

COVID-19

PAHO/WHO Response. 23 March 2021. Report ° 47

HIGHLIGHTS

Vaccine efforts accelerate in the Americas through COVAX.

Deliveries of COVID-19 vaccines are picking up speed across the Americas as more countries prepare for the imminent arrival of doses procured through COVAX, the global mechanism for equitable distribution of vaccines. Distribution can be tracked through the [COVID-19 Vaccination in the Americas database](#).



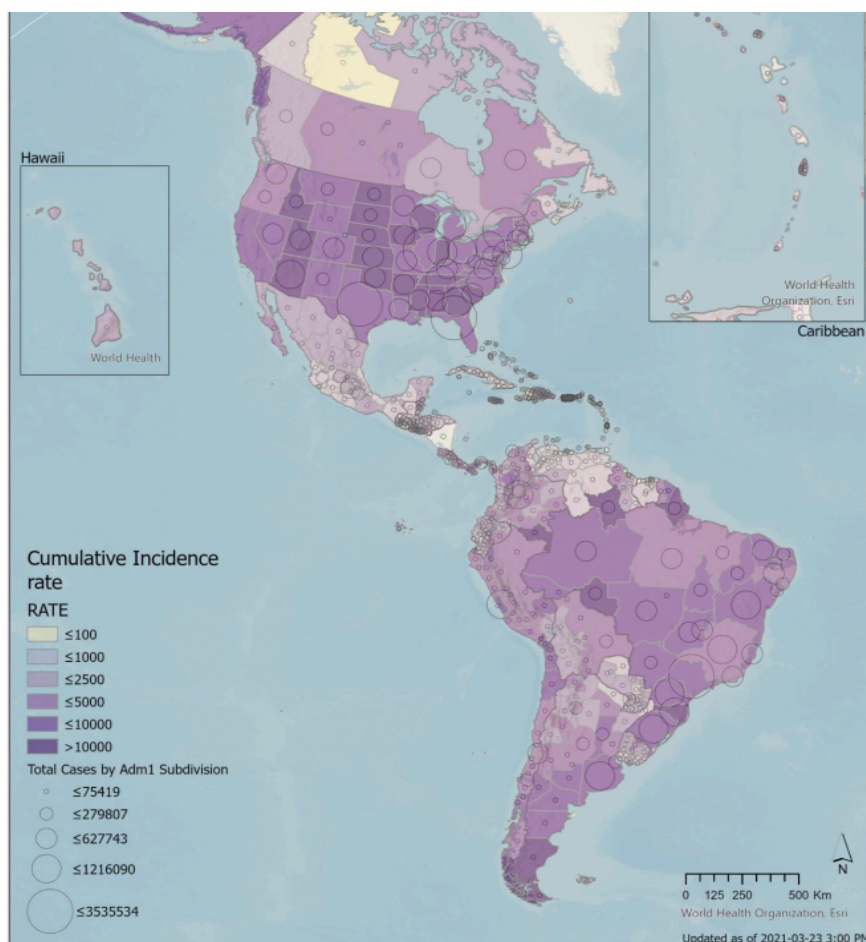
Figure 1: Administration of the COVID-19 vaccine in Honduras. Source: PAHO

Infection prevention and control health-care facility response



The Organization designed a [self-assessment tool](#) for acute health-care facilities (i.e. tertiary and secondary levels) to help identify, prioritize and address the gaps in infection prevention and control (IPC) capacity in managing the response to COVID-19. The same tool can be modified for use in long-term care facilities.

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 23 March 2021



SITUATION IN NUMBERS IN THE AMERICAS

as of 23 March 2021 (15:00)

54,394,715

Confirmed cases

1,309,398 Deaths

56 Affected countries / areas / territories

155,830,298

Vaccination doses administered

RESPONSE PILLARS



Coordination, Planning, and Monitoring



Risk Communication and Community Engagement



Surveillance, Rapid Response Teams, and Case Investigation



Points of Entry, International Travel, and Transport



National Laboratories



Infection Prevention and Control



Case Management



Operational Support and Logistics



Maintaining Essential Health Services during the Pandemic













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

[Link to global operational situation reports](#)



World Health
Organization

Key Figures: The Americas' Response to COVID-19

PAHO Response	 131 Technical guidelines and recommendations developed or adapted from WHO	 19.6M COVID-19 PCR tests 6.9M Ag-RDTs sent* to 36 countries and territories	 >249 Virtual / in-person regional and country trainings on testing, tracking, care, and more	PAHO has sent 156 PPE shipments to 36 countries and territories	
				 6.2M Gloves	 2.1M Gowns
Regional Readiness				 40.5M Surgical & Respirator Masks	 371k Goggles
	 32/35 # Countries with national COVID-19 Preparation and Response Plans	 38/51 # Countries and territories with molecular detection capacity to diagnose COVID-19	 21/35 # countries using existing SARI/ILI surveillance systems to monitor COVID-19	 17/22 # Reporting countries where at least 50% of health facilities have triage capacity	 33/35 # Reporting countries with national IPC / WASH plans for health facilities

PAHO/WHO Response (9 March to 22 March 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.

Vaccine distribution in the Americas

Regional

As of 23 March, more than **155.8 million people** have received a COVID vaccine in the Americas. PAHO released the [COVID-19 Vaccination in the Americas database](#), which reports on doses administered by country. PAHO has **distributed 2.16 million doses** to the Americas and **procured 1.2 million** more through the COVAX facility. Additionally, PAHO continued to provide strategic direction to those countries in the region which are anticipating the pending arrival of vaccines. PAHO's Director, Dr. Carissa Etienne reported that COVAX informed participating countries that a total of 28.7 million doses of vaccines would be delivered by May 2021.



Figure 2: Bolivia received its first COVID-19 vaccine doses through COVAX. Source: PAHO

Successfully deploying vaccines for COVID-19 requires countries to have detailed plans which factor in considerations ranging from regulatory and logistical issues to staff needs and ensuring equitable distribution, while targeting persons most at risk of infection (e.g., frontline health workers, older persons, and those with underlying conditions).

PAHO is supporting countries throughout this planning process. **Twenty-three countries** shared their **national vaccine deployment plans (NVDPs)** with PAHO for feedback, and **48 countries** have completed the [Vaccine Introduction Readiness tool \(VIRAT\)](#), with a [dashboard](#) to provide a bird's eye view on regional readiness.

Regional support also includes work with countries interested in gaining access to possible vaccine candidates through the **COVAX facility**. The **PAHO Revolving Fund**, which has four decades of experience procuring and distributing vaccines, plays a key role in this process, supporting countries along the way. Through the Revolving Fund, 41 countries and territories in the Americas have been able to pool their resources to purchase high-quality vaccines, syringes, and related supplies for their populations at lower prices than they would receive on their own. This is complemented by the Organization's ongoing efforts to generate COVID-19 vaccine demand forecasting for countries participating in the Revolving Fund.

PAHO provides technical cooperation to countries seeking to access the COVID-19 vaccine through the COVAX Facility, including those which selected **advance market commitment (AMC)** funding to cover their doses. This included sharing recommendations with national authorities on steps to ensure that their NVDPs met necessary criteria to roll out vaccines to priority populations.



PAHO released the **Guide for the preparation of a risk communication strategy for COVID-19 vaccines: A Resource for the countries of the Americas**, aimed at facilitating the preparation of a risk communication and community engagement strategy for vaccination against COVID-19. This guide aims to strengthen the communication and planning capacities of the ministries of health and other agencies in charge of communicating about new COVID-19 vaccines in the Americas.

PAHO continues to work with all its Member States to ensure country readiness to deploy these vaccines, with the goal of providing them to **at least 20% of the population in each country participating in COVAX to protect those most at risk for severe forms of COVID-19**.

In addition to written guidance, PAHO also provides webinar trainings to Member States. In **Haiti**, vaccine training sessions were planned for 350 community health workers as well as 160 personnel of care institutions. Access the full list of past and future training sessions for all member states **on PAHO's website**.

Country

The Organization is a key ally and technical advisor in working with countries of the Americas to develop NVDPs, and to ensure systems are in place for a smooth rollout of COVID-19 vaccines. PAHO forms part of **Jamaica's** National Vaccine Commission chaired by the Minister of Health. PAHO facilitated the arrangements for the arrival in Jamaica of the first 14,400 doses of COVID-19 vaccine from the COVAX facility, the first country in the Caribbean to receive COVAX doses. PAHO is also working with countries to ensure the equitable distribution of vaccines.



Country-level Coordination, Planning, and Monitoring

Regional

PAHO continues 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 countries' IMSTs as they coordinated and monitored their national response activities.

Regulatory aspects for COVID-19

PAHO provides assistance to Member States on a daily basis in the area of regulatory preparedness to expedite processes for vaccine deployment. As part of the COVAX Facility allocation mechanism, support includes presenting information on technical documents in Member States' required 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. The Regional Database of HTA Reports of the Americas

(BRISA) has 292 reports available in its COVID-19 section.

PAHO continues to maintain a list of 73 prioritized IVDs for proprietary and open platforms. Additionally, the Organization monitored alerts and updates as part of its post-market surveillance on IVDs, ventilators, Personal Protective Equipment (PPE), and other items to provide the most updated, timely information to regulatory authorities.

The Organization collaborates with national regulatory authorities from across the Americas to share recommendations, considerations, and evaluations on products that would be used to manage COVID-19 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 terms of monitoring, in **Chile** PAHO provided periodic systematization of epidemiological and communication information on the country's COVID-19 situation, for the preparation of technical reports, utilizing PAHO's epidemiological management tools.

COVID-19 Courses Available on PAHO's Virtual Campus for Public Health (SPA-POR)

Emerging respiratory viruses, including COVID-19: detection methods, prevention, response, and control (SPA, POR)

COVID-19 operational planning guidelines: for UNCT systems and other partners (SPA)

Standard precautions: Hand hygiene (COVID-19) (SPA)

Infection prevention and control (IPC) caused by COVID-19 (SPA, POR)

ePROTECT Respiratory Infections: Health and occupational health (SPA)

Course on the clinical management of Severe Acute Respiratory Infections (SARI) (SPA)

Severe Acute Respiratory Infection (SARI) Treatment Facility Design (POR)



Risk Communication and Community Engagement

Regional

As the communication needs of the Region evolve, PAHO continues to disseminate key messages across multiple platforms, and to respond to media enquiries. **Infographics** cover a range of issues related to COVID-19, from steps for preventing infection to tips for staying healthy and protecting mental health during this pandemic.

PAHO's Director, Dr. Carissa Etienne, delivered three press briefings during this reporting period. On **10 March**, the briefing focused on the **expansion of the COVID-19 vaccine rollout in the Americas**. Dr. Etienne welcomed this expansion and reported that PAHO was working closely with Member States to "accelerate access" throughout the region. PAHO continues to work with countries on all fronts. As the Revolving Fund extends its financial credit to facilitate procurement, PAHO also handles the logistics of vaccine purchase and delivery, including shipping.

The press briefing on **17 March** focused on the **acceleration of vaccine procurement through COVAX**. "For all these countries – even those which received small donations earlier this month – these COVAX deliveries will enable the start of steady vaccination efforts," Dr. Etienne said. "We are happy that vaccines through COVAX are being delivered but we recognize that the need for more vaccines and sooner is great in the Americas." Unfortunately, there is a bottleneck that prevents the simultaneous distribution of vaccines to the Americas because only two vaccine manufacturers are dispatching millions of doses to dozens of countries around the world. The Johnson & Johnson vaccine, which was recently authorized by WHO, promises to accelerate vaccination efforts with its single dose protection.

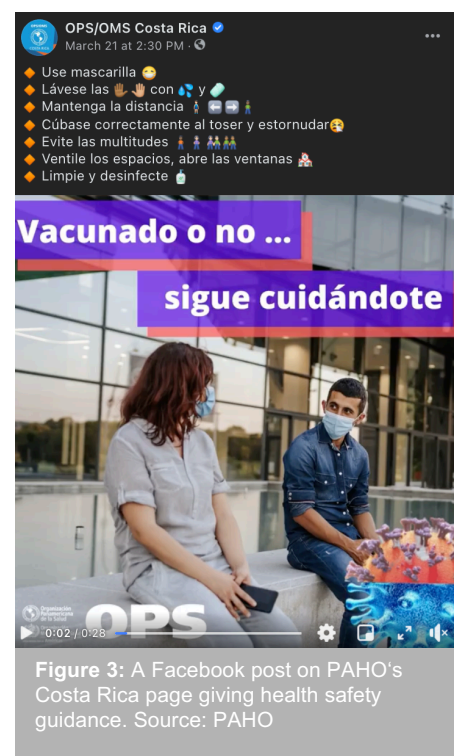
On **23 March**, the press briefing warned of a **COVID-19 surge in the Americas**. Even as COVAX delivered 2.2 million doses of vaccines, cases continued to rise particularly in South America. Dr. Etienne warned that “the COVID-19 virus is not receding, nor is the pandemic starting to go away.” Pointing out the Americas’ long history of successful immunization against polio, measles, influenza, and yellow fever, she said, “once our supply increases, there is not another region in the world better prepared to deliver vaccines swiftly and safely. Our health workers have special expertise driving large-scale vaccination campaigns that cover diverse geographies.” Dr. Etienne also reiterated that countries must maintain public health measures – hand washing, social distancing, and mask wearing. Even people who have been vaccinated should adhere to the measures.

At the time of this event, close to **155.8 million persons had been vaccinated in the Region** (albeit mostly in northern parts of the hemisphere), edging towards the over 700 million people who should be vaccinated to ensure a 70% coverage in this Region. In the Americas, **36 countries are participating in COVAX**. Ten are Advance Market Commitment (AMC) countries that will receive COVID-19 vaccines free of cost, while the rest are self-financing. PAHO urged countries to prioritize finalizing their COVAX contracts and grounding their vaccination campaigns in equity while striving to hire and train the staff necessary to conduct mass immunizations. PAHO is also supporting its country offices in creating strategic plans for communicating the distribution of COVID-19 vaccines through COVAX.

Country

PAHO Belize has aired COVID-19 public service announcements (PSAs) on national and local media stations and has developed PSAs specifically on vaccinations. Similarly, PAHO **Costa Rica** ran a **social media campaign on their Facebook** page featuring advice on how to wear medical masks correctly, the importance of social distancing, and hand washing tips.

In **Honduras**, PAHO **shared a video** on Twitter featuring vaccination success stories in order to support vaccination efforts. The video featured citizens being vaccinated with the recent shipment of COVAX vaccines.



Surveillance, Rapid Response Teams, and Case Investigation

Regional

PAHO has 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, the public can consult PAHO's **interactive dashboard** showing cumulative cases, deaths, cumulative incidence rate, new cases and deaths, as well as several other epidemiological indicators reported by countries and territories.

PAHO continues its **Event-Based Surveillance** (EBS) while also supporting countries to boost their **Indicator-Based Surveillance** (IBS). Efforts continued to ensure that countries **integrate COVID-19** into their routine severe acute respiratory illness / influenza-like illness (**SARI/ILI**) **surveillance systems**. To date, **21 countries** have integrated COVID-19 surveillance into their SARI/ILI systems.

PAHO also publishes [weekly reports](#) detailing trends in influenza and other respiratory viruses, as well as SARS-CoV-2 surveillance indicators. Meanwhile, PAHO continues to analyze trends in the Region, particularly through the collection of COVID-19 nominal data. Through the collection of case-report forms of COVID-19 cases, PAHO has been able to analyze 76% of reported cases and 53% of deaths.

Seroprevalence studies have provided the Region with invaluable data on how the virus has spread since the onset of the pandemic to date. PAHO maintains a [dashboard that shows seroprevalence studies in Latin America and the Caribbean](#), including information on individual studies ranging from the study design, sampling method, sample sizes, and other relevant information. **Updated evidence** was added during this period.

In collaboration with GOARN, PAHO has trained 31 countries and territories in the **Go.Data** app, and **23** are implementing this software. Go.Data is a tool to support suspect case investigation and management, display of transmission chains, and contact tracing. During this reporting period, PAHO worked with GOARN, and the U.S. CDC to strengthen the use of Go.Data in **Mexico**.

Country

PAHO teams have been deployed to municipalities in the inner state of **Brazil's Amazonas** to provide technical support on COVID-19 situation diagnosis, health surveillance, laboratory procedures, and health care assistance.



National Laboratory

Regional

Since the beginning of PAHO's response up to the date of this report, the Organization has provided primers, probes and/or PCR kits for over 9.1 million reactions/tests. To date, PAHO has provided approximately 512,950 swabs, 154 sampling kits, enzymes for around 990,000 reactions, among other critical material. PAHO also delivered molecular detection material and laboratory supplies (swabs, primers, probes, plastic materials, reagents, among others) to **Barbados, Ecuador, and Guatemala**. Additionally, Member States have procured **ten million reactions/tests** through [PAHO's Strategic Fund](#).

PAHO provided technical cooperation, including data review, troubleshooting sessions, and follow up calls, on laboratory diagnostics with teams from **Antigua and Barbuda, Bolivia, Dominica, Guyana, Honduras, Jamaica, St Kitts and Nevis, and Suriname**.

The Organization has delivered over 6.9 million [antigen-based rapid diagnostic tests \(Ag-RDTs\)](#) to sixteen countries, while ten countries have used the Strategic Fund to procure 4.2 million of these.

The WHO SARS-CoV-2 subnational **external quality assurance program (EQAP)** serves to provide laboratories with critical data to guide efforts to improve laboratory detection capacities. PAHO worked with **Brazil, Bolivia, Colombia, and Paraguay** to support their participation in this program.

SARS-CoV-2 variants of concern

Various SARS-CoV-2 variants have been identified thanks to global genomic sequencing. These include the variants that were first detected in the United Kingdom and in South Africa. Given the significant resource requirements needed to sequence all samples in the region to identify variants, PAHO continued 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, **twenty-one countries** are participating in the **COVID-19 Genomic Surveillance Network**, with reference sequencing laboratories in Brazil and Chile, visible at the [dashboard](#). This mechanism will be critical to tracking the spread or appearance of new variants of concern. PAHO is supporting the design of

12 epidemiological studies in **Brazil** to understand the patterns of transmission, reinfection, and the severity of cases from the different circulating variants.

PAHO **Bolivia** supported the implementation of biological molecular surveillance on variants.



Infection Prevention and Control (IPC)

Regional and Country

Health workers are one of the most at-risk populations for COVID-19 infection. PAHO provided technical cooperation to **Grenada** on IPC activities and the implementation of an education and training program.

PAHO conducted IPC trainings for 40 health workers in **Antigua and Barbuda** and 90 health workers in **Saint Lucia**.

Since March, early detection capacity in **Haiti** (triage and isolation when possible) has been set up in 171 centers and with the support of PAHO a total of 1,830 frontline workers have been trained in IPC and 520 regarding oxygen therapy.



Case Management

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 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. PAHO worked with facilities in **Brazil, Colombia, the Dominican Republic, and Mexico** to utilize this platform.

PAHO updated evidence for the [Ongoing Living Update of Potential COVID-19 Therapeutics: summary of rapid systematic reviews](#). The study synthesizes evidence of 86 therapeutics from 231 randomized controlled trials and observational studies.

Emergency Medical Teams (EMTs)

EMTs are invaluable when a country's health system is stretched beyond its 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](#).



Figure 4: Technical health specialists visit a health module for COVID-19 patients in Panama
Source: PAHO

In **Panama**, PAHO, in collaboration with EMTs, mobilized specialists to provide technical guidance on the operation and maintenance of health care facilities for the management of COVID-positive patients.



Operational Support and Logistics

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 to procurement of COVID-19 response goods, supplies, and equipment. This has entailed reviewing technical specifications of procured goods, ensuring correct shipping documentation for customs clearance, and supporting countries with quality assurance issues. WHO issued interim guidance on the rational use of PPE for COVID-19 as well as considerations during severe shortages.

In **Paraguay**, PAHO provided technical cooperation for the purchase of intensive therapy medication through PAHO's Strategic Drug Fund to aid the care of critically ill patients.



Maintaining Essential Health Services during the Pandemic

Regional and Country Expansion of services



Figure 5: Image from Apoyando la salud mental webinar.
Source: PAHO

To support **Honduras** as they address hurricanes Eta and Iota, PAHO is providing risk communications support and leading trainings on controlling infection and caring for mental health.

The COVID-19 pandemic has taken a significant toll on the mental health of this Region's population. Recognizing this challenge, the PAHO office in **Panama** held webinars for parents, caregivers, and teachers on supporting the mental health of children during the pandemic and 2021 school year. The trainings offer information and techniques for detecting signs of disruptive behaviors. More information, as well as the recordings, can be found on the [PAHO website](#).

Nutrition continues to be a central conversation in all countries as health officials consider the necessary measures to ensure food security during the pandemic. The COVID-19 crisis poses a threat to all components of the food system, placing at risk the nutritional well-being of the populations of

countries in Latin America and the Caribbean. PAHO joined with other UN organizations to release a [joint statement on the threat of COVID-19 to nutrition](#).



Research, Innovation, and Development

Regional

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 publication and ongoing research protocols from the region. This is the result of partnerships with WHO, Cochrane, McMaster University, Epistemonikos, and others.

With WHO, PAHO is supporting countries' participation in the **SOLIDARITY trial**, which aims to assess the efficacy of possible therapeutics for COVID-19. PAHO also continued to collaborate with WHO on developing a seroepidemiology study, **SOLIDARITY II**, to study the prevalence of the virus across multiple countries.

PAHO supported research on public health ethics and COVID-19 vaccines through a presentation in **Mexico** and in meetings with **Bolivia's** national regulatory agency, discussing topics ranging from priority-setting of scarce resources to the use of placebo in vaccine research.

PAHO also held an interagency meeting on health and migration in **Mexico** to coordinate and strengthen data collection related to the COVID-19 situation of the migrant population, asylum seekers, and repatriated persons.

PAHO/WHO's COVID-19 response was made possible in part due to generous contributions from the governments of Belize, Canada, Colombia, Japan, Korea, New Zealand, Spain, Sweden, Switzerland, the United Kingdom of Great Britain and Northern Ireland, the United States of America, as well as the Caribbean Development Bank, the Caribbean Confederation of Credit Unions, the Central American Economic Integration Bank, Corporación Andina de Fomento – Banco de Desarrollo de América Latina, the European Union, Fundación Yamuni Tarbush, the International Organization for Migration, the Inter-American Development Bank, the Rockefeller Foundation, the UN Central Emergency Response Fund, the UN Development Fund, the UN International Children's Emergency Fund, the UN Multi-Partner Trust Fund, the UN Office for South-South Cooperation, the World Bank Group, World Food Program, the World Health Organization and its donors, other small contributions and to the invaluable collaboration from our partners within the Americas and beyond. 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 Salomon Beda, Sony Latin Music and Global Citizens for their strategic partnership to help fight the pandemic.

As of 24 March 2021, PAHO received just over US\$300 million in donor contributions and firm pledges.

You can donate to support PAHO's response to COVID-19 at this [link](#).

CONTRIBUTE TO OUR RESPONSE

GAPS	CHALLENGES
<ul style="list-style-type: none"> • Surveillance systems: More 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. 	<ul style="list-style-type: none"> • 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. This has added additional pressure to countries undergoing complex political and socioeconomic transitions. • Competitive marketplace: Countries and organizations are competing for limited supplies due to global shortages of PPE and other items. • Managing infections in healthcare settings: Healthcare workers rely on PPE and other supplies to avoid infection. Global shortages are contributing to increasing cases and loss of life of frontline workers. • 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 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 essential 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.
- **Risk Communication:** The risk perception is still low in some countries/territories.
- **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 noncommunicable diseases (NCDs).
- **Stigma:** Countries must take steps to reduce stigma towards persons returning from abroad and others associated with 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.
- **Equitable Vaccine Distribution**



Figure 6: Officials gather to welcome the arrival of the first arrival of vaccines in Bolivia through the COVAX facility.
Source: PAHO