

### COVID-19 Global Outbreak

On 31 December 2019, WHO was alerted to a cluster of cases of acute respiratory syndrome, now called COVID-19. The precise zoonotic (animal) origin of the COVID-19 is still uncertain. The virus (SARS-CoV-2) has been identified in environmental samples from a live animal market in Wuhan City, China, and some human cases have been epidemiologically linked to this market.

Epidemiological evidence shows that COVID-19 can also be transmitted from one individual to another. During previous outbreaks due to other coronaviruses, including Middle East respiratory syndrome coronavirus (MERS-CoV) and the Severe Acute Respiratory Syndrome coronavirus (SARS-CoV), human-to-human transmission most commonly occurred through droplets, personal contact, and contaminated objects (fomites). The modes of transmission of SARS-CoV-2 are likely to be similar. Due to increase importation of cases of COVID-19, countries outside of China are now reporting sustained local transmission of cases.

**Risk Assessment:** **Very High** at global level. Factors taken into consideration are the likelihood of further spread, potential impact on human health, effectiveness of current preparedness and response measures.

**Recommendations of the Emergency Committee:** On 30 January 2020, the Director-General (DG) of WHO declared the COVID-19 outbreak a **public health emergency of international concern** under the International Health Regulations (IHR) (2005) following advice from the Emergency Committee. The DG and Emergency Committee also issued [temporary recommendations](#) to China and to other countries.

### Needs in the Region of the Americas

**Surveillance:** With increasing number of cases detected in the Americas, the capacities of existing human resources will be stretched thin to keep up with trainings on changing case definitions and use of new reporting forms for COVID-19 surveillance, while maintain surveillance for other diseases. Surveillance teams will also need to be strengthened to carry out case investigations and contact tracing.

**Laboratory:** Almost all countries in the region either have national capacity or access to an international reference laboratory for differential diagnosis or confirmation of unusual respiratory diseases, including COVID-19. Challenges include ensuring availability of reagents and tests, adequate and safe shipping of supplies and samples, to ensure continuity of services, as demand for testing grows.

**Case Management:** The lack of appropriate medical equipment for treatment, lack of trained personnel (at all levels including pre-hospital), and inadequate referral systems in countries may hinder access to timely provision of care necessary to save lives.

**Infection Prevention and Control:** Challenges to reduce human-to-human transmission in healthcare facilities include low availability of appropriate personal protective equipment (PPE) and with few trained human resources. Healthcare facilities, healthcare services will need to be reorganized with a focus on improving triage and isolation to facilitate the flow of patients and reduce nosocomial infections.

**Risk communication:** Capacity is low in the region and must be improved to ensure evidence-based information is regularly shared with the populations and travelers to reduce transmission.

#### Situation Assessment

As of 2 March 2020

##### GLOBAL SITUATION

**88,948 confirmed cases**

80,174 in China

8,774 outside China

**2,804 deaths**

2,915 in China

128 outside China

**64 countries reporting cases**

4 with local transmission

##### REGION OF THE AMERICAS

**81 confirmed cases**

2 in Brazil

24 in Canada

1 in Dominican Republic

6 in Ecuador

5 in Mexico

15 in United States

**48 confirmed cases in**

repatriated persons to US:

3 from China

45 from Diamond Princess

Cruise

**2 deaths** in the United States

# PAHO/WHO Response Strategy for the Region of the Americas

*This strategy is aligned with the global WHO Strategic Preparedness and Response Plan (3 Feb 2020). The focus is on scaling up country readiness and response operations in the Region of the Americas.*

**OVERALL GOAL:** Stop further transmission of COVID-19 and to mitigate the impact of the outbreak in the Region of the Americas.

**SPECIFIC OBJECTIVE:** Support Member States in preparing for and responding to COVID-19 outbreaks.

## PAHO/WHO Priority Areas

- Risk communication
- Surveillance
- Case management
- Infection Prevention and Control (IPC)
- Laboratory
- Coordination and Logistics

### PRIORITY RESPONSE ACTIONS:

- **Surveillance (both indicator-based and event-based):** Reinforce active case-finding and enhance existing surveillance systems to enable monitoring of COVID-19 transmission
- **Laboratory:** Support standardized systems for molecular testing, support access to reagents and testing kits, ensure specimen collection, management, referral network, and procedures are functional.
- **Case management:** Assess burden on local health system and capacity to safely deliver primary healthcare services, share regularly updated information and train or refresh medical and ambulatory teams on management of severe acute respiratory infections and COVID-19-specific protocols. Share guidance on clinical management.
- **Infection Prevention and Control (IPC):** Prepare rapid health assessments and isolation facilities to manage ill passengers and to safely transport them to designated health facilities; identify intensive care unit capacities in countries; engage trained staff with technical expertise to implement IPC activities.
- **Coordination and Logistics:** Support development of national plans to manage PPE supplies, prepare staff surge capacity and deployment mechanisms.
- **Risk communication:** Support country capacity for risk communication and health promotion, to help countries communicate with their populations rapidly, regularly and transparently, as well as address rumors and misinformation. Communicate information about COVID-19 to travelers.

## Resource Requirements

### US \$53.5 Million Required

For 6-month response, by subregion:

- Regional Response: \$11.4M
- Caribbean: \$12.0M
- Central America: \$15.4M
- South America: \$14.7M

An initial six (6)-month response (from 1 March 2020 to 30 September 2020) is anticipated to continue and scale-up COVID-19 response as more outbreaks are expected within the region. PAHO/WHO has established Incident Management teams both regionally and in country offices to provide technical guidance, to coordinate regional response efforts including surge capacity for human resources, and to support strategic partnerships globally and locally. PAHO/WHO will continue to contribute experts in global discussions to support priority research and innovation as more information is uncovered about COVID-19.

## CONTACT INFORMATION

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