



BARBADOS

An example of government leadership and regional cooperation in containing the COVID-19 virus

This case study was compiled by World Health Organization (WHO) with input from the PAHO/WHO Office for Barbados and the Eastern Caribbean Countries. It is taken from the July publication of COVID-19: WHO's Action in Countries.



2019 World Health Day, Universal Health Solidarity Chain event in Barbados
Photo credit: PAHO ECC Office Barbados

Cover photo - Hon Prime Minister of Barbados, Mia Mottley and Minister of Health and Wellnes, Lt Col Hon Jeffery Bostic.
Photo credit: Prime Minister's Office Barbados

As of August 10, the Eastern Caribbean island nation of Barbados – a high-income country with a population of 290,000 and an economy dominated by tourism and international trade – has recorded 142 confirmed COVID-19 cases and seven deaths, with more than half of cases occurring within a month of the first reported case on March 16 and no deaths occurring since the end of April. The risk of COVID-19 is now considered low enough that the Government is promoting the country as a haven from the disease for foreigners to stay and work remotely (see box). While having the advantage of being an island and thus the ability to more easily prevent importation of the virus, Barbados' quick and comprehensive response to the pandemic has undoubtedly been a key factor in the country's success to date in preventing widespread community transmission. This case study describes the actions taken and critical factors that account for Barbados's success, as well as PAHO's role in supporting the nation's response.

Early planning, building upon past experiences and plans

Barbados had the advantage of having well-developed preparedness plans for pandemic influenza and other pandemic diseases (e.g., Ebola). The PAHO Office for Barbados and the Eastern Caribbean countries worked with Ministry of Health officials to identify the gaps and required adjustments to these plans in order to develop a COVID-19 plan. The plan, which details the steps to be taken by a wide range of sectors and stakeholders at each of four stages of the outbreak, was completed and approved by the Government by mid-March – several days before the first case was identified on the island. This planning, along with the sharing of technical guidelines and consultations by PAHO with the Government, led to rapid actions once the first cases (from passengers arriving from overseas) were confirmed. These early actions include, among others described in more detail below:

- Screening of all arriving passengers at points of entry for COVID symptoms and requiring them to leave their contact information. This was soon followed by a mandate for all arriving passengers to quarantine for 14 days regardless of whether they had symptoms, which

caused airlines to suspend most international flights;

- Designation of the Barbados Government Information Service (BGIS) (<https://gisbarbados.gov.bb/covid-19/>) as the primary source of accurate information on COVID the day after the first case was reported. The Website contains a range of protocols, situation reports and articles, and educational videos;
- Establishment of a 24-hour hotline manned by medical and nursing students and volunteers to provide accurate information to individuals – in an effort to counter rampant misinformation and fake news – and to direct people with symptoms to appropriate services, thus helping to identify cases. The hotline, set up a week before the first case was reported, has received, on average, 150 calls a day.

Early development and rapid built-up of COVID-19 testing capacity and contact tracing

In anticipation of COVID-19 arriving in the Eastern Caribbean, PAHO conducted on February 11-12 a hands-on, in-person training in COVID PCR testing for staff of the Best-dos Santos Public Health laboratory, a state-of-the-art facility built with support the U.S. CDC. PAHO also provided test kits, reagents and other testing supplies, enabling the lab to begin COVID-19 testing more than a month before the first case was detected on the island. Thus, in a matter of weeks, the national laboratory went from having only capacity to test for influenza prior to the emergence of COVID-19 to being one of the first laboratories in the Caribbean to conduct COVID-19 testing.

While there have been some shortages of test kits and testing supplies, especially in April when global demand was highest, Barbados has been by and large able to test those who need it (e.g., persons with symptoms, health workers, contacts of cases) in a timely manner. As a result of a PAHO donation of testing kits and enzymes, procurement through the U.N. system, and purchases on the open market, the country has been able to procure 20,000 test kits. The laboratory has conducted more than 13,000 tests to date and has capacity for over 100,000 tests at hand to continue testing well into the future.

Also critically, the Ministry of Health and Wellness created the new position of Health Liaison Officer in response to the outbreak. Sixty officers were hired throughout the country to support contact tracing, as well as to work with community leaders to disseminate accurate COVID-related information and encourage community cooperation with the response.



Dr. Lionel Gresh (L), PAHO/WHO Virologist, training staff at the Best dos Santos Public Health Laboratory. Photo credit: PAHO ECC Office Barbados



PAHO and Canada donate essential supplies to Barbados. From right PWR-ECC, Dr Yitades Gebre, Minister of Health and Wellness, Lt Col Jeffrey Bostic and Ms Natalie Hutchinson, Senior Development Officer, High Commission of Canada to Barbados and OECS. Photo credit: PAHO ECC Office Barbados



“We need a global leadership initiative that is rooted in moral leadership more so than ever.” - Prime Minister, Mia Amor Mottley



Top - Hon Prime Minister Mia Mottley addresses the Social Partnership Meeting on COVID 19, held 10 March 2020 with representation from Labour, Private Sector, Church, Political Opposition, Tourism, Agriculture and Health. Bottom - Social Partnership Meeting on COVID-19, held 10 March 2020. Photo credit: Prime Minister's Office Barbados

Strong, inclusive leadership and communications from the top

The Prime Minister of Barbados has received international attention for her leadership in responding to the COVID pandemic.¹ She took ownership of the response early on in making key decisions and in keeping the public informed about the epidemic and restrictive measures to curb it. She was also the only leader in the Eastern Caribbean to name a COVID-19 czar (on 11 March), a sociologist with experience in Sierra Leone during the Ebola outbreak, to coordinate the Government's response and serve as its consistent face to the public. The Prime Minister also appointed two other technical experts to help lead the response – a quarantine facilities manager to oversee the establishment or conversion of COVID treatment and quarantine facilities, and an infectious disease specialist to oversee the isolation facilities, clinical management and training of health workers.

Shortly after the first case was confirmed, the Prime Minister gave a press conference from the Parliament to inform the public about the outbreak and the government's actions, followed by regular press updates broadcast on TV and radio given by her COVID-19 leadership team, the health minister or chief medical officer, among others.

Another key aspect of the Prime Minister's leadership was to consult with and seek the buy-in of a range of stakeholders – from the public and private sectors, including the business and tourism industries - in the national COVID-19 preparedness plan and in changes in the designated stages of the outbreak. Prime Minister Mottley

held a five-hour meeting with these stakeholders to present and discuss the plan before its publication in early March.

Most critically - and in following the World Health Organization Director General's request that countries not politicize the pandemic – opposition political leaders and other social partners were included in the meeting and all agreed to present a united front in supporting the Government's COVID-19 response. PAHO officials, upon request, made presentations and participated in the discussions during the consultations with stakeholders.

This solidarity likely contributed to the population's generally good compliance (with some lapses) to the rather strict lockdown measures that were put in place once a national emergency was declared on March 28 and the country entered Stage 3 of the response after 24 cases had been confirmed. These measures included the closure of all non-essential businesses (for a month from early April to early May) and a 24-hour curfew during this period, which prohibited all but essential workers from leaving their homes, except for medical reasons or to visit banks and supermarkets, following a schedule based on the first letter of people's last name. (The curfew was later relaxed to evening hours only from May 3 to June 30).

¹ Wilkinson E Covid-19: a lesson in leadership from the Caribbean, 18 May 2020 blog. Available at: <https://www.odi.org/blogs/16959-covid-19-lesson-leadership-caribbean>.

² CNN interview with P.M. Mottley by Christiane Amanpour, April 29, 2020. Found at: <https://www.youtube.com/watch?v=awL3tKAFU8>.

Scaling up COVID-19 treatment and quarantine capacity to minimize disruptions in the delivery of essential health services



To prevent the country's main hospital from being overwhelmed with COVID-19 cases in the event of a major outbreak and to avoid major disruptions in essential health services, the Government made plans early on to set up specific facilities for treating and isolating COVID-19 patients and for quarantining those potentially exposed to the virus. A military hospital – the field Medical Facility at Paragon Base – became a COVID-19 treatment facility, to which PAHO donated PPE kits and other medical supplies. And within five weeks beginning in early March, an abandoned military base was rebuilt and converted into a first-class hospital with 220 beds (38 with ventilators and monitors and 182 isolation beds) and turned over to the Ministry of Health and Wellness. A contingent of 100 Cuban doctors and nurses with intensive care experience were also brought in in early April to specifically treat COVID-19 patients at these facilities, thus freeing up local health workers to conduct COVID-19 testing and provide other routine health

services.

Within eight weeks, Barbados increased the number of intensive care unit beds with ventilator capacity from 6 to 54 beds, and added a further 42 high dependency beds to the response. All cases were able to go into one of the 100 newly established isolation beds upon receiving a positive test result.

At the same time, several quarantine or isolation facilities were established to house the contacts of cases and others not able to quarantine or isolate at home (e.g., travelers from overseas before flights were halted). These include a 70-bed quarantine and isolation facility (Enmore) across from the country's main hospital that was built during the Ebola epidemic in West Africa, and a primary school (Blackmann & Gallop) that had been designed to also serve as an emergency shelter during tropical storms, and which expanded its

Above - Harrison Point Naval Base building before (1st photo) and after its restoration as a COVID-19 facility .

Photo credit for first 2 photos: Colin Browne. Photo credit far right photo Barbados Today

capacity for COVID from 48 to 126 beds.

PAHO has monitored the provision of essential health services during the COVID-19 emergency and found that critical services (immunization, maternal and newborn health, sexual and reproductive health, NCDs and communicable diseases) were maintained, except during the one-month strict lockdown period, where patients were required to make appointments. Some reduction in services also resulted from some health workers at the primary health care level being diverted to higher levels of care. To address these reductions, the Government expanded the schedule for primary health care clinics, increased the use of telemedicine, and revised drug proscribing policies to enable patients with non-communicable diseases to get a three-month supply of their medications.



The Enmore quarantine/isolation facility. Photo credit: PAHO ECC Office Barbados



Above - Special Meeting of CARICOM on COVID-19 held 1 March 2020.
 Photo credit: Prime Minister's Office Barbados

Collaborating with other Caribbean Island Countries

Through CARICOM – a regional organization of 20 Caribbean states that promotes economic integration and cooperation – and other groups, such as the forum of Eastern Caribbean country health ministers, Barbados worked with other countries in the region to coordinate their responses to COVID-19, share experiences and assist each other during the crisis. CARICOM countries, led during this period by Barbados' Prime Minister as rotating chair, jointly procured critical medical supplies and equipment (e.g. PPE, ventilators, test kits), in order to improve economies of scale through

centralized procurement, using two pooled purchasing mechanisms: 1) the PAHO/WHO Strategic Fund for essential medicines and public health supplies; and 2) the Logistics and Procurement Cell of the Regional Coordination Centre, a regional response mechanism managed by the Caribbean Disaster Emergency Management Agency.

Through CARICOM, Member States were also encouraged to integrate psycho-social support; gender considerations, child protection, and appropriate cultural elements into their COVID-19 policies and strategies, as

well as to enroll in the WHO Solidarity Trial for COVID-19 vaccines. In addition, the seven countries covered by PAHO's Eastern Caribbean country office shared SARS-CoV-2 PCR test kits and other critical supplies with each other to minimize shortages. As a further example of regional collaboration, the Caribbean Public Health Agency's laboratory in Trinidad (CARPHA), with supplies provided by PAHO/WHO, conducted COVID-19 tests of samples sent from other Eastern Caribbean countries before they had their own testing up and running.

A prime example of cooperation among Eastern Caribbean Countries in the fight against COVID-19 involves the

Regional Security System (RSS), a long-standing collaboration between the military forces of the seven countries to share in each other's defense and provide mutual aid during natural disasters. Following a letter of agreement between PAHO and this network, and in coordination with the Public Health Emergency unit at the PAHO Country Office, RSS helicopters ferried critical medical supplies, including test kits, specimens and PPE, as well as personnel, to the various member states. During a time when all other air travel was suspended, these airlifts became a critical lifeline in the response to COVID for these small island countries.



RSS delivers supplies to Dominica.
Photo credit: Chris Stuart

Applying the experiences and innovations from COVID-19 to improve health services in Barbados

The COVID-19 crisis has led to a number of improvements and innovations in the delivery of health care services that should continue into the future. Examples include extending the hours for primary health care services, using telemedicine to ensure continuity of NCD care services and to extend their reach (as practiced by the Barbados Diabetes Association), and the use of hotlines or helplines to provide responsive health advice to people. PAHO has made a substantial contribution to ensure the maintenance of essential health services, including;

- designing tools to help health institutions assess their level of maturity to offer telemedicine services and to identify possible gaps or areas that could require more attention and expert technical

support.

- conducting an assessment of the Management of Human Resources for Health in response to COVID-19 and health systems readiness.
- supporting prioritization of childhood immunizations as part of essential health services in the context of COVID-19 and advising on adaptations to ensure strict infection prevention and control measures.

Barbados has sent its expression of interest to the global COVAX facility to access COVID-19 vaccine when it becomes available and to build back better the economy for the people and to be a safe and viable tourism destination. The existing immunization program services and national strategies are

being assessed for readiness to deliver a new COVID-19 vaccine.

The PAHO/WHO country office will continue its support of the health system through a combination of strategies. These include strengthening health service delivery by focusing on primary health care, incorporating evidence-based innovative approaches to promote greater access to health services, positioning

the health sector at the center of the government's digital transformation, and exploring opportunities to strengthen collaboration across sectors and establish strategic alliances with partners to address the impact of the deepening inequities across society arising from the pandemic.

Vaccination day
Photo credit: PAHO



BOX 1

Taking advantage of Barbados' low-risk COVID status to entice foreigners to work remotely from its beaches: the Welcome Stamp Visa program

While Barbados hasn't closed its borders due to the COVID-19 pandemic, once it announced a 14-day quarantine for all travelers from Europe and the U.S., along with the suspension of cruises, tourism effectively stopped on the island. With tourism accounting for more than 40% of the nation's economy and a major source of foreign exchange earnings, this has had a devastating economic impact in a country that was already one of the most indebted countries in the world in terms of debt to GDP ratio (at 118% in 2020).³

With the incidence of COVID-19 remaining low, leading to the lifting of curfews on July 1 and the phased-in resumption of international flights starting in mid-July (based on the COVID risk in originating countries), Barbados has decided to promote itself as an oasis from COVID for foreigners able to work remotely. A brainchild of Prime Minister Mottley, the Welcome Stamp Visa program, started in mid-July, offers tax-free stays for 12 months or longer for workers and businesses

that are location-independent. To further attract long-term visitors, the application submitted on-line is processed within 48 hours and the visa processed within seven days.

As the Prime Minister has stated, "COVID-19 has placed a severe strain on people's mental well-being. The sunshine is powerful. The seawater is powerful. They're both therapeutic in ways that are hard to explain. And we felt that, why not share it?" According to the Washington Post, the message is: "Come here, not just for a holiday but for up to a year. Bring your laptop. Soak up the sun, sea and sand and forget about coronavirus."⁴ The appeal of Barbados as a long-term destination is enhanced by its political stability, well-developed tourism infrastructure, relatively high standard of living and the fastest fiber-optics Internet and mobile services in the Caribbean.

The focus on longer-term stays and permanent relocation of professionals and businesses is seen as having many of the same

economic benefits, including foreign exchange earnings, as short-term tourism, while reducing the risk of importing COVID that a greater number of short-term visitors would entail. Strict protocols have been put in place for all visitors to minimize this risk, including temperature checks at the airport, and confirmation of a negative COVID test result taken within 72 hours prior to arrival, or submission to testing at the airport, followed by quarantine until the test results are received. This program may become a model for other tourism-dependent countries that remain at low-risk of COVID transmission and is already being examined by other Caribbean island countries.



³ UNDP, UNICEF, UN Women, Barbados COVID-19 HEAT Report, Human and Economic Assessment of Impact, April 2020.

⁴ Taylor Adam, Barbados wants you to work from its beaches during the pandemic, Washington Post, July 16, 2020. Found at: www.washingtonpost.com/world/2020/07/16/barbados-work-remote-coronavirus.

BOX 2

Examples of PAHO's assistance to the Eastern Caribbean sub-region in responding to COVID-19



In addition to Barbados, the PAHO office in the country serves six other small Eastern Caribbean countries (ECCs): Antigua and Barbuda, Dominica, Grenada, St. Lucia, St. Kitts & Nevis, St. Vincent and the Grenadines. Within days of WHO declaring COVID-19 a public health emergency of international concern (on January 30, 2020), the Office set up an Incident Management and Support Team (ISMT) – consisting of PAHO experts in various technical areas (e.g., surveillance, health services, laboratory testing, clinical management, infection prevention and control or IPC), as well as PAHO specialists residing in

each of the six other countries – to coordinate an effective response throughout this sub-region and to advise on adjustments to policies and protocols. Highlights of this assistance include:

- **Development of national COVID-19 plans.** Building upon existing pandemic preparedness plans, such as for influenza, PAHO assisted each country through field visits and teleconferencing, in developing national COVID Strategic Preparation and Response Plans.
- **Building national laboratory**

capacity in COVID testing. Besides the lab in Barbados, PAHO provided training -- mainly virtually -- in PCR testing for COVID to labs in each of the six other countries. These included national laboratories, private testing facilities that provided tests for free and university labs. PAHO also donated test kits and helped the labs procure other critical supplies. As a result, all seven countries are now conducting COVID testing on their own.

- **Building national technical capacities.** The PAHO ECC Office has organized Webinars

Above - PAHO/WHO Representative to Barbados and the Eastern Caribbean Countries and Incident Management Team virtual meeting with Chief Medical Officer, Dr Hazael Laws, St Kitts and Nevis. [Photo credit: PAHO ECC Office Barbados](#)

on wide-ranging topics for different audiences across the seven countries. These have included sharing experiences in COVID-19 clinical management (attended by 187 health professionals across countries); training on data collection tools for COVID surveillance and in mathematical modeling of COVID incidence to plan short-term needs; IPC training for health workers and workers in the tourism sector, such as hotel workers and taxi drivers; training in the management of acute stress among health care workers dealing with COVID-19 (using MHGap);

psychological first aid training for individuals and communities (attended by 1,300 community and religious leaders, influencers and hotline workers); a virtual dialogue among 1,400 young people from the region on coping with pandemic-related isolation; training in the management of NCD services in the midst of the pandemic; and dialogue and guidance on how to safely resume international travel in the region.

- **Procurement of essential supplies.** Through the PAHO Strategic Fund for medicines and public health supplies;

needed medical supplies, test kits and testing supplies, as well as communications materials were procured for all seven countries. In addition, PAHO mobilized resources from international partners such as UK-DFID, the European Union, USAID, and the governments of Brazil and Canada to procure essential supplies. As mentioned above, PAHO's collaboration with the RSS also ensured the distribution of these supplies to the countries once commercial air travel was suspended.



Photo: PAHO/WHO Office Barbados

BOX 3

Calling upon the local and emigrant community to help those most in need during the COVID emergency: the Adopt a Family Programme

With the economic devastation resulting from the suspension of tourism and the lockdown, including a nearly four-fold increase in unemployment (to 40%), the Government of Barbados has established the innovative Adopt a Family Programme as part of a large stimulus package to assist individuals and local busi-

nesses. Corporations and well-off Barbadians, including those living overseas, are encouraged to contribute to a government fund that provides cash assistance (BD\$600 or US\$300 per month) to the neediest families. Contributions can be made through WhatsApp or through local banks.

As of July 14, the fund, which gar-

nered considerable media attention, has received BD\$5 million, with the Government contributing \$2.9 million and private donors, including from the U.S., contributing \$2.1 million. While 1,500 families were initially targeted, the private donations have enabled the program to assist nearly 3,000 families, who are issued debit cards.



Photo: PAHO/WHO Office Barbados

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Contact the PAHO/WHO Office for Barbados and the Eastern Caribbean Countries:

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