

COVID-19



PAHO

PAHO/WHO Response. 31 December 2021. Report n. 67

HIGHLIGHTS

PAHO welcomed the World Health Organization (WHO) Emergency Use Listing of an AstraZeneca vaccine jointly produced by Argentina and Mexico – **the first such decision for a COVID-19 vaccine manufactured in Latin America**. The vaccine, with the international denomination COVID-19 Vaccine (ChAdOx1-S [recombinant]), is jointly manufactured by Argentina's mAbxience, which reproduces its active pharmaceutical ingredient, and Mexico's Laboratorios Liomont, which mixes and finishes the product for distribution. "We applaud this news," said PAHO's Director Carissa F. Etienne on 23 December 2021. "This is an important milestone for Latin America and highlights the importance of technology transfer to increase the availability of quality COVID-19 vaccines in the region." The regionally produced AstraZeneca vaccine is already in use in some Latin American and Caribbean countries, and inclusion in the WHO Emergency Use Listing will facilitate its procurement and distribution through PAHO's Revolving Fund as well as through COVAX, the international mechanism to increase global COVID-19 vaccines access. Boosting regional capacity to produce vaccines is key to bridging the vaccine inequity gap in the Region, the PAHO Director said, citing the international endorsement as an example of how the region is primed to develop its pharmaceutical manufacturing capacity. "If given the opportunity and tools, our region can deliver," she stressed.

On 22 December 2022, the **Region of the Americas surpassed 100 million cases of COVID-19**, according to PAHO's **epidemiological data**. PAHO continues to recommend vaccination and public health measures to reduce the risk of exposure to COVID-19 and halt the transmission of the virus. These include wearing masks, maintaining physical distance from others, frequent hand washing, and avoiding crowded spaces, especially indoors. "These measures are effective against all variants, including Omicron," PAHO Director Carissa F. Etienne said recently. "Countries should sustain their public health measures to limit transmission of the virus and adjust them according to local transmission risks," she added. In terms of vaccine distribution, over 868 million doses had been administered in Latin America and the Caribbean at the time of the release, with about 57.3% of the population in Latin America and the Caribbean having completed their COVID-19 vaccination schedules. PAHO projects that most countries in the region will have reached or surpassed the WHO target of vaccinating 40% of their eligible populations by the end of 2021. Over 76 million doses of vaccines have been delivered to 33 countries in the Region through the COVAX mechanism. PAHO's Revolving Fund has handled the logistics for these deliveries and is working with countries to purchase vaccines directly from manufacturers.

SITUATION NUMBERS IN THE AMERICAS

as of 31 December 2021 (15:00)

56

Countries/territories affected

102,333,991

Confirmed cases

2,404,442

Deaths

1,456,115,602

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

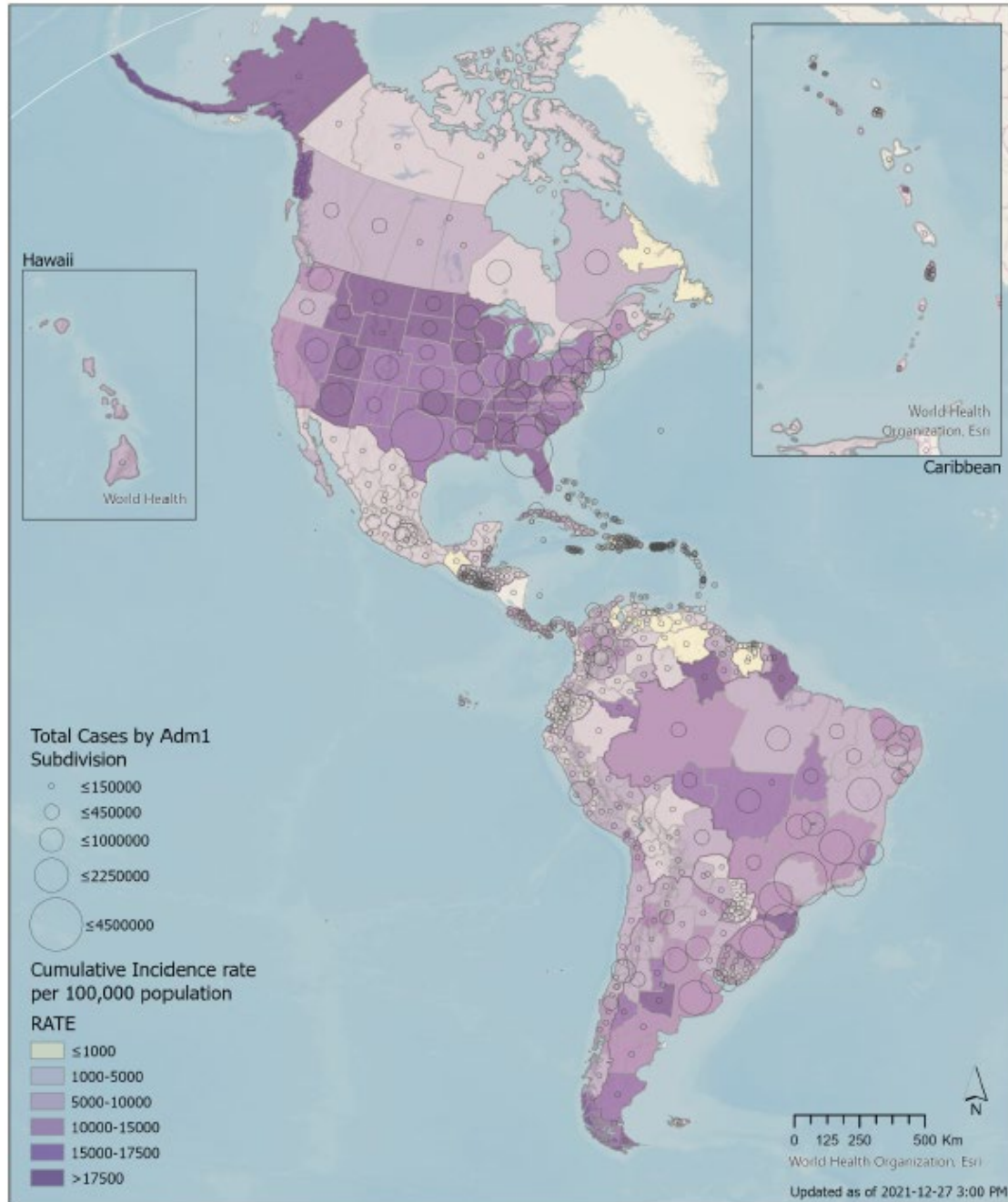
[Link to PAHO's technical and epidemiological reports, guidance, and recommendations](#)

[Link to global operational situation reports](#)



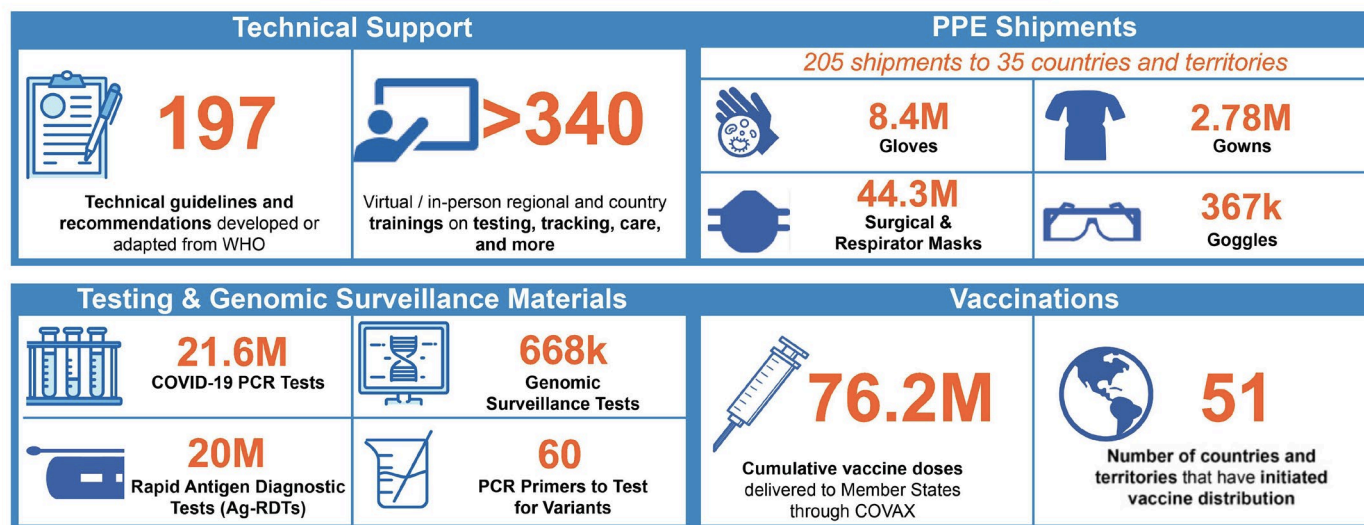
World Health Organization

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 27 December 2021



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The designations employed and the presentation of the material in these maps do not imply the expression of any opinion whatsoever on the part of the Secretariat of the Pan American Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

PAHO Regional Response Summary



Cumulative regional response data as of 31 December 2021.

PAHO/WHO Response (18 to 31 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.



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 31 December 2021, a total of **2,084 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.



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](#).

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 **Costa Rica**, PAHO launched a social media campaign to encourage the maintenance of preventive measures against COVID-19 during end-of-year holidays. The campaign offers 10 tips to avoid COVID-19 infection and has been available on PAHO [Costa Rica's Facebook page](#) since 20 December 2021.



Figures 1 and 2: PAHO communication material on prevention against COVID-19 during the holidays, published on PAHO Costa Rica's Facebook page. 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 and WHO headquarters held a two-day Go.Data training for the Ministry of Health and Wellness (MOHW) contact tracing staff on 21 and 22 December 2021. A total of 37 participants attended the training, including 32 contact tracers and 5 MOHW staff from the Epidemiological Unit.



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.

During the reporting period, PAHO continued to provide technical cooperation, including data review, troubleshooting sessions, and follow-up calls on laboratory diagnostics with teams from Member States.

Country

In **Colombia**, PAHO delivered a donation of PCR primers and probes for the detection of Variants of Concern (VOC), including an adapted probe to improve detection of the new Omicron VOC. The material was handed over to the National Health Institute (INS) on 22 December 2021, with the objective of strengthening capacities for the diagnostic and surveillance of VOC in the country.

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 31 December 2021, more than **6,664,793** 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 **60 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 174 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.



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.



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

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 400,000 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 15 December 2021**. The study synthesizes evidence on 163 therapeutics from 483 randomized controlled trials and observational studies.

7.2 Emergency Medical Teams (EMTs)

Emergency Medical Teams (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 31 December 2021, there were at least 100 EMTs 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.



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 31 December 2021, the SF has procured more than **\$290 million** worth of COVID-19 diagnostic tests (PCR and rapid tests), PPE and medicines for critical care, supporting more than **38 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,

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.

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. As of 31 December 2021, there were **336 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

A [new project by PAHO](#) will provide technical support to improve national capacity to develop and implement health and social responses for substance-use related problems in **Colombia, Costa Rica, Ecuador, Guyana, Jamaica and Panama**. The pandemic exacerbated the pressure on persons with substance use disorders, who also face higher risk of poor outcomes related to COVID-19. Capacity building activities will center around improving health and social workers' abilities to screen for substance use disorders, implementing early interventions, better management of at-risk populations, and the formulation of health policies. The project was launched on 27 December 2021 and will run for 18 months. Sessions will be conducted virtually and can also be accessed by other countries of the Region.



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 31 December 2021, more than **1,456,115,602 billion doses of COVID-19 vaccines** had been administered in the Americas, with more than **623 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 76,268,770 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 deployment and vaccination plans (NDVPs)**. **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 NDVPs 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 **Haiti**, during the reporting period, several health institutions in the Ouest, Nord-Ouest and Sud-Est regions received visits from PAHO and the Ministry of Health personnel for the supervision and validation of vaccination data. PAHO also provided logistical support for these visits.

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 (UNDCO)
- 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:
www.paho.org/donate

