

COVID-19

PAHO/WHO Response. 5 November 2021. Report n. 63

HIGHLIGHTS

PAHO released the results of **Round Two of the National Pulse Survey on Continuity of Essential Health Services during the COVID-19 Pandemic** (February to March 2021) on 25 October 2021. The WHO/PAHO joint report notes that the average percentage of interrupted essential health services increased slightly from 44% in 2020 to 46% in 2021, which indicates that health systems in the Americas still face significant challenges almost two years into the pandemic. The 2021 survey was sent to 52 countries and territories in the Americas, and its findings provide information on countries' current experiences, the extent of disruptions in a set of tracer services, the reason for these disruptions, and mitigation strategies implemented by countries. The survey results are important as they provide information to support decision-makers to take stock of current challenges and serve as a basis for planning processes and resource allocation at the national, regional, and global levels. They are also critical to support actions to mitigate the impact of the pandemic, including those implemented by PAHO's Incident Management Support Team, and the actions of the WHO Access to COVID-19 Tools (ACT) Accelerator.

SITUATION NUMBERS IN THE AMERICAS

as of 5 November 2021 (15:00)

56

Countries/territories affected

94,202,549

Confirmed cases

2,304,923

Deaths

1,246,572,647

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

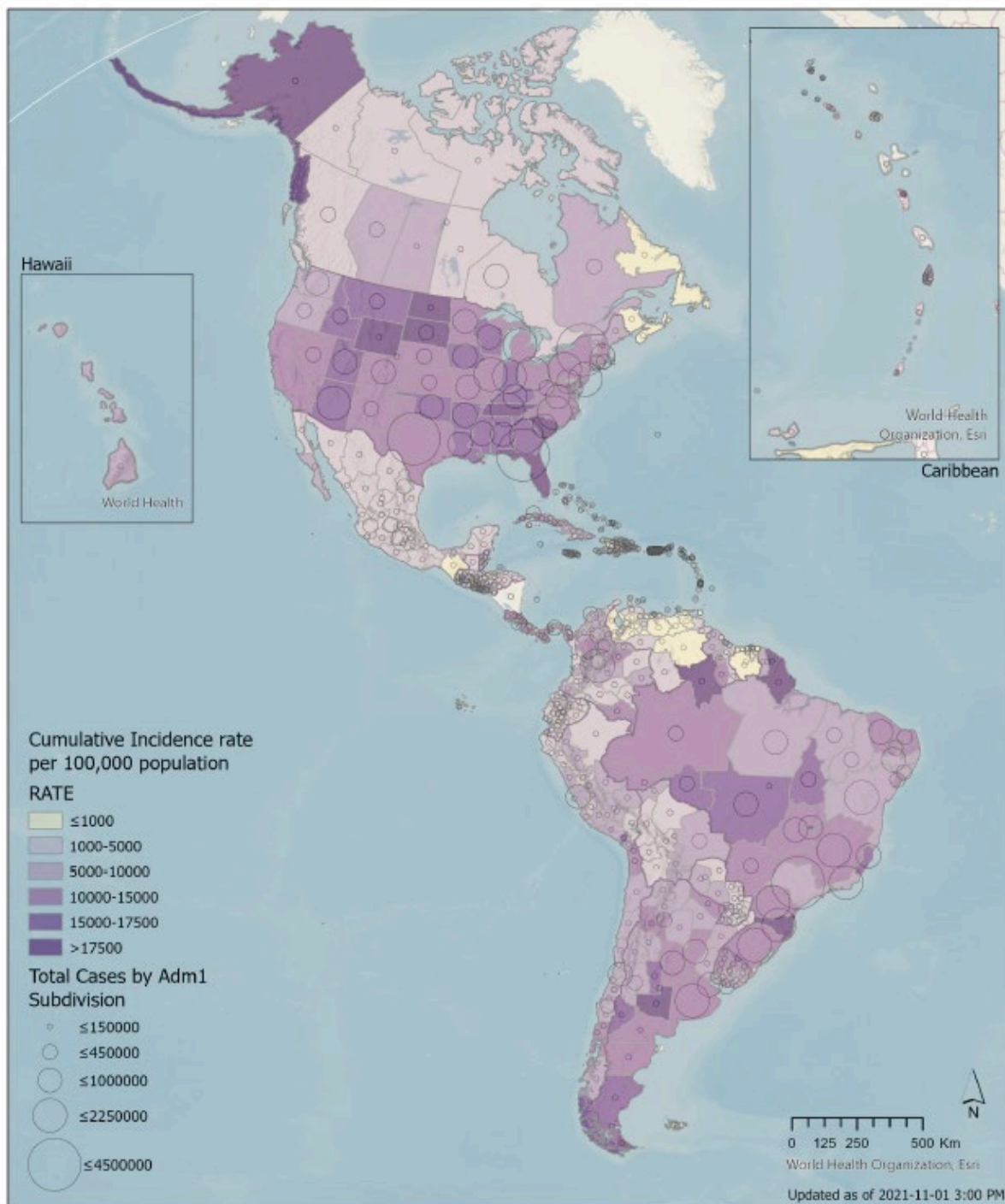
[Link to PAHO's technical and epidemiological reports, guidance, and recommendations](#)

[Link to global operational situation reports](#)

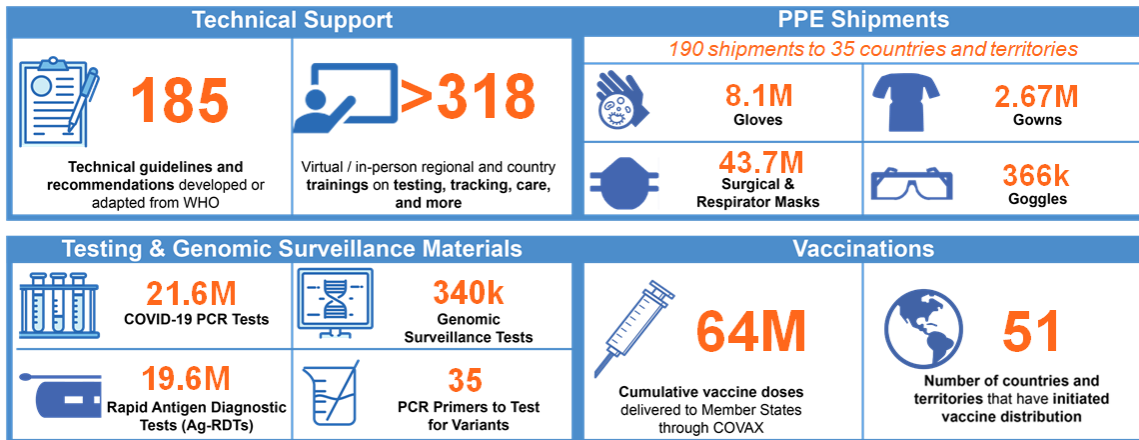


World Health Organization

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 1 November 2021



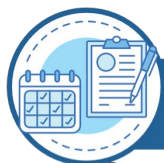
PAHO Regional Response Summary



Cumulative regional response data as of 5 November 2021.

PAHO/WHO Response (23 October to 5 November 2021)¹

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.

¹ **Correction notice** PAHO COVID-19 Operational SitRep 62: 8.1 million gloves shipped as of 22 Oct; PAHO COVID-19 Operational SitRep 61: 8 million gloves shipped as of 8 Oct.

Since the beginning of January 2021 through 5 November 2021, a total of **1,568 bilateral communications** (under Article 44 of the International Health Regulations) between National Focal Points (NFPs) with information concerning cases/contacts and travel were received. A slight decrease in the number of bilateral communications between the NFPs was observed during the last reported week, in comparison with the previous week.

PAHO continued to review new and emerging information to build the evidence base to combat the virus. The public has access to PAHO's **COVID-19 Technical Database** for technical guidelines, scientific publications, and ongoing research protocols from the Region. This is the result of partnerships with WHO, Cochrane, McMaster University, Epistemonikos, and others.



Figure 1: Belize MOHW received 20 patient monitors during event to launch initiative to strengthen clinical management of COVID-19 patients and reduce the risk of the disease in the country. Source: PAHO.

Country

PAHO in collaboration with the Ministry of Health and Wellness (MOHW) **Belize**, the Ministry of Foreign Affairs, Foreign Trade and Investment, and the United Nations Office of South-South Cooperation (UNOSSC), conducted a media **visibility event, on 1 November 2021, to launch** an initiative to strengthen the clinical management of COVID-19 patients, and to reduce the risk of COVID-19 transmission among health workers in the country. During the event, 20 patient monitors were donated to the MOHW as part of the first set of medical equipment being procured through this initiative.



PILLAR 2: Risk Communication, Community Engagement (RCCE)

Support participatory development and implementation of RCCE plans and dissemination of risk communication information to all populations and to travelers

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

Introduction to the COVID-19 Vaccine: Guidance for Identifying Priority Groups and Developing Microplanning (SPA)

COVID-19 Vaccination Training for Healthcare Personnel – 2021 (SPA, POR)

Vaccination for COVID-19: technical protocols and procedures – Brazil 2021 (POR)

Occupational Health and Safety for Healthcare Professionals in the Context of COVID-19 – 2020 (SPA, POR)

The full list of courses is available on the [PAHO website](#).

2.1 Weekly Press Briefings

PAHO's Assistant Director Dr. Jarbas Barbosa delivered two press briefings during this period. On **27 October 2021**, Dr. Barbosa provided an update on COVID-19 in the Region stating that 800,000 new COVID-19 infections and 18,000 COVID-related deaths were reported in the Americas in the last week. Many countries are seeing downward trends, but Belize is reporting a sharp jump in COVID-related deaths, while Paraguay saw a doubling of COVID-19 cases in the last week. Some of the smaller Caribbean islands are just now reaching their first pandemic peaks, with Anguilla, Barbados, Saints Kitts and Nevis, and Saint Vincent and the Grenadines reporting their highest number of COVID-19 infections and COVID-19-related deaths since the start of the pandemic. The Assistant Director informed that 44% of people in Latin America and the Caribbean are now fully vaccinated, and highlighted the persisting inequities, with vaccination rates in some countries still below 20%.

Dr. Barbosa highlighted that countries must build on the lessons learned during the COVID-19 pandemic to prepare for the health implications of climate change, the biggest long-term threat to our public health. Ahead of the 26th United Nations Climate Change Conference on the Parties, known as COP26, PAHO launched an **Agenda for the Americas on Health, Environment, and Climate Change**, to provide countries with a plan of action to address the risks posed by climate change to the health of the Americas that builds on lessons learned from the Region's pandemic response.

During the press briefing held on **3 October 2021**, Dr. Barbosa provided an update on COVID-19 in the Region stating that downward trends in cases and deaths continue across much of the Americas for the eighth consecutive week. However, Barbados continues to report its highest number of COVID-related infections and deaths since the start of the pandemic, and there are concerning shortages of hospital capacity in the Dominican Republic and Trinidad and Tobago. "The Assistant Director reported that as a result of strong immunization systems in the Region, 1.2 billion doses of COVID-19 vaccines have been administered and 46% of the overall population is now fully vaccinated. Dr. Barbosa emphasized that vaccine inequity remains the biggest barrier to reaching coverage targets with 19 countries below the 40 percent vaccination target and highlighted that PAHO is working to address this inequity with vaccine allocations expected to accelerate in the coming weeks. The COVAX facility, with the support of PAHO's Revolving Fund, has already delivered 64.3 million doses to the Region, and approximately 30 percent of these vaccines were donations by the Governments of the United States, Spain, Canada and other governments.

As more vaccines become available, the Assistant Director urged countries to follow the latest guidance from the WHO Strategic Advisory Group of Experts on Immunization (SAGE) to ensure that shots go into the arms of those that need them the most. While these decisions are ultimately up to individual countries, Dr. Barbosa stated that they "should always be based on evidence, equity, and the commitment to protect our most vulnerable". Dr. Barbosa added that vaccination combined with effective public health measures make up the best strategy for reducing COVID-19 transmission and saving lives.

Regional

As the communication needs of the Region evolve, PAHO continues to disseminate key messages across multiple platforms and respond to numerous media inquiries. Communications support is provided to country offices on a variety of issues, particularly regarding COVID-19 vaccines and COVAX. **Infographics** cover a range of issues related to COVID-19, from steps on how to prevent infection to tips on staying healthy and protecting one's mental health during the pandemic.

Country

PAHO participated in meetings of focal groups in the cantons of Corredores, Tibás, Desamparados and Goicoechea in **Costa Rica**. This was done within the context of a community engagement initiative developed in partnership with the Ministry of Human Development, the Ministry of Health, the Mixed Institute for Social Aid, the National Emergency Commission, and local governments in 2020. It aims to identify priorities, reach consensus, and develop response plans for COVID-19 and other health priorities in communities throughout the country.

PAHO also conducted missions to the indigenous territories of Comte Burica and Alto Chirripó. Activities consisted of intercultural dialogues to strengthen COVID-19 response plans, as well as the distribution of material with information on vaccination and prevention of the infection. The missions also included the delivery of health emergency kits to help communities face the double emergency situation of heavy

Conversatorio:
Derribando mitos sobre las vacunas contra la COVID-19

f LIVE **Viernes 12 de noviembre 2021, 3:00 a 4:00 p.m.**

¿Tienes consultas sobre las vacunas?



Figure 2: Communication material produced to disseminate information about an online vaccination event. Source: Costa Rica MOH Facebook page.

rainfalls together with COVID-19. The missions are part of support PAHO has been providing for COVID-19 response in 12 indigenous territories.

Additionally, in **Costa Rica**, PAHO co-organized a virtual conversation on COVID-19 Vaccine MythBusters, with the Ministry of Health and the Costa Rican Social Security Fund (CCSS). The online event was aimed at the general public, and answered questions about vaccination, with the purpose to provide accurate information and build confidence in COVID-19 vaccines. The conversation was broadcasted on the MOH Facebook page on 3 November 2021, and questions were answered by experts from PAHO, the MOH and CCSS.

In **Suriname**, PAHO provided support to the Ministry of Health to identify ways to effectively disseminate information about COVID-19 vaccination locations. Communication material was developed for the country's main newspapers and social media dissemination, and weekly radio announcements prepared to inform the community of the vaccination locations. PAHO continues to support the airing of media messages on local radio and TV stations, to raise awareness about the COVID-19 benefits and the importance of continuing to adhere to public health measures.

Figure 3: Communication material produced to disseminate information about vaccination in Suriname. 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.



PILLAR 4. Points of Entry, International Travel, and Mass Gatherings

Support surveillance and risk communication activities at points of entry as well as implementation of appropriate public health measures

Regional

It is important that risk mitigation measures are always in place, including advice for travelers, particularly regarding the self-monitoring of signs and symptoms; surveillance and case management at the point of entry and across borders; capacities and procedures for international contact tracing; and environmental controls and public health and social measures at points of entry and onboard conveyances.

PAHO will continue to support countries to ensure that these capacities are in place. PAHO will also support countries' efforts to define a risk-based policy while resuming international traffic in the context of the COVID-19 pandemic, considering the provisions of the International Health Regulations (IHR), available scientific evidence, and the most cost-effective use of available resources.

Country

In **Chile**, PAHO is participating in missions with the Ministry of Health to verify core capacities at points of entry, according to the International Health Regulations (IHR), with the purpose to assess and build capacity to respond to a Public Health Emergency of International Concern (PHEIC). PAHO's support included training local actors in the IHR core capacities, presenting tools to verify core capacity at points of entry, and presentation of PAHO/WHO COVID-19 recommendations for international travel, including protocols. The team visited the region of Tarapacá from 2 to 5 November 2021.

PILLAR 5: Laboratories and Diagnostics

Enhance laboratory capacity to detect COVID-19 cases as well as to manage large-scale testing for COVID-19 domestically or through arrangements with international reference laboratories

Regional

Since the beginning of PAHO's response to the date of this report, the Organization has provided primers, probes and/or PCR kits for over **21.6 million reactions/tests**. To date, PAHO has provided over 683,900 swabs and 365 sampling kits, among other critical materials.

PAHO continued to provide technical cooperation, including data review, troubleshooting sessions, and follow-up calls on laboratory diagnostics with teams from **Antigua and Barbuda, Barbados, Dominica, Guyana, and Suriname**.

Country

In **Suriname**, PAHO supported the training of 10 technologists from the Central Laboratory of the National Influenza Center, in Paramaribo, on how to conduct the Immunofluorescence assay (IFA) for several respiratory viruses (Influenza A and B, Respiratory Syncytial virus, Parainfluenza viruses 1, 2 and 3, Adenovirus and human metapneumovirus), as part of the activities to strengthen laboratory capacities. Training activities also included the retraining of staff in the PCR assay for COVID-19 and other respiratory agents causing outbreak-prone diseases, such as Influenza.

In addition, as part of the activities to support respiratory disease surveillance, the Central Laboratory staff received training in manual RNA/DNA extraction from human nasopharyngeal swabs taken in the context of the COVID-19 pandemic. Professionals were trained in the use of commercial kits approved by WHO to extract genetic material of several infectious agents, including SARS-CoV-2. This training is part of the effort supported by PAHO to strengthen the testing capacity in the national Public Health Laboratory.



Figures 4 and 5: Technologists receive training at the National Influenza Center in Paramaribo, Suriname. Source: PAHO.

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 5 November 2021, more than **4,894,729** complete genomic sequences have been shared globally through publicly accessible databases.

Given the significant resource requirements needed to sequence all samples in the Region to identify variants, PAHO continues to work closely with the laboratories of the countries of the Americas to help identify samples which should be prioritized for genomic sequencing. To date, PAHO has distributed **35 unique primers** to detect genetic variants using PCR.

To date, **twenty-six countries** are participating in the **COVID-19 Genomic Surveillance Network**, with reference sequencing laboratories in Brazil and Chile, visible on this **dashboard**. This mechanism will be critical to tracking the spread or appearance of new Variants of Concern (VOCs). During the reporting period, a total of 96 new SARS-CoV-2 full genome sequences from Guatemala were sequenced through the PAHO COVID-19 Genetic Surveillance Network at the Regional Sequencing Reference Laboratory for COVID-19 at Gorgas Institute in Panama. Delta VOC was detected in higher proportion, together with other variants (non-VOC/VOI) in few samples.



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

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

Regional

Implementation of national IPC plans are key to reducing COVID-19 transmission at both community and health facility levels. PAHO supports countries by procuring PPE through donations, the Revolving Fund, and training healthcare personnel.

Country

In **Brazil**, PAHO provided training for 1,207 additional healthcare workers in infection prevention and control during the reporting period, for a total of 145,598 health professionals trained to date.



PILLAR 7: Case Management, Clinical Operations, and Therapeutics

Improve local health system capacity and protect healthcare workers to safely deliver equitable healthcare services

7.1 Therapeutics and Clinical Management

Regional

Considering the breadth of knowledge and evidence related to COVID-19, PAHO maintains an **interactive infographic** to help external partners navigate PAHO and WHO's technical material and compilations of evidence from the Americas and around the globe.

The Organization worked with countries in the Region to promote the **WHO Global COVID-19 Clinical Data Platform** for the clinical characterization and management of hospitalized patients with suspected or confirmed COVID-19. This is part of a global strategy to gain a clearer understanding of the severity, clinical features, and prognostic factors of COVID-19. The Platform has more than 390,000 cases with contributions from the following countries: **Argentina, Brazil, Chile, Colombia, Dominican Republic, Mexico, Panama, Peru, and the United States of America.**

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

Country

PAHO conducted training in COVID-19 case management for healthcare workers in **Brazil**. A total of 13,725 health professionals have been trained in the country since the start of the pandemic.

7.2 Emergency Medical Teams (EMTs)

EMTs are invaluable when demands on a country's health system exceed regular capacity. Updated information on deployed EMTs and alternative medical care sites (AMCS) throughout the Americas remained available at **PAHO's COVID-19 EMT Response information hub**. As of 5 November 2021, there were at least 100 Emergency Medical Teams deployed throughout the Region, and 129 Alternative Medical Care Sites, such as military bases, sports stadiums, and fairgrounds managed by PAHO. These EMTs have added 6,899 inpatient hospital beds and 1,078 critical care beds throughout the Region.

Country

In **Belize**, on 2 November 2021, PAHO held a meeting with the technical staff from the Ministry of Health and Wellness to identify priority topics for capacity building on Emergency Medical Teams (EMT), based on the EMT Blue Book, including the deployment of mobile hospitals, oxygen therapy and other relevant topics. The meeting discussed technical cooperation for the planning of a series of virtual EMT training sessions, following the setup of a field hospital in the city of Belmopan to address surge in COVID-19 cases.



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.

Country

In **Belize**, PAHO facilitated the First Virtual Health Technology Management Workshop, aimed at informing stakeholders of the impact of medical equipment management on healthcare and to understand the challenges faced during the COVID-19 pandemic. Participants included Ministry of Health and Wellness Technical Advisors and Engineers, Regional Health Managers, Medicals Chiefs of staff, Nurse supervisors, maintenance officers, and lab technologists. This is the first of a series of health technology management webinars, as a follow-up activity to the current support provided by PAHO to the MOHW on the National Maintenance Policy and Plan.

On 28 October and 2 November 2021, PAHO provided medical supplies to the Regional Health Services in **Suriname** to support the response to COVID-19 and the management of possible cases of vaccine adverse events, as the country faces its fourth wave of the pandemic. Items donated included 12 privacy screens/room dividers, 90 chairs, 160 goggles, 900 reservoir bag masks and 33 oxygen tanks with a capacity of 55 cubic feet. Oxygen tanks were filled with oxygen and included accessories such as regulators, barb connectors and humidifiers.

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 5 November 2021, the SF has procured more than **\$267 million** worth of COVID-19 diagnostic tests (PCR and rapid tests), PPE and medicines for critical care, supporting more than **33.5 million people** throughout the Region of the Americas.² The Fund continues to support the procurement of medicines and public health supplies for individuals affected by HIV/AIDS, tuberculosis, malaria, diabetes, neglected tropical diseases, cardiovascular diseases, and hepatitis C. Learn more about the PAHO Strategic Fund's essential work on the **PAHO website**.



PILLAR 9: Strengthening Essential Health Services and Systems

Support continued operation of equitable health systems based on Primary Health Care, to protect and sustain public health gains, investing in improved response capacity in the first level of care and the health service delivery networks, including the implementation of gender and culturally sensitive actions using human rights-based approaches, to overcome barriers to access, especially in populations in conditions of vulnerability.

Regional

PAHO provides continuous assistance to its Member States on **regulatory preparedness** to expedite processes for vaccine deployment. As part of the COVAX Facility's allocation mechanism, support includes presenting information on technical documents required by Member States during bilateral and regional meetings.

Health technology assessments (HTAs) are invaluable guidance for health authorities in the use of technologies relevant to the COVID-19 pandemic. There are currently **328 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**).

During the reporting period, PAHO launched a new virtual self-learning open access course on the Management of Working and Employment Conditions for Human Resources for Health, available in **English** and **Spanish**, in the **Virtual Campus for Public Health**. The purpose of the course is to provide those

² 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.

persons who provide health services with the basic knowledge and concepts they should have about managing working and employment conditions in the new health context generated by the COVID-19 pandemic. This course is aimed at persons who work in the health sector, particularly at the first level of care, as well as decision-makers who are in charge of developing policies, as well as planning and implementing health programs and services.

Country

In **Costa Rica**, PAHO has been working since August 2021 to strengthen community capacities for the promotion of mental wellbeing and to improve psycho emotional support given to communities in the context of COVID-19. The initiative is being implemented in eight cantons and delivers capacity building workshops for community leaders. From 26 October to 2 November 2021, the workshop “Strengthening resilience in my community” was delivered to the cantons of Los, San Carlos, Barva, Corredores, Pérez Zeledón y Santo Domingo. Action plans have also been elaborated to support the development of community strategies for the promotion of mental health. Audiovisual materials for social networks and radio programs were also produced to raise awareness about mental health care. PAHO also held the third face-to-face training on mental health wellbeing during the COVID-19 pandemic in Alto Chirripó with the network of indigenous adolescent women (RIMA).

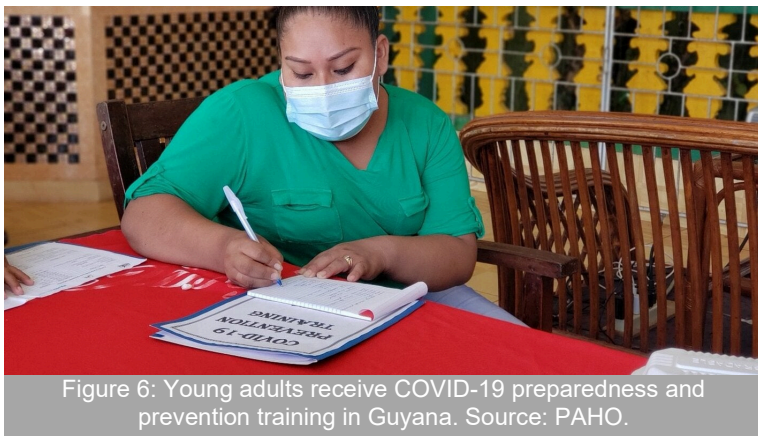


Figure 6: Young adults receive COVID-19 preparedness and prevention training in Guyana. Source: PAHO.

In **Guyana**, in collaboration with the Guyana National Youth Council (GNYC), **PAHO conducted a COVID-19 preparedness and prevention training** in Region 8, community of Mahdia, with the participation of 25 young adults. The prevention training was aimed at increasing awareness among young persons in the community and teaching them appropriate COVID-19 prevention strategies to become trainers, and to continue community actions. Medical frontline workers participated in the training, and shared

available local data and information on the available health services offered for young people in the community, to improve access and uptake. Sessions also included topics such as social behavioral change communication and mental health.

PAHO participated in the **VII Regional Platform on Disaster Risk Reduction in the Americas and Caribbean held** from 1 to 4 November 2021. The virtual event was chaired by the Government of **Jamaica** and co-organized by the United Nations Office for Disaster Risk Reduction (UNDRR) Regional Office for the Americas and the Caribbean, together with the Caribbean Disaster Emergency Management Agency (CDEMA). The meeting was convened under the theme ‘Building Resilient Economies in the Americas and the Caribbean,’ and aimed to raise awareness of the increasing economic and human cost of disasters in the Region, including special challenges faced by small island developing States (SIDS). A team of PAHO experts participated and led high-level sessions on strengthening disaster risk governance and enhancing resilient infrastructure. PAHO also provided support as co-organizer of other sessions of the event.

In the Region of Chiapas, in **Mexico**, PAHO trained 219 health professionals responsible for the Prenatal Control Program at the primary health care level aimed to build capacity for prenatal control in high-risk situations in the context of COVID-19. The course is part of a PAHO initiative aimed at the reduction of maternal mortality related to COVID-19. PAHO also trained 171 health professionals on health promotion

with an intercultural approach, with a focus on measures for the prevention of COVID-19 and on raising awareness for adherence to vaccination among indigenous populations.

In **Panama**, PAHO in partnership with the Union of Domestic Workers and Similar Activities (SINGRETRADS) and the Hebrew Immigrant Aid Society (HIAS) convened a workshop to address the mental health challenges that domestic workers face during the pandemic era. It served to establish a network for psychological and emotional support to domestic workers in the country, whether or not they are affiliated to SINGRETRADS. The workshop is part of a project coordinated by PAHO, aimed at strengthening SINGRETRADS' capacities to provide its members with an effective response to the impact of the COVID-19 pandemic on their lives and well-being.



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 5 November 2021, more than **1.2 billion doses of COVID-19 vaccines** had been administered in the Americas, with more than **544 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 64 million doses** to the Americas through COVAX. Additionally, PAHO continued to provide strategic direction to countries in the Region that are pending arrival of vaccines. More details are available on PAHO's **COVID-19 Vaccination in the Americas database**, which reports on doses administered by country.

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

PAHO is supporting countries throughout this process. **33 countries** have completed their **national vaccine deployment plans (NVDPs)**. **35 countries** have completed the **Vaccine Introduction Readiness tool (VIRAT)**, which includes a **dashboard** that provides an overview of regional readiness. Regional support also includes work with countries interested in gaining access to vaccines through the **COVAX Facility**.

PAHO provides technical cooperation to countries seeking to access the COVID-19 vaccine through the COVAX Facility, including those selected for **Advance Market Commitment (AMC)** funding to cover their doses. This includes sharing recommendations with national authorities on steps to ensure that their NVDPs meet the necessary criteria to roll out vaccines to priority populations.

In addition to written guidance, PAHO also provides training webinars to its Member States. PAHO worked with Member States to develop workshops aimed at strengthening the Events Supposedly Attributable to Vaccination or Immunization (ESAVI) surveillance in the Region of the Americas. Access the full list of past and future training sessions for all member states **on PAHO's website**.

PAHO maintains a public **dashboard** that tracks the safety of various COVID-19 vaccines during and after clinical trials.

Country

In **Belize**, during the reporting period, PAHO facilitated a meeting to exchange information on the Immunization Information System (IIS) with the Ministry of Health and Wellness, the Inter-American Development Bank and University of Oslo, particularly on the features of DHIS2 software for Internet Information Systems developed by the University of Oslo and to explore possibilities for technical cooperation support.

In **Costa Rica**, PAHO donated more than 11,000 cold chain equipment items to support the country's Expanded Immunization Program (EIP). Delivered to the Costa Rican Social Security Fund (CCSS) in the week of 1 November 2021, supplies will be distributed throughout the country and will help strengthen the COVID-19 and Influenza vaccination campaigns.

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.

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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.

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