

Strengthening Response to COVID-19 Pandemic in Nations with Declining Trend: Program Managers' Perspective

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Abstract

The trends of the ongoing coronavirus disease-2019 (COVID-19) pandemic continues to rise in different parts of the world and no nation can rest assured that they have won the battle against the novel viral infection. The epidemiological trends from some of the affected nations have reported a decline in the number of cases, but we cannot let down our guard. Many sections of the community and other stakeholders are concerned about the emergence of second wave of the infection, but as a Program Manager, our priority has to strengthen our outbreak readiness and emergency response. Further, the health care delivery system has to be reformed in such a way that the needs of the community are given utmost priority and we work together as a team for the containment of the infection. In conclusion, the fight against the COVID-19 pandemic is far from being over and we have to continue our good work and take appropriate measures to further intensify our response to safeguard the health and well-being of the vulnerable population groups and be ready for the most difficult times.

Keywords: COVID-19 pandemic, Outbreak readiness, World Health Organization

INTRODUCTION

The trends of the ongoing coronavirus disease-2019 (COVID-19) pandemic continue to rise in different parts of the world, and no nation can rest assured that they have won the battle against the novel viral infection. The available estimates suggest that as of August 16, 2020, a total of 21.2 million COVID-19 cases and 761,000 deaths have been reported across all the affected nations and territories, with the European region and the American region being the most affected.^[1] It is important to consider that the global case fatality rate of the infection has increased to 6.9% and it is expected that in the absence of prompt interventions, these estimates will rise even further in the coming days.^[1]

Declining trends of COVID-19

The epidemiological trends from some of the affected nations such as China, Italy, and Spain have reported a decline in the number of cases.^[2] It is indeed a good sign and shows that the infection is being contained well, but in no ways, we can let down our guard, and we should be really cautious about the progress made so far. As the number of cases has declined in

a few nations, the rise in the incidence has been reported in many more nations and considering the definite possibility of transmission of infection across the international borders, we cannot be secure and safe till the development of an effective vaccine or a therapeutic option.^[1,2]

Public health considerations

We have to acknowledge that the return to normalcy cannot be expedited, and any step taken to ease the restrictions or social and physical distancing provisions has to be gradual, thoughtful, evidence based, and based on the findings of the risk assessment.^[2] Many sections of the community and other stakeholders are concerned about the emergence of the second

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wave of the infection, but as a program manager, our priority has to strengthen our outbreak readiness and emergency response to a worst-case scenario of community-level transmission.^[2,3] This period of reduced incidence has to be utilized for improving the testing capacity, accessibility and availability; scaling up the ability of the intensive care units, and strategies to contain the infection among vulnerable population groups or settings like long-term care facilities or pockets of migrants or refugees.^[3]

Areas to be strengthened

In addition, the other pillars of the infection control such as isolation of confirmed cases, offering appropriate treatment, tracing contacts, quarantine, risk communication, community engagement, and strict adherence to the infection prevention and control measures also need to be ensured.^[3] The real heroes of this pandemic have been the health-care professionals, who have worked beyond their capacity, under unsafe environment, with limited or no supply of personal protective equipment, and who are more often than not understaffed and underpaid.^[2] It is the responsibility of the public health authorities to provide additional remuneration for the health-care professionals for their dedicated efforts, train them about the different aspects of their work, arrange for adequate human resources, and supply them with an adequate amount of personal protective equipment.^[2,4]

Long-term care facilities

The long-term care facilities have been recognized as the hot spots where multiple incidents of outbreaks have been reported in the European and American regions.^[2,5] During these times of reduced caseload, steps should be taken to improve the overall administration and infection prevention facilities in these settings. Moreover, owing to the fact that residents of these places are either suffering from chronic illnesses or dependent on others for their care and survival, they remain extremely vulnerable to acquire the infection. We have to understand the gravity of the problem and ensure delivery of adequate care without violating any of their human rights along

with implementation of a holistic plan to prevent and control infection.^[2,5] Finally, the health-care delivery system has to be reformed in such a way that the needs of the community are given utmost priority and we work together as a team for the containment of the infection.^[2,3]

CONCLUSION

In conclusion, the fight against the COVID-19 pandemic is far from being over and we have to continue our good work and take appropriate measures to further intensify our response to safeguard the health and well-being of the vulnerable population groups and be ready for the most difficult times.

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Conflicts of interest

There are no conflicts of interest.

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