HIGHLIGHTS

PAHO published “Strengthening mental health responses to COVID-19 in the Americas: A health policy analysis and recommendations,” in The Lancet Regional Health – Americas. The paper highlights the devastating toll of the ongoing COVID-19 pandemic on the mental health and wellbeing of populations in the Americas, as well as the impact of service disruptions throughout the Region. Countries across the Americas have reported a worsening of their population mental health. “The message is clear: we have been operating in crisis mode since the onset of the pandemic,” said Dr. Anselm Hennis, Director of Noncommunicable Diseases and Mental Health at PAHO. “In addition to navigating the fear of getting sick and the trauma of losing loved ones to the novel coronavirus, people across the Americas have suffered from unemployment, poverty and food insecurity, and the adverse impact on mental health has been pervasive”, he added. The authors stressed that there is an immediate need for countries in the Americas to scale up and improve mental health and psychosocial support services during the pandemic and to build back better mental health systems in anticipation of future emergencies, including climate change.

According to the PAHO Epidemiological Update: SARS-CoV-2 variants in the Region of the Americas of 1 December 2021, all five Variants of Concern (VOC) of the SARS-COV-2 virus have been identified in the Americas, including Omicron. The most frequent variant continues to be Delta, with 181 countries worldwide – including 54 countries and territories in the Americas – reporting its detection. As of 3 December 2021, the Omicron VOC has been reported in at least 25 countries globally, including Brazil, Canada, Mexico, and the United States of America. However, it is not yet clear if it is more easily transmitted from person-to-person compared to other variants, or if it causes more severe disease. Understanding the level of severity of Omicron could take several weeks. All SARS-CoV-2 variants, including the globally dominant Delta VOC, can cause serious illness or death, particularly for the most vulnerable people; therefore, prevention is always paramount, as highlighted by PAHO’s Epidemiological Update.
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 29 November 2021
PAHO/WHO Response (20 November to 3 December 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.

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 3 December 2021, a total of 1,786 bilateral communications (under Article 44 of the International Health Regulations), between National Focal Points (NFPs) with information concerning cases/contacts and travel were received.
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**

On 25 November 2021, Costa Rica presented the results of a study on COVID-19 public health expenditure in the country during 2020, the first of its type carried out in the Region. The study was conducted by the Ministry of Health with PAHO’s technical support. The analysis was undertaken using a methodology based on standards of the Organization for Economic Cooperation and Development (OECD), the European Union (Eurostat) and the World Health Organization (WHO), which enable the classification of expenditures under different perspectives. The launch of the study was broadcast on PAHO’s social media and the video can be watched 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)

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

PAHO’s Director Dr. Carissa F. Etienne delivered two press briefings during this period. On 24 November 2021, the Director emphasized there is no room for complacency in tackling the pandemic, as COVID-19 cases rose by 23% in the Region over the past week. Over the last few weeks, many European countries have reported record numbers of new cases despite high vaccination coverage. The relaxation of public health measures combined with pockets of unvaccinated people has created the perfect environment for the virus to spread, Dr. Etienne said. “Throughout this pandemic, Europe has been a window into the future for the Americas.” The Director cautioned that “The future is unfolding before us, and it must be a wakeup call for our Region.”

Upward trends are already seen throughout the Americas, particularly in Canada and the United States. In South America, nearly every country is reporting increased incidences, including in the Southern Cone. High rates of infection are also reported in the Caribbean. Central America is the only area to have experienced a drop in new infections. While just over half of people in Latin America and the Caribbean (LAC) are fully vaccinated against COVID-19, 19 countries have yet to reach 40% vaccination coverage, the WHO target for the end of 2021. Despite this, preventive measures are being lifted, including in densely populated areas. Dr. Etienne highlighted that the virus gains momentum every time we lower our guard. Last year, the Americas saw a jump in new cases following the holiday season, which took months to decline. With the
upcoming holidays and summer vacations in the Southern Hemisphere, the Director stressed that “our individual and collective decisions chart the path of this pandemic.” It is therefore crucial that individuals get vaccinated as soon as possible, to protect against severe disease and to prevent hospitals from becoming overwhelmed, particularly if they plan to travel. In addition to vaccination, continued public health measures such as mask wearing, social distancing and avoiding large gatherings, particularly indoors, are key to reducing the spread.

During the press briefing held on 1 December 2021, the Director called for public health measures and vaccination in light of the Omicron variant of concern. Urging against panic, Dr. Etienne highlighted that there are still many unknowns about the new variant, and studies will take some time to complete. Until then, it is not clear if Omicron is more transmissible or if it causes more severe disease. PAHO continues to track all variants in the Region and Delta remains the predominant variant in the Americas.

With just over half of the people in LAC fully vaccinated against COVID-19, “vaccine inequity is prolonging the COVID crisis, and this is exactly what we’re seeing with the arrival of Omicron,” the Director said. Calling on governments to sustain public health measures, such as mask wearing, and to redouble their surveillance efforts, Dr. Etienne emphasized that “the more COVID-19 circulates, the more opportunities the virus has to mutate and change.” Turning to the commemoration of World AIDS Day, the Director reminded that COVID-19 is not the first infectious disease to shake the world. Prior to the pandemic, just 65% of people living with HIV in the Region were receiving ARV therapy and as the pandemic progressed, more countries reported partial disruptions in services for ARV therapy, leaving millions at risk despite the existence of effective drugs to control the disease and interrupt transmission. “We must work together to finish the job,” the Director said. So that “everyone in our Region has access to the services and tools they need to live healthy and productive lives.”

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 COVID-19 vaccines and COVAX. Infographics cover a range of issues related to COVID-19, from steps on how to prevent infection to tips on staying healthy and protecting one’s mental health during the pandemic.

Country

In Colombia, PAHO launched the campaign #Nocontarcontagia (Silence is contagious) on 24 November 2021, specifically aimed at young people from 18 to 25 years old. The campaign addresses the potential increase in cases among young people who do not mention their COVID-19 symptoms to their close contacts or inform them of contact with infected persons. It is also intended to raise awareness about the importance of using masks, testing, and social distancing in case of suspected COVID-19 symptoms. A video for the campaign demonstrating how the virus can be disseminated among young people who do not take these measures has been published on the PAHO TV YouTube Channel. There will also be ongoing dissemination of digital material on PAHO Colombia’s social media.
PAHO is also supporting the implementation of a communication strategy with an ethnic approach in four departments and 10 indigenous communities of **Colombia**. The strategy is mainly aimed at increasing vaccine acceptance and includes the dissemination of information about COVID-19 prevention and vaccination. As part of this initiative, PAHO has already created communication materials for a campaign on case and contact tracing in the Department of Chocó. There was also a risk communication workshop for residents of the cities of Beté and Lloró, in Chocó, to reinforce the importance of preventive measures against COVID-19, such as hand washing, the constant use of masks and social distancing. In Beté, women from the community also shared ancestral knowledge on measures to cope with COVID-19 symptoms during the workshop.

Figures 2 and 3: Residents of the city of Lloró and Beté participate in risk communication and community engagement activities on COVID-19 prevention in Colombia. Source: PAHO.
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 donated 17 tablets to the **Ministry of Health and Wellness (MOHW)** to enable electronic data collection by contact tracers. The Go.Data app will be installed on the tablets that will be distributed to contact tracers so they can transition from the manual data collection on cases and contacts to electronic data collection. This will help ensure that country response teams can analyze and visualize the case and contact data in a timely manner to inform decisions and the identification of evidence-informed public health response interventions.
In Guatemala, PAHO delivered IT equipment which will be distributed to 14 health regions prioritized by the Ministry of Public Health and Social Assistance. Items donated include 12 desktop computers, 53 laptops, 140 tablets and 60 cell phones, that will be used to support the strengthening of activities of the COVID-19 case and contact tracing strategy in the country.

In Honduras, on 26 November 2021, the Universidad Autónoma de Honduras (UNAH) in collaboration with PAHO, presented the results of a knowledge survey on COVID-19 contact tracing. The initiative is part of the National Pandemic Response Plan and its results will support the implementation of communication interventions, as well as the design and implementation of refresher training courses for journalists on the importance of contact tracing and preventive measures related to the pandemic. The survey was carried out in the municipalities with higher incidence of COVID-19 cases: Distrito Central, La Paz, Nacaome and San Pedro Sula. It provides information about the perception and the knowledge level of the population regarding COVID-19 and its management. 1,148 men and women from 18 to 19 years old were interviewed. Questions covered their concerns, impact on family environments, COVID-19 prevention, and their sources of information about the pandemic.

### 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.

### 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 706,700 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 Bolivia, Costa Rica, Dominica, Ecuador, Guatemala, Haiti, Honduras, Jamaica, Saint Kitts and Nevis, Saint Lucia and Saint Vincent and the Grenadines.

A number of SARS-CoV-2 variants have been identified through global genomic sequencing. Since the initial identification of SARS-CoV-2, until 3 December 2021, more than 5,732,146 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-seven countries are participating in the COVID-19 Genomic Surveillance Network, with reference sequencing laboratories in Brazil, Chile, Colombia, Mexico, Panama, the United States of America and Trinidad and Tobago 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 162 new SARS-CoV-2 full genome were sequenced and genomic sequencing data shared through the PAHO COVID-19 Genetic Surveillance Network (COVIGEN) Regional Sequencing Reference Laboratories for COVID-19 in support to countries using external sequencing capacity.

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 Belize, PAHO donated personal protective equipment (PPE) to the Belize Tourism Board (BTB). The donated items included gloves, face shields, masks, and hand sanitizers. The donation is intended to support infection prevention and control (IPC) measures in the workplace for micro and small enterprises of the tourism industry during the COVID-19 pandemic.
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 12 November 2021. The study synthesizes evidence on 157 therapeutics from 460 randomized controlled trials and observational studies.

Country
In Bolivia, on 2 December 2021, PAHO donated high-flow oxygen therapy (HFOT) equipment to the Ministry of Health and Sports for the management of moderate and severe cases of COVID-19. Donations are part of a broader initiative to ensure access and universal health coverage through the strengthening of primary health care in the context of COVID-19. The initiative also included the training of more than 3,295 health professionals in the use of this equipment, including 279 doctors and nurses from eight departments, who are now certified in oxygen therapy and can provide a more effective response to COVID-19 patients.

In Honduras, in coordination with the Health Secretariat, PAHO held workshops on COVID-19 clinical management to strengthen technical capacity and improve care provided to patients in the health regions of Cortés and San Pedro Sula. Health professionals received training in the management of non-invasive mechanical ventilation and in the use of oxygen therapy in patients with mild or moderate pneumonia from COVID-19. The training also addressed the most common problems faced by health professionals when using non-invasive mechanical ventilation and how to solve them.
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 3 December 2021, there were at least 100 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
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.

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 3 December 2021, the SF has procured more than $275 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. 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 334 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**

In Barbados, on 25 November 2021, PAHO concluded the delivery of a series of webinars called “Doing What Matters in Times of Stress.” The series was launched on 4 November 2021 and held every Thursday. Health care workers, social workers, counsellors, religious leaders, educators, and other representatives from various sectors representing 18 countries participated. The series was hosted in collaboration with the Universal Health Coverage Partnership (UHC-P), the United Nations Children’s Fund (UNICEF), the Ministry of Health, Wellness and the Environment, Saint Vincent and the Grenadines, and the

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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.
Caribbean Alliance of National Psychology Associations (CANPA). The webinar series sought to equip frontline workers with the practical skills to cope with stress and encourage health professionals to look after their own mental health while providing support to others in the context of the COVID-19 pandemic.

In Colombia, PAHO coordinated the development and delivery of a program on Mental Health First-Aid aimed at COVID-19 frontline workers held on 25 November 2021. Additionally, a workshop directed to COVID-19 first responders was delivered to community leaders in the city of Fundación, in the Department of Magdalena.

In Haiti, PAHO has been providing technical and financial support to the planning and implementation of community response activities. During the reporting period, PAHO provided support for the training of 40 community health workers and nurses on how to set up community response to COVID-19 in the town of Kenscoff. It is estimated that this initiative has benefited two thousand households and 16 health institutions. Additionally, on 25 November 2021, PAHO organized a meeting with 32 community leaders of the Ouest department, including representatives of religious denominations and feminist organizations, to discuss strategies to curb the COVID-19 epidemics in their respective communities. The meeting also sought to foster the involvement of community leaders in COVID-19 response. A working session with the technical health personnel of the department was also held to discuss the improvement of vaccine delivery in sites where there is an increasing demand for the anti-COVID-19 vaccine.

Regional
As of 3 December 2021, more than 1.35 billion doses of COVID-19 vaccines had been administered in the Americas, with more than 590 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 70.6 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 **Colombia**, PAHO conducted a microplanning workshop on COVID-19 in the Dumingueka community, in the department of La Guajira. The workshop was aimed at capacity building for vaccine deployment in the community.
## Gaps and Challenges

<table>
<thead>
<tr>
<th>GAPS</th>
<th>CHALLENGES</th>
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<tbody>
<tr>
<td><strong>Surveillance systems</strong>: additional capacity-building and equipment for analysis.</td>
<td><strong>Equitable Vaccine Distribution</strong>: The shortage of available vaccines limits the ability of the countries to protect their populations.</td>
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<tr>
<td><strong>Information systems</strong>: Data management systems are essential for case monitoring and contact tracing while protecting confidentiality.</td>
<td><strong>Competitive marketplace</strong>: Countries and organizations are competing for limited supplies due to global shortages of PPE and other items.</td>
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<td><strong>Strategic planning and response</strong>: Countries need enough resources to implement national COVID-19 Preparedness and Response Plan and Risk Communication Plans.</td>
<td><strong>Border closures</strong>: 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.</td>
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<tr>
<td><strong>Laboratory test kits and equipment</strong>: National laboratories need more extraction kits and other supplies to keep testing.</td>
<td><strong>Managing infections in healthcare settings</strong>: Healthcare workers rely on PPE and other supplies to avoid infection. Global shortages are contributing to increasing cases and frontline workers losing their lives.</td>
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<td><strong>IPC supplies</strong>: PPEs and supplies (including for WASH) are urgently needed for isolation and quarantine wards. Healthcare workers are hesitant to work without PPE.</td>
<td><strong>Infected healthcare workers</strong>: Infected health workers who are sick or quarantined will strain health systems.</td>
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<td><strong>Health facility evaluations</strong>: Countries must undertake additional assessments to guide measures for infection prevention and control.</td>
<td><strong>Test availability</strong>: Epidemiological monitoring requires more testing. Counterfeit tests are creating risks in resources lost and incorrect analyses.</td>
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<tr>
<td><strong>Resources for and access to populations in situations of vulnerability</strong>: PPE and other supplies are needed in these communities. Logistical challenges must be overcome to deliver these critical goods.</td>
<td><strong>Health workforce limitations</strong>: Insufficient human resources hamper countries’ efforts to conduct contact tracing and manage patients in quarantine.</td>
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<td><strong>Risk communications</strong>: Key messages must be tailored to each country’s context to resonate with intended audiences.</td>
<td><strong>Risk Communication</strong>: The perception of risk is still low in some countries/territories and many people ignore government public health measures.</td>
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<td><strong>Subnational-level health workers</strong>: A surge in medical personnel is needed to ensure countries can serve their whole populations and obtain more epidemiological data as it becomes available.</td>
<td><strong>Telephone referral systems</strong>: Some countries are reporting overwhelming call volumes.</td>
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<td><strong>Intensive care units</strong>: More ICUs will be needed to manage severe cases.</td>
<td><strong>Logistics systems</strong>: Many countries are still unprepared to manage the distribution of supplies and equipment.</td>
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<td><strong>Migrant access to health services</strong>: Countries are assessing how to serve these populations and better manage outbreaks.</td>
<td><strong>Continuity in other health services</strong>: The pandemic has diverted resources from other critical services for programs such as HIV, TB, and non-communicable diseases (NCDs).</td>
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<tr>
<td><strong>Private sector coordination</strong>: This is essential to ensure national protocols are followed.</td>
<td><strong>Stigma</strong>: Countries must take steps to reduce stigma towards persons returning from abroad and others associated with a higher likelihood of infection.</td>
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<tr>
<td><strong>Nutritional Guidance</strong>: This is vital to ensure families maintain nutritional health during and after the COVID-19 emergency.</td>
<td><strong>Public Compliance of Public Health Protocols</strong>: Public reluctance to follow public health protocols has led to increased infection rates in many countries in the Americas.</td>
</tr>
<tr>
<td><strong>Health Disaster Management Programs</strong>: Health Disaster Management Programs and surveillance were noted as priorities to enhance the COVID-19 and any other health emergency responses.</td>
<td><strong>Variants</strong>: New COVID-19 strains present a challenge to the control of the disease.</td>
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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 Yamini 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
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- Government of Sweden
- Government of Switzerland
- UN Agencies consortium
- UNICEF
- Government of the United Kingdom
- UN Development Coordination Office (UNCTD)
- UN Development Programme (UNDP)
- UN Multi-Partner Trust Fund
- UN Office for South-South Cooperation (UNOSSC)
- UN Resident Coordinator Office (UNRCO)
- USAID
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- 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:
www.paho.org/donate