

COVID-19 pandemic



PAHO's Advice

ICAO Virtual Meeting for Ministers of Health, Tourism and Transportation and
Civil Aviation Authorities Directors General on Aviation Recovery

North American, Central American and Caribbean (NACC) States

Virtual Sessions, 28-29 October 2020

58th PAHO Directing Council / 72nd WHO Regional Committee for the Americas 28-29 September 2020

58th DIRECTING COUNCIL
72nd SESSION OF THE REGIONAL COMMITTEE OF WHO FOR THE AMERICAS
Virtual Session, 28-29 September 2020

Provisional Agenda Item 4.2 CD58/6
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COVID-19 PANDEMIC IN THE REGION OF THE AMERICAS



Introduction

1. As of 15 July 2020, the pandemic. The Region includes 10 countries of the Americas (BR, CL, CO, CR, CU, EC, PA, PE, PR, and VE). All 54 countries and territories have implemented various measures to control the pandemic and to ensure its success.

2. Although not yet quantified, the COVID-19 pandemic in the Region is believed to be unprecedented. National authorities to strengthen and lessons learned through engagement in responding to the pandemic have succeeded in responding to the pandemic is increasing pressure to resolve in a manner that does not compromise

3. This document provides an update on the COVID-19 pandemic in the Region of the Americas and on the response of the Pan American Sanitary Bureau (PASB). It provides information for Member States of the Pan American Health Organization (PAHO) on how to strengthen and support responsive and adaptive health systems in the face of risks from this pandemic so that the health and well-being of societies, as well as social and economic development in the Region, can be sustained. It assumes that the Region will experience recurring epidemic waves and outbreaks interspersed with periods of low-level transmission over the next 24 months, pending development of a safe, efficacious, and equitably accessible COVID-19 vaccine and achievement of appropriate population coverage

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RESOLUTION
CD58.R9

COVID-19 PANDEMIC IN THE REGION OF THE AMERICAS

g) provide support to Member States, in the framework of the IHR and in coordination with the World Health Organization, through the development and publication of regional guidelines and recommendations on the management of international travelers, for example, the effectiveness of traveler screening tools, among others, in order to allow Member States to undertake the corresponding risk management activities;

pandemic is, and will be, requiring national leadership and responsibility as well as the whole-of-government and the whole-of-society commitment to sustain consistent and robust response, mitigation, and recovery efforts in the medium and long terms;

Recalling World Health Assembly resolution WHA73.1 on the response to the COVID-19 pandemic, and in particular the call, in the spirit of unity and solidarity, to intensify cooperation and collaboration at all levels in order to contain and control the COVID-19 pandemic and mitigate its impact;

Resolution CD58.R9

Resuming non-essential international air traffic

PAHO's advice

✓ Risk-based approach

- Risk Assessment
- Risk Mitigation
- Risk Communication

✓ Use of medical surgical masks

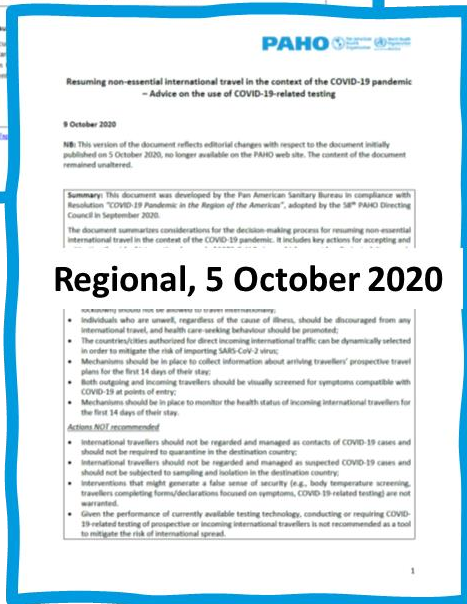
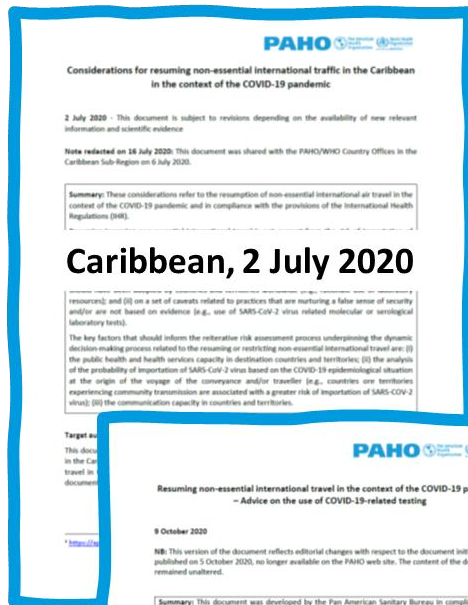
✓ Visual screening at airports

✓ Health monitoring of incoming travellers for 14 days

✗ No quarantine of travellers

✗ No testing of travellers as condition to...

✗ No other practices generating false sense of security



✓ Risk-based approach

Risk Assessment



Level of **acceptable** risk of COVID-19 introduction



Zero risk



Closure of borders



If borders open

Determination of residual risk



- Public health and health services capacity at destination
- Epidemiological situation in locations from which direct connections exists
 - Selection of origins → sources of information
- Communication capacity at origin and destination
 - Travellers
 - Operators
 - Other countries

Need to define:

- Essential traffic
- Non-essential traffic

✓ Risk-based approach

Risk Mitigation



To be **prevented at origin from travelling**

Cases isolated; Contacts quarantined; Residents in locked-down areas; Sick individuals



Travellers population is a COVID-19 **low prevalence** population



- Travellers are **NOT cases** – **NO** isolation
- Travellers are **NOT contacts** – **NO** quarantine
- Infected asymptomatic vs symptomatic



Travel Experience



Personal protection and hygiene

Environmental measures

Physical distancing

Public health measures



Adherence to measures at destination

✓ Risk-based approach

Risk Mitigation



Travel Experience



| Personal protection and hygiene | Environmental measures | Physical distancing | Public health measures |
|---|---|--|--|
| <ul style="list-style-type: none">✓ Medical surgical masks- Universal control of sources of infection- Easy compliance monitoring- Low cost • Hand hygiene• Respiratory etiquette | <ul style="list-style-type: none">• Cleaning of aerodromes and aircrafts | <ul style="list-style-type: none">• Smooth flow of passengers and workers at aerodromes• Crowd control at aerodromes...and on aircrafts | <ul style="list-style-type: none">• Collection of information for locating incoming traveller for 14 days after arrival (IHR Article 23)✓ Visual screening for COVID-19 compatible signs at airports✓ Health monitoring for 14 days after arrival |

Risk-based approach

Risk Mitigation



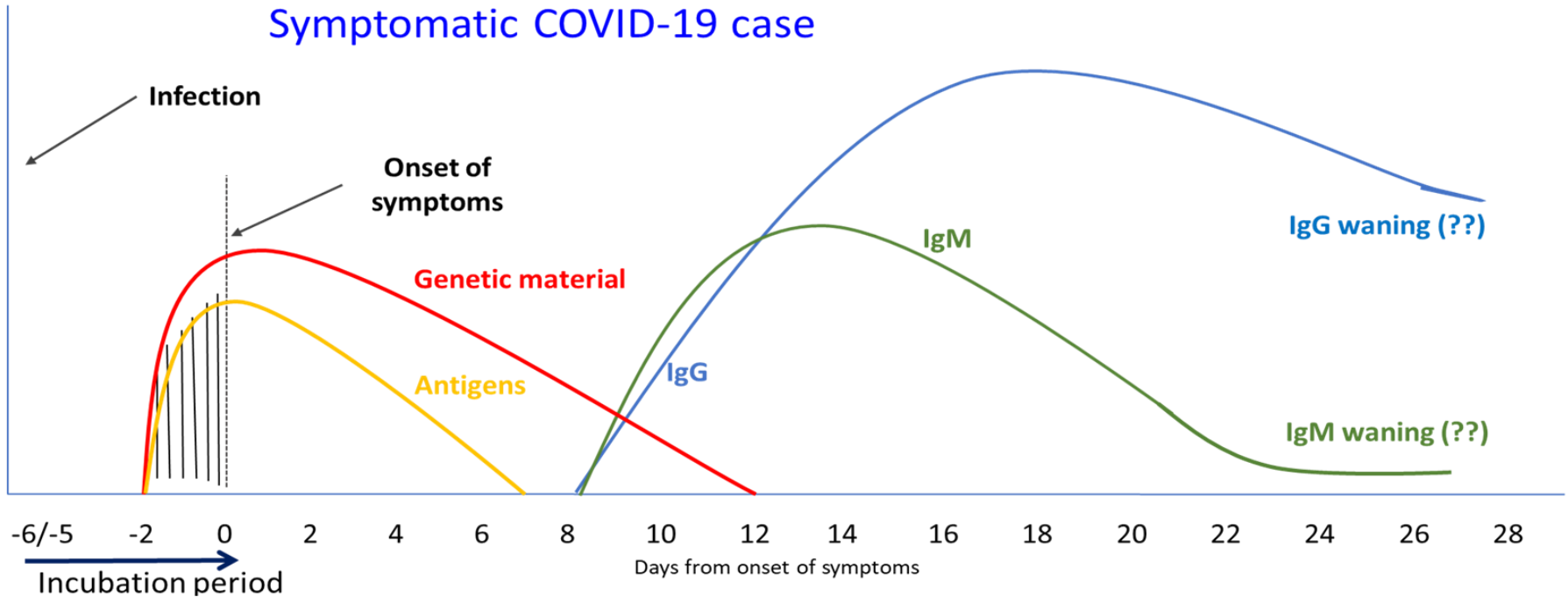
At present, **NO** to measures and interventions which may:

- ✘ Pose **unnecessary obstacles** to the International travellers and, hence, deter them from travelling
 - Quarantine of incoming travellers
- ✘ Generate **crowding** at aerodromes
 - Completing forms
 - Medical exams/procedures
- ✘ Generate **false sense of security**
 - Temperature screening
 - Forms focused on symptoms
 - **Laboratory testing**

- Primary limitations of SARS-CoV-2 virus-related testing
 - Natural history of the infection
 - Epidemiology of the infection
 - Characteristics of the laboratory assay
- Secondary challenges
 - Legal
 - Operations
 - Effective resource management

SARS-CoV-2 virus-related testing

Symptomatic COVID-19 case



Confirmatory/diagnostic test

Non-confirmatory/research test

Molecular test (RT-PCR)

Antigen test (ELISA or RDT)

Serological test (ELISA or RDT)

Detects: genetic material
In: nasopharyngeal swabs

Detects: proteins
In: nasopharyngeal swabs

Detects: antibodies
In: blood

High sensitivity
High specificity

Acceptable sensitivity (80-90%)
High specificity

Gold standard

To expand diagnostic capacity

For seroprevalence studies

Risk-based approach

Risk Communication



- Health advice **AND** Travel measures
- Communication mechanisms: agreed upon by all governmental sectors and targeting different audiences (travellers, operators, other countries)
- Engagement and buy-in from the general public, travelers and other stakeholders (Annex 4 of the IHR)
- Any introduction, change, termination of non-essential international traffic related measures to be communicated clearly, timely, and through consistent channels, incl. multiple languages
- Comprehensive information about non-essential international traffic related measures: rationale, dynamicity, anticipated introduction of imported cases, etc.

Thank you