

COVID-19 pandemic in the Americas

Response Strategy and Donor Appeal

April 2022 – March 2023

Summary



PAHO



Pan American
Health
Organization



World Health
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REGIONAL OFFICE FOR THE
AMERICAS

COVID-19 pandemic in the Americas. Response Strategy and Donor Appeal April 2022 – March 2023. Summary

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Introduction

Throughout 2021, the protracted health crisis caused by the COVID-19 pandemic and its devastating consequences continued to impact people's lives and livelihoods in the Americas, and further disrupted decades of progress, growth, and health gains attained by the Region's countries, societies, and economies. The acceleration of infections in the Region – and worldwide – after mid-2021 underscored the fact that, until transmission is effectively contained, infections can surge quickly. The grim pandemic milestone of two million deaths from COVID-19 in the Americas, reached in August 2021, was a distressing reminder that there must be continuous and urgent action to prevent further suffering.

In addition to increasing vaccination coverage, key challenges ahead include maintaining essential health services, adapting and expanding surveillance, and improving clinical management of cases, infection prevention, and control in health facilities. With just over two thirds of its population fully vaccinated against COVID-19, the Region continues to remain particularly vulnerable. Countries must sustain public health measures to limit transmission of the virus and adjust these measures according to prevailing local risks for transmission.

Priority must be given to prevention, using communication campaigns to encourage proactive action, combatting misinformation, and reminding younger, working-age populations of their risk and the need to protect themselves, including getting vaccinated.. Health systems should also be prepared to deal with surges in COVID-19 cases as well as with an increased demand for hospital beds and critical care for a range of other illnesses. Health systems should strive for a comprehensive approach to managing the pandemic, adapting this approach to a constantly evolving environment.

While looking forward to promising developments in COVID-19 therapeutics to treat the virus, curb hospitalizations and prevent deaths, it is also important to incorporate lessons learned and the best evidence-based practices. Countries must also be prepared to ensure timely and affordable access to new treatments. The Region has the technical expertise, manufacturing capacity, strong regulatory infrastructure, and an effective pooled procurement mechanism via the Pan American Health Organization (PAHO) Strategic Fund, which if leveraged will help accelerate access to COVID-19 technologies.



As demonstrated by the surge of the Omicron variant of concern (VOC) at the end of 2021, vaccine inequity is prolonging the current crisis. These glaring gaps must be urgently addressed to provide life-saving protection to all peoples in the Americas. As in the past, the Region's common goal must be focused on bringing down the epidemic curve, expanding access to vaccines to everyone, and saving lives. It is also crucial that Member States continue to work together, as sharing knowledge and experiences is central to defeating this pandemic. Collaboration across borders enabled vaccines to be developed in record time, variants to be identified quickly, and countries to adjust responses based on the latest evidence.

PAHO will continue to provide technical cooperation to help countries and territories adopt a more holistic approach to COVID-19 response, and develop and adapt strategies for the continuity of priority public health programs. The experience of the past years will serve as the foundation for rebuilding a stronger and healthier Region, looking ahead with a heightened spirit of solidarity and collaboration and renewed energy to defeat COVID-19.



Situation in the Region of the Americas

Epidemiological update (as of 15 June 2022) ¹

GLOBAL

533,816,957

Cumulative cases

6,309,633

Cumulative deaths

REGION OF THE AMERICAS

159,952,106

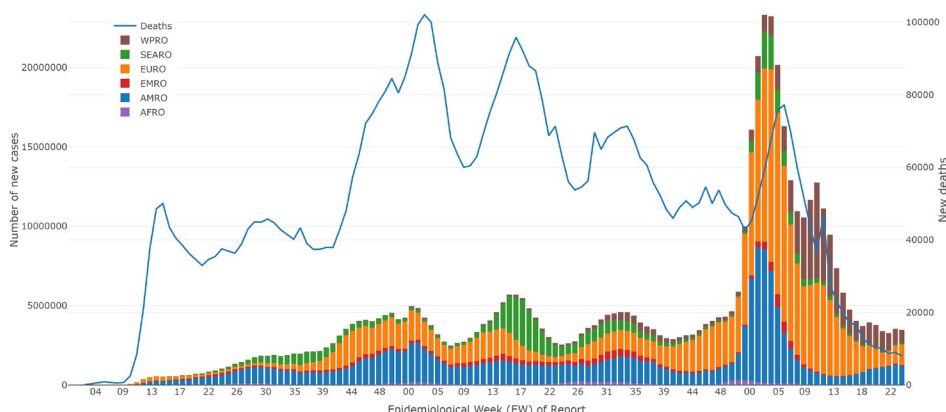
Cumulative cases

2,754,341

Cumulative deaths

29.8% of the global count

43.6% of the global count



Evolution of COVID-19 cases and deaths by WHO Region as of 15 June 2022

The year 2021 represented one of the most challenging periods ever faced by PAHO and the Region of the Americas as a whole. The COVID-19 pandemic overburdened health systems in all parts of the Americas as countries and territories struggled to cope with the multiple impacts caused by 68 million infections and 1.4 million lives lost to the coronavirus over the year. Despite having approximately 13% of the world's population², the Region accounted for more than 40% of all deaths reported worldwide in 2021, making COVID-19 deadlier in the Americas than in any other WHO Region.

¹ Source: Cases and deaths updated using WHO table accessed 22 June 2022 at 05:00 PM.

² Source: United Nations Population Fund. World Population Dashboard. Available from: <https://www.unfpa.org/data/world-population-dashboard>

Peaks in the months of April and October 2021, along with the emergence of the Delta VOC in August 2021 showed the world the situation was still far beyond being controlled. But as the year drew to a close, numbers started to steadily decrease. This downward trend, however, continued only until the first week of December 2021, when the SARS-CoV-2 Omicron VOC was first identified in the Americas.

The third year of the COVID-19 pandemic began with the highest peak in cases and levels of transmission ever seen. During January 2022, infections were accelerating across every corner of the Americas, and health systems were once again significantly pressured by the rising number of patients requiring assistance. The Omicron VOC spread significantly faster than any previous variant. The new wave of infections challenged the health workforce, also limiting care for other diseases. As previously observed, every time infections surge, deaths rapidly follow, imposing a heavy toll on families and communities in the Region.

Nonetheless, thanks to the protection conferred by vaccines, deaths did not increase in the same proportion as cases. The decoupling of death rates and new infections provides proof that vaccines are effective to protect people from hospitalization and death due to COVID-19. Still, too many people continue to become severely ill and need hospitalization, and thousands of people continued to die each week. Older persons, people living with comorbidities, immunocompromised individuals, and the unvaccinated or partially vaccinated remain at the highest risk of serious symptoms and death.

Lessons learned over 2020 and 2021 have equipped countries with better tools to fight this disease and the experience needed to control infections. In addition to promoting vaccination, countries have also gained the knowledge to adjust hospital systems to accommodate new surges, while ensuring health workers have the protection and information to safely treat COVID-19 patients.

However, vaccination gaps and the relaxation of public health measures in some countries while millions of people remain unvaccinated keep the Region at risk of facing surges of new variants. Therefore, the pandemic remains an acute threat. In the first two months of 2022 alone, 63% of new global cases were reported in the Americas, which continue to account for a disproportionate number of COVID-19 infections. During the first three months of 2022, the number of new COVID-19 cases in the Region increased by almost 50 million and deaths rose by nearly 300,000. By mid-June 2022, the Region had reported nearly 160 million total cases and over 2.7 million deaths.

More than two thirds of the population in the Region is now fully vaccinated³. At the same time, vaccination against SARS-CoV-2 remains unequal. Whereas high rates of coverage may be observed in countries such as Chile (91.4%) and Uruguay (82.8%), countries such as Guatemala (34.5%) and Jamaica (23.7%) still report extremely low rates at this stage. Haiti is still to vaccinate 2% of its population, and another 20 countries did not fully vaccinate even half of their inhabitants. The emergence of new variants and the consequences of having such large unvaccinated populations show that all efforts must continue to be directed at urgently addressing these intolerable gaps in vaccination coverage across the Region.

Since March 2022, cases and deaths started to drop again and transmission levels seemed to subside. But since May 2022, while health systems were still recovering from the disruptions brought by the pandemic, countries started facing another surge of COVID-19 cases. In addition, this development is coupled with a growing risk of current public health events, including Monkeypox, viral hepatitis, and other respiratory infections.

The COVID-19 pandemic is not a short-term problem. By June 2022, the Region is again challenged by a significant increase in cases, with an important impact on health systems, and too many people remaining unvaccinated.

(Weekly COVID-19 epidemiological updates with most current information are available on [PAHO/WHO's COVID-19 website](https://ais.paho.org/imm/IM_DosisAdmin-Vacunacion.asp)).

³ 68.9% as of 17 June 2022. Vaccination data available from: https://ais.paho.org/imm/IM_DosisAdmin-Vacunacion.asp.



Beyond the health crisis

The countries of the Americas have been combating COVID-19 while simultaneously addressing many ongoing and emerging health challenges. The pandemic remains a highly fluid situation with an immense economic and social impact and a disproportionate effect on vulnerable population groups. The pandemic is occurring in the context of various underlying political, economic, social, and health issues and is exposing and amplifying challenges in health inequalities, access to health services, and continuity of care for acute and chronic conditions.

Much has been said about the need to “build back better and fairer” during and after COVID-19, with multisectoral, whole-of-government, whole-of-society, and health-in-all-policy approaches that address the social, economic, environmental, commercial, and other determinants of health, emphasizing strategic partnerships and placing people – especially persons in vulnerable conditions – at the core of interventions.

Per the Global Humanitarian Overview 2022, Latin America and the Caribbean is the world’s most economically unequal region and the second-most disaster-prone region. It also states that the pandemic’s effects have had a significant impact on the region’s poverty, displacement, food insecurity and violence. At the same time the Region is still experiencing the impacts of

several disease outbreaks, sudden disasters, and the record-setting Atlantic hurricane season during 2020.

The health crisis caused by COVID-19 in 2020 triggered the most serious economic contraction experienced over the past 120 years in Latin America and the Caribbean (LAC). Thus, in addition to giving rise to an alarming public health situation in these countries, the pandemic has also exposed structural, economic, and social weaknesses. The multiple and profound impacts that the health crisis have had and continues to have, underscore the Region’s vulnerability, while unemployment, poverty, and inequality have reached peak levels in 2021⁴.

According to the Economic Commission for Latin America and the Caribbean (ECLAC) estimates in the Social Panorama of Latin America 2021, the number of people living in extreme poverty in LAC countries rose from 81 million in 2020 to 86 million in 2021, and the economic recovery of 2021 was not enough to reestablish the setbacks faced by the Region since COVID-19. In 2020, extreme poverty reached the levels seen 27 years before, while the overall poverty rate was at levels akin to those at the end of the 2000s.

Health systems of the Region, which were already underfunded and fragmented prior to the arrival of COVID-19, have been forced to face the pandemic with various systemic weaknesses.

⁴ Economic Commission for Latin America and the Caribbean (ECLAC), Pan American Health Organization (PAHO). 2021. The prolongation of the health

crisis and its impact on health, the economy and social development. Available from: <https://iris.paho.org/handle/10665.2/54991>.

Public health expenditure in LAC averages a mere 3.7% of GDP, far from the 6% target recommended by PAHO. A third of the population still faces some type of barrier to access the health services they need.

The high degree of inequality combined with the high levels of poverty, informality, lack of social protection, and limited access to quality, timely health care, explain the high social costs that the pandemic is having in the Region; and health inequity continues to fuel and prolong this worrisome scenario.

Two years of COVID-19 have stretched health systems, societies, and supply chains, leaving vulnerable communities with less capacity to cope. Also, according to World Health Organization (WHO) estimates, 2022 is shaping up to be the most challenging year yet. COVID-19 cases continue to surge, fueled by newly emerging variants and persistent vaccine inequity, in addition to ongoing and new conflicts. This severely impacts health systems worldwide, particularly in countries or regions dealing with humanitarian crises, such as Latin America and the Caribbean.

Regional coordination and response mechanisms

The PAHO/WHO regional Incident Management Support Team (IMST), activated in January 2020, with similar Incident Management Teams in PAHO/WHO country offices, were established to spearhead the Organization's technical cooperation for the pandemic. This cooperation was initially structured around three strategic blocks of response: epidemic intelligence, public health measures, and health systems strengthening. In the first quarter of 2021, the IMST and country teams officially incorporated a fourth block into the COVID-19 response: vaccination.

Working through its regional and country teams, PAHO has been providing direct technical cooperation to countries and territories to address and mitigate the impact of the COVID-19 pandemic. These efforts have been aligned with the 2020, 2021, and 2022 WHO Strategic Preparedness and Response Plan for COVID-19 as well as with PAHO Resolutions CD58.R9 and CDSS1.R1, approved by its Member States. PAHO developed, published, and disseminated technical documents to help guide country strategies and policies to manage this pandemic. It has collaborated with partners in the Region and across the globe to deliver technical cooperation, evidence-based guidance, and recommendations, as well as advocating for the Americas on the global stage.

The joint report published by PAHO and ECLAC in October 2021, "The prolongation of the health crisis and its impact on health, the economy and social development," asserts that controlling the health crisis is crucial towards a sustainable and equitable economic recovery.

The report also states that prioritizing a comprehensive and intersectoral approach recognizing the interdependence of the health, social, economic, and environmental dimensions must be the driver of a transformative recovery from this critical and alarming scenario. Confronting this pandemic and triggering sustainable economic growth also entails transforming health systems, with the due centrality given to primary health care, equity, financial sustainability, and governance.

There is no way out of this crisis without placing health and well-being as the building blocks for reactivating the economy, and at the core of public policies aimed at building back better. Equity must be the force guiding the path to recovery from this pandemic.

A major effort of the Organization in 2020 and 2021 has focused on supporting countries in the rollout of the COVID-19 vaccination, from preparing the countries for the introduction of vaccines, to facilitating the procurement, distribution, delivery, and safe administration of the vaccine and monitoring of its effects. Through its Revolving Fund, PAHO played a critical role in assisting countries in the acquisition of vaccines made available through the COVAX Facility -a groundbreaking global collaboration to accelerate the development, production, and equitable access to COVID-19 vaccines. PAHO has advocated for a greater number of doses to be donated to the Region of the Americas and has been proactively involved in planning and operations related to bilateral donations, and in accessing vaccines donated to COVAX by other countries. In addition, PAHO successfully advocated for regional dose-sharing, and supporting the reallocation of COVAX doses between participating countries.

As of 15 June 2022, more than 142 million doses have been delivered through COVAX and PAHO's Revolving Fund to 33 countries in the Americas. The Organization has been also supporting activities in 31 countries to strengthen cold chain capacity and their logistic and deployment capacities to carry out

COVID-19 vaccination campaigns in rural areas, reaching indigenous groups and other vulnerable populations.

Although gradual vaccination rollout intensified in the second half of 2021, high vaccine hesitancy has slowed uptake by the population, preventing the full achievement of vaccination potential. As such, major efforts concentrated on developing communication strategies aimed at countering misinformation and disinformation and at addressing myths circulating about COVID-19 vaccines. Since the beginning of the pandemic, PAHO has disseminated material and worked with partners to ensure that relevant, up-to-date, evidence-based information was readily available to the population. PAHO also engaged in community-based activities and partnered with civil society to expand its reach to the farthest areas and the most vulnerable populations, and relied on community actors perceived as trusted sources of information to convey institutional messages.

Vaccine safety surveillance is also critical to building confidence in vaccines and increasing uptake. PAHO has been directing efforts at ensuring the implementation of a robust regional safety surveillance system to rapidly detect, notify, and respond to events supposedly attributable to vaccination or immunization (ESAVI) and/or adverse events following immunization (AEFI). PAHO supported the development of advanced strategies and informatic tools (national COVID-19 vaccination dashboards, digital vaccination cards, vaccination appointment scheduling systems; nominal electronic immunization registries) in 15 countries and territories.

These strategies and tools enabled the strengthening of regional and national ESAVI surveillance systems through the digital transformation of case-based databases and modules for notification and investigation. It also helped enhance ESAVI data analysis at the regional and national level, and ensure appropriate data management and standardization at the regional level. PAHO also developed and maintains a pharmacovigilance dashboard to support regulatory processes for the introduction and monitoring of the safety of COVID-19 vaccines.

Throughout 2021, countries and territories in the Region continued to report persistent disruptions of varying degrees in the provision of essential health services, as demonstrated by the third round of the WHO global pulse survey on continuity of essential health services during the COVID-19 pandemic (November-December 2021). These disruptions highlight difficulties in ensuring continuity of services and the need to strengthen resolution capacity, especially at the first level of care. Sustained and effective response to the COVID-19 pandemic requires health services to deliver patient care that is coordinated and integrated across the different levels of complexity, with availability of an uninterrupted supply of medicines and medical devices in all health care facilities, including in remote areas. The pandemic has demonstrated the critical need for universal health, showing that the activation of primary health care is essential to tackling the pandemic.



The Organization has used epidemiological models to estimate needs for human and financial resources, as well as supplies and hospital beds. It also supported countries to analyze options for reorganizing and expanding hospital services and to share experiences. Tools and guidance were developed to manage human resources for health, adapting the first level of care, and reorganizing different care levels to address the needs generated by the pandemic.

PAHO also continued to provide technical guidance on case management and strategies to expand health services to meet these unprecedented needs. The Organization trained health workers in case management and therapeutics and worked with health authorities to adapt their recommendations and policy options on clinical management. PAHO collaborated closely with WHO and other global partners and stakeholders to advance clinical research, expand the knowledge base, and facilitate the exchange of experiences and expertise of frontline health providers.

Another essential part of PAHO's response has been the support the Organization has provided to countries in the Region to strengthen their public health surveillance systems to detect COVID-19. Supporting efforts to boost event-based surveillance (EBS) and indicator-based surveillance (IBS) helped ensure that countries integrate COVID-19 into their routine severe acute respiratory illness/influenza-like illness (SARI/ILI) surveillance systems.

The demand for diagnostic tests has also reached levels not seen before, causing a shortage of laboratory equipment and diagnostic supplies in several countries. PAHO has been working to provide laboratories in the Region with essential supplies for diagnostics and to build and strengthen national laboratory capacities. Since 2020 and until mid-June 2022, over 21.4 million antigen-based detection tests (Ag-RDTs) and 21.9 million PCR tests have been delivered to countries and territories in the Americas, including through procurement by PAHO's Strategic Fund.. In addition, PAHO maintains an emergency stock of laboratory supplies for rapid deployment to areas that might have acute, uncovered needs.

Building upon its Member States' installed capacity for molecular diagnostic testing, PAHO disseminated algorithms for testing for SARS-CoV-2 that took advantage of existing influenza surveillance systems, and continued to provide guidance on testing strategies, quality assurance procedures, and genomic

surveillance to leverage and scale-up molecular diagnostic testing capacity throughout the Region. The Organization developed and shared technical guidance on the interpretation of laboratory results for COVID-19 diagnosis, conducted technical trainings, followed up to provide troubleshooting and analysis of results, and conducted training, as needed.

Additionally, to reduce the burden on laboratory systems, PAHO also continued expanding the diagnostic network using Ag-RDTs in points of care. Comprising 31 laboratories from 28 countries in the Region, PAHO created and coordinates the COVID-19 Genomic Surveillance Regional Network (COVIGEN) to monitor the virus that causes COVID-19 and to detect any change in its sequence that may influence its ability to spread and increase disease severity. In addition, monitors vaccine effectiveness, treatments, diagnostics, or other public health and social measures.

Throughout the pandemic, the PAHO Strategic Fund has rapidly assessed inventories of critical supplies across the Region to ensure there is an adequate stock of prioritized items. By leveraging close relationships with suppliers to better plan deliveries and shipments, as well as through existing long-term agreements to assure availability and mitigate price inflation, the Strategic Fund expanded supply chain options that provided Member States with needed flexibility.

As of 17 June 2022, the Organization also delivered more than 225 shipments of Personal Protective Equipment (PPE) to 35 countries and territories in the Americas, which have been of paramount importance to strengthen infection prevention and control and guarantee the safety of health care workers during response.

PAHO has been at the center of regional health response efforts alongside national authorities and other international partners. The support provided ranges from the development and dissemination of technical guidance and capacity building courses, to the critical operational and logistics support provided to the coordination and dispatch of relief supplies for COVID-19 response.

More details on PAHO's efforts at regional and country level to tackle the pandemic in 2021 are available in [PAHO's Response to COVID-19 in the Americas report](#). Additional information is also available in PAHO's operational response updates, which are published every two weeks on the [COVID-19 Operational Situation Reports](#).

Key Achievements up to December 2021

21.6 million COVID-19 PCR tests
sent to 36 countries and territories

20 million antigen-based tests (Ag-RDTs)
sent to 36 countries and territories

8.4 million gloves
distributed to countries and territories

44.3 million surgical and respirator masks
distributed to countries and territories

2.78 million gowns
distributed to countries and territories

38 countries and territories
with molecular detection capacity to diagnose SARS-CoV-2

2,555,304 complete genomic sequences
from the Americas shared globally through publicly accessible
databases

>340 virtual/in-person trainings
on testing, tracking, patient care and more

197 technical guidelines on COVID-19
developed or adapted from WHO

1.45 billion doses of COVID-19 vaccines administered
in the Americas

over 623 million people
fully vaccinated against COVID-19

76,268,770 million vaccine doses
distributed to 33 countries through COVAX

> US\$ 290 million worth of COVID-19 diagnostic tests,
personal protection equipment, and medicines for critical
care procured, supporting over 38 million people in the
Americas



US\$ 239
million
requested for 2021



US\$ 132.8
million
received in 2021 (55.56%)

The generous financial contributions received by PAHO from various partners to sustain COVID-19 response efforts in LAC countries to mitigate the impact of the pandemic totaled US\$ 132.8M for the year 2021 (55.56% of the total funds requested by PAHO in its Appeal). Over 66% of the resources received were used towards the procurement of essential items to support case management, individual protection and surveillance/laboratory detection capacity.

2022 Priorities and Response Strategy

Planning scenarios

It is possible that by 2023 countries in the Americas will still face localized COVID-19 outbreaks, primarily in institutions (e.g., nursing homes, prisons), densely populated peri-urban areas, and rural settings. Significant heterogeneity in vaccination coverage may persist across subnational entities among the different age and population groups. The WHO Strategic Preparedness and Response Project for 2022 includes three planning scenarios to guide COVID-19 response operations in the coming months and years:

- a. **Base case:** The virus continues to evolve but with significantly reduced severity over time. Periodic spikes in transmission may occur if there is a significant waning of immunity.
- b. **Worst case:** A more virulent and highly transmissible variant emerges against which vaccines are less effective and/or immunity against severe disease and death wanes rapidly.
- c. **Best case:** Future variants are significantly less severe and protection against severe disease is maintained.

Response strategy

While optimizing national and international strategies and operational readiness, PAHO's efforts in 2022 are grounded in an integrated plan: engaging and empowering all of society and every arm of government through community-centered solutions, underpinned by the principles of equity and inclusiveness, with communities at the center.

The end of the acute phase of the pandemic requires tackling the primary factors driving transmission of SARS-CoV-2 and the direct and indirect impacts of COVID-19. In the Americas, this process will continue to require a comprehensive response with sustained capacity in the health service network; maintenance of public health and social measures; and targeted vaccination operations and outbreak control actions, including early detection, investigation, and isolation of cases, as well as tracing contacts.

Health systems must be prepared to deal with surges in COVID-19 cases as well as with increased demand for hospital beds and critical care for a range of other illnesses, related to the disruption of essential services. This requires a comprehensive approach to managing



the pandemic, with adaptations to a context that is constantly evolving. This approach should have the right balance of proven health interventions to prevent transmission and save lives, including vaccination and other public health measures; response capacity at the first level of care (primary care); and progressive expansion of hospital and critical care services, including Emergency Medical Teams and Alternative Medical Care Sites, when necessary.

Public health and social measures must be adapted to the needs and particular situation of those who are hit harder by the health and economic crisis, and who are living in humanitarian settings. Response to COVID-19 and other health threats in fragile, conflict-affected, and vulnerable contexts requires careful adaptation of public health and social measures in order to reduce the burden on those most strongly impacted.

In April 2021, PAHO launched its updated [Response Strategy and Donor Appeal](#), seeking US\$ 238.7 million to maintain and scale up its response to the COVID-19 pandemic to contain the spread of the virus and mitigate the longer-term health impact on the population of the Americas.

The Appeal built on the knowledge acquired and lessons learned during the first year of the response. It addresses persistent and arising challenges and priorities at national, subnational, and regional levels, such as the need to mitigate risks related to new variants and the safe, equitable, and effective delivery of diagnostics and vaccines.

Between February 2020 and 31 December 2021, PAHO mobilized over US\$ 379 million from strategic donors and partners, achieving 86.35% of the estimated funding requirements for priority public health needs of countries in the Region for 2020–2021. A pool of over 58 donors have provided financial contributions to support PAHO's COVID-19 response in the Americas.

The Organization also received US\$ 158 million from international financial institutions and bilateral donors to support the procurement, on behalf of Member States, of essential supplies and equipment critical to the response, including PPE; laboratory tests, reagents, and equipment; clinical care supplies; and COVID-19 vaccines.

More information about donations to PAHO for COVID-19 response can be found on the [PAHO COVID-19 Response Fund webpage](#).

PAHO COVID-19 Response Fund

HELP US SAVE LIVES AND REDUCE THE IMPACT OF COVID-19

The Region of the Americas has the highest cumulative COVID-19 cases and deaths. PAHO is working with health professionals on the frontlines of this fight. Resources will help identify and eventually halt the pandemic.

Support PAHO's efforts to fight COVID-19 in the Americas

Make your donation today!

As the specialized health agency for the Americas and the Regional Office of the World Health Organization, PAHO is providing essential leadership, coordination and assistance to fight the spread of COVID-19, save lives, and protect the most vulnerable populations groups—including health workers—in all 51 countries and territories of the Americas.

Latin America and the Caribbean need more vaccines now to save lives and prevent future waves. PAHO is working to make sure access to COVID-19 vaccines is guaranteed for every eligible person — regardless of their ethnicity, economic condition, gender, migratory status or whether they reside in a city or rural area — starting with the most vulnerable.

Your donation will enable us to:

- Help countries and territories organize and prepare their health systems to cope with the rapid rise and resurgence of COVID-19 cases while maintaining other essential health services.
- Obtain, track and slow the spread of COVID-19 by supporting countries' surveillance, testing, contact tracing and laboratory capacity.
- Send essential supplies, including personal protective equipment (PPE), to frontline health workers.
- Share the latest scientific knowledge, epidemiological data and technical guidance with governments, health systems, and communities to guide public health actions.
- Support research and facilitate countries' participation in genome sequencing and clinical trials of new medicines.
- Deliver COVID-19 vaccines safely and effectively where they are needed the most.

Stories of impact

PAHO's Regional COVID-19 Response Strategy and Donor Appeal

While much progress has been achieved over the past year, the Region of the Americas has substantially increased the exposure of the COVID-19 pandemic. PAHO's Regional COVID-19 Response Strategy and Donor Appeal 2021 to continue supporting Latin American and Caribbean countries and territories in their fight against COVID-19. This document outlines PAHO's regional strategy for the year 2021 to sustain and scale-up the response to COVID-19 pandemic in the Americas, against the exponentially increasing impact of the virus and mitigate the significant health impact of the pandemic.

Download 2021 Strategy | Download 2021 Report

The Region will continue utilizing surveillance to monitor the spread of the virus, prevent future outbreaks, detect threats, adapt measures, and prepare health systems for new surges. Continued integration of SARS-CoV-2 surveillance with systems for the surveillance of influenza viruses and other epidemic-prone diseases is key for integrated respiratory disease surveillance once this pandemic is over. It is also important to continue upgrading and expanding national capacities for molecular sequencing and genomic epidemiology for SARS-CoV-2, while ensuring quality in laboratory practices and full integration into public health surveillance and disease control efforts at national levels. Data and evidence will continue to be the foundation stone for decision-making and for the development of guidelines and recommendations to Member States in this process towards the end of the acute phase of the COVID-19 emergency in the Americas and resilient recovery. Relying on testing and strengthening laboratory capacity will also ensure the continued close monitoring of the virus and can rapidly react to new scenarios as the pandemic evolves to a new phase.

PAHO will also continue to prioritize efforts to close vaccination gaps in the Region and accelerate the equitable access to vaccination, especially to protect the most vulnerable. Work in 2022 will be based on supporting strategies to strengthen vaccine demand-generation activities, including building trust in vaccines, and combatting vaccine hesitancy; ensuring the access to vaccines and related supplies and strengthening capacities for vaccine deployment; and maintaining surveillance of vaccine safety and events supposedly attributable to vaccination or immunization. Countries and territories will also be supported towards integrating COVID-19 vaccination operations into national immunization programs, which require targeted actions and necessary resources for successful COVID-19 vaccine rollout and to ensure sustainability of routine immunization activities.

This report outlines PAHO's regional response strategies for the year 2022 to reduce and control the incidence of SARS-CoV-2 infection; and prevent, diagnose, and treat the coronavirus disease to protect individuals, reduce risk of future variants, reduce disease morbidity, mortality, and long-term consequences of infections to a minimum. It also includes the financial requirements for the implementation of the strategy from April 2022 to March 2023. PAHO's COVID-19 Appeal and Strategy Response is fully aligned with [WHO's Strategic preparedness, readiness and response plan to end the global COVID-19 emergency in 2022](#) published in March 2022.

Goal

The overall goal of this strategy is to end the global public health emergency of COVID-19 in 2022 in the Region of the Americas, through the achievement of the following two strategic objectives.

Strategic objectives

1. Reduce and control the incidence of SARS-CoV-2 infections to protect individuals, and especially vulnerable individuals at risk of severe disease or occupational exposures to the virus, from exposure, reduce the probability that future variants will arise, and reduce pressure on health systems.
2. Prevent, diagnose, and treat COVID-19 to reduce mortality, morbidity, and long-term sequelae.

The current strategy builds upon the achievements, lessons learned, and innovations of countries and PAHO's support to expand and reorganize health networks to improve equitable access to quality health services for COVID-19 patients.

To achieve these objectives, international and national strategies need to be calibrated and optimized, and operational readiness for emergence of new threats needs to be strengthened.



Priority Actions in the Americas for 2022



Coordination, Planning, Financing, and Monitoring: Support operations 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.



Risk Communication and Community Engagement (RCCE) and Infodemic Management: Support participatory development and implementation of RCCE plans and dissemination of risk communication information to all populations and to travelers.



Surveillance, Epidemiological Investigation, Contact Tracing, and Adjustment of Public Health and Social Measures: Strengthen the capacity of surveillance systems to detect COVID-19 cases, while ensuring continued surveillance of other diseases epidemic and pandemic potential; foster the integration of SARS-CoV-2 surveillance into influenza and other respiratory diseases surveillance networks.



Points of Entry, International Travel and Transport, and Mass Gatherings: Support surveillance and risk communication activities at points of entry as well as implementation of appropriate public health measures.



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; expand genomic surveillance capacity throughout the Region.



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.



Case Management, Clinical Operations, and Therapeutics: Improve and expand local health system care delivery capacity and protect healthcare workers to safely deliver equitable healthcare services.



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.



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.



Vaccination: Support the introduction, deployment, and evaluation of COVID-19 vaccines, ensuring their timely and equitable access, and strengthening vaccine safety surveillance; facilitate the integration of COVID-19 vaccination into national routine immunization programs. Efforts will also continue to improve capacity of the region to manufacture COVID-19 vaccines and other health technologies.



Research and Innovation: PAHO will continue to work with WHO to advance the research agenda pertaining to clinical characterization and management of COVID-19 to keep up to date in the evolving understanding of VOCs, disease severity, and post COVID-19 condition.



FUNDING REQUIREMENTS

US\$ 180 Million

Estimated funding requirements to implement priority public health measures for countries in the Region of the Americas to successfully transition from an acute emergency response to a sustained control of COVID-19 during the period 1 April 2022 – 31 March 2023












Funding Requirements

The following section outlines the estimated funding level required for the period 1 April 2022 to 31 March 2023 to implement the priority public health measures already outlined in support of countries and territories in the Region of the Americas; to maintain and scale up their response to the COVID-19 pandemic; and sustain COVID-19 vaccination roll-out and transition out of the acute phase of the emergency response towards integrated and sustained control. The estimated financial requirements will be adjusted as the situation evolves.

Countries included in each subregion:

- **Caribbean:** Antigua and Barbuda, Bahamas, Barbados, Belize, Dominica, Grenada, Guyana, Haiti, Jamaica, Saint Kitts and Nevis, Saint Lucia, Saint Vincent and the Grenadines, Suriname, Trinidad and Tobago
- **Central America:** Costa Rica, Cuba, Dominican Republic, El Salvador, Guatemala, Honduras, Mexico, Nicaragua, Panama
- **South America:** Argentina, Bolivia (Plurinational State of), Brazil, Chile, Colombia, Ecuador, Paraguay, Peru, Uruguay, Venezuela (Bolivarian Republic of)



Amount Required (US\$)					
Pillar	Caribbean	Central America	South America	Regional	Total
 P1. Coordination, planning, financing, and monitoring	2,529,048	2,666,186	6,062,030	9,971,780	21,229,044
 P2. Risk communication, community engagement, and infodemic management	1,394,845	1,092,709	2,176,811	3,444,578	9,108,943
 P3. Surveillance, epidemiological investigation, contact tracing, and adjustment of public health and social measures	1,627,120	2,907,779	5,737,615	4,201,782	14,474,296
 P4. Points of entry, international travel and transport, and mass gatherings	153,183	474,636	357,254	249,589	1,234,662
 P5. Laboratories and diagnostics	2,723,006	5,063,005	4,978,242	9,684,312	22,448,565
 P6. Infection prevention and control, and protection of the health workforce	1,119,379	2,211,017	4,742,658	6,177,427	14,250,481
 P7. Case management, clinical operations, and therapeutics	1,123,384	2,994,560	4,744,714	4,565,115	13,427,773
 P8. Operational support and logistics, and supply chains	737,013	2,280,611	3,748,798	8,712,843	15,479,265
 P9. Strengthening essential health services and systems	5,409,184	6,645,573	12,386,744	5,677,591	30,119,092
 P10. Vaccination	4,550,811	7,219,002	8,998,708	15,975,919	36,744,440
 P11. Research and Innovation	31,468	187,983	626,502	637,486	1,483,439
Total	21,398,441	34,743,061	54,560,076	69,298,422	180,000,000

How to Support this Appeal

Generous donations from the international community allows PAHO to deliver its technical cooperation and deploy its operational and logistics support to address existing and emerging public health challenges impacting the countries and territories of the Americas.

PAHO highly values the donors who have already provided funding to fight COVID-19 in the Region of the Americas. However, in the context of the unprecedented public health crisis confronting LAC countries and territories, continued support to PAHO's response efforts is needed to help slow down and suppress the spread of COVID-19, save lives, and protect the most vulnerable population groups—including health workers.

The current funding needs for 2022 outlined in this strategy are pivotal to maintain and scale up ongoing response to the COVID-19 pandemic, and address the new challenges of emerging variants and the COVID-19 vaccination roll-out.

PAHO ensures that funding is distributed in the most efficient manner and where it is most needed, in coordination with public health authorities and other United Nations agencies in every LAC country.

Here are some ways how private or public organizations and individuals can contribute to this donor appeal.

Donating directly to the COVID-19 Appeal

Financial contributions from governmental aid agencies, multilateral institutions, foundations and philanthropic organizations and other public and private sector partners are one of the most valuable and effective forms of support to the health emergency response. The main characteristic of a financial donation is its flexibility to support an agile response. The resources obtained can be used in a fast and efficient way, responding to the most acute needs, and ensuring that the actions funded are fully aligned with priority public health actions for countries to successfully tackle the COVID-19 pandemic.

Donating organizations are invited to make cash contributions to support one, several or all priority actions and response pillars highlighted in this strategy. To make a donation to PAHO, governments, corporations and foundations can contact Julie Mauvernay (mauvernj@paho.org) or Mariana Faria (fariatmar@paho.org). For more information about how to donate, please email: donate@paho.org.

Contributing to the PAHO COVID-19 Response Fund

As COVID-19 spread to all parts of the world, individual expressions of solidarity have multiplied in support of disproportionately vulnerable populations and communities..Individual donations can make a difference and help save lives by supporting the deliveryof essential supplies and critical assistance to frontline workers and people in need.

Individuals can contribute to PAHO's COVID-19 Response Fund by online donations at<http://bit.ly/pahocovid-19fund> or by mailing checks to PAHO, 525 23rd St NW, Washington, D.C., 20037.

For corporate and foundation giving, please contact Julie Mauvernay (mauvernj@paho.org) or email: donate@paho.org.

Donating in-kind resources and services

PAHO encourages the private and public sectors to align response efforts for the pandemic through the priority action lines outlined in this COVID-19 response strategy. Donations from corporations must comply with PAHO/WHO's guidelines and roadmap for engagement with the private sector.

To make an in-kind donation of good and services, please contact donate@paho.org to guarantee coherent priorities, minimize gaps and duplication in the COVID-19 response,and ensure quality assurance of the goods offered.

PAHO appreciates and thanks in advance its donors for their generous contributionsto the COVID-19 response efforts in the Americas. Contributions to this Appeal will be reported on PAHO's webpage to acknowledge and give visibility to donors' generosity, report on funding received as well as remaining financial gaps.



Photo © PAHO

This report outlines PAHO's regional response strategies for the year 2022 to reduce and control the incidence of SARS-CoV-2 infection; and prevent, diagnose, and treat the coronavirus disease to protect individuals, reduce risk of future variants, reduce disease morbidity, mortality, and long-term consequences of infections to a minimum. It also includes the financial requirements for the implementation of the strategy from April 2022 to March 2023.

PAHO



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