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The Pan American Health Organization (PAHO) was founded in 1902 and is recognized as the independent specialized health agency of the inter-American system, under the Charter of the Organization of American States. In 1949, PAHO agreed to serve as the Regional Office for the Americas of the World Health Organization (WHO), a specialized agency of the United Nations system. Acting in its capacity as WHO’s Regional Office, PAHO participates actively in the United Nations Country Team, collaborating with other agencies, the funds and programmes of the United Nations system, and with the United Nations Resident Coordinator to contribute to the achievement of the Sustainable Development Goals at country level. For 120 years, PAHO has developed recognized competence and expertise, providing technical cooperation to its Member States to fight communicable and noncommunicable diseases and their causes, to strengthen health systems, and to respond to emergencies and disasters throughout the Region of the Americas.

Given PAHO’s dual legal status and the difficulty of disaggregating PAHO from WHO activities, this Annual Report reflects both PAHO and WHO activities in the Americas as related to technical cooperation in 2021. Approximately 80% of PAHO’s technical cooperation in health in the Region of the Americas is funded by PAHO’s own quota and voluntary contributions, as an inter-American organization. The remaining 20% of PAHO’s integrated biennial budget includes WHO-funded activities. Further detailed financial information for this Annual Report can be found in the Financial Summary section.
Mission
To lead strategic collaborative efforts among Member States and other partners to promote equity in health, combat disease, improve the quality of, and lengthen the lives of the peoples of the Americas.

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

EQUITY  Striving for fairness and justice by eliminating differences that are unnecessary and avoidable.

EXCELLENCE  Achieving the highest quality in what we do.

SOLIDARITY  Promoting shared interests, responsibilities and enabling collective efforts to achieve common goals.

RESPECT  Embracing the dignity and diversity of individuals, groups, and countries.

INTEGRITY  Assuring transparent, ethical, and accountable performance.

St. Thomas, U.S. Virgin Islands.
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# CONTENTS

*Message from the Director* .................................................................................................................................................. vi
*Message from the Director of the Subregional Program* ......................................................................................... vii

**HIGHLIGHTS** ......................................................................................................................................................... 1

**PAHO TECHNICAL COOPERATION** .................................................................................................................. 2
  - Health Emergencies.................................................................................................................................................. 2
  - Health Systems and Services ................................................................................................................................. 4
  - Communicable Diseases.......................................................................................................................................... 7
  - Noncommunicable Diseases and Mental Health................................................................................................. 9
  - Health Throughout the Life Course ..................................................................................................................... 11
  - Environment and Health...................................................................................................................................... 16

**FINANCIAL SUMMARY** ......................................................................................................................................... 19

**LOOKING AHEAD** .................................................................................................................................................. 21
In 2021, COVID-19 remained the greatest public health challenge of modern history. The Region of the Americas was hardest hit and, as new variants of the virus emerged, it became clear that the pandemic was not yet over. However, new vaccines heralded its ending and the advent of a new normal at work, at school, and in everyday social interactions.

The Pan American Health Organization (PAHO) strengthened its technical cooperation to support Member States in vaccinating populations against COVID-19. However, vaccine hesitancy and misinformation sometimes hampered their valiant efforts. PAHO must continue to assist countries in implementing strategies to overcome such obstacles for the COVID-19 vaccination program and routine childhood and other immunization programs.

COVID-19 has had a devastating impact on all countries. Given the attention focused on the pandemic response, we risk losing gains already made in other areas of public health and face a significant worsening in the socioeconomic determinants of health. The COVID-19 experience has underscored the need to continue to advocate for resilient health systems; strengthen the first level of care using a primary health care approach; promote health in all policies; and revitalize essential public health functions.

Therefore, in 2021 we focused more on those areas of health neglected earlier in the pandemic. These 2021 annual reports chronicle the work in countries and subregions as we prepare for the post-pandemic era.

I sincerely thank our Member States, partners, and donors for working with us to address the challenges of COVID-19. We need to continue to collaborate closely in the complex task of ending the pandemic; tackling the inequities and inequalities in health that plague our Region; maintaining health high on the political agenda of all Member States; and championing health equity as the cornerstone for sustainable development to ensure that we leave no one behind.

Dr. Carissa F. Etienne
Director of the Pan American Health Organization
MESSAGE FROM THE DIRECTOR OF THE SUBREGIONAL PROGRAM

Despite myriad challenges in 2021, the Caribbean has realized significant achievements in public health. Amid lockdowns and travel restrictions, PAHO and its partners strived to secure the region’s access to adequate immunization supplies through COVAX and bilateral agreements, as well as the PAHO Revolving Fund. PAHO subregional technical staff, working through intergovernmental bodies and public health partnerships, provided the latest pandemic information and epidemiological guidance and recommendations of COVID-19 vaccines and medicines, as well as test kits for viral detection, and supported the pandemic response with efforts to strengthen Human Resources for Health (HRH) and addressed COVID-19 vaccine hesitancy in the Caribbean.

The PAHO Subregional Program Office for the Caribbean (SPC CRB) supported activities on other communicable diseases as well, such as the assessment of viral hepatitis data, policies and service delivery in the Caribbean, and advances in high-impact innovations for HIV prevention including HIV self-testing and pre-exposure prophylaxis (PrEP). The Subregional Office also focused on noncommunicable diseases (NCDs) in the Caribbean in view of the consequences of NCDs comorbidity during the pandemic, with activities that led to advances in the areas of health-related law and tobacco control.

In 2021 there was increased interest from countries, partners, and donors to implement initiatives related to the broad spectrum of critical public health priorities in the Caribbean. SPC CRB continued cooperating with the subregion on establishing strong and resilient health systems with a new academic program, new tools and capacity building for health financing systems and reforms, and digital resources and the regulation of quality medicines and vaccines. In addition, gaps regarding the impact of climate change on health in Caribbean small island developing states (SIDS) were addressed via the creation of a climate and health consortium for the Caribbean that led to papers and conference presentations on Caribbean SIDS, including the 2021 United Nations Climate Change Conference (COP26).

I am pleased to present in this annual report important contributions of the work of the Subregional Office, in collaboration with Caribbean governments and other partners, toward achieving national and subregional health and development goals as we enter 2022 and celebrate the 120th Anniversary of PAHO.

Dean Chambliss
Subregional Program Director, Caribbean
A baby receiving routine checks at a local health center in Dominica.
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HIGHLIGHTS

- As the COVID-19 pandemic continued to have an impact on most countries globally in 2021, the PAHO Subregional Program Coordination Office for the Caribbean (SPC CRB) provided support to Caribbean countries and territories, especially on assessing and addressing vaccine hesitancy, as well as procurement, delivery, and pharmacovigilance of vaccines, treatment recommendations, and diagnostic polymerase chain reaction (PCR) kits.

- In 2021, SPC CRB renewed its technical cooperation for development of strong and resilient health systems in the context of the pandemic, focusing on a new academic program in health policy and health systems, new tools and capacity building for health financing systems and reforms, digital resources, and regulation of quality medicines and vaccines.

- Recognizing the importance of climate change and health, which particularly affects Caribbean countries, SPC CRB implemented its largest project in this area to address gaps specific to the Caribbean small island developing states (SIDS). PAHO supported the development of a wide-ranging climate and health consortium for the Caribbean in 2021, with papers and conferences on Caribbean SIDS, including at the 2021 United Nations Climate Change Conference (COP26), as well as the implementation of evidence-based approaches to mitigating against and adapting to the effects of climate on health.

- The non-pandemic communicable diseases agenda remained important in 2021, as viral hepatitis data and policies and service delivery in the Caribbean were assessed. In addition, high-impact innovations for HIV prevention (HIV self-testing and pre-exposure prophylaxis [PrEP]) were advanced to reduce HIV infection among key populations.

- Based on the documented consequences of noncommunicable diseases (NCDs) comorbidity during the pandemic, added to the already high NCD burden in the subregion, where these diseases cause 80% of all deaths, the Subregional Office prioritized the NCD agenda with activities that led to advances in the areas of health-related law and tobacco control.

- As part of the life course approach to building health for people of all ages, this year the Subregional Office supported efforts toward improving the health of adolescents and youth, including sexual and reproductive health, adolescent pregnancy prevention, COVID-19 vaccine acceptance, and partner violence among youth.
The second year of the COVID-19 pandemic saw the advent of widespread vaccine hesitancy (and in some cases opposition) in Caribbean countries and territories, many
The two waves of COVID-19 infections with successive variants nearly overwhelmed the health systems in several countries. The tension between public health concerns and economic priorities became even more acute in 2021 than in 2020 as “pandemic fatigue” set in. The SPC CRB Office provided the most accurate and up-to-date information and guidance to partners and countries, in order to inform policy decisions and public health measures. Subregional technical staff were authoritative sources for the latest pandemic information and epidemiological guidance from PAHO, working through intergovernmental bodies and public health partnerships to provide the timeliest technical analysis and cooperation.

As the pandemic revealed the need to strengthen Human Resources for Health (HRH), policies to address this were developed by the HRH Action Task Force for the Caribbean and PAHO, with support from CARICOM. Interventions to strengthen HRH in responding to COVID-19 and other emerging pandemics in the Caribbean, and addressing COVID-19 vaccine hesitancy among healthcare workers in the Caribbean, were approved by ministers of health and chief medical officers at the 41st CARICOM Council for Human and Social Development (COHSOD) meeting in October.

To inform strategies to address vaccine hesitancy, PAHO published in October an analysis on concerns, attitudes, and intended practices of healthcare workers to COVID-19 vaccines in the Caribbean, based on a mixed-methods survey conducted by PAHO in April and May among 1200 physicians, nurses, and other healthcare workers from 14 countries. The survey results included in the publication were shared at forums including heads of state, ministers of health, chief medical officers, and the regional nursing body. The findings of this analysis supported communication strategies and policy development.

PAHO also prioritized actions to identify gaps in pandemic response resources. In December, a working group composed of PAHO advisors and consultants and technical staff from the Saint Lucia Ministry of Health and Wellness was organized to implement a COVID-19 forecasting tool to assess short-term financial needs and gaps in capacity to respond to the pandemic. A joint briefing with various scenarios was prepared and delivered to the Minister. In addition, to establish subregional regulatory capacities for emergency response, PAHO provided technical support to the Caribbean Regulatory System (CRS) to develop its Emergency Use Recommendation guideline. Following this guideline and using the WHO Collaborative Review Procedure, nine COVID-19 vaccines, one medicine for COVID-19 treatment, and one PCR test kit for SARS-CoV-2 detection were recommended for CARICOM emergency use by the CRS.

Additionally, the technical summaries and templates developed by the CRS enabled countries without regulatory authorities to make timely and informed decisions about procurement and donations of COVID-19 vaccines. Subregional pharmacovigilance was also strengthened thanks to the introduction by VigiCarib of an online reporting form for adverse events following immunization (AEFI), with a total of 75 COVID-19 vaccine-related AEFIs reported. PAHO supported the dissemination of these data as part of information sharing to the region.

of which are still struggling to achieve sufficient vaccine coverage even though vaccines were widely available in the region at the end of 2021.
The broad realization that the best way to effectively stop a pandemic is through development of strong and resilient health systems opened the door for SPC CRB to renew its technical cooperation in this area.
Therefore, the Office created a new academic program in health policy and health systems, as well as new tools and capacity building for health financing systems and reforms in collaboration with the University of the West Indies (UWI) Center for Health Economics (CHE), including digital resources for the health sector and regulation of quality medicines and vaccines.

New academic program in health policy and health systems

PAHO, in collaboration with UWI, developed a new diploma/certificate in Health Policy and Health Systems. This 27-credit academic program is the only one of its kind in the subregion, offering four new courses, four that were updated from UWI, and one adjusted from a course in the Caribbean Node of the Virtual Campus for Public Health (VCPH). The course on Critical Care Nursing, designed by UWI in partnership with PAHO, attracted 31 nurses from Antigua and Barbuda, Barbados, Belize, Dominica, Guyana, Suriname, and Trinidad and Tobago. The course was highlighted in the WHO Stories from the Field and in an article published in June 2021 in the magazine Talent Development as critical to the support for the COVID-19 response in the Caribbean.

Health financing

To support the development of health financing reforms and to evaluate and monitor health financing systems, an agreement between PAHO and the UWI Center for Health Economics (CHE) led to various ad hoc studies, instruments, tools, and capacity-building training and workshops conducted and implemented across five Member States of the Organization of Eastern Caribbean States (OECS). Among these, a series of training and capacity-building workshops generated a pool of experts within UWI–CHE. These activities sought not only to support the implementation of specific technical cooperation activities but, more broadly, to create the necessary long-term expertise in the region to ensure a pool of experts is available to support PAHO’s analytical work in health financing.

Digital resources

In 2021, the Caribbean Node of VCPH received about 4000 visits, mostly new users (86.2%). The total webpage visits were 13,184 and 6269 sessions, with Trinidad and Tobago, Dominican Republic, and Jamaica logging the most visits. Moreover, an open online course on health expenditure delivered by PAHO attracted approximately 75 participants from across the Caribbean region.

In December, following the policy on Cooperation among Countries for Health Development (CCHD), PAHO hosted a virtual tour for technical cooperation between Belize and Uruguay. This initiative was implemented to extend knowledge about the structure, organization, and management of Uruguay’s health services and to assist Belize in the development of its health sector.
Access to safe, effective, and quality medicines and vaccines

In 2021, there was an increased uptake of the Caribbean Regulatory System (CRS) recommendations. Thanks to 76 new recommendations for marketing authorization made by the CRS, 26 Caribbean countries gained increased access to safe, effective, and quality medicines and vaccines. At least two countries in the region (the Bahamas and Belize) amended or developed legislation and/or guidance that recognized the CRS as a reference authority for authorization and/or importation. A review on assessment of viral hepatitis data, policies, and service delivery in the Caribbean emphasized hepatitis B within maternal and child health (including national immunization data and services), and hepatitis B and C at the primary care level. Based on the findings, which include limited strategic information on viral hepatitis and the criteria for the elimination of hepatitis B and C as public health problems, PAHO is recommending strategies for the strengthening and expansion of services, as well as mathematical modeling to determine a country’s attainment for the elimination of mother-to-child transmission (EMTCT) of hepatitis B.
The non-pandemic communicable disease agenda remained important in 2021, when viral hepatitis data, policies, and service delivery in the Caribbean were assessed. High-impact innovations were advanced.
for HIV prevention (HIV self-testing and pre-exposure prophylaxis) to reduce HIV infection among key populations.

HIV prevention

The subregion is advancing with the implementation of two high impact innovations for key populations. These are HIV self-testing (HIVST) and the use of pre-exposure prophylaxis (PrEP) and non-occupational post-exposure prophylaxis (nPEP) to reduce HIV infection among key populations. At the end of 2021, five additional countries (Antigua and Barbuda, Belize, Guyana, Haiti, and Jamaica) were implementing PrEP services at varied levels, as opposed to only two countries (the Bahamas and Barbados) in 2020. Both HIVST and PrEP are offered within the framework of combination HIV prevention and include screening and diagnosis of sexually transmitted infections (STIs), particularly syphilis, hepatitis B and C, and the monitoring of HIV prevention services for the target population.

PAHO offered technical support to the countries to estimate the number of individuals in the key populations (men who have sex with men, transgender persons, and sex workers) that would access the services, as well as the cost of providing PrEP, allowing for national planning and budgeting. In addition, PAHO collaborated with Pan Caribbean Partnership against HIV/AIDS (PANCAP) to develop a package to support countries to establish and implement quality services for PrEP and nPEP in order to achieve standardization of the PrEP service across the region. The comprehensive package includes generic clinical guidelines developed for the Caribbean, clinical forms, PrEP registration and monitoring tools, as well as communication materials. The comprehensive package was developed to ensure the standardization of the services and data collection across all countries in the Caribbean. This will allow for future analysis of services and reduction of new HIV infections among key populations in the region.

Viral hepatitis

To determine the readiness of countries to advance the elimination of viral hepatitis as a public health problem, including EMTCT of hepatitis B, PAHO conducted a review and assessment of viral hepatitis data, policies, and service delivery in the Caribbean. This review also emphasized hepatitis B within maternal and child health (including national immunization data and services), and hepatitis B and C at the primary care level. Based on the information collected and gaps identified, PAHO will recommend strategies for strengthening and expanding the appropriate services.
SPC CRB built on the documented consequences of noncommunicable diseases (NCDs) comorbidity during the pandemic to revitalize the NCD agenda in the Caribbean, with notable advances in the areas of health-related law and tobacco control.
The Caribbean Public Health Law Forum

PAHO and the Caribbean Court of Justice Academy for Law (CAFL) launched the Caribbean Public Health Law Forum (CPHLF), designed as a collaborative space to advance the use of law for NCD risk factors, on 30 June 2021. The Forum’s Steering Committee, which comprises multiple institutions, including PAHO, the Healthy Caribbean Coalition (HCC), CARICOM, the UWI Cave Hill Campus Law and Health Unit, and CAFL, developed draft Rules of Procedure as well as the terms of reference of the Forum. These were subsequently finalized and approved. Once the virtual platform to facilitate communication of the Forum was developed within the PAHO VCPH, the first and second business meetings of the Forum took place.

The Forum’s membership comprises representatives of CARICOM institutions, civil society, academia, and delegates from ministries of health and legal affairs. Several priority areas were determined, with participants committed to working together to contribute to the development of law and NCDs. Finalized discussion papers highlight the role of community law in advancing NCDs, with a focus on tobacco control. Branding of the Forum has since been finalized.

Tobacco control

A collaboration established between PAHO, HCC, and UWI within the framework of the Forum produced several outcomes that will prove beneficial to the Caribbean countries in terms of the development of their tobacco control policies across various sectors. The resulting documents were an analysis of national NCD commissions, including entry points for tobacco coordinating mechanisms (Tobacco Control and the Blue Economy; Tobacco Control and the Tourism Sector); four intersectoral policy briefs (Tobacco Control and the Role of Ministries of Education; Tobacco Control and the Role of Ministries of Finance; Survey of People Living with NCDs and the Impact of COVID-19 [report and discussion paper]); and two tobacco control case studies (Case Study on Implementing Smoke-Free Environments in Saint Lucia; Case Study in relation to Antigua and Barbuda).

Additional initiatives were undertaken to facilitate the development of tobacco control laws and the strengthening of tobacco control policies in the region. A tutor-based course was developed on the PAHO VCPH on Developing Tobacco Control Legislation in the Caribbean, with contents and educational resources to facilitate its implementation developed by CAFL and NextGenU.org, in collaboration with PAHO. The course, launched in July and completed in October 2021, saw the registration of approximately 25 participants across the Caribbean. Furthermore, PAHO provided direct technical support to a number of Caribbean countries to assist with the development of their tobacco control legislation and smoke-free policies.
The Subregional Office, still in the context of the pandemic in 2021, continued prioritizing a life course approach to building health for people of all ages, with an emphasis this year on advancing the health of
adolescents and youth, including sexual and reproductive health, adolescent pregnancy prevention, COVID-19 vaccine acceptance, and partner violence among young people.

Interagency Committee for Women’s, Children’s, Adolescents’, and Youth Health

In 2021, SPC CRB collaborated with the regional Interagency Committee for Women’s, Children’s, Adolescents’, and Youth Health and youth advocates for development and implementation of a work plan to operationalize the road map developed in 2019 at the first congress on adolescent and youth health. Two key components of the work plan aimed to support the implementation of the road map were a communication strategy and a monitoring framework.

A sexual and reproductive health framework for the Caribbean

With the support of the regional Interagency Committee, SPC CRB contributed to the development of a sexual and reproductive health framework for the Caribbean, focusing on the life course. The framework will support the implementation of the regional plan for women’s, children’s, and adolescents’ health in the Caribbean, the road map to advance the health of adolescents and youth, and the integration of HIV/STI into sexual and reproductive health services.

Youth-focused campaigns

In collaboration with UWI, SPC CRB supported the development of youth-led awareness and advocacy campaigns with a focus on adolescent pregnancy prevention, COVID-19 vaccine acceptance, and partner violence among youth. In addition, based on an established curriculum of UWI (Mona Campus), PAHO contributed to capacity building of regional health care providers from selected countries toward good quality and efficient care services for the target population.
Ciladelle Glen channels passion for youth development with psychological first aid training

Adolescent health and wellness have been thrust into sharp focus across the Caribbean region since the advent of the COVID-19 pandemic. For healthcare professionals such as Ciladelle Glen, the average medical routine has been far from normal during this period. Utilizing and directing available resources to children and their parents are crucial in keeping families safe, calm, and hopeful during a time of uncertainty, fear, and unease.

Glen underscores the importance of the integrated recommendations for psychological first aid (PFA) as a strategic front-line step for self-learning for professionals and the wider society. Her impassioned work ethic is well known among her peers at the Ministry of Health’s Adolescent Health Department, where she works as a coordinator to shape the development and implementation of programs and services to address adolescent health across her homeland of Guyana.

Through PAHO’s Virtual Campus for Public Health, Glen joined the ranks of thousands of healthcare professionals to participate in the 10-hour PFA course that applies the tools to provide suitable initial and critical responses to Guyanese citizens experiencing psychological distress after a crisis situation. With over 550,000 persons already benefiting across Guyana’s health facilities where training participants work, Glen testifies to the usefulness of the course and has already implemented key methods in her day-to-day professional methodologies.

“I really liked the part of the training that reminded us to prepare, look, listen, and link. The PFA course taught me that it is very important for us to use those four critical action points because children would not just be experiencing mental health issues, but other social issues that require specific support and resources,” she outlined.

Glen maintains that the PFA course has been of tremendous value for front-line workers in preparing to connect participants to the adequate resources that they need.
Welfare of health-care workers became a priority during the COVID-19 pandemic.
© iStock
Overcoming the fear of working in an intensive care unit

The COVID-19 pandemic exposed weaknesses in Caribbean countries' health systems and their health workforce, among which a key problem identified was a shortage of critical care nurses. In response to the need to train nurses with the right skills and competences to provide critical nursing care in intensive care units (ICU), UWI in partnership with PAHO developed a Critical Care Nursing introductory course. A cadre of 82 nurses across seven Caribbean countries took part in a 4-week training course to learn new skills and make significant contributions to hospitals across the Caribbean providing critical care to COVID-19 patients.

One of the preceptors was Rehemia Reyes, Head Nurse of Adult ICU at the Eric Williams Medical Sciences Complex in Trinidad and Tobago. “One of the challenges that we faced during this intensive care introduction is that nurses were totally unfamiliar with the ICU environment. For most of them, it was their first time to step into the ICU, which is very intimidating because of all the unfamiliar equipment,” she said.

According to two participants, “After this training I will be able to give holistic care to all my patients. I’m no longer intimidated by the ICU and equipment there. I can now say I’m very confident in myself and the care I will be giving to any patient, and because of this I will be applying to pursue the critical care course next year in my country. I’ll also be teaching my colleagues.” Another participant stated that, “This training has allowed me to analyze and communicate more with the critically ill patients as well as communicate better with my colleagues … I became brave in nursing the patient instead of being fearful.”

During an emergency mission to assess health care services and the COVID-19 response in Dominica (September 2021), PAHO observed nurses who participated in the course supporting efficiently and effectively the work of critical care nurses in the COVID-19 complex.
The importance of climate change and health has recently gained a greater profile than ever globally.
SPC CRB has underscored the need to address gaps specific to the Caribbean small island developing states (SIDS) seeking to implement evidence-based approaches to mitigating against, and adapting to, the effects of climate on health. SPC CRB implemented its largest project in this area, with funding from the European Union, including training, technical cooperation, and policy advice across the subregion. Working toward these goals, PAHO supported the development of a wide-ranging climate and health consortium for the Caribbean in 2021 with the aim of forming a network for practice, research, and fundraising.

The successful work of this new alliance this year led to several outcomes, such as papers and conferences that highlight globally the need to address gaps specific to the Caribbean SIDS, particularly the effect of climate on health of vulnerable individuals. In addition, this consortium implemented evidence-based approaches to mitigating against and adapting to the effects of climate on health, elicited consultation and feedback from Caribbean stakeholders, encouraged multisectoral and collaborative action, and provided concrete approaches to climate and health in the Caribbean. Moreover, a virtual conference event, Climate Change and Health in Small Island Developing States: Focus on the Caribbean, was held on 5–8 October 2021. This event mobilized individuals at all levels and generated interest from donors for climate and health projects in the Caribbean. The committee also presented findings at the 2021 United Nations Climate Change Conference (COP26) to promote expanding climate and health work in the subregion.
ENVIRONMENT AND HEALTH

STORIES FROM THE FIELD

When is too much, enough?

The small-scale farmer, florist, and entrepreneur stares at her farm in grief once again after hurricane Elsa hit Saint Lucia on 2 July 2021. Another storm has ripped off six shed cloths from six greenhouses where she grows orchids and anthuriums. “It is early in the 2021 hurricane season, and we were expecting a tropical storm,” said Beverly Charlemagne. “So my staff left early, and I did not take the usual precautions of taking down the plastics from the greenhouses and securing them, because I did not anticipate this rapid intensification overnight.”

Notwithstanding, she admits that she did not sleep on the night of 1 July. Insomnia kicks in every time there is an impending storm. She says, “It always happens. I stay to keep watch, because I get nervous about damage to my farm, my crops, my flowers, my greenhouses. I remember one year during a storm, an electrical pole located on my property caught fire. Luckily, I was home to quickly turn off my main switch to avert any possible impact on my life and that of my family. Since then, I can’t sleep once there is a storm or hurricane advisory.”

The hurricane season comes yearly from June to November in Saint Lucia, which faces a high risk of tropical cyclones and landslides and ranks fifth among small states for climate-induced events. Saint Lucia’s Director of Meteorological Services, Andre Joyeaux, tells us that on 2 July hurricane Elsa developed rapidly from a storm, much like hurricane Tomas did in 2010. “We call it rapid intensification. Fortunately, it was a category 1 hurricane when it struck the island, so the usual related panic and distress was minimized,” he explained. Hurricane Elsa packed winds of 75 mph and lasted 8 hours.

Promoting mental well-being and good coping techniques is of growing importance this hurricane season in a pandemic year. Therefore, PAHO and SPC CRB had launched the “Stronger Together 2020” campaign to reduce the stigma about seeking mental health and psychosocial support and conveying the basic principles of psychological first aid (PFA), which helps people to feel calm and able to cope in difficult situations, and promote community support. This initiative is one among several being undertaken by PAHO on enhancing the Caribbean’s health resilience to climate change. Another PAHO initiative, the EU/CARIFORUM Climate Change and Health Project aimed at improving the capacity of Caribbean countries to reduce the negative impacts of climate change on health, using the One Health approach.

As Beverly Charlemagne picks up the pieces from the damage to her farms, investments, and livelihoods, it reminds us that climate change is not going away any time soon unless high-income countries work to reduce emissions and stay within the 1.5 °C target.
PAHO’s reports on the budget and its financing cover a biennial period. Hence, the financial information shown in this report corresponds to the 2020–2021 biennium.

In 2020–2021, the Subregional Program Office for the Caribbean (SPC CRB) was 81% funded versus its allocated budget ceiling (~US$ 7 million vs US$ 8.6 million) for base programs. Of the funding received, ~US$ 6 million or 86% was implemented, with the remaining ~US$ 1 million carried forward into 2022. The largest program area for SPC CRB was climate and health, with significant voluntary contribution funding from the European Union to implement part of a Caribbean-wide project to address the impact of climate change on health and health systems. Significant resources were also dedicated to health emergencies (both in the base segment and “special programs”) in the context of the COVID-19 response, which continued to dominate PAHO’s work in the Caribbean in 2021. Noncommunicable diseases remain among the highest priorities in the Caribbean, as reflected in funding and implementation, since PAHO supports the development of public policies to address risk factors at the subregional and national levels. Lastly, significant funding was spread across various health system-related health outcomes, including medicines and technologies, HRH, and health financing.
Figure. Outcome budget allocations, financing, and implementation: Base programs

In millions of US$

- Expenditures
- To be implemented
- Financing gap
LOOKING AHEAD

The response to the pandemic continued to be a priority in 2021. COVID-19 nearly overwhelmed Caribbean health systems and hindered the provision of routine health services, while also creating challenges in securing essential goods and services amid a disrupted international supply chain. In 2022, Caribbean countries are looking to reverse the detrimental impact the pandemic has had on regional economic development.

The pandemic forced governments to increase public debt to levels not seen in several decades. The funds have largely been used to prevent economies from collapsing, rather than to increase public spending. In the Caribbean, governments on average account for approximately 54% of all health expenditures, and therefore a healthy economy and tax base are key to supporting strong health systems going forward.

Despite myriad challenges in 2021, the Caribbean has made considerable progress. Amid lockdowns and travel restrictions, over the past year PAHO strived with partners to ensure that the region had access to adequate vaccines and other supplies through COVAX and several bilateral agreements. For 2022, the challenge is COVID-19 vaccine demand generation. Out of the 13 countries and territories in the Americas that have not yet reached the WHO goal of 40% vaccination coverage, 10 are in the Caribbean, making the region particularly vulnerable to COVID-19 transmission.

The pandemic was made more severe by the epidemic of NCDs, which continues to rise, causing 80% of all deaths in the region. The implementation of legal and regional policies to address risk factors for NCDs and childhood obesity, coupled with the development of expert mental health sensitization and coping tools, health financing reform, and approaches to mitigate against and adapt to the effects of climate change on health, are some of the main challenges on which SPC CRB will continue to focus in 2022.

SPC CRB looks forward to new initiatives including expanded strategic partnership with UWI, building on the already successful collaborative relationship. We will also strengthen and formalize SPC CRB’s relationship with the Caribbean Development Bank to jointly promote economic and social development in the Caribbean, and will be executing vaccine acceptance strategies on behalf of Global Affairs Canada. The relationship with CARPHA continues to develop and remains a high priority in 2022. SPC CRB will continue to support CARICOM through various high-level collaborations around health governance, and efforts to work with other sectors in CARICOM will be enhanced.
SPC CRB will maintain its work toward increasing vaccine acceptance, while building trust in immunization programs and the wider health care system. This will include more targeted, community-based communication products and interventions, including among healthcare workers, while reminding Caribbean people of past immunization successes in the Caribbean region.

In 2022, when we will celebrate the 120th Anniversary of PAHO, SPC CRB will work with the Caribbean countries on established priorities, such as supporting equitable access to medicines and technologies, including vaccines, for pandemic and communicable disease; building resilient and sustainable health systems that support economic development; strengthen social protection mechanisms, as well as legal and regulatory frameworks, to better respond to public health crises and their consequences; a renewed and stronger focus on health financing given its direct influence on health inequities and ultimately the health and well-being of the population; strengthening mental health and psychosocial support during crises; mitigation and adaption to the effects of climate on health; and empowerment of adolescents and youth to further their social and economic development.

The challenges were many in 2021 while the Caribbean is emerging from the societal and economic ravages of the pandemic. The past two years have highlighted the inextricable link between health and economic prosperity, revealed existing inequities and disparities, and proved that health sector responses alone cannot achieve health for all, as a healthy economy depends on a healthy population. All sectors must work together toward common social, economic, and environmental objectives.

Lastly, we want to thank our staff, our partners and the SPC CRB teams for another year of focused and dedicated work with countries in the region toward achieving PAHO’s goal of improving the health and quality of life of all persons in the Americas.
Advancing health of young people remained a priority during 2021.