

Introductory note for the reader of UNDP-ISGlobal Policy papers on COVID-19 in the Caribbean

Author's note on the current edition of the report.

Three policy papers were generated in the period of October to December 2020 addressing the COVID-19 pandemic in the Caribbean, as per the request of the UNDP:

- “Considerations towards the opening of the British Virgin Islands to tourism” (date of submission: October 2020).
- “Regional Scenarios for COVID-19 Prevention and Control” (date of submission: 10th December 2020).
- “COVID-19 Epidemiological Situation and Response in Eastern Caribbean States” (date of submission: 10th December 2020).

These papers answered specific questions posed by the countries and proposed regional recommendations focusing on the analysis of ten English-speaking countries and Territories in the Eastern Caribbean (Anguilla, Antigua and Barbuda, Barbados, British Virgin Islands, Dominica, Grenada, Montserrat, Saint Kitts and Nevis, Saint Lucia, Saint Vincent and the Grenadines). Nonetheless, recommendations enclosed in them may apply to other Caribbean and non-Caribbean countries, especially other island-states. These papers are not intended to be holistic or prescriptive, but rather targeted and with enough information to serve as complementary source for countries in their development of COVID-19 guidance and their decision-making processes.

While proposed thresholds in the “Regional Scenarios for COVID-19 Prevention and Control” and most of the recommendations still stand, it is important to note that countries priorities should focus now in accessing and providing vaccination to respective populations while ensuring necessary protocols to control the spread, particularly of those new strains with much higher transmissibility.

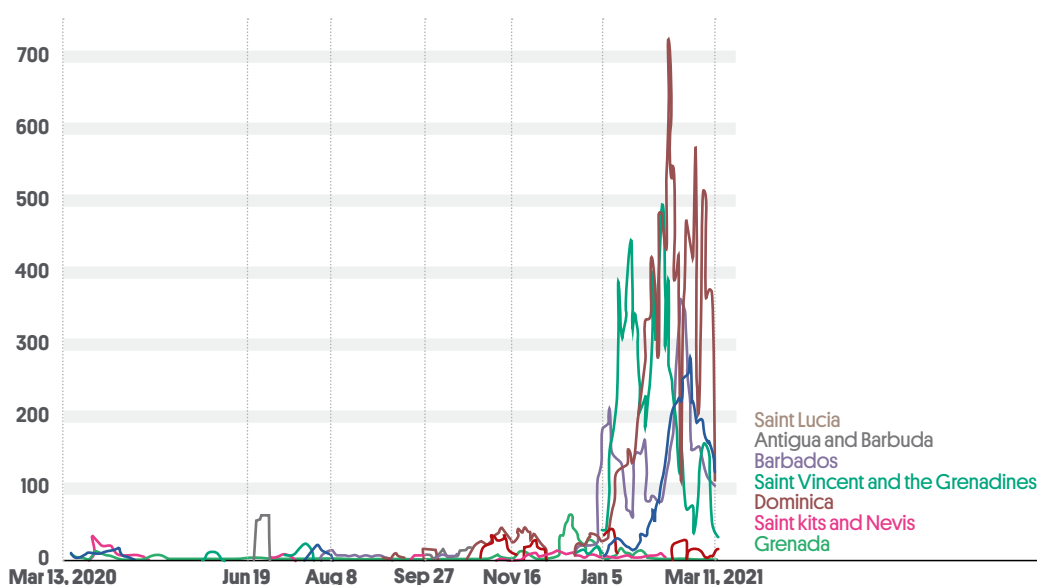
Evolving context since the writing of the policy papers

At the time of writing the last reports (mid December 2020) Eastern Caribbean States had been able to keep low levels of COVID-19, with the country that had recorded most cases per day being Saint Lucia with 8 cases in one day in November, and Barbados being the country with the highest cumulative number of cases since the start of the pandemic, with a total of 266 cases until the 27th of November 2020. However, the first quarter of 2021 has observed the first waves of the COVID-19 pandemic in a number of Caribbean countries. In the period of January to March

2021, Antigua and Barbuda, Barbados, Saint Lucia, and Saint Vincent and the Grenadines registered most COVID-19 cases since the start of the pandemic. The British Virgin Islands observed a second wave in December-January which seems to be now controlled, after having had a first wave in August 2020. Grenada saw their surge in cases in December, and the situation seems to have been controlled from January onwards. All these surges are now in their downward trend, mimicking the downward trend in cases worldwide.

Daily new confirmed COVID-19 cases per million people

Show is the rolling 7-days average. The number of confirmed cases is lower than the number of actual cases; the main reason for that is limited testing.



Source of graph: [Our World in Data](#)

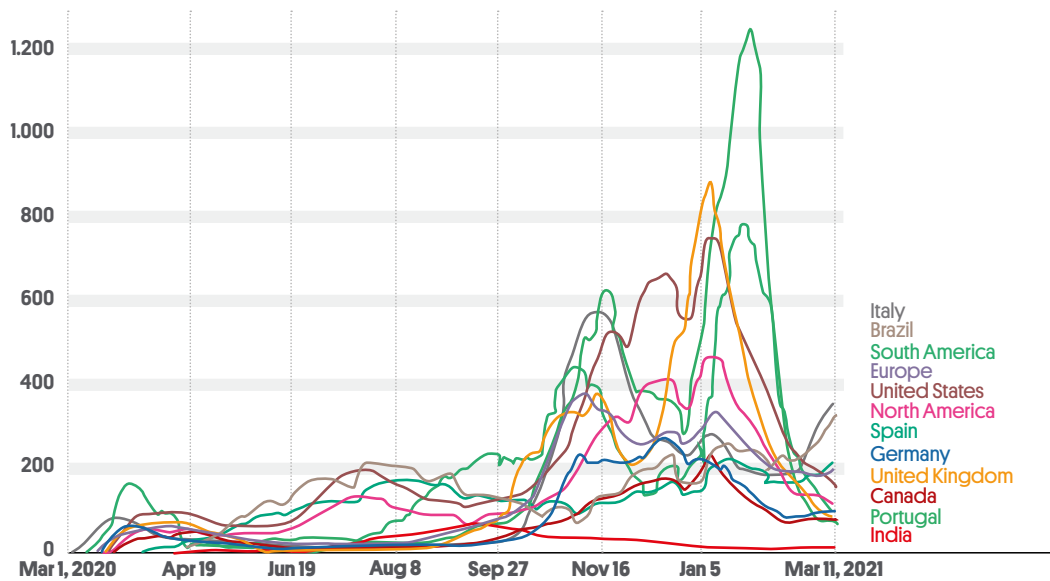
In an [interview published in the scientific journal The Lancet](#), the executive director of the Caribbean Public Health Agency (CARPHA), Joy St John, argues that the return of tourism per se is probably not the main driver of the spike in cases in the Caribbean, given that several countries managed to re-open their borders for several months. Nonetheless, she points out that the introduction of the highly transmissible COVID-19 variant B.1.1.7. in the Caribbean in late 2020 may have played a role, together with Christmas gatherings and the COVID-19 fatigue causing a certain letting down of the guard, aside from country-specific factors. This surge in cases in the Caribbean countries has caused a strengthening of measures in many countries including lockdowns or curfews in some instances.

At a worldwide level, at the time of writing the policy papers a second wave was on the rise in the northern hemisphere – which is now seeing its decline or end in most countries –, with countries in Asia, Africa and Oceania managing to avoid by and large the dramatic increases in cases compared to population totals that have been observed in Europe and North America.

Nonetheless, with many northern countries going into easter holidays at the end of March and the rapid spread of the new more transmissible variants in these countries, the advent of a third wave is likely to be observed in the coming weeks.

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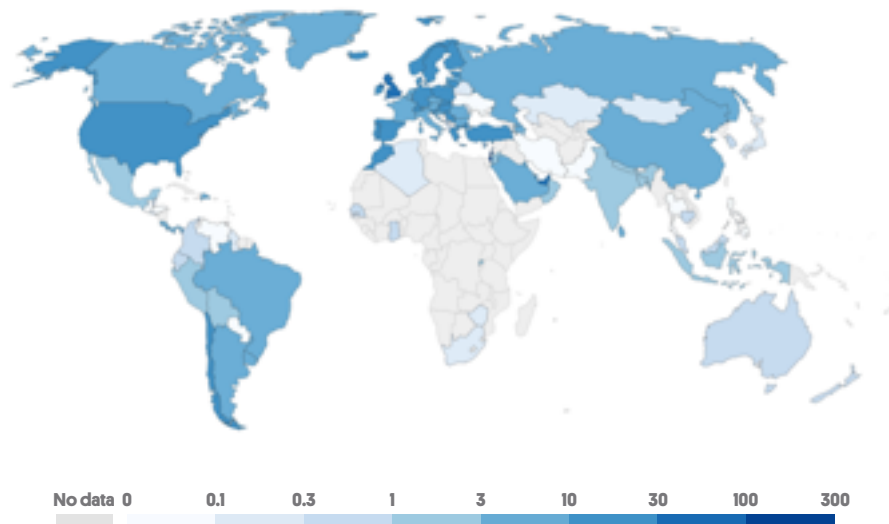
Source of graph: [Our World in Data](#)

Worldwide, 2,5% of the population has so far received at least one dose of any vaccine against the SARS-CoV-2 virus and 0,9% has been fully vaccinated. To date, most doses have been administered in the global north. High-income countries have bought about half of the world's current vaccine supply even though they represent only 13% of the world's population. Low and middle income countries have recently started to receive vaccines through the COVAX initiative, although in very small amounts which are mainly intended for healthcare workers. It is predicted that wide access to vaccines by the general population will not be achieved until 2022 or 2023 in low and middle income countries.

Vaccination in several Caribbean countries has already started (Barbados, Dominica, Antigua and Barbuda, Saint Vincent and the Grenadines, or British Virgin Islands), with some nations leveraging the COVAX initiative for vaccination and others reaching bilateral deals with the manufacturers. The British Virgin Islands has already started vaccinating their population with the AstraZeneca vaccine through the doses dispatched from the UK.

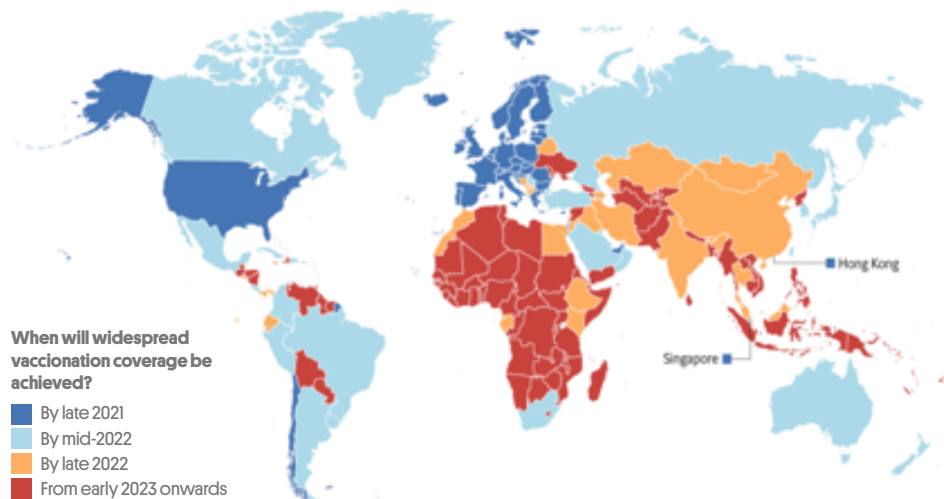
COVID-19 vaccine doses administered per 100 people, Mar 10, 2021

Total number of vaccination doses administered per 100 people in the total population. This is counted as a single dose, and may not equal the total number of people vaccinated, depending on the specific dose regime (e.g. people receive multiple doses)



Source of graph: [Our World in Data](#)

Rich countries will get access to coronavirus vaccines earlier than others



Source of graph: [The Economist Intelligence Unit](#)

During the last quarter of 2020 and first quarter of 2021, several variants of SARS-CoV-2 virus have posed concern because of their higher transmissibility – which ultimately leads to more deaths than higher lethality – and the fear of vaccines being less effective against them. Three variants have outstayed and are now widespread across the globe. The first variant is the B.1.1.7, originally detected in the UK and known to be more transmissible and to possibly increase severity and mortality. The second variant is the B.1.351, first detected in South Africa and observed to be more transmissible and less susceptible to protection derived from prior infection from other variants and vaccines. The third is the P1 variant, first detected in Brazil, which is also more transmissible than previous circulating variants. Its capacity to evade vaccine’s protection is still under investigation.

Most studies assessing the efficacy of vaccines against the new variants are laboratory based. In laboratory-based studies, both Pfizer-BioNTech and Moderna’s vaccines showed lower eliciting of immune responses against the B.1.351 variant, and it is still under investigation whether the immune response elicited are sufficient to offer protection. The first [clinical trial assessing the efficacy of AstraZeneca’s vaccine against B.1.351](#) showed no protection of the vaccine against mild and moderate infections, and its protection against severe COVID-19 is still to be determined. When an increased fraction of the population is vaccinated in the future, observations at clinical level of re-infections or severe COVID-19 cases in vaccinated individuals will themselves be informative. Besides, mRNA-based vaccines, like the ones developed by Pfizer-BioNTech and Moderna, can easily be tweaked to be effective against new variants and clinical trials can potentially be shortened in duration.

WHO provides actualizations on the spread and key information of the variants of concern in [weekly epidemiological updates](#) and summarises relevant information and advice regarding the [effects of virus variants on COVID-19 vaccines in a dedicated page](#).

At this pace of vaccine rollout, it is very likely that western countries will have high proportions of their populations vaccinated and starting to return to ‘normal’ pre-COVID-19 ways of interacting in late 2021 or early 2022; and that southern countries will still not be widely vaccinated and still have sustained COVID-19 transmission and COVID-19 related economic and social effects for another two years at least. In that scenario, where some regions are still largely susceptible to infection, it is very likely that new variants will appear, and although only a few might be of concern, some could escape vaccine’s elicited immunity and potentially cause new outbreaks even amongst people who have already been vaccinated for the current strains. This could mean that a number of disease-causing coronavirus variants sustain transmission in the coming years and new vaccines need to be developed in a cyclical manner every time a new coronavirus strain appears for which already-developed vaccines are not effective.

Adaptation of the measures and recommendations to the new and future contexts

With the worldwide and regional context changes, and especially as new strains evolve and vaccines become available, the measures applied in countries will need to be adapted. At the moment, a key priority should be ensuring vaccine accessibility and to vaccinate the population, while still sustaining the basic public health measures to avoid spread and, importantly, reinforcing or putting in place genomic surveillance.

The currently proposed thresholds in the “Regional Scenarios for COVID-19 Prevention and Control” still stand. These may need to be re-evaluated if strains with much higher transmissibility evolve or arrive in the region. For this, it is recommended that genomic surveillance is strengthened, to be able to promptly identify local transmission of SARS-CoV-2 variants and if required adapt public health measures to them.

The recommendations in “Considerations towards the opening of the British Virgin Islands to tourism” also still stand. However, it should be noted that some countries are starting to apply stricter quarantines (generally, 14 or 10-day quarantines with the option of shortening to 7 days if the person has a negative COVID-19 test in the quarantine) for travellers coming from Southern African countries and from some Latin American countries including Brazil, to prevent the spread of the new more dangerous strains. COVID-19 vaccination certificates might come into play, as they are being discussed in the European Union and other nations, although they are discouraged by WHO. Their usefulness, however, is subject to vaccines proving to be efficacious against the transmission of the virus (beyond their already known efficacy against COVID-19 disease development). Another turning point in the control of SARS-CoV-2 importation, but also of local transmission, would be the widespread availability of rapid COVID-19 tests. For instance, in Germany they can be bought at supermarkets, and in Denmark they are performed for free and anytime at clinics. Their accessibility would allow to increase the frequency of testing and thus counteract their limitation of not detecting early infections.

In order to be on top of the changes in recommendations, the reader can find in the following resources information on the evolution of the pandemic, recommendations and scientific updates.

Sites with periodically updated information, recommendations and new tools available:

- [WHO technical guidance](#), organized by topic and by date of publication.
 - WHO’s main updates since December 2020 relate to vaccines and treatment for COVID-19, clinical management, genomic sequencing for SARS-CoV-2 (implementation guide to genomic sequencing), and using routine data to monitor the effects of COVID-19 on essential health services.
 - Given the current situation in the Caribbean (namely, the need to control the current wave and then to re-open sectors), the following new resources in the WHO technical guidance site may potentially of interest to the Caribbean countries:
 - [Considerations for implementing a risk-based approach to international travel in the context of COVID-19](#) (16 Dec 2020)
 - [Checklist to support schools re-opening and preparation for COVID-19 re-surges or similar public health crises](#) (11 Dec 2020)
 - [Guidance on developing a national deployment and vaccination plan for COVID-19 vaccines](#) (16 Nov 2020)
 - [Corrigendum to “Contact tracing in the context of COVID-19”](#) (1 Feb 2021)
 - [Update of “COVID-19: Occupational health and safety for health workers”](#) (2 Feb 2021)
 - [Considerations for implementing and adjusting public health and social measures in the context of COVID-19](#) (4 nov 2020)
 - [Critical preparedness, readiness and response actions for COVID-19](#) (4 nov 2020)

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- [Update of “Infection prevention and control guidance for long-term care facilities in the context of COVID-19”](#) (8 Jan 2021)
 - [Roadmap to improve and ensure good indoor ventilation in the context of COVID-19](#) (1 March 2021)
 - WHO tracking the [effects of virus variants on COVID-19 vaccines](#)
 - PAHO [Technical guidance](#)
 - CARPHA (Caribbean Public Health Agency) [Vaccine Information](#), including the “[Recommended Steps For Regulatory Decision-Making For COVID-19 Vaccines By CARICOM Member States](#)” algorithm (29 Jan 2021)

Tracking COVID-19 in the Caribbean islands:

- PAHO [Subregional and Country Epidemiological Curves](#) and PAHO [COVID-19 situation reports](#) contain disaggregated information for Antilla, Montserrat and the British Virgin Islands.
- [WHO COVID-19 Dashboard](#) by country.
- [COVID-19 surveillance reports](#) by country in the Caribbean, including daily reports and weekly summaries.
- [Our World in Data COVID-19 Tracker](#) including vaccine roll outs.