

HEALTH IN THE **AMERICAS**

Accelerating Disease Elimination

PAHO



Pan American
Health
Organization



World Health
Organization
Americas Region

**EXECUTIVE
SUMMARY**



© PAHO

Executive Summary

What is the Elimination Initiative, and why was it launched?

Since the founding of the Pan American Health Organization (PAHO) in 1902, the Region has made significant progress toward disease elimination. The Americas eliminated smallpox in 1974 (with eradication in 1980). In 1994, the Region was certified as free from poliomyelitis. Over the last several decades, the Region has eliminated a number of other diseases, including rubella, congenital rubella syndrome, and neonatal tetanus.

By the 2010s, the Region of the Americas faced a complex landscape of communicable disease challenges. Despite successes in eliminating various vaccine-preventable diseases, certain issues became more urgent, including climate change, vaccine hesitancy, healthcare inequalities, and novel infectious diseases. Recognizing that existing siloed efforts were insufficient to address these multifaceted problems, PAHO, under the leadership of former Director Carissa Etienne, initiated a bold, comprehensive framework. This initiative integrated services on a broader scale, tackling more than 30 diseases and conditions under one umbrella, while emphasizing a community- and person-centered approach to leave no one behind in the effort to conquer communicable diseases.

In 2019, PAHO and its Member States launched the Elimination Initiative, a comprehensive framework addressing more than 30 diseases and conditions in the Americas. Developed through key regional consultations and expert input, the initiative aimed to tackle broad categories of diseases responsible for the greatest burdens in the Region. However, the COVID-19 pandemic severely disrupted healthcare systems and revealed existing inequalities. Despite these challenges, the pandemic also revealed opportunities for more comprehensive health services. In 2023, current PAHO Director Jarbas Barbosa da Silva Jr. relaunched the Elimination Initiative, viewing it as a critical opportunity to strengthen healthcare systems, recover from pandemic setbacks, and accelerate progress toward universal health in the Americas.

The Elimination Initiative targets selected diseases that represent a significant burden and can be combatted using existing tools and technologies. The initiative also tackles diseases that disproportionately affect communities living in situations of vulnerability due to complex social, economic, and systemic factors. These groups include women; Indigenous peoples; Afro-descendants; rural communities; lesbian, gay, bisexual, and transgender individuals; migrants; and prison populations. As countries progress toward disease elimination, the initiative works to understand and improve the underlying conditions that hinder efforts among these communities.

PAHO developed four lines of action to guide the Elimination Initiative:

1. Strengthening the integration of health systems and service delivery;
2. Strengthening health surveillance and information systems;
3. Addressing the environmental and social determinants of health;
4. Strengthening governance, stewardship, and finance.



STATUS OF ELIMINATION TARGETS IN THE AMERICAS

The presence of more than 30 diseases and conditions in the Elimination Initiative varies across the Region's diverse countries and territories. While some diseases like **sexually transmitted infections** and **viral hepatitis** are in all settings, others – like vector-borne, zoonotic, and neglected infectious diseases – affect specific areas and populations. Consequently, each country tailors its strategies based on the context of each disease.

PAHO is monitoring progress toward specific indicators and targets for each of the 30+ diseases and conditions. Seven diseases have been eliminated regionally – **guinea-worm disease** and six vaccine-preventable diseases: **smallpox, poliomyelitis, rubella, congenital rubella, measles, and neonatal tetanus**. Some diseases, while not eliminated regionally, have been eliminated in certain countries. **Malaria** has been eliminated in 19 countries, and **elimination of mother-to-child transmission (MTCT) of syphilis and HIV** has been achieved in 11 Caribbean countries and territories. Several neglected infectious and zoonotic diseases – including **foot-and-mouth disease, plague, onchocerciasis, lymphatic filariasis, Chagas disease, trachoma, human rabies transmitted by dogs, and cholera** – have also been eliminated in certain countries.

Some countries are very close to elimination targets, but many challenges remain before countries achieve elimination status. For **yaws**, transmission has halted across the Region, but no country except Ecuador has officially confirmed this. Also, while unconfirmed, **human rabies transmitted by dogs** is close to being eliminated in 37 countries and territories, and for **foot-and-mouth disease**, eight countries will contribute to the global eradication process. Health officials suspect nine countries and territories in the Caribbean have eliminated **schistosomiasis**. For some other diseases – **cervical cancer, tuberculosis, hepatitis C, hepatitis B, HIV/AIDS, bacterial meningitis, and sexually transmitted infections** – no countries in the Region have achieved elimination targets. Eliminating **MTCT of HIV, syphilis, hepatitis B, and Chagas disease** is also a major challenge in several countries, along with the elimination of **malaria, cholera,**

open defecation, and **use of polluting fuels in the household**. And neglected infectious and zoonotic diseases still affect millions across the Region, particularly those lacking access to basic services – including health, education, water, and sanitation.

The Elimination Initiative faces significant data gaps across various diseases, geographical areas, and populations, hindering full recognition of its potential and effective implementation. Improving data quality through enhanced accuracy, completeness, and specificity is crucial for effective monitoring, evaluation, and resource allocation, ultimately leading to increased accountability and more tailored strategies for reaching all populations.



www.paho.org/en/data-portal-elimination

Explore the Elimination Initiative Regional Data Portal for up-to-date insights on the progress toward eliminating over 30 communicable diseases in the Americas by 2030. Visit the “Indicators and Targets” tab for detailed information on end-point elimination indicators and specific targets for each disease and condition.



PERSPECTIVES AND ANALYSIS ON PROGRESS TOWARD ELIMINATION

The Elimination Initiative faces complex implementation challenges, including healthcare disparities; political, technological, and economic barriers; inadequate surveillance, and cultural and linguistic diversity. *Health in the Americas: Accelerating Disease Elimination* analyzes several diseases that have not yet achieved their targets, to review what strategies have worked, what challenges exist, and what remains to be done.

Cervical cancer deaths in the Americas are projected to remain high by 2030. Comprehensive prevention strategies should include improving precancer screening, treatment of precancerous lesions, and providing universal access to the human papillomavirus vaccine. Despite no **cholera** cases in 2020 and 2021, a resurgence began in 2022 with thousands of cases reported in Haiti and the Dominican Republic. Because predicting future cases is difficult, cholera elimination efforts must focus on prevention, preparedness, and response alongside a strong surveillance system.

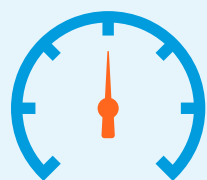
The Elimination Initiative is aiming for a 95% reduction in **open defecation** between 2020 and 2030. This behavior has been decreasing steadily; by 2026, the initiative forecasts that only 0.01% will be engaging in this practice, and in subsequent years, this value will reach close to 0. Similarly, the forecasting analysis indicates that by 2030, the estimated proportion of people relying on **polluting fuels in households** will be close to the Elimination Initiative target of 5%.

Syphilis rates are increasing in the Americas, leading to higher prevalence among pregnant women and increased congenital syphilis rates, with challenges including limited access to prenatal care, diagnostics, and treatment. Forecasts suggest that by 2030, the rate of **MTCT of syphilis** will rise to nearly 3.7 per 1000 live births, diverging significantly from the elimination target of 0.5 per

1000 live births. The rate of **MTCT of HIV** in the Region has consistently decreased, but reaching the 2030 target (MTCT of HIV of 2% or less) requires scaling up access to HIV services for pregnant women. New **HIV** infections in the Region are decreasing, with projections indicating a rate of 0.14 cases per 1000 uninfected population by 2030, though this falls short of the 2030 target of 0.02 new cases per 1000 uninfected population.

Tuberculosis remains a leading infectious disease killer, globally. Projections indicate a possible increase of the incidence rate by 2030, underscoring the continued need for sustained efforts to combat tuberculosis in the Region. These projections indicate a need for tailored, information-based approaches to address disease foci in each country, particularly in mining areas and Indigenous communities where transmission rates remain high.

The Region faces deep-rooted structural inequalities that have an impact on health outcomes and opportunities. The diseases and conditions addressed by the Elimination Initiative disproportionately affect those living in situations of vulnerability, who face stigma, environmental challenges, and limited access to health care. For it to succeed, Member States must address underlying health inequities and identify social and environmental determinants of health. Rigorous health inequality assessments can help Member States implement culturally appropriate interventions to create lasting positive changes, prioritizing the most marginalized and underserved groups.



ACCELERATING ELIMINATION EFFORTS IN THE REGION

The cumulative experience of PAHO and Member States in disease elimination efforts has yielded valuable insights into integrated strategies for disease elimination. While implementation and context vary, all strategies listed below have potential for further acceleration.

Line of action 1 – strengthening the integration of health systems and service delivery:

- ▶ **Integrating multi-disease health services within primary care** at the local level can effectively reach communities where disease transmission persists. By incorporating successful practices from existing programs like the Elimination of Mother-to-Child Transmission Plus initiative, health services can offer comprehensive, integrated care during each patient interaction. This approach not only enhances the efficiency of healthcare delivery but also accelerates efforts to eliminate multiple diseases simultaneously.
- ▶ **Improved innovation and access to health technologies** can help combat communicable diseases. PAHO's Regional Revolving Funds provide affordable access to supplies, and its Special Program, Innovation and Regional Production Platform promotes innovation and to access to health technologies. Accelerating overall access to medicines, diagnostics and other essential health technologies, as well as the adoption of portable X-ray systems enhanced by artificial intelligence, can significantly improve the detection and treatment of tuberculosis. Additionally, innovative point-of-care diagnostics, like the dual test for HIV and syphilis, offer a powerful tool for countries to save lives and advance their progress toward disease elimination.

- ▶ **Water, sanitation, and hygiene (WASH)** programs help prevent and manage communicable diseases, such as the case of the elimination of trachoma by increasing access to water for facial hygiene to prevent ocular infections or increasing access to water and sanitation to prevent intestinal parasitic infections in rural remote communities. Countries can expand existing WASH programs to integrate prevention and management of various diseases in the Elimination Initiative.

Line of action 2 – strengthening strategic health surveillance and information systems for health:

- ▶ **Enhancing surveillance and information systems for health** is crucial, particularly in underserved areas. Focusing on multi-disease surveillance efforts like the integrated serosurveillance or multi-disease molecular diagnostic platforms to improve efficiency and responsiveness in disease elimination efforts.
- ▶ **Data for decision-making at all levels** can be enhanced through disaggregated data, real-time data collection, interoperable platforms aligned with international standards, capacity-building in data science, and regional partnerships to harmonize surveillance efforts.
- ▶ **Addressing antimicrobial resistance** poses a significant threat to the prevention and treatment of infectious diseases. To meet this challenge, countries can improve data collection and sharing, advance access to diagnostics and laboratory techniques, and adopt a One Health approach.

Line of action 3 – addressing the environmental and social determinants of health:

- ▶ **Using available tools to measure and address equity** helps countries tailor interventions. Introducing simpler tools and accessing more community-level data would further enable strategies to address systemic barriers and needs of marginalized groups.
- ▶ **Using an intercultural perspective** can make disease elimination efforts more effective and sustainable. National strategies should include culturally appropriate health education materials, cultural practices, and local language materials.
- ▶ **One Health approaches** facilitate disease elimination at the local level by integrating human, animal, and environmental health services. To accelerate One Health programs, countries can improve surveillance, increase funding, and consider cultural factors.
- ▶ **Addressing climate change** is vital, as it has a significant impact on communicable diseases by expanding vector ranges and altering transmission patterns. Key strategies include enhancing cross-sector collaboration and building local capacity to improve resilience.



© PAHO

Line of action 4 – strengthening governance, stewardship, and finance:

- ▶ **Intergovernmental coordination** can ensure long-term sustainability of elimination programs. Key activities include integrating elimination goals into national health plans, coordinating cross-border health initiatives, and establishing high-level steering groups.
- ▶ **Public-private partnerships** provide essential resources, drive innovation, and enhance local capacity to implement comprehensive solutions. Countries can consider additional partnerships with private stakeholders, carefully considering local needs and context.
- ▶ **Civil society engagement** facilitates the use of local knowledge to enhance the effectiveness and cultural appropriateness of the elimination efforts. Scaling up this engagement across the Region is important, using flexible, community-led approaches.

Member States are encouraged to adopt and scale up these effective strategies to meet their disease elimination targets and provide more equitable, community- and person-centered care.



ACHIEVING ELIMINATION

The Elimination Initiative builds on past successes and utilizes available tools and strategies. The Region continues to see progress toward the Elimination Initiative's goal of eliminating more than 30 diseases and conditions by 2030. However, more remains to be done. To accelerate progress, PAHO and Member States are focusing on several areas: advocating for continued political and financial support, strengthening community engagement, improving intercultural services, implementing primary health care strategies, fostering cross-sector partnerships, embracing digital transformation, and ensuring access to new technologies. These efforts aim to create more resilient and efficient health systems.

In addition to setbacks exacerbated by COVID-19, key challenges in implementing the initiative have included funding constraints, health inequities, maintaining elimination status, engaging stakeholders across multiple disease treatment and prevention approaches, technological limitations, and migration-related issues. These obstacles require innovative solutions to overcome and ensure continued progress.

Looking toward 2030, the initiative emphasizes building more robust health systems and mitigating future disease threats. This involves enhancing disease surveillance, strengthening primary care, investing in research and development, scaling up One Health activities, and preparing communities through education. By integrating preparedness strategies for disease outbreaks into existing health systems, Member States can better support the Elimination Initiative while improving their ability to respond to future communicable disease threats. The ultimate goal is to ensure sustainable, consistent prioritization of enhanced surveillance, infrastructure, and community preparedness, even outside of crisis situations, thereby improving the well-being of individuals, communities, and economies across the Americas.

PAHO/EIH/HA/24-0006

© **Pan American Health Organization, 2024.** Some rights reserved. This work is available under license CC BY-NC-SA 3.0 IGO.

PAHO



Pan American
Health
Organization



World Health
Organization
Americas Region

www.paho.org