministry of Health conducted technical site visits** to facilities to assess how the items procured through the initiative are being used in the production of different equipment and key medical devices.



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 F. Etienne delivered two press briefings during this period. On **13 October 2021**, the Director discussed WHO's new goal of vaccinating 40% of every country's population before the end of the year and the challenges faced by countries in the Region. Dr. Etienne highlighted that thirty-nine percent of people in Latin America and the Caribbean are fully vaccinated against COVID-19 with 26 countries and territories already immunizing 40% or more of their population; however there remain several countries lagging behind, with six of them yet to reach 20% of their populations vaccinated: Guatemala, Haiti, Jamaica, Nicaragua, Saint Lucia, and Saint Vincent and the Grenadines,

The Director said that, due to the unequal distribution of doses, vaccine availability has been a central challenge across the Region, but countries also face their own unique barriers to increase vaccine coverage. Dr. Etienne emphasized the importance of ensuring adequate infrastructure is in place to roll out doses at scale. Hiring and training health care workers at all levels, and designing vaccine campaigns around the unique needs of the population to ensure their effectiveness, such as door to door campaigns by community leaders and weekend long vaccine drives are also key. The Director said PAHO is working hard to accelerate vaccine deliveries across the Region and called on everyone to work together and support each other so that all countries in the Region can reach the 40% vaccination coverage target by the end of the year.

During the press briefing held on **20 October 2021**, the Dr. Etienne discussed the importance of surveillance efforts in the Region to track and manage COVID-19 and other infections. The Director said surveillance will remain important to identify new risks and respond to local infection hotspots. She stressed that to improve and evolve the epidemic response in the Region, countries must act locally, smarter, and together. Local hotspots are driving national trends more and more, warranting the need for surveillance at the local level to detect risks more quickly and remain on top of emerging trends.

Dr Etienne emphasized that to act smarter, countries should look for ways to build on existing surveillance networks, and by integrating COVID-19 with surveillance activities for other respiratory viruses, like influenza, countries can monitor diseases more efficiently and sustainably. The Director said that PAHO is working with the US Centers for Disease Control and Prevention (CDC) to implement a new PCR test to simultaneously detect COVID-19 and influenza from the same sample. This new integrated testing strategy will help countries sustain their surveillance efforts as they work to become more self-sufficient in their pandemic response. In addition, PAHO has developed a modeling tool that tracks cases, forecasts short term trends and helps countries to measure the impact of public health measures to inform their response.

As a result of the efforts of countries across the Americas, the Region has built a robust and innovative surveillance network that tracks the emergence and spread of COVID-19 variants. There are now 45 National Public Health Laboratories that run PCR tests for countries across the Region. PAHO has provided support to the network by standardizing laboratory protocols, conducting trainings, and donating more than 21 million COVID PCR tests, and nearly 18 million rapid diagnostic tests to countries in the Region. This platform is the Region's backbone for pandemic preparedness as it can be adopted to identify other viruses and other emerging pathogens.

In closing, the Director highlighted the upcoming 30-year anniversary of the last case of polio in the Americas as a lesson in fighting disease through sustained and concerted action. "This extraordinary accomplishment was made possible by mass vaccination efforts and robust epidemiologic surveillance," Dr. Etienne said. The Director said World Polio Day is a reminder of what can be achieved in the region when countries work together to keep health threats in check, protect the most vulnerable, and ensure access to vaccines for all.

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.

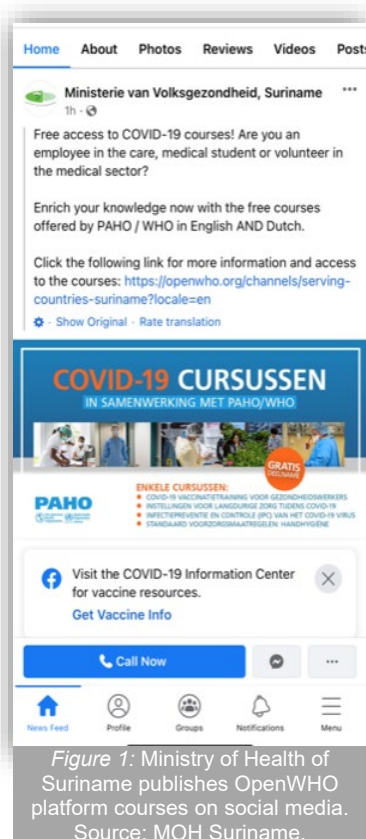


Figure 1: Ministry of Health of Suriname publishes OpenWHO platform courses on social media.
Source: MOH Suriname.

Country

In **Belize**, PAHO engaged with authorities in the Central Health Region on COVID-19 response strategies in the Belize District, which is facing a surge in cases and was identified as the current hotspot for COVID-19 transmission in the country. Discussions also considered risk communication and community engagement (RCCE) needs.

In **Bolivia**, PAHO has been working with the Foundation for Journalism and providing support to verify false information, misinformation, and disinformation. The initiative, which started in August, reports and sends out alerts for the verification of fake news, and has produced communication pieces such as press releases, posts for social networks, and podcasts for radio and the internet. It also uses TikTok to reach diverse audiences and provide accurate information about the pandemic and vaccines. Capacity building activities for communicators and journalists are also implemented. As of 22 October, PAHO has collaborated in the verification of 33 news reports on COVID-19.

Additionally, since July 2021, PAHO has been working with the Ministry of Presidency, Vice Ministry of Communication of **Bolivia**,

and the Plurinational Public Management School, to deliver a Diploma in Communication and Health program. Up to the end of the reporting period, more than 27 State communication professionals have concluded the program, which include topics on basic epidemiology, health emergencies, risk communication and on how to address the infodemic.

In **Haiti**, PAHO provided support to community outreach activities aimed at boosting vaccine uptake in the commune of Borgne, in the North department. The initiative was a coordinated work of teams composed of community health workers, nurses, and community leaders. PAHO also supported community activities at the health district of Croix des Bouquets aimed at educating the population about COVID-19 vaccines and referring them to the three main vaccination centers in the area.

In **Suriname**, PAHO continues to support the translation of key online COVID-19 courses into Dutch for the OpenWHO platform. PAHO has been working in coordination with the Ministry of Health (MOH) to promote the dissemination of these courses. On 11 October, the MOH published information about the on its social media. As of 22 October, 2,100 persons have received certificates from the OpenWHO platform. The platform currently includes **10 courses available in Dutch**, two of which were launched in the reporting period.

PAHO also supported the Ministry of Health of **Suriname** with the production and airing of two new videos for national television focusing on the benefits of the COVID-19 vaccine and the need to adhere to the preventive measures. PAHO also supported the Ministry of Health with the production and airing of eight audio spots with a special focus on adolescents and pregnant women, highlighting the importance of COVID-19 vaccination.



Figures 2 and 3: Videos produced by MOH of Suriname in collaboration with PAHO to encourage vaccination and preventive measures. Source: PAHO.



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 in the **Go.Data** app.

Country

In **Belize**, PAHO, the Epidemiology Unit of the Ministry of Health and Wellness and WHO had a joint meeting to discuss strategies to further strengthen the implementation and rollout of the Go.Data platform for

outbreak surveillance in the country. PAHO is supporting the initiative from the regional and country level, and topics discussed include the use of the Go.Data Strategic Framework.

In **Paraguay**, PAHO is coordinating with Universidad Nacional del Este and the Molecular Biology laboratory of the Ministry of Health in Ciudad del Este to deliver the second edition of training modules on basic epidemiology for the control of diseases (MOPECE), with special focus on the COVID-19 context. Three modules of the program were offered on the weekends of 8 and 22 October, in the program which started 22 September 2021. It is aimed at physicians, microbiologists, nurses and teachers, as well as staff at points of entry at the border with Brazil. The purpose of the course is to build capacity among health personnel to respond to outbreaks and pandemics, considering the International Health Regulations (IHR) and the current risk situation of COVID-19.



Figure 4: MOPECE training in Ciudad de Este, Paraguay. Source: PAHO.



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 **Haiti**, PAHO is supporting the national laboratory and the National Office of Migration through the provision of COVID-19 antigenic tests and personal protection equipment (PPE). Additionally, support was provided to the Ministry of Health to produce banners and posters displaying COVID-19-related information in airports.



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 683,900 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 **Antigua and Barbuda, Barbados, Bolivia, Dominica, Guatemala, Honduras and Suriname.**

Country

In **Brazil**, PAHO provided technical support to optimize sample collection for the SARS-CoV-2 Prevalence Infection Study (PrevCOV), a nationwide seroprevalence study, including state capitals and regions. The study aims to understand the circulation of the virus in the country and provide inputs for the development of public policies to respond to the COVID-19 pandemic.

In **the Bahamas and Jamaica**, PAHO alerted the Ministries of Health and the National Regulatory Authorities on potential false COVID-19 Rapid Antigen tests, which are not included in the WHO Emergency Use Listing (WHO/EUL) and are being sold in the countries. PAHO is providing follow-up support.

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, until 22 October 2021, more than **4,564,200** complete genomic sequences have been shared globally through publicly accessible databases.

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-six 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 76 new SARS-CoV-2 full genome sequences from the **Bahamas**, 55 from **Belize**, and 49 from **Guyana** were generated through the PAHO COVID-19 Genetic Surveillance Network at the Regional Sequencing Reference Laboratory for COVID-19 at Gorgas Institute in Panama. The Delta VOC was detected in higher proportion, together with Alpha and Gamma in some samples, as well as other common variants.



PILLAR 6: Infection Prevention and Control (IPC), and Protection of the Health Workforce

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

Regional

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.

Country

In **Brazil** PAHO provided training for 1,183 additional healthcare workers in infection prevention and control during the reporting period, for a total of 144,391 health professionals trained to date.

In **Suriname**, PAHO and OpenWHO launched two courses in Dutch as part of a series of courses in Infection Prevention and Control. The first course is **Standard precautions: Injection safety and needle-stick injury management**. The course addresses the causes of unsafe injection practices, how to safely give injections, and how to safely dispose of needles and other sharps. Participants can also learn what to do when needle-stick injuries occur, how to manage potential exposures, and ways to protect themselves, staff and patients in their facilities, and their community. The second course launched is **Standard precautions: Waste management**, which covers the different categories of waste and the process for waste management.



Figure 5: OpenWHO platform screen with details on injection safety course in Dutch. Source: OpenWHO platform.

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 390,000 cases with contributions from the following countries: **Argentina, Brazil, Chile, Colombia, Dominican Republic, Mexico, Panama, Peru, and the United States of America.**

PAHO last updated evidence for the **Ongoing Living Update of Potential COVID-19 Therapeutics: Summary of rapid systematic reviews** on 22 October 2021. The study synthesizes evidence on 155 therapeutics from 452 randomized controlled trials and observational studies.

Country

PAHO conducted training in COVID-19 case management for healthcare workers in **Brazil**. A total of 13,679 health professionals have been trained in the country since the start of the pandemic.

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](#)**. As of 22 October, there were at least 97 Emergency Medical Teams deployed throughout the Region, and 129 Alternative Medical Care Sites, such as military bases, sports stadiums, and fairgrounds managed by PAHO. These EMTs have added 6,899 inpatient hospital beds and 1,078 critical care beds throughout the Region.

Regional

On 18 October, PAHO published a self-learning virtual course (available in English) on **[Medical Coordination and Information Cells \(CICOMs\)](#)** which offers tools to Emergency Medical Teams (EMT) and Alternative Medical Care Sites (AMCS) coordination staff for swift and timely preparation and response. PAHO's Regional Secretariat for Emergency Medical Teams (EMTs) had previously taught this course remotely in response to countries' expressed need for training to implement Medical Coordination and Information Cells (CICOMs, for its Spanish acronym), complementing the publication of **[Recommendations for implementing the CICOM methodology during the COVID-19 response](#)**. Now published as a self-learning tool, this document is part of the EMT Initiative, which provides technical support in the Region for EMT coordination and information management and Alternative Medical Care Sites (AMCSs) to build clinical care capacity in the countries of the Americas during the current COVID-19 pandemic response.

The CICOM serves as a fundamental support for health Emergency Operations Centers (EOCs) s, with the goal of strengthening actions and addressing needs related to information management, coordination, and operational support for EMTs and AMCSs, facilitating decision-making in health EOCs. This is vital in the short term to protect life and alleviate the suffering of affected populations. The course is available on **[PAHO's Virtual Campus for Public Health](#)**



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.

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 22 October 2021, the SF has procured more than **\$267 million** worth of COVID-19 diagnostic tests (PCR and rapid tests), PPE and medicines for critical care, supporting more than **33.5 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.

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.

Health technology assessments (HTAs) are invaluable guidance for health authorities in the use of technologies relevant to the COVID-19 pandemic. There are currently **327 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](#)).

On 14 October 2021, the United Nations Food and Agriculture Organization (FAO), the World Organization for Animal Health (OIE) and PAHO signed an addendum with the European Union to extend the regional project [Working Together to Fight Antimicrobial Resistance](#) until 2023, to address COVID-19 associated antimicrobial resistance (AMR) threats. This extension will support actions to mitigate the impact of the COVID-19 pandemic on antimicrobial resistance and prevent future emerging diseases with pandemic potential. In addition to the direct impact on AMR due to the intensive use of antibiotics to treat bacterial infections in COVID-19 patients, it will consider the impact of increased levels of antimicrobials in the environment and the importance of protecting animal health. The strategy to mitigate the emergence and spread of AMR focuses on intensifying interventions in the seven participating countries (Argentina, Brazil, Chile, Colombia, Paraguay, Peru, and Uruguay) through national plans to specifically address challenges that have emerged during the COVID-19 pandemic.

Country

In **Belize**, in collaboration with the University of Vermont and the Ministry of Health and Wellness (MOHW), PAHO facilitated a series of trainings related to the MOHW Maintenance Policy and Plan as part of the of the [Health Sector Support Programme \(HSSP\)](#). Training sessions were held from 11 to 14 October 2021, and focused on the maintenance of critical equipment, including those used for COVID-19 response. Participants included staff from the National Engineering & Maintenance Center and medical, administrative, and maintenance staff from the MOHW from various regions across the country.



Figure 6: Debriefing meeting with University of Vermont on maintenance training. Source: PAHO.

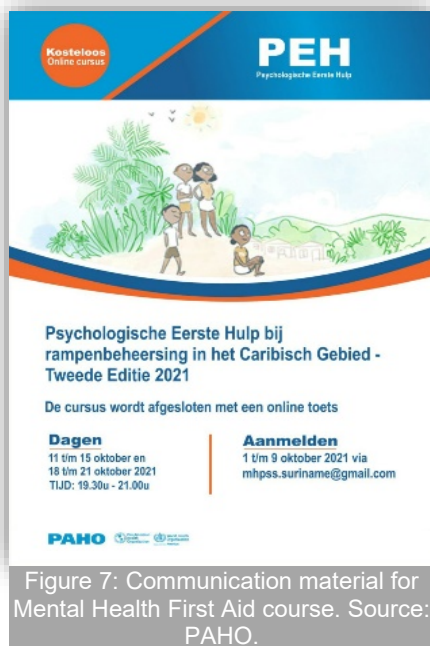


Figure 7: Communication material for Mental Health First Aid course. Source: PAHO.

In **Suriname**, PAHO facilitated the second edition of a training for health care workers on **Mental Health First Aid in Disaster Management in Dutch**. The course was previously available in **English** and **Spanish**. Topics addressed include orientation to caregivers, identification of people with special needs, and first-aid mental health care in different crisis scenarios. The course opened on 11 October 2021 and more than 100 people have participated as of the end of the reporting period.



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 22 October 2021, more than **1.1 billion doses of COVID-19 vaccines** had been administered in the Americas, with more than **508 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 59 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 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 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

In **Belize**, [PAHO continued to provide support to the Karl Heusner Memorial Hospital \(KHHM\) with the donation of IT equipment and office supplies](#) to strengthen existing surveillance activities as part of ensuring COVID-19 vaccine safety. The KHHM is a sentinel hospital and the donation will enable the establishment of an ESAVI Situation Room to conduct proper vaccine safety surveillance in the country, in collaboration with the Ministry of Health and Wellness.

Additionally, [PAHO donated communication equipment and supplies to the Ministry of Health and Wellness of Belize](#) for COVID-19 risk communication in support of the country's vaccination campaign. Items donated include video production equipment and posters, and are primarily intended to improve the country's capacity to develop and disseminate health campaigns to encourage positive behavior changes and informed decision-making.



Figure 8: Donation of ESAVI IT Equipment to the Karl Heusner Memorial Hospital for surveillance of vaccine safety. Source: PAHO.



Figure 9: Donation of equipment and supplies to MOHW of Belize to support Vaccination Campaign. Source: PAHO.

In **Bolivia**, PAHO provided technical cooperation to the Ministry of Health and Sports in the design of a communication strategy to increase vaccination acceptance in rural areas, with the implementation of four components: promotion, communication and information, risk communication, and social mobilization/community participation.

In addition, PAHO is providing technical support and up-to-date vaccination information to the campaign "Vaccines bring you closer", launched on 14 October 2021, with the purpose of sensitizing collaborators and clients of companies participating in the initiative about the importance of vaccination against COVID-19. Developed by UNICEF in alliance with the National Chamber of Exporters of Bolivia (CANEB) and the Association of Development Financial Institutions (FINRURAL), the initiative includes a digital campaign, thematic webinars to promote vaccines and the acknowledgment of companies that promote vaccination among their collaborators.

In **Haiti**, in support to the surveillance and management of events supposedly attributable to vaccination and immunization (ESAVI), 100 treatment kits were distributed at vaccination sites in different departments. Training sessions on ESAVI surveillance were carried out in the Great South during the reporting period, and 8 of 10 departments of the country have already benefited from this training. Three cases of serious ESAVI have been notified as of 22 October.

In **Jamaica**, from 11 to 15 October 2021, PAHO conducted daily training sessions for the team designated to carry out surveillance activities since the Kingston Public Hospital (KPH) was identified as a sentinel site for the Regional ESAVI Surveillance System. The focal points for Immunization (EPI), pharmacovigilance, and information systems from the Ministry of Health and Wellness also participated in the training.

Gaps and Challenges

GAPS	CHALLENGES
<ul style="list-style-type: none"> • 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. 	<ul style="list-style-type: none"> • 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)
- 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 (IDB)
- 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
- Other donors
- Rockefeller Foundation
- Sony Latin Music
- Government of Spain
- Government of Sweden
- Government of Switzerland
- UN Agencies consortium
- UNICEF
- Government of the United Kingdom
- UN Development Coordination Office (UNCDO)
- UN Development Programme (UNDP)
- UN Multi-Partner Trust Fund
- UN Office for South-South Cooperation (UNOSSC)
- UN Resident Coordinator Office (UNRCO)
- USAID
- WHO Foundation
- World Bank
- World Food Programme
- 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, Government of Germany, Government of France, the OPEC Fund for International Development (OFID), Government of Spain, Government of Saudi Arabia, the Government of United Kingdom and the World Bank.

In addition, the following donors have pledged further support to PAHO: the Caribbean Development Bank, 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:
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