

Cabo Verde

This document is a compilation of all questions, justifications, and sources used to determine the 2021 Global Health Security Index scores for Cabo Verde. For a category and indicator-level summary, please see the Country Profile for Cabo Verde.

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Category 1: Preventing the emergence or release of pathogens with potential for international concern

1.1 ANTIMICROBIAL RESISTANCE (AMR)

1.1.1 AMR surveillance, detection, and reporting

1.1.1a

Is there a national AMR plan for the surveillance, detection, and reporting of priority AMR pathogens?

Yes, there is evidence of an AMR plan, and it covers surveillance, detection, and reporting = 2, Yes, there is evidence of an AMR plan, but there is insufficient evidence that it covers surveillance, detection, and reporting = 1, No evidence of an AMR plan = 0

Current Year Score: 1

There is evidence that Cape Verde has a national AMR plan, but it is not publicly available online and there is insufficient evidence that it covers surveillance, detection, and reporting of priority AMR pathogens.

Cape Verde is not listed as having a national plan in place on the WHO website, and there is no reference to such a plan on the websites of the Ministry of Health and Social Security and the Ministry of Agriculture and Environment. [1,2,3] The WHO has conducted a Joint External Evaluation of Cape Verde on 4-8 November 2019. The JEE states that Cape Verde has a National Action Plan for AMR for 2018-2022; however, it also states that it has not yet been activated. [4] However, it was approved in June 2018 during a workshop with representatives from the Ministry of Health and Social Security and the Ministry of Agriculture and Environment and with technical support from the WHO. [5]

No further evidence of its existence or implementation has been found online on the website of the Ministry of Health and Social Security. The plan was not found anywhere online, inclusive in the website of the Ministry of Health and Social Security [6]

[1] World Health Organization. "Library of National Action Plans". [<http://www.who.int/antimicrobial-resistance/national-action-plans/library/en/>]. Accessed 19 February 2021.

[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 19 February 2021.

[3] Ministry of Agriculture and Environment. [<http://maa.gov.cv/>]. Accessed 19 February 2021.

[4] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 19 February 2021.

[5] O País. 22 June 2018. "Health: National Plan for Fight Against Antimicrobial Resistance Approved (Saúde: Aprovado Plano Nacional de Luta Contra a Resistência Antimicrobiana)". [<https://opais.cv/saude-aprovada-o-plano-nacional-de-luta-contra-a-resistencia-antimicrobiana/22/06/2018/>]. Accessed 19 February 2021.

[6] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 15 March 2021.

1.1.1b

Is there a national laboratory/laboratory system which tests for priority AMR pathogens?

All 7 + 1 priority pathogens = 2, Yes, but not all 7+1 pathogens = 1, No = 0

Current Year Score: 0

There is insufficient evidence that Cape Verde has a national laboratory system that has the capacity to test for WHO's priority AMR pathogens.

The WHO has conducted a Joint External Evaluation of Cape Verde on 4-8 November 2019. According to the JEE on page 18, the national laboratory system (RNL) has the capacity to test for AMR pathogens, including pneumonias, sepsis, meningitis, and urinary tract infections, in central hospitals. On page 31 of the JEE, the RNL has created two lists of priority pathogens for the country, one for human and another for animal health, but those diagnostics are not specifically for AMR pathogens. For human health, priority diseases are malaria, tuberculosis, HIV-AIDS, meningitis, Zika, hepatitis, dengue, yellow fever, acute facial paralysis, measles, chickenpox, and diarrheal diseases. In animal health, its priority diseases are brucellosis, cistercecosis, fasciolosis, hematic carbuncle, swine flu, and African swine flu, red fever, salmonella, and bovine tuberculosis. The RNL has two main reference laboratories. The National Institute of Public Health (INSP) is responsible for human health and the General Directorate of Agriculture, Forestry and Livestock (DGASP) is responsible for animal health. [1]

The INSP website does not provide any more information on AMR pathogens; however, it does publish data collected from its sentinel system. Cape Verde's National Health Observatory has the Geographic Information System on Health (SIG-Saúde), which allows the user to explore health data on six modules, including incidence rates of select diseases, such as tuberculosis (the only pathogen in the WHO's AMR priority list). The latest data available is for 2018. [2] No relevant information was found on the website of the DGASP. [3]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 19 February 2021.

[2] National Institute of Public Health. 8 March 2018. "Geographic Information System on Health (Sistema de Informação Geográfica em Saúde)". [<https://www.insp.gov.cv/index.php/observatorio-saude/sistemas-de-informacao-geografica-em-saude>]. Accessed 19 February 2021.

[3] Ministry of Agriculture and Environment. "General Directorate of Agriculture, Forestry and Livestock (Direção Geral de Agricultura, Silvicultura e Pecuária)". [<http://www.maa.gov.cv/index.php/min-a-a/60-estrutura-organica/164-direcao-geral-da-agricultura-silvicultura-e-pecuaria>]. Accessed 19 February 2021.

1.1.1c

Does the government conduct environmental detection or surveillance activities (e.g., in soil, waterways) for antimicrobial residues or AMR organisms?

Yes = 1, No = 0

Current Year Score: 0

There is insufficient evidence that the Cape Verde conducts detection or surveillance activities (e.g. in soil, waterways, etc.) for antimicrobial residues or AMR organisms. The WHO has conducted a Joint External Evaluation of Cape Verde in 4-8 November 2019. There are no mentions in the JEE that Cape Verde is conducting environmental detection or surveillance of antimicrobial residues or AMR organisms. It notes that the country has a National Agency for Water and Sanitation (ANAS), which is responsible for safety and water quality control, as well as monitoring environmental contamination; however, it does not mention whether it conducts environmental detection or surveillance of antimicrobial residues or AMR organisms.

[1] The ANAS website does not mention environmental detection or surveillance of antimicrobial residues or AMR organisms.

It has a section for Monitoring and Laboratories, but both pages are blank. [2]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 19 February 2021.

[2] National Agency for Water and Sanitation. "Attributions (Atribuições)". [<https://anas.gov.cv/index.php/servicos/agua/atribuicoes>]. Accessed 19 February 2021.

1.1.2 Antimicrobial control

1.1.2a

Is there national legislation or regulation in place requiring prescriptions for antibiotic use for humans?

Yes = 2 , Yes, but there is evidence of gaps in enforcement = 1 , No = 0

Current Year Score: 1

Cape Verde has a national legislation in place requiring prescriptions for antibiotic use for humans. Cape Verde has Decree-Law number 41 of 11 August 2014 that establishes, in its Article 9, that antibiotics requires a special control medical prescription for its dispensing. [1] Despite the presence of regulation, one study from 2015 found that 25.6% of respondents obtained medicines on an illegal market, though, this was for all medicine, not just antibiotics. [2] In another academic study from 2015, surveyed pharmacists indicated that the use of antibiotics in Cape Verde is high and that the population go to parallel markets to obtain prescription medications, including antibiotics. [3]

[1] Government of Cabo Verde. Decree-Law number 41 of 11 August 2014. [https://ofcv.cv/images/Documentos-PDFs/Legislacao/DL_41.2014_Alteracoes_DL_prescricao_medica.pdf]. Accessed 19 February 2021.

[2] Reis, C. D., E. J. Tavares, and J. J. Martins. 2015. "Illegal Market of Medicines in Cabo Verde: Characterization for Action." *J Pharmacovigil* 3.178: 2. [<https://www.omicsonline.org/open-access/illegal-market-of-medicines-in-cabo-verde-characterization-for-action-2329-6887-1000178.php?aid=61497>]. Accessed 19 February 2021.

[3] Silva, C.D.D. September 2015. "The rational use of antibiotics in Cape Verde: The perspective of pharmacists in Praia (O uso racional de antibióticos em Cabo Verde: A perspetiva dos farmacêuticos da cidade da Praia)". [https://ubibliorum.ubi.pt/bitstream/10400.6/5257/1/4578_8700.pdf]. Accessed 19 February 2021.

1.1.2b

Is there national legislation or regulation in place requiring prescriptions for antibiotic use for animals?

Yes = 2 , Yes, but there is evidence of gaps in enforcement = 1 , No = 0

Current Year Score: 0

There is insufficient evidence that Cape Verde has a national legislation or regulation requiring prescriptions for antibiotic use for animals. The Independent Health Regulatory Entity (ERIS) is responsible for regulating all types of medications, including those for animal health. [1] It was created in 2019, when it substituted the Agency of Supervision of Pharmaceutical Products and Medicines. [2] According to Animal Health Law number 30 of 13 May 2013, Article 29, there is a National List of Veterinary Medications that determines the veterinary medications that require prescriptions and those that do not require prescriptions. [3] However, the National List of Veterinary Medications could not be found online or in the website of ERIS. [4] No evidence of the National List of Veterinary Medications was found in the websites of the Ministry of Health and Social

Security and the Ministry of Agriculture and Environment. [5][6]

- [1] Independent Health Regulatory Entity. "Attributions and Competencies (Atribuições e Competências)". [<https://www.eris.cv/index.php/institucional/perfil-da-entidade/atribuicoes-e-competencias>]. Accessed 19 February 2021.
- [2] Independent Health Regulatory Entity. "History (Historial)". [<https://www.eris.cv/index.php/institucional/perfil-da-entidade/historial>]. Accessed 19 February 2021.
- [3] Government of Cape Verde. Animal Health Law number 30 of 13 May 2013. [<http://igae.cv/igae/wp-content/uploads/2019/04/Lei-n-30-VIII-2013-de-13-de-Maio-Estabelece-as-normas-de-seguran%C3%A7a-sanit%C3%A1ria-dos-animais.pdf>]. Accessed 19 February 2021.
- [4] Independent Health Regulatory Entity. [<https://www.eris.cv/>]. Accessed 19 February 2021.
- [5] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 19 February 2021.
- [6] Ministry of Agriculture and Environment. [<http://maa.gov.cv/>]. Accessed 19 February 2021.

1.2 ZOOBOTIC DISEASE

1.2.1 National planning for zoonotic diseases/pathogens

1.2.1a

Is there national legislation, plans, or equivalent strategy documents on zoonotic disease?

Yes = 1 , No = 0

Current Year Score: 1

There is evidence that Cape Verde has national legislation, plans, or equivalent strategy documents on zoonotic disease.

The WHO has conducted a Joint External Evaluation (JEE) of Cape Verde on 4-8 November 2019. According to the JEE, the country seeks to respond to public health events, including zoonoses, both in human health and animal health. In the area of human health, Order No. 11/2002 created two multidisciplinary teams: ETNIR - National Technical Team for Rapid Intervention, to coordinate the response at the central/national level; and ETLIR - Local Technical Team for Rapid Intervention for the implementation of actions at the land / local level. These teams may include elements from other sectors. The veterinary sector is governed by the Zoosanitary Law No. 30 of 05/13/13.

In terms of disease-specific plans, the JEE states that "the country has developed some Plans and Strategies, namely in human health, the Ebola Virus Hemorrhagic Fever Contingency Plan in 2014, the Contingency Plan and Response to the Dengue Epidemic in 2009 and, in animal health, the Prevention Plan and the Control of Avian Influenza and Pandemic Influenza - 2007 and the National Strategy for Prevention, Control and Fight against Endo and Ectoparasites - March 2019. An integrated plan/project for performance with a "One Health" approach." [1]

Chapter VII of the law is dedicated to the fight against contagious and zootechnical diseases. The law includes guidelines for policing and monitoring animal health, vaccines and preventative measures, reporting of diseases, and sanitary and hygienic inspections. [2]

Additionally, the JEE mentions that "National priorities for zoonotic diseases have been defined between the two health sectors human and animal, with a large number of zoonoses being present in the country and several other represent an additional threat to the country, characterized by the influx of tourists and the Cape Verdean diaspora. There is a list of priority zoonoses agreed between the sectors of the animal health (Fasciolosis, Cysticercosis, Hemic Carbuncle, Brucellosis, Tuberculosis, Salmonellosis, Rubro Mal, Ectima Contagioso, Leishmaniasis, Scabies, Avian Flu) and human health (Fever

Hemorrhagic Viruses, Dengue, Zika, Chikungunya, Avian Flu), which are on the list of diseases priorities under epidemiological surveillance, updated according to the epidemiological situation. [1]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 15 March 2021.

[2] Government of Cape Verde. Animal Health Law number 30 of 13 May 2013. [<http://igae.cv/igae/wp-content/uploads/2019/04/Lei-n-30-VIII-2013-de-13-de-Maio-Estabelece-as-normas-de-seguran%C3%A7a-sanit%C3%A1ria-dos-animais.pdf>]. Accessed 20 February 2021.

1.2.1b

Is there national legislation, plans or equivalent strategy document(s) which includes measures for risk identification and reduction for zoonotic disease spillover events from animals to humans?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that Cape Verde has national legislation, plans or equivalent strategy document(s) which includes measures for risk identification and reduction for zoonotic disease spillover events from animals to humans.

Cape Verde's law on Animal Health does not include measures for risk identification and reduction for zoonotic disease spillover events. Animal Health Law number 30 of 13 May 2013 covers multiple facets of animal health, but it does not mention any measures for risk identification and reduction for zoonotic disease spillover events. [1] The WHO has conducted a Joint External Evaluation of Cape Verde in 4-8 November 2019. There is no mention in the JEE of any measure for risk identification and reduction for zoonotic disease spillover events. [2] No evidence was found in the websites of the Ministry of Health and Social Security and the Ministry of Agriculture and Environment. [3][4]

Cape Verde developed the Strategic Plan for the Pre-Elimination of Malaria in 2009, which lasted from 2009 through 2013. The plan's objective was to reduce the risk of spillover events of malaria from the mosquito to humans. Measures included the pulverization of residences with insecticide and a public campaign to educate the population on how the disease spreads. [5] However, this is a risk mitigation strategy specific for Malaria does not address spillover events from animals to humans generally.

[1] Government of Cape Verde. Animal Health Law number 30 of 13 May 2013. [<http://igae.cv/igae/wp-content/uploads/2019/04/Lei-n-30-VIII-2013-de-13-de-Maio-Estabelece-as-normas-de-seguran%C3%A7a-sanit%C3%A1ria-dos-animais.pdf>]. Accessed 20 February 2021.

[2] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 20 February 2021.

[3] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[4] Ministry of Agriculture and Environment. [<http://maa.gov.cv/>]. Accessed 20 February 2021.

[5] Government of Cape Verde. March 2009. "Strategic Plan for the Pre-Elimination of Malaria (Plano Estratégico de Pré-Eliminação do Paludismo)". [<https://www.insp.gov.cv/index.php/documentos/outors-documentos/8-programa-nacional-de-luta-contra-o-paludismo/file>]. Accessed 14 May 2021.

1.2.1c

Is there national legislation, plans, or guidelines that account for the surveillance and control of multiple zoonotic pathogens of public health concern?

Yes = 1 , No = 0

Current Year Score: 0

There is insufficient evidence that Cape Verde has plans that account for the surveillance and control of multiple zoonotic pathogens of public health concern. The Animal Health Law number 30 of 13 May 2013 covers multiple facets of animal health, but it does not specifically mention any pathogen for surveillance or control. [1] The WHO has conducted a Joint External Evaluation of Cape Verde in 4-8 November 2019. It mentions that Cape Verde developed two plans for specific zoonotic diseases: the Plan for the Prevention and Control of Avian and Pandemic Flu of 2007 and the National Strategy for the Prevention, Control and Fight against Endo and Ectoparasites of 2019. [2] Neither plan was found online. No additional evidence was found in the websites of the Ministry of Health and Social Security and the Ministry of Agriculture and Environment. [3][4]

[1] Government of Cape Verde. Animal Health Law number 30 of 13 May 2013. [<http://igae.cv/igae/wp-content/uploads/2019/04/Lei-n-30-VIII-2013-de-13-de-Maio-Estabelece-as-normas-de-seguran%C3%A7a-sanit%C3%A1ria-dos-animais.pdf>]. Accessed 20 February 2021.

[2] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 20 February 2021.

[3] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[4] Ministry of Agriculture and Environment. [<http://maa.gov.cv/>]. Accessed 20 February 2021.

1.2.1d

Is there a department, agency, or similar unit dedicated to zoonotic disease that functions across ministries?

Yes = 1 , No = 0

Current Year Score: 0

There is no publicly available evidence that Cape Verde has a unit dedicated to zoonotic disease that functions across ministries.

The WHO has conducted a Joint External Evaluation of Cape Verde in 4-8 November 2019. In Chapter 4 on Zoonoses, it lists pertinent agencies, but only one directly and specifically deals with zoonotic diseases, the General Directorate of Agriculture, Forestry and Livestock (DGASP). [1] According to its website, it is under the Ministry of Agriculture and Environment and there is no evidence that it can function across ministries. [2] No additional evidence was found in the websites of the Ministry of Health and Social Security and the Ministry of Agriculture and Environment. [3][4]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 20 February 2021.

[2] Ministry of Agriculture and Environment. "General Directorate of Agriculture, Forestry and Livestock (Direção Geral de Agricultura, Silvicultura e Pecuária)". [<http://www.maa.gov.cv/index.php/min-a-a/60-estrutura-organica/164-direcao-geral>].

da-agricultura-silvicultura-e-pecuaria]. Accessed 20 February 2021.

[3] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[4] Ministry of Agriculture and Environment. [<http://maa.gov.cv/>]. Accessed 20 February 2021.

1.2.2 Surveillance systems for zoonotic diseases/pathogens

1.2.2a

Does the country have a national mechanism (either voluntary or mandatory) for owners of livestock to conduct and report on disease surveillance to a central government agency?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that Cape Verde has a national mechanism for owners of livestock to conduct and report on disease surveillance to a central government agency. The Animal Health Law number 30 of 13 May 2013 covers multiple facets of animal health, including a requirement by livestock owners to report any diseases to the veterinary authority or similar entity. However, it does not establish any kind of mechanism for reporting. [1] The WHO has conducted a Joint External Evaluation of Cape Verde in 4-8 November 2019. The JEE does not mention any kind of mechanism for owners of livestock to conduct and report on disease surveillance to a central government agency. On page 34, the JEE states that "surveillance of animal health is very little developed". [2] No additional evidence was found in the websites of the Ministry of Health and Social Security and the Ministry of Agriculture and Environment. [3][4]

[1] Government of Cape Verde. Animal Health Law number 30 of 13 May 2013. [<http://igae.cv/igae/wp-content/uploads/2019/04/Lei-n-30-VIII-2013-de-13-de-Maio-Estabelece-as-normas-de-seguran%C3%A7a-sanit%C3%A1rias-dos-animais.pdf>]. Accessed 20 February 2021.

[2] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 20 February 2021.

[3] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[4] Ministry of Agriculture and Environment. [<http://maa.gov.cv/>]. Accessed 20 February 2021.

1.2.2b

Is there legislation and/or regulations that safeguard the confidentiality of information generated through surveillance activities for animals (for owners)?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence of laws or guidelines that safeguard the confidentiality of information generated through surveillance activities for animals (for owners) in Cape Verde. The WHO has conducted a Joint External Evaluation of Cape Verde in 4-8 November 2019. The JEE does not mention any kind of law or guideline that safeguards confidentiality for livestock owners in matters of data generated from surveillance. [1] The Animal Health Law number 30 of 13 May 2013 covers multiple facets of animal health, but it does not mention any measure that protects the confidentiality of information generated through surveillance activities for animals for livestock owners. [2] Cape Verde has the General Judicial Regime for the Protection of Personal Data of Individuals (Law number 41 of 17 September 2013). There are no measures in the General Judicial Regime that safeguards the confidentiality of information generated through surveillance activities for animals for livestock owners.

[3] No additional evidence was found in the websites of the Ministry of Health and Social Security and the Ministry of Agriculture and Environment. [4][5]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 20 February 2021.

[2] Government of Cape Verde. Animal Health Law number 30 of 13 May 2013. [<http://igae.cv/igae/wp-content/uploads/2019/04/Lei-n-30-VIII-2013-de-13-de-Maio-Estabelece-as-normas-de-seguran%C3%A7a-sanit%C3%A1ria-dos-animais.pdf>]. Accessed 20 February 2021.

[3] Government of Cape Verde. General Judicial Regime for the Protection of Personal Data of Individuals (Law number 41 of 17 September 2013). [<http://www.informatica-juridica.com/ley/lei-no-41-viii-2013-regime-juridico-geral-da-proteccao-de-dados-pessoais-das-pessoas-singulares/>]. Accessed 20 February 2021.

[4] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[5] Ministry of Agriculture and Environment. [<http://maa.gov.cv/>]. Accessed 20 February 2021. General Judicial Regime for the Protection of Personal Data of Individuals Law number 41 of 17 September 2013. [<http://www.informatica-juridica.com/ley/lei-no-41-viii-2013-regime-juridico-geral-da-proteccao-de-dados-pessoais-das-pessoas-singulares/>]. Accessed 20 February 2021.

1.2.2c

Does the country conduct surveillance of zoonotic disease in wildlife (e.g., wild animals, insects, other disease vectors)?

Yes = 1, No = 0

Current Year Score: 0

There is insufficient evidence that the country conducts surveillance of zoonotic disease in wildlife.

The National Health Observatory, part of the National Institute of Public Health, has an online geographic dashboard of mosquito vectors. The tracker uses geographical information systems (GIS) to provide information on breeding areas and locations of Aedes and Anopheles and Culex mosquitos. [1,2] The program was developed by the National Institute of Public Health and the Information Society Operational Center in collaboration with health, statistics and other government agencies of Cape Verde, as well as the World Health Organisation and the West African Health Organisation. [1] However, there is no evidence that there is surveillance via sampling or monitoring for diseases present in local wildlife. There is no further evidence on websites of the Ministry of Health and the Ministry of Agriculture. [3,4]

The WHO has conducted a Joint External Evaluation (JEE) of Cape Verde on 4-8 November 2019. The JEE does not mention any action related to surveillance of zoonotic diseases via sampling in wildlife. [5]

[1] National Institute of Public Health. 8 March 2018. "Geographic Information System on Health (Sistema de Informação Geográfica em Saúde)". [<https://www.insp.gov.cv/index.php/observatorio-saude/sistemas-de-informacao-geografica-em-saude>]. Accessed 20 February 2021.

[2] National Health Observatory. "SIG - National Health Observatory - Mosquito model" (SIG - Observatório Nacional de Saúde - Módulo Mosquito). [https://portondinosilhas.gov.cv/redglobal/!REDGLOBAL.GLB_DISPATCHER.main?p_env_menu=//C6CFC9CDC6&p_prm_target=_blank&p_fw_parameter=&igrpbbeeccceea=50506695053700040567&p_env_dad=//CACECEC8]. Accessed 20 February 2021.

[3] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[4] Ministry of Agriculture and Environment. [<http://maa.gov.cv/>]. Accessed 20 February 2021.

[5] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 15 March 2021.

1.2.3 International reporting of animal disease outbreaks

1.2.3a

Has the country submitted a report to OIE on the incidence of human cases of zoonotic disease for the last calendar year?

Yes = 1, No = 0

Current Year Score: 0

2019

OIE WAHIS database

1.2.4 Animal health workforce

1.2.4a

Number of veterinarians per 100,000 people

Input number

Current Year Score: 4.91

2018

OIE WAHIS database

1.2.4b

Number of veterinary para-professionals per 100,000 people

Input number

Current Year Score: 4.73

2018

OIE WAHIS database

1.2.5 Private sector and zoonotic

1.2.5a

Does the national plan on zoonotic disease or other legislation, regulations, or plans include mechanisms for working with the private sector in controlling or responding to zoonoses?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence of a national plan or other legislation, regulation or plan on zoonotic disease in Cape Verde which includes mechanisms for working with the private sector in controlling or responding to zoonoses.] The Animal Health Law number 30 of 13 May 2013 covers multiple facets of animal health, but it makes no mention of working with the private sector in controlling or responding to zoonoses. [1] The WHO has conducted a Joint External Evaluation of Cape Verde in 4-8 November 2019. The JEE does not mention any collaboration with the private sector to manage control and response to zoonotic diseases. [2] No additional evidence was found in the websites of the Ministry of Health and Social Security and the Ministry of Agriculture and Environment. [4][5]

[1] Government of Cape Verde. Animal Health Law number 30 of 13 May 2013. [<http://igae.cv/igae/wp-content/uploads/2019/04/Lei-n-30-VIII-2013-de-13-de-Maio-Estabelece-as-normas-de-seguran%C3%A7a-sanit%C3%A1ria-dos-animais.pdf>]. Accessed 20 February 2021.

[2] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 20 February 2021.

[3] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[4] Ministry of Agriculture and Environment. [<http://maa.gov.cv/>]. Accessed 20 February 2021.

1.3 BIOSECURITY

1.3.1 Whole-of- government biosecurity systems

1.3.1a

Does the country have in place a record, updated within the past five years, of the facilities in which especially dangerous pathogens and toxins are stored or processed, including details on inventories and inventory management systems of those facilities?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that Cape Verde has in place a record, updated within the past five years, of the facilities in which especially dangerous pathogens and toxins are stored or processed, including details on inventories and inventory management systems of those facilities. The WHO has conducted a Joint External Evaluation of Cape Verde in 4-8 November 2019. The JEE states on page 5 that a priority action for Cape Verde is to "Inventory the microorganisms that are manipulated and the location where they are being stored in the country". The same priority action recommendation is present on page 49, where it states that an area that needs to be strengthened is of an "updated inventory of pathogenic agents and toxins in entities that manipulate or store those microorganisms". [1] No additional evidence was found in the websites of the Ministry of Health and Social Security and the Ministry of Agriculture and Environment. [2][3] The VERTIC database has no entries for Cape Verde. [4] Cape Verde has not submitted any Confidence Building Measures reports. [5] At the time of research, the website of the Ministry of Defense was under construction.

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 20 February 2021.

[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[3] Ministry of Agriculture and Environment. [<http://maa.gov.cv/>]. Accessed 20 February 2021.

[4] VERTIC. [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/c/>]. Accessed 20 February 2021.

[5] UN Confidence Building Measures. "Cape Verde". [<https://bwc-ecbm.unog.ch/state/cape-verde>]. Accessed 15 March 2021.

1.3.1b

Does the country have in place legislation and/or regulations related to biosecurity which address requirements such as physical containment, operation practices, failure reporting systems, and/or cybersecurity of facilities in which especially dangerous pathogens and toxins are stored or processed?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that Cape Verde has in place legislation and/or regulations related to biosecurity which address requirements such as physical containment, operation practices, failure reporting systems, and/or cybersecurity of facilities in which especially dangerous pathogens and toxins are stored or processed. The WHO has conducted a Joint External Evaluation of Cape Verde in 4-8 November 2019. The JEE states in its Chapter 6 on Biosecurity and Biosafety that Cape Verde does not have any plans, legislation or regulations on biosecurity or biosafety. [1] No relevant evidence was found in the websites of the Ministry of Health and Social Security and the Ministry of Agriculture and Environment. [2][3] At the time of research, the website of the Ministry of Defense was under construction. [4] The VERTIC database has no entries for Cape Verde. [5] Cape Verde has not submitted any Confidence Building Measures reports. [6]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 20 February 2021.

[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[3] Ministry of Agriculture and Environment. [<http://maa.gov.cv/>]. Accessed 20 February 2021.

[4] Ministry of Defense. (Under construction). [<https://www.defesa.gov.cv/>]. Accessed 20 February 2021.

[5] VERTIC. [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/c/>]. Accessed 20 February 2021.

[6] UN Confidence Building Measures. "Cape Verde". [<https://bwc-ecbm.unog.ch/state/cape-verde>]. Accessed 15 March 2021.

1.3.1c

Is there an established agency (or agencies) responsible for the enforcement of biosecurity legislation and regulations?

Yes = 1 , No = 0

Current Year Score: 0

There is no publicly available evidence that Cape Verde has an established agency responsible for enforcement of biosecurity legislation and regulations. The WHO has conducted a Joint External Evaluation of Cape Verde in 4-8 November 2019. On page 27, the JEE states that a priority action is to create a National Commission for Biosecurity. On page 26, it states that there are no operational procedures in place on biosecurity or biosafety. [1] No relevant evidence was found in the websites of the Ministry of Health and Social Security and the Ministry of Agriculture and Environment. [2][3] At the time of research,

the website of the Ministry of Defense was under construction. [4] The VERTIC database has no entries for Cape Verde. [5] Cape Verde has not submitted any Confidence Building Measures reports. [6]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 20 February 2021.

[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[3] Ministry of Agriculture and Environment. [<http://maa.gov.cv/>]. Accessed 20 February 2021.

[4] Ministry of Defense. (Under construction). [<https://www.defesa.gov.cv/>]. Accessed 20 February 2021.

[5] VERTIC. [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/c/>]. Accessed 20 February 2021.

[6] UN Confidence Building Measures. "Cape Verde". [<https://bwc-ecbm.unog.ch/state/cape-verde>]. Accessed 15 March 2021.

1.3.1d

Is there public evidence that shows that the country has taken action to consolidate its inventories of especially dangerous pathogens and toxins into a minimum number of facilities?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that Cape Verde has taken action to consolidate its inventories of especially dangerous pathogens and toxins into a minimum number of facilities. There is no evidence that Cape Verde maintains an inventory of dangerous pathogens. The WHO has conducted a Joint External Evaluation of Cape Verde in 4-8 November 2019. The JEE states on page 5 that a priority action for Cape Verde is to "Inventory the microorganisms that are manipulated and the location where they are being stored in the country". The same priority action recommendation is present on page 49, where it states that an area that needs to be strengthened is of an "updated inventory of pathogenic agents and toxins in entities that manipulate or store those microorganisms". [1] No relevant evidence was found in the websites of the Ministry of Health and Social Security and the Ministry of Agriculture and Environment. [2][3] At the time of research, the website of the Ministry of Defense was under construction. [4] The VERTIC database has no entries for Cape Verde. [5] Cape Verde has not submitted any Confidence Building Measures reports. [6]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 20 February 2021.

[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[3] Ministry of Agriculture and Environment. [<http://maa.gov.cv/>]. Accessed 20 February 2021.

[4] Ministry of Defense. (Under construction). [<https://www.defesa.gov.cv/>]. Accessed 20 February 2021.

[5] VERTIC. [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/c/>]. Accessed 20 February 2021.

[6] UN Confidence Building Measures. "Cape Verde". [<https://bwc-ecbm.unog.ch/state/cape-verde>]. Accessed 15 March 2021.

1.3.1e

Is there public evidence of in-country capacity to conduct Polymerase Chain Reaction (PCR)–based diagnostic testing for anthrax and/or Ebola, which would preclude culturing a live pathogen?

Yes = 1 , No = 0

Current Year Score: 0

There is no public evidence in Cape Verde of in-country capacity to conduct Polymerase Chain Reaction (PCR)-based diagnostic testing for anthrax or Ebola, which would preclude culturing a live pathogen. The WHO has conducted a Joint External Evaluation of Cape Verde in 4-8 November 2019. The JEE does not mention any capability of conducting PCR-based testing for any disease. [1] No relevant evidence was found in the websites of the Ministry of Health and Social Security and the Ministry of Agriculture and Environment. [2][3] At the time of research, the website of the Ministry of Defense was under construction. [4] The VERTIC database has no entries for Cape Verde. [5] Cape Verde has not submitted any Confidence Building Measures reports. [6]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 20 February 2021.

[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[3] Ministry of Agriculture and Environment. [<http://maa.gov.cv/>]. Accessed 20 February 2021.

[4] Ministry of Defense. (Under construction). [<https://www.defesa.gov.cv/>]. Accessed 20 February 2021.

[5] VERTIC. [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/c/>]. Accessed 20 February 2021.

[6] UN Confidence Building Measures. "Cape Verde". [<https://bwc-ecbm.unog.ch/state/cape-verde>]. Accessed 15 March 2021.

1.3.2 Biosecurity training and practices

1.3.2a

Does the country require biosecurity training, using a standardized, required approach, such as through a common curriculum or a train-the-trainer program, for personnel working in facilities housing or working with especially dangerous pathogens, toxins, or biological materials with pandemic potential?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that Cape Verde requires biosecurity training, using a standardized, required approach, such as through a common curriculum or a train-the-trainer program, for personnel working in facilities housing or working with especially dangerous pathogens, toxins, or biological materials with pandemic potential. The WHO has conducted a Joint External Evaluation of Cape Verde in 4-8 November 2019. According to the JEE, Cape Verde does not have any plans or regulations that addresses biosecurity or biosafety. On training, the JEE states that there is a need for capacitation and training of personnel, but it does not mention any existing requirement for biosecurity training. [1] No relevant evidence was found in the websites of the Ministry of Health and Social Security and the Ministry of Agriculture and Environment. [2][3] At the time of research, the website of the Ministry of Defense was under construction. [4] The VERTIC database has no entries for Cape Verde. [5] Cape Verde has not submitted any Confidence Building Measures reports. [6]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 20 February 2021.

[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[3] Ministry of Agriculture and Environment. [<http://maa.gov.cv/>]. Accessed 20 February 2021.

[4] Ministry of Defense. (Under construction). [<https://www.defesa.gov.cv/>]. Accessed 20 February 2021.

[5] VERTIC. [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/c/>]. Accessed 20 February 2021.

[6] UN Confidence Building Measures. "Cape Verde". [<https://bwc-ecbm.unog.ch/state/cape-verde>]. Accessed 15 March 2021.

1.3.3 Personnel vetting: regulating access to sensitive locations

1.3.3a

Do regulations or licensing conditions specify that security and other personnel with access to especially dangerous pathogens, toxins, or biological materials with pandemic potential are subject to the following checks: drug testing, background checks, and psychological or mental fitness checks?

Personnel are subject to all three of these checks = 3, Personnel are subject to two of these checks = 2, Personnel are subject to one of these checks = 1, Personnel are not subject to any of these checks = 0

Current Year Score: 0

There is no evidence that Cape Verde has regulations or licensing conditions that specify that security and other personnel with access to especially dangerous pathogens, toxins, or biological materials with pandemic potential are subject to drug testing, background checks, and psychological or mental fitness checks. The WHO has conducted a Joint External Evaluation of Cape Verde in 4-8 November 2019. According to the JEE, Cape Verde does not have any plans or regulations that addresses biosecurity or biosafety. There are no mentions of any checks for personnel. [1] No relevant evidence was found in the websites of the Ministry of Health and Social Security and the Ministry of Agriculture and Environment. [2][3] At the time of research, the website of the Ministry of Defense was under construction. [4] The VERTIC database has no entries for Cape Verde. [5] Cape Verde has not submitted any Confidence Building Measures reports. [6]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 20 February 2021.

[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[3] Ministry of Agriculture and Environment. [<http://maa.gov.cv/>]. Accessed 20 February 2021.

[4] Ministry of Defense. (Under construction). [<https://www.defesa.gov.cv/>]. Accessed 20 February 2021.

[5] VERTIC. [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/c/>]. Accessed 20 February 2021.

[6] UN Confidence Building Measures. "Cape Verde". [<https://bwc-ecbm.unog.ch/state/cape-verde>]. Accessed 15 March 2021.

1.3.4 Transportation security

1.3.4a

Does the country have publicly available information on national regulations on the safe and secure transport of infectious substances (specifically including Categories A and B)?

Yes = 1 , No = 0

Current Year Score: 1

There is evidence that Cape Verde has publicly available information on national regulations on the safe and secure transport of infectious substances (specifically including Categories A and B). The Ministry of Health and Social Security and the National Institute of Public Health (INSP) published in August 2020 a Manual for the Transportation of Biological Samples. The Manual specifically includes norms for transportation of biological samples, including Categories A and B. [1] Cape Verde has not submitted any Confidence Building Measures reports. [2]

[1] Ministry of Health and Social Security; National Institute of Public Health. August 2020. "Manual for the Transportation of Biological Samples (Manual de Transporte de Amostras Biológicas)". [https://covid19.cv/wp-content/uploads/2021/01/INSP-Manual_Transporte-de-substancias-infecciosas.pdf]. Accessed 20 February 2021.

[2] UN Confidence Building Measures. "Cape Verde". [<https://bwc-ecbm.unog.ch/state/cape-verde>]. Accessed 15 March 2021.

1.3.5 Cross-border transfer and end-user screening

1.3.5a

Is there legislation and/or regulations in place to oversee the cross-border transfer and end-user screening of especially dangerous pathogens, toxins, and pathogens with pandemic potential?

Yes = 1 , No = 0

Current Year Score: 0

Cape Verde does not have a national legislation, regulation, or other guidance in place to oversee the cross-border transfer and end-user screening of especially dangerous pathogens, toxins and pathogens with pandemic potential. The WHO has conducted a Joint External Evaluation of Cape Verde in 4-8 November 2019. The JEE does not provide any evidence of a legislation or regulation to oversee the cross-border transfer and end-user screening of especially dangerous pathogens, toxins, and pathogens with pandemic potential. [1] No relevant evidence was found in the websites of the Ministry of Health and Social Security and the Ministry of Agriculture and Environment. [2, 3] At the time of research, the website of the Ministry of Defense was under construction. [4] The VERTIC database has no entries for Cape Verde. [5] Cape Verde has not submitted any Confidence Building Measures reports. [6]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 20 February 2021.

[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[3] Ministry of Agriculture and Environment. [<http://maa.gov.cv/>]. Accessed 20 February 2021.

[4] Ministry of Defense. (Under construction). [<https://www.defesa.gov.cv/>]. Accessed 20 February 2021.

[5] VERTIC. [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/c/>]. Accessed 20 February 2021.

[6] UN Confidence Building Measures. "Cape Verde". [<https://bwc-ecbm.unog.ch/state/cape-verde>]. Accessed 15 March 2021.

1.4 BIOSAFETY

1.4.1 Whole-of-government biosafety systems

1.4.1a

Does the country have in place national biosafety legislation and/or regulations?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that Cape Verde has in place national biosafety legislation and/or regulations. The WHO has conducted a Joint External Evaluation of Cape Verde in 4-8 November 2019. The JEE states in its Chapter 6 on Biosecurity and Biosafety that Cape Verde does not have any plans, legislation or regulations on biosecurity or biosafety. [1] No relevant evidence was found in the websites of the Ministry of Health and Social Security and the Ministry of Agriculture and Environment. [2][3] At the time of research, the website of the Ministry of Defense was under construction. [4] The VERTIC database has no entries for Cape Verde. [5] Cape Verde has not submitted any Confidence Building Measures reports. [6]

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[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[3] Ministry of Agriculture and Environment. [<http://maa.gov.cv/>]. Accessed 20 February 2021.

[4] Ministry of Defense. (Under construction). [<https://www.defesa.gov.cv/>]. Accessed 20 February 2021.

[5] VERTIC. [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/c/>]. Accessed 20 February 2021.

[6] UN Confidence Building Measures. "Cape Verde". [<https://bwc-ecbm.unog.ch/state/cape-verde>]. Accessed 15 March 2021.

1.4.1b

Is there an established agency responsible for the enforcement of biosafety legislation and regulations?

Yes = 1 , No = 0

Current Year Score: 0

There is no publicly available evidence that Cape Verde has an established agency responsible for enforcement of biosafety legislation and regulations. The WHO has conducted a Joint External Evaluation of Cape Verde in 4-8 November 2019. On page 27, the JEE states that a priority action is to create a National Commission for Biosecurity, which given the context, would also include biosafety. On page 26, it states that there are no operational procedures in place on biosecurity or biosafety. [1] No relevant evidence was found in the websites of the Ministry of Health and Social Security and the Ministry of Agriculture and Environment. [2][3] At the time of research, the website of the Ministry of Defense was under construction. [4] The VERTIC database has no entries for Cape Verde. [5] Cape Verde has not submitted any Confidence Building Measures reports. [6]

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[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[3] Ministry of Agriculture and Environment. [<http://maa.gov.cv/>]. Accessed 20 February 2021.

[4] Ministry of Defense. (Under construction). [<https://www.defesa.gov.cv/>]. Accessed 20 February 2021.

[5] VERTIC. [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/c/>]. Accessed 20 February 2021.

[6] UN Confidence Building Measures. "Cape Verde". [<https://bwc-ecbm.unog.ch/state/cape-verde>]. Accessed 15 March 2021.

1.4.2 Biosafety training and practices

1.4.2a

Does the country require biosafety training, using a standardized, required approach, such as through a common curriculum or a train-the-trainer program, for personnel working in facilities housing or working with especially dangerous pathogens, toxins, or biological materials with pandemic potential?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that Cape Verde requires biosafety training, using a standardized, required approach, such as through a common curriculum or a train-the-trainer program, for personnel working in facilities housing or working with especially dangerous pathogens, toxins, or biological materials with pandemic potential. The WHO has conducted a Joint External Evaluation of Cape Verde in 4-8 November 2019. According to the JEE, Cape Verde does not have any plans or regulations that addresses biosecurity or biosafety. On training, the JEE states that there is a need for capacitation and training of personnel, but it does not mention any existing requirement for biosafety training. [1] No relevant evidence was found in the websites of the Ministry of Health and Social Security and the Ministry of Agriculture and Environment. [2][3] At the time of research, the website of the Ministry of Defense was under construction. [4] The VERTIC database has no entries for Cape Verde. [5] Cape Verde has not submitted any Confidence Building Measures reports. [6]

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[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[3] Ministry of Agriculture and Environment. [<http://maa.gov.cv/>]. Accessed 20 February 2021.

[4] Ministry of Defense. (Under construction). [<https://www.defesa.gov.cv/>]. Accessed 20 February 2021.

[5] VERTIC. [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/c/>]. Accessed 20 February 2021.

[6] UN Confidence Building Measures. "Cape Verde". [<https://bwc-ecbm.unog.ch/state/cape-verde>]. Accessed 15 March 2021.

1.5 DUAL-USE RESEARCH AND CULTURE OF RESPONSIBLE SCIENCE

1.5.1 Oversight of research with especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research

1.5.1a

Is there publicly available evidence that the country has conducted an assessment to determine whether ongoing research is occurring on especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research?

Yes = 1 , No = 0

Current Year Score: 0

There is no publicly available evidence that the country has conducted an assessment to determine whether ongoing research is occurring on especially dangerous pathogens, toxins, pathogens with pandemic potential, and/or other dual use research. The WHO has conducted a Joint External Evaluation of Cape Verde in 4-8 November 2019. The JEE does not mention any assessment on ongoing research related to dangerous pathogens, toxins or any other dual-use research. [1] No relevant evidence was found in the websites of the Ministry of Health and Social Security and the Ministry of Agriculture and Environment. [2][3] At the time of research, the website of the Ministry of Defense was under construction. [4] The VERTIC database has no entries for Cape Verde. [5] Cape Verde has not submitted any Confidence Building Measures reports. [6]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 20 February 2021.

[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[3] Ministry of Agriculture and Environment. [<http://maa.gov.cv/>]. Accessed 20 February 2021.

[4] Ministry of Defense. (Under construction). [<https://www.defesa.gov.cv/>]. Accessed 20 February 2021.

[5] VERTIC. [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/c/>]. Accessed 20 February 2021.

[6] UN Confidence Building Measures. "Cape Verde". [<https://bwc-ecbm.unog.ch/state/cape-verde>]. Accessed 15 March 2021.

1.5.1b

Is there legislation and/or regulation requiring oversight of research with especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research?

Yes = 1 , No = 0

Current Year Score: 0

There is no publicly available evidence that Cape Verde has legislation or regulation requiring oversight of research with especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research. The WHO has conducted a Joint External Evaluation of Cape Verde in 4-8 November 2019. The JEE does not mention any legislation or regulation requiring oversight of research with especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research. [1] No relevant evidence was found in the websites of the Ministry of Health and Social Security and the Ministry of Agriculture and Environment. [2][3] At the time of research, the website of the Ministry of Defense was under construction. [4] The VERTIC database has no entries for Cape Verde. [5] Cape Verde has not submitted

any Confidence Building Measures reports. [6]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 20 February 2021.

[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[3] Ministry of Agriculture and Environment. [<http://maa.gov.cv/>]. Accessed 20 February 2021.

[4] Ministry of Defense. (Under construction). [<https://www.defesa.gov.cv/>]. Accessed 20 February 2021.

[5] VERTIC. [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/c/>]. Accessed 20 February 2021.

[6] UN Confidence Building Measures. "Cape Verde". [<https://bwc-ecbm.unog.ch/state/cape-verde>]. Accessed 15 March 2021.

1.5.1c

Is there an agency responsible for oversight of research with especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence of an agency in Cape Verde responsible for oversight of research with especially dangerous pathogens, pathogens with pandemic potential, and/or other dual use research. The WHO has conducted a Joint External Evaluation of Cape Verde in 4-8 November 2019. The JEE does not mention any agency responsible for oversight of research with especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research. [1] No relevant evidence was found in the websites of the Ministry of Health and Social Security and the Ministry of Agriculture and Environment. [2][3] At the time of research, the website of the Ministry of Defense was under construction. [4] The VERTIC database has no entries for Cape Verde. [5] Cape Verde has not submitted any Confidence Building Measures reports. [6]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 20 February 2021.

[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[3] Ministry of Agriculture and Environment. [<http://maa.gov.cv/>]. Accessed 20 February 2021.

[4] Ministry of Defense. (Under construction). [<https://www.defesa.gov.cv/>]. Accessed 20 February 2021.

[5] VERTIC. [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/c/>]. Accessed 20 February 2021.

[6] UN Confidence Building Measures. "Cape Verde". [<https://bwc-ecbm.unog.ch/state/cape-verde>]. Accessed 15 March 2021.

1.5.2 Screening guidance for providers of genetic material

1.5.2a

Is there legislation and/or regulation requiring the screening of synthesized DNA (deoxyribonucleic acid) against lists of known pathogens and toxins before it is sold?

Yes = 1 , No = 0

Current Year Score: 0

In Cape Verde, there is no evidence of national legislation, regulation, policy, or other guidance, requiring the screening of synthesized DNA before it is sold. The WHO has conducted a Joint External Evaluation of Cape Verde in 4-8 November 2019. The JEE does not mention any such legislation or regulation. [1] According to a Food and Agricultural Administration (FAO) report from 2014, Cabo Verde does not have any GMO legislation in place. [2] No relevant evidence was found in the websites of the Ministry of Health and Social Security and the Ministry of Agriculture and Environment. [3][4] At the time of research, the website of the Ministry of Defense was under construction. [5] The VERTIC database has no entries for Cape Verde. [6] Cape Verde has not submitted any Confidence Building Measures reports. [7]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 20 February 2021.

[2] Food and Agricultural Administration (FAO). 2014. Low Levels of Genetically Modified Crops in International Food and Feed Trade: FAO International Survey and Economic Analysis. [<http://www.fao.org/docrep/019/i3734e/i3734e.pdf>]. Accessed 20 February 2021.

[3] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[4] Ministry of Agriculture and Environment. [<http://maa.gov.cv/>]. Accessed 20 February 2021.

[5] Ministry of Defense. (Under construction). [<https://www.defesa.gov.cv/>]. Accessed 20 February 2021.

[6] VERTIC. [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/c/>]. Accessed 20 February 2021.

[7] UN Confidence Building Measures. "Cape Verde". [<https://bwc-ecbm.unog.ch/state/cape-verde>]. Accessed 15 March 2021.

1.6 IMMUNIZATION

1.6.1 Vaccination rates

1.6.1a

Immunization rate (measles/MCV2)

Immunization rate (measles/MCV2), 95% or greater = 2, 80-94.9% = 1, Less than 80%, or no data = 0

Current Year Score: 1

2019

World Health Organization

1.6.1b

Are official foot-and-mouth disease (FMD) vaccination figures for livestock publicly available through the OIE database?

Yes = 1 , No = 0

Current Year Score: 1

2020

OIE WAHIS database

Category 2: Early detection and reporting for epidemics of potential international concern

2.1 LABORATORY SYSTEMS STRENGTH AND QUALITY

2.1.1 Laboratory testing for detection of priority diseases

2.1.1a

Does the national laboratory system have the capacity to conduct diagnostic tests for at least 5 of the 10 WHO-defined core tests?

Evidence they can conduct 5 of the 10 core tests and these tests are named = 2, Evidence they can conduct 5 of the 10 core tests and the tests are not named = 1, No evidence they can conduct 5 of the 10 core tests = 0

Current Year Score: 0

There is insufficient evidence that Cape Verde's national laboratory system has the capacity to conduct diagnostic tests for at least 5 of the 10 WHO-defined core tests. There is only evidence that Cape Verde can conduct rapid diagnostic testing for malaria, microscopy for tuberculosis, and serology for HIV.

An academic study by DePina et al from 2018 confirms that Cape Verde has capability to conduct diagnostic testing for plasmodium spp. (malaria). [1] An academic article from 2007 and a news article from 2013 confirms that Cape Verde has the capability to conduct microscopy testing for tuberculosis. [2][3]

The WHO has conducted a Joint External Evaluation of Cape Verde on 4-8 November 2019. The JEE confirms on page 31 that Cape Verde can conduct serology for HIV. The JEE also states that the country can conduct testing for a variety of other pathogens but it does not specify the type of test. Among those other pathogens, Cape Verde can test for malaria, tuberculosis, meningitis, Zika, hepatitis, dengue, yellow fever, acute facial paralysis, measles, and chickenpox. It can also test for zoonotic diseases, which include salmonella, but again it does not specify the type of test. [4] No relevant evidence was found in the websites of the Ministry of Health and Social Security and the National Institute of Public Health. [5][6]

[1] A. J. DePina, N. B. Fernandes, J. M. Moreira, U. Furtado, E. Fortes, A. L. Moreira, I. Seck. 2018. "Malaria: Diagnosis and treatment in the context of elimination in Cape Verde". [<https://symbiosisonlinepublishing.com/criticalcare-diagnostic-management/criticalcare-diagnostic-management01.pdf>]. Accessed 20 February 2021.

[2] Almeida, A.P. June 2007. "Epidemiology of Tuberculosis Among Patients in the Hospital Dr. Baptista de Sousa, São Vicente, Cape Verde (Epidemiologia da Tuberculose Entre Pacientes Atendidos Na Delegacia de Saúde / Hospital Dr. Baptista de Sousa, São Vicente, Cabo Verde)".

[<http://www.portaldoconhecimento.gov.cv/bitstream/10961/2240/1/Monografia%20Antonio%20Pinto%20Final.pdf>]. Accessed 20 February 2021.

[3] Expresso das Ilhas. 22 April 2013. "Tuberculosis rises in Cape Verde (Tuberculose aumenta em Cabo Verde)".

[<https://expressodasilhas.cv/pais/2013/04/22/tuberculose-aumenta-em-cabo-verde/36581>]. Accessed 20 February 2021.

[4] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 20 February 2021.

[5] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[6] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 20 February 2021.

2.1.1b

Is there a national plan, strategy or similar document for conducting testing during a public health emergency, which includes considerations for testing for novel pathogens, scaling capacity, and defining goals for testing?

Yes, there is evidence of a plan, and it includes considerations for testing for novel pathogens, scaling capacity, and defining goals for testing = 2, Yes, there is evidence of a plan, but there is insufficient evidence that it includes considerations for testing for novel pathogens, scaling capacity, and defining goals for testing = 1, No evidence of a plan = 0

Current Year Score: 0

There is insufficient evidence that Cape Verde has plans that include testing during a public health emergency with considerations for novel pathogens, scaling capacity, and defining goals for testing.

The WHO has conducted a Joint External Evaluation of Cape Verde on 4-8 November 2019. The JEE states that Cape Verde has developed plans for Ebola in 2014, Dengue in 2009, Avian Flu in 2007, and Endo and Ectoparasites in 2019. None of those plans could be found online. [1]

More recently, as a response to the COVID-19 pandemic, Cape Verde developed a plan specific for the novel pathogen. The National Contingency Plan for COVID-19 published in January 2020 provides guidelines for collecting samples and responding to the disease. However, nowhere in the document are there any considerations for other novel pathogens, scaling capacity, or testing goals. The document does not provide any details on the testing process, capabilities, or sites. It only provides details on collecting, storing, and transporting samples. There are no details on protocols for testing. [2]

No other relevant evidence was found on the websites of the Ministry of Health and Social Security and the National Institute of Public Health. [3][4]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 20 February 2021.

[2] Ministry of Health and Social Security. January 2020. "COVID-19: National Contingency Plan (COVID-19: Plano Nacional de Contingência)". [<https://covid19.cv/wp-content/uploads/2020/03/PLANO-NACIONAL-DE-CONTING%C3%8ANCIA.pdf>]. Accessed 20 February 2021.

[3] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[4] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 20 February 2021.

2.1.2 Laboratory quality systems

2.1.2a

Is there a national laboratory that serves as a reference facility which is accredited (e.g., International Organization for Standardization [ISO] 15189:2003, U.S. Clinical Laboratory Improvement Amendments [CLIA])?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that a national or regional laboratory that serves as a reference facility in Cape Verde is accredited.

The National Institute of Public Health (INSP) serves as the reference facility for Cape Verde and it was only created in 2014. Its website does not indicate any type of accreditation. [1] The WHO has conducted a Joint External Evaluation of Cape Verde on 4-8 November 2019. The JEE does not mention any type of accreditation associated with any reference facility or laboratory. [2] No other relevant evidence was found on the websites of the Ministry of Health and Social Security. [3] There is also no evidence of a regional laboratory that serves as a reference facility for the country.

[1] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 20 February 2021.

[2] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 20 February 2021.

[3] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

2.1.2b

Is there a national laboratory that serves as a reference facility which is subject to external quality assurance review?

Yes = 1 , No = 0

Current Year Score: 0

There is insufficient evidence that the national laboratory that serves as a reference facility in Cape Verde is subject to external quality assurance review.

The National Institute of Public Health (INSP) in Cape Verde serves as a reference facility for the country. It conducts external quality control for other laboratories in the country, but there is no evidence on the website that the INSP itself is subject to external quality assurance review. [1]

The WHO has conducted a Joint External Evaluation of Cape Verde on 4-8 November 2019. The JEE does not mention whether the INSP is subject to external quality assurance review. The JEE states that Cape Verde needs to create a national policy on quality and implement standard operating procedures in its laboratory system. On page 33 the JEE mentions that the national reference laboratory participates in external quality controls for bacteriology and HIV; however, there are no details on who provides the external quality control. [2] No other relevant or supporting evidence was found on the websites of the Ministry of Health and Social Security. [3]

[1] National Institute of Public Health. "Laboratories (Laboratórios)". [<https://www.insp.gov.cv/index.php/conheca-o-insp/atribuicoes/laboratorios>]. Accessed 20 February 2021.

[2] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de

missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 20 February 2021.

[3] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

2.2 LABORATORY SUPPLY CHAINS

2.2.1 Specimen referral and transport system

2.2.1a

Is there a nationwide specimen transport system?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence of a nationwide specimen transport system in Cape Verde.

The Ministry of Health and Social Security and the National Institute of Public Health (INSP) published in August 2020 a Manual for the Transportation of Biological Samples. The Manual specifically includes norms for the transportation of biological samples. However, there is no mention of any nationwide specimen transport system. [1]

The WHO has conducted a Joint External Evaluation of Cape Verde on 4-8 November 2019. The JEE gives question D.1.2 regarding "Specimen referral and transport system" a score of 3 which indicates that a system is in place to transport specimens to national laboratories from 50-80% of intermediate levels/districts within the country for advanced diagnostics. The JEE also states on page 26 that Cape Verde lacks protocols for the transportation of samples across the different islands that compose the archipelago. A priority action that the JEE recommends is the implementation of a national plan for the transport of samples. [2]

No other relevant evidence was found in the websites of the Ministry of Health and Social Security and the National Institute of Public Health. [3][4]

[1] Ministry of Health and Social Security; National Institute of Public Health. August 2020. "Manual for the Transportation of Biological Samples (Manual de Transporte de Amostras Biológicas)". [https://covid19.cv/wp-content/uploads/2021/01/INSP-Manual_Transporte-de-substancias-infecciosas.pdf]. Accessed 20 February 2021.

[2] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 20 February 2021.

[3] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[4] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 20 February 2021.

2.2.2 Laboratory cooperation and coordination

2.2.2a

Is there a plan in place to rapidly authorize or license laboratories to supplement the capacity of the national public health laboratory system to scale-up testing during an outbreak?

Yes = 2 , Yes, but there is evidence of gaps in implementation = 1 , No = 0

Current Year Score: 0

There is no evidence that Cape Verde has any mechanism in place to rapidly authorize or license laboratories to supplement the capacity of the national public health laboratory system to scale-up testing during an outbreak. The WHO has conducted a Joint External Evaluation of Cape Verde in 4-8 November 2019. The JEE does not mention any kind of mechanism for expediting laboratory licenses during a public health crisis. [1] The National Contingency Plan for COVID-19 makes no mention of such a mechanism. [2] No other relevant evidence was found in the websites of the Ministry of Health and Social Security, the National Institute of Public Health or the Ministry of Agriculture and Environment. [3][4][5]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 20 February 2021.

[2] Ministry of Health and Social Security. January 2020. "COVID-19: National Contingency Plan (COVID-19: Plano Nacional de Contingência)". [<https://covid19.cv/wp-content/uploads/2020/03/PLANO-NACIONAL-DE-CONTING%C3%8ANCIA.pdf>]. Accessed 20 February 2021.

[3] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[4] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 20 February 2021.

[5] Ministry of Agriculture and Environment. [<http://maa.gov.cv/>]. Accessed 15 March 2021.

2.3 REAL-TIME SURVEILLANCE AND REPORTING

2.3.1 Indicator and event-based surveillance and reporting systems

2.3.1a

Is there evidence that the country is conducting ongoing event-based surveillance and analysis for infectious disease?

Yes, there is evidence of ongoing event-based surveillance and evidence that the data is being analyzed on a daily basis = 2,
Yes, there is evidence of ongoing event-based surveillance, but no evidence that the data are being analyzed on a daily basis = 1, No = 0

Current Year Score: 0

There is insufficient evidence that Cape Verde is conducting ongoing event-based surveillance and analysis for infectious diseases. There is no evidence that the data is analyzed on a daily basis.

The WHO has conducted a Joint External Evaluation (JEE) of Cape Verde in 4-8 November 2019. According to the JEE, Cape Verde still needs to structure an event-based surveillance system. The country fares behind in terms of community surveillance and collecting, centralizing, and integrating information for various health units. [1]

Cape Verde, on the other hand, has the National Health Observatory, under the National Institute of Public Health (INSP). According to the INSP website, the National Health Observatory "allows a spatial analysis of health-related events, including those relating to the conditions and determinants of health, geographical contexts and associate geographic information technologies for information and statistical health data and provide dynamic information to users". However, there is no evidence that the data collection for the National Health Observatory is beyond the regular data collection framework and not based on events, reports, and rumors. [2] The data is aggregated from Ministry of Health data, which for most measures, only occurs yearly. [3]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 15 March 2021.

[2] National Institute of Public Health. National Health Observatory. [<http://www.insp.gov.cv/index.php/observatorio-saude/sistemas-de-informacao-geografica-em-saude>]. Accessed 20 February 2021.

[3] National Institute of Public Health. National Health Observatory. [<http://www.insp.gov.cv/index.php/observatorio-saude/sistemas-de-informacao-geografica-em-saude>]. Accessed 20 February 2021.

2.3.1b

Is there publicly available evidence that the country reported a potential public health emergency of international concern (PHEIC) to the WHO within the last two years?

Yes = 1 , No = 0

Current Year Score: 0

There is no publicly available evidence that the country reported a Potential Public Health Emergency of International Concern (PHEIC) to the World Health Organization (WHO) within the last two years. The WHO Disease Outbreak News page has no reports from Cape Verde in either 2019 and 2020. [1] The last report was for Zika virus infection in December 2015. [2] There is no evidence that Cape Verde reported COVID-19 as a PHEIC to the WHO. No other relevant evidence was found in the websites of the Ministry of Health and Social Security and the National Institute of Public Health. [3][4]

[1] World Health Organization (WHO). "Emergencies preparedness , response: Cape Verde".

[<http://www.who.int/csr/don/archive/year/2017/en/>]. Accessed 20 February 2021.

[2] World Health Organization (WHO). "Zika virus infection – Cape Verde". [<https://www.who.int/csr/don/21-december-2015-zika-cape-verde/en/>]. Accessed 20 February 2021.

[3] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[4] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 20 February 2021.

2.3.2 Interoperable, interconnected, electronic real-time reporting systems

2.3.2a

Does the government operate an electronic reporting surveillance system at both the national and the sub-national level?

Yes = 1 , No = 0

Current Year Score: 0

There is no publicly available evidence that Cape Verde operates an electronic reporting surveillance system at both the national and sub-national level. The WHO has conducted a Joint External Evaluation of Cape Verde in 4-8 November 2019. The JEE recommends on page 35 that Cape Verde should develop an electronic surveillance system in the country. The JEE states that the country has a surveillance system set in 2007 called the Disease Integrated Surveillance (VID-R), which is based on paper forms. [1] Cape Verde has a National Health Observatory that presents data electronically through its website; however, there is no indication that the data collection is done through an electronic system. VID-R is one of the sources used by the National Health Observatory. [2] No other relevant evidence was found in the websites of the Ministry of Health and Social Security and the National Institute of Public Health. [3][4]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 20 February 2021.

[2] National Institute of Public Health. 8 March 2018. "Geographic Information System on Health (Sistema de Informação Geográfica em Saúde)". [<https://www.insp.gov.cv/index.php/observatorio-saude/sistemas-de-informacao-geografica-em-saude>]. Accessed 20 February 2021.

[3] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[4] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 20 February 2021.

2.3.2b

Does the electronic reporting surveillance system collect ongoing or real-time laboratory data?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that Cape Verde operates an electronic reporting surveillance system; therefore, there is no evidence that it could collect ongoing or real-time laboratory data. The WHO has conducted a Joint External Evaluation of Cape Verde in 4-8 November 2019. The JEE recommends on page 35 that Cape Verde should develop an electronic surveillance system in the country. The JEE states that the country has a surveillance system set in 2007 called the Disease Integrated Surveillance (VID-R), which is based on forms. The JEE does not confirm that the VID-R collects ongoing or real-time laboratory data. [1] Cape Verde has a National Health Observatory that presents data electronically through its website; however, there is no indication that the data collection is done through an electronic system or that it is real-time. The latest year of data in the National Health Observatory is for 2018. VID-R is one of the sources used by the National Health Observatory. [2] No other relevant evidence was found in the websites of the Ministry of Health and Social Security and the National Institute of Public Health. [3][4]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 20 February 2021.

[2] National Institute of Public Health. 8 March 2018. "Geographic Information System on Health (Sistema de Informação Geográfica em Saúde)". [<https://www.insp.gov.cv/index.php/observatorio-saude/sistemas-de-informacao-geografica-em-saude>]. Accessed 20 February 2021.

[3] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[4] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 20 February 2021.

2.4 SURVEILLANCE DATA ACCESSIBILITY AND TRANSPARENCY

2.4.1 Coverage and use of electronic health records

2.4.1a

Are electronic health records commonly in use?

Electronic health records are commonly in use = 2, Electronic health records are not commonly in use, but there is evidence they are used = 1, No evidence electronic health records are in use = 0

Current Year Score: 1

There does not exist evidence that electronic health records are commonly in use in Cape Verde, although there is evidence that they do exist. The WHO has conducted a Joint External Evaluation of Cape Verde in 4-8 November 2019 and it does not mention anywhere in the document any reference to electronic health records. [1] There is no information on this on the Ministry of Health and Social Security website or the National Institute of Public Health website. [1][2] There is a World Health Organization report states that Cape Verde does use electronic health records across primary, secondary and tertiary health facilities. However, as of 2015, only 25-50% of primary care facilities used EHR and 50-75% of secondary and tertiary facilities used EHRs. [3]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 20 February 2021.

[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[3] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 20 February 2021.

[4] World Health Organization. 2015. "Atlas of eHealth country profiles".

[http://apps.who.int/iris/bitstream/handle/10665/204523/9789241565219_eng.pdf;jsessionid=476B193530DAAD23EE7D09E067A13433?sequence=1]. Accessed 20 February 2021.

2.4.1b

Does the national public health system have access to electronic health records of individuals in their country?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the national public health system has access to electronic health records of individuals in Cape Verde. According to a World Health Organization report, Cape Verde does have Electronic Health Records and uses them across primary, secondary and tertiary facilities. [1] However, there is no evidence that the national public health system has access to these records. There is no information on this on the Ministry of Health and Social Security website or the National Health Institute website. [2][3] No evidence on the matter was found in the Joint External Evaluation of Cape Verde conducted in 4-8 November 2019 by the WHO. [4]

[1] World Health Organization. 2015. "Atlas of eHealth country profiles".

[http://apps.who.int/iris/bitstream/handle/10665/204523/9789241565219_eng.pdf;jsessionid=476B193530DAAD23EE7D09E067A13433?sequence=1]. Accessed 20 February 2021.

[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[3] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 20 February 2021.

[4] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 20 February 2021.

2.4.1c

Are there data standards to ensure data is comparable (e.g., ISO standards)?

Yes = 1 , No = 0

Current Year Score: 0

There is no publicly available evidence that there are data standards to ensure data is comparable in Cape Verde. A World Health Organisation report states that Cape Verde does use electronic health records across primary, secondary and tertiary health facilities. [1] However, there is no evidence that the data standards are maintained in these records. There is no information on this on the Ministry of Health and Social Security website or the National Health Institute website. [2][3] No evidence on the matter was found in the Joint External Evaluation of Cape Verde conducted in 4-8 November 2019 by the WHO. [4]

[1] World Health Organization. 2015. "Atlas of eHealth country profiles".

[http://apps.who.int/iris/bitstream/handle/10665/204523/9789241565219_eng.pdf;jsessionid=476B193530DAAD23EE7D09E067A13433?sequence=1]. Accessed 20 February 2021.

[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 20 February 2021.

[3] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 20 February 2021.

[4] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 20 February 2021.

2.4.2 Data integration between human, animal, and environmental health sectors

2.4.2a

Is there evidence of established mechanisms at the relevant ministries responsible for animal, human, and wildlife surveillance to share data (e.g., through mosquito surveillance, brucellosis surveillance)?

Yes = 1, No = 0

Current Year Score: 0

There is insufficient evidence of established mechanisms at the relevant ministries responsible for animal, human and wildlife surveillance to share data. The National Health Observatory, part of the National Institute of Public Health, has an online geographic dashboard of mosquito vectors. However, there is no indication that it is a collaborative work across ministries.

[1] The Joint External Evaluation of Cape Verde conducted in 4-8 November 2019 by the WHO mentions on page 35 that there is a need in the country to develop a mechanism to integrate data on human, animal and environmental health. [2] No relevant evidence was found in the websites of the Ministry of Health and Social Security and the Ministry of Agriculture and Environment. [3][4]

[1] National Institute of Public Health. 8 March 2018. "Geographic Information System on Health (Sistema de Informação Geográfica em Saúde)". [<https://www.insp.gov.cv/index.php/observatorio-saude/sistemas-de-informacao-geografica-em-saude>]. Accessed 21 February 2021.

[2] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 21 February 2021.

[3] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 21 February 2021.

[4] Ministry of Agriculture and Environment. [<http://maa.gov.cv/>]. Accessed 21 February 2021.

2.4.3 Transparency of surveillance data

2.4.3a

Does the country make de-identified health surveillance data on infectious diseases publicly available via reports (or other format) on government websites (such as the Ministry of Health, Ministry of Agriculture, or similar)?

Yes = 1, No = 0

Current Year Score: 0

There is insufficient evidence that Cape Verde publishes de-identified health surveillance data on infectious diseases on government websites on at least weekly basis with no more lag than one month.

The Joint External Evaluation of Cape Verde conducted in 4-8 November 2019 by the WHO states on pages 34-35 that epidemiological bulletins are published weekly on priority diseases, but evidence of those bulletins could not be found. Those bulletins allegedly cover diseases beyond COVID-19 and they are published in the website of the Ministry of Health and Social Security. [1] The section of the Ministry of Health and Social Security website where those documents could be found was not accessible at the time of research. [2] The National Institute of Public Health has a Health Observatory, which provides some information on surveillance of select diseases. The latest data year is 2018 and it has incidence, prevalence, number of cases, number of deaths data on tuberculosis, mental health, HIV/AIDS, new epidemic events, alcoholism, leprosy, malaria, dengue, neoplasty, diabetes, Zika, and arterial hypertension. The data can be filtered by sex and age range. [3]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 21 February 2021.

[2] Ministry of Health and Social Security. "Documents (Documentos)". [<http://www.minsaude.gov.cv/index.php/documentosite>]. Accessed 21 February 2021.

[3] National Institute of Public Health. "SIG - National Health Observatory - General Dashboard (SIG - Observatório Nacional de Saúde - Dashboard Geral)". [https://portondinosilhas.gov.cv/redglobal/!REDGLOBAL.GLB_DISPATCHER.main?igrpbcdfadceea=183047167053700040295&p_env_dad=/cacecec8&p_env_menu=/C6CFC7CCC9&ichange=p_categoria#idp_categoria]. Accessed 24 February 2021.

2.4.3b

Does the country make de-identified COVID-19 surveillance data (including details such as daily case count, mortality rate, etc) available via daily reports (or other formats) on government websites (such as the Ministry of Health, or similar)?

Yes = 1, No = 0

Current Year Score: 1

Cape Verde publishes daily reports on COVID-19 surveillance data and it is published in the COVID-19 dedicated website managed by the National Institute of Public Health (INSP). The reports date back to 8 May and they are daily. [1] The 21 February 2021 report shows data on the total number of cases investigated on the day, the number of new cases, the number of recuperated patients and their location, total number of deaths, and transfers. [2] Cape Verde also publishes more extensive reports every two weeks. The first version of the two-week reports came out on 28 October 2020. [3] The 10 February 2021 two-week report contains more detailed information on the situation of COVID-19 in the country and contextualizes it to the global scenario. It also provides more maps and charts that present data in a more user-friendly manner. [4]

- [1] National Institute of Public Health. "COVID-19: Epimediological Bulletin (COVID-19: Boletim Epidemiológico)". [<https://covid19.cv/category/boletim-epidemiologico/>]. Accessed 21 February 2021.
- [2] National Institute of Public Health. "COVID-19: Epimediological Bulletin of 21 February 2021 (COVID-19: Boletim Epidemiológico de 21 de fevereiro de 2021)". [<https://covid19.cv/boletim-epidemiologico-de-21-de-fevereiro-de-2021/>]. Accessed 21 February 2021.
- [3] National Institute of Public Health. "COVID-19: Two-week bulletin (COVID-19: Boletim Quinzenal)". [<https://covid19.cv/boletim-quinzenal/>]. Accessed 21 February 2021.
- [4] National Institute of Public Health. "Situation Report of COVID-19 in Cape Verde - 10 February 2021 (Relatório da Situação da COVID-19 em Cabo Verde - 10 de fevereiro de 2021)". [<https://covid19.cv/wp-content/uploads/2021/02/Boletim-COVID19-no-07-de-10-de-fevereiro-2021.pdf>]. Accessed 21 February 2021.

2.4.4 Ethical considerations during surveillance

2.4.4a

Is there legislation and/or regulations that safeguard the confidentiality of identifiable health information for individuals, such as that generated through health surveillance activities?

Yes = 1 , No = 0

Current Year Score: 1

Cape Verde has a law that explicitly protects the confidentiality of health information of individuals. Cape Verde has the General Judicial Regime for the Protection of Personal Data of Individuals (Law number 41 of 17 September 2013). Article 8 addresses the treatment of sensitive information and health information of individuals are included as a protected type of data. Article 12 Paragraph 5 explicitly states that health and genetic data can only be accessed with consent from the data owner. Article 16 requires health data to be kept separate from other personal data. [1]

[1] Government of Cape Verde. General Judicial Regime for the Protection of Personal Data of Individuals (Law number 41 of 17 September 2013). [<http://www.informatica-juridica.com/ley/lei-no-41-viii-2013-regime-juridico-geral-da-proteccao-de-dados-pessoais-das-pessoas-singulares/>]. Accessed 21 February 2021.

2.4.4b

Is there legislation and/or regulations safeguarding the confidentiality of identifiable health information for individuals, such as that generated through health surveillance activities, include mention of protections from cyber attacks (e.g., ransomware)?

Yes = 1 , No = 0

Current Year Score: 0

There is insufficient evidence that Cape Verde has a law or regulation that protects the confidentiality of identifiable health information for individuals, such as that generated through health surveillance activities, include mention of protections from cyber attacks. On 29 January 2021, the government passed Decree-Law 9, which approves a new judicial regime for cybersecurity. It creates the National Center for Cybersecurity and adopts the directives from the Economic Community of West African States (ECOWAS) on cybersecurity. The decree-law becomes active on 28 July 2021. [1] The National Center for Cybersecurity does not have a website and the law does not specify in which agency, department or ministry in which it will be housed. The General Judicial Regime for the Protection of Personal Data of Individuals (Law number 41 of 17 September 2013) does not include any provisions on cyber attacks. [2] There are no mentions of data protection and cyber attacks in the WHO's Joint External Review of Cape Verde or in the websites of the Ministry of Health and Social Protection and the

National Institute of Public Health. [3][4][5]

[1] Government of Cape Verde. Judicial Regime on Cybersecurity (Decree-Law number 9 of 29 January 2021).

[<https://www.siawise.com/home/regime-juridico-de-ciberseguranca/>]. Accessed 21 February 2021.

[2] Government of Cape Verde. General Judicial Regime for the Protection of Personal Data of Individuals (Law number 41 of 17 September 2013). [<http://www.informatica-juridica.com/ley/lei-no-41-viii-2013-regime-juridico-geral-da-proteccao-de-dados-pessoais-das-pessoas-singulares/>]. Accessed 21 February 2021.

[3] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 21 February 2021.

[4] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 21 February 2021.

[5] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 21 February 2021.

2.4.5 International data sharing

2.4.5a

Has the government made a commitment via public statements, legislation and/or a cooperative agreement to share surveillance data during a public health emergency with other countries in the region?

Yes, commitments have been made to share data for more than one disease = 2, Yes, commitments have been made to share data only for one disease = 1, No = 0

Current Year Score: 0

There is insufficient evidence that the government has made public commitments to share surveillance data during a public health emergency with other countries in the region for one or more diseases.

According to the WHO's Joint External Evaluation of Cape Verde from November 2019, Cape Verde shares surveillance data with the Economic Community of West African States (ECOWAS) through the West African Health Organization (WAHO). [1] The ECOWAS website confirms that "collecting, interpreting and disseminating information" is one of its missions. [2] The WAHO website showcases several projects and programs that promote the sharing of health data. [3] However, there is no evidence of any public and specific commitment to share surveillance data during a public health emergency in none of the websites or documents. No relevant evidence was found in the websites of the Ministry of Health and Social Security and the National Institute of Public Health. [4][5]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 21 February 2021.

[2] Economic Community of West African States. "Health". [<https://www.ecowas.int/life-in-the-community/325-2/>]. Accessed 21 February 2021.

[3] West African Health Organization. "Programs". [<https://www.wahooas.org/web-ooas/en/programmes>]. Accessed 21 February 2021.

[4] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 15 March 2021.

[5] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 15 March 2021.

2.5 CASE-BASED INVESTIGATION

2.5.1 Case investigation and contact tracing

2.5.1a

Is there a national system in place to provide support at the sub-national level (e.g. training, metrics standardization and/or financial resources) to conduct contact tracing in the event of a public health emergency?

Yes, there is evidence that the national government supports sub-national systems to prepare for future public health emergencies = 2, Yes, there is evidence that the national government supports sub-national systems, but only in response to active public health emergencies = 1, No = 0

Current Year Score: 0

There is no evidence that Cape Verde has a system to provide support at the sub-national level to conduct contact tracing in the event of an active or future public health emergency. The WHO's Joint External Evaluation of Cape Verde from November 2019 makes no mention of contact tracing. [1] The COVID-19 National Contingency Plan mentions contact tracing, but it does not mention any kind of support for sub-national authorities to conduct contact tracing. [2] No other relevant evidence was found in the websites of the Ministry of Health and Social Security and the National Institute of Public Health. [3][4]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 21 February 2021.

[2] Ministry of Health and Social Security. January 2020. "COVID-19: National Contingency Plan (COVID-19: Plano Nacional de Contingência)". [<https://covid19.cv/wp-content/uploads/2020/03/PLANO-NACIONAL-DE-CONTING%C3%8ANCIA.pdf>]. Accessed 21 February 2021.

[3] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 21 February 2021.

[4] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 21 February 2021.

2.5.1b

Does the country provide wraparound services to enable infected people and their contacts to self-isolate or quarantine as recommended, particularly economic support (paycheck, job security) and medical attention?

Yes, both economic support and medical attention are provided = 2, Yes, but only economic support or medical attention is provided = 1, No = 0

Current Year Score: 0

There is no evidence that Cape Verde provides wraparound services to enable infected people and their contacts to self-isolate or quarantine as recommended, particularly economic support (paycheck, job security) and medical attention.

The WHO's Joint External Evaluation of Cape Verde from November 2019 makes no mention of any kind of wraparound services, being them economic support or medical attention. [1] The COVID-19 National Contingency Plan does not mention any kind of wraparound services. [2] No other relevant evidence was found in the websites of the Ministry of Health and Social Security and the National Institute of Public Health. [3][4] Cape Verde has laws for unemployment assistance (Decree-Law Number 15 of 5 March 2016) and for social protections (Law Number 131/V of 22 January 2001), but neither document has any provisions for wraparound services to enable cases and suspected cases to self-isolate as recommended, particularly

economic support (paycheck, job security) and medical attention. [5][6]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 21 February 2021.

[2] Ministry of Health and Social Security. January 2020. "COVID-19: National Contingency Plan (COVID-19: Plano Nacional de Contingência)". [<https://covid19.cv/wp-content/uploads/2020/03/PLANO-NACIONAL-DE-CONTING%C3%8ANCIA.pdf>]. Accessed 21 February 2021.

[3] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 21 February 2021.

[4] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 21 February 2021.

[5] Government of Cape Verde. Decree-Law Number 15 of 5 March 2016 (the document says 2015 but it is indeed 2016; it is a misprint and they later issued another publication noting the error). [<https://kiosk.incv.cv/V/2016/3/5/1.1.13.2153/p420>]. Accessed 15 March 2021.

[6] Government of Cape Verde. Law Number 131/V of 22 January 2001.

[<http://www.oit.org/dyn/natlex/docs/ELECTRONIC/104589/127640/F2031124176/ley%20131%20V%202001%20cabo%20verde.pdf>] Accessed 15 March 2021.

2.5.1c

Does the country make de-identified data on contact tracing efforts for COVID-19 (including the percentage of new cases from identified contacts) available via daily reports (or other format) on government websites (such as the Ministry of Health, or similar)?

Yes = 1 , No = 0

Current Year Score: 0

Cape Verde's reports on COVID-19 do not include data on contact tracing efforts. Based on the latest available reports, neither the daily (21 February 2021) nor the biweekly (10 February 2021) reports include data on contact tracing efforts. [1][2]

[1] National Institute of Public Health. "COVID-19: Epimediological Bulletin of 21 February 2021 (COVID-19: Boletim Epidemiológico de 21 de fevereiro de 2021)". [<https://covid19.cv/boletim-epidemiologico-de-21-de-fevereiro-de-2021/>]. Accessed 21 February 2021.

[2] National Institute of Public Health. "Situation Report of COVID-19 in Cape Verde - 10 February 2021 (Relatório da Situação da COVID-19 em Cabo Verde - 10 de fevereiro de 2021)". [<https://covid19.cv/wp-content/uploads/2021/02/Boletim-COVID19-no-07-de-10-de-fevereiro-2021.pdf>]. Accessed 21 February 2021.

2.5.2 Point of entry management

2.5.2a

Is there a joint plan or cooperative agreement between the public health system and border control authorities to identify suspected and potential cases in international travelers and trace and quarantine their contacts in the event of a public health emergency?

Yes, plan(s)/agreement(s) are in place to prepare for future public health emergencies = 2, Yes, but plan(s)/agreement(s) are in place only in response to active public health emergencies = 1, No = 0

Current Year Score: 1

There is evidence the Cape Verde has a joint plan or cooperative agreement between the public health system and border control authorities to identify suspected and potential cases in international travelers and trace and quarantine their contacts in the event of an active public health emergency, but only in response to an ongoing emergency.

On page 9, the WHO's Joint External Evaluation conducted in November 2019 recommends Cape Verde to create permanent mechanisms for collaboration between public health, animal health and security and border control authorities, as it reckons that it is a challenge and weakness for the country. [1] The COVID-19 plan of 2020 includes considerations of border control authorities. It requires health authorities to support border control authorities with important information as well as PPE. The COVID-19 plan also provides a form for health control to be used upon entry into the country in page 48. The plan, however, does not indicate the existence of any joint plan or cooperative agreement between the public health system and border control authorities. [2] There is an International Travel Form on the Covid19.cv website. A passenger needs to complete it online and submit it prior to your travel. [3]

No other relevant evidence was found in the websites of the Ministry of Health and Social Security and the National Institute of Public Health. [4,5] The Ministry of Internal Administration and the National Police, the two entities responsible for border security, do not have official websites.

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 21 February 2021.

[2] Ministry of Health and Social Security. January 2020. "COVID-19: National Contingency Plan (COVID-19: Plano Nacional de Contingência)". [<https://covid19.cv/wp-content/uploads/2020/03/PLANO-NACIONAL-DE-CONTING%C3%8ANCIA.pdf>]. Accessed 21 February 2021.

[3] TravelBans. Cape Verde. [<https://travelbans.org/africa/cape-verde/>]

[4] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 21 February 2021.

[5] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 21 February 2021.

2.6 EPIDEMIOLOGY WORKFORCE

2.6.1 Applied epidemiology training program, such as the field epidemiology training program, for public health professionals and veterinarians (e.g., Field Epidemiology Training Program [FETP] and Field Epidemiology Training Program for Veterinarians [FETPV])

2.6.1a

Does the country meet one of the following criteria?

- Applied epidemiology training program (such as FETP) is available in country
- Resources are provided by the government to send citizens to another country to participate in applied epidemiology training programs (such as FETP)

Needs to meet at least one of the criteria to be scored a 1 on this measure. , Yes for both = 1 , Yes for one = 1 , No for both = 0

Current Year Score: 1

There is sufficient evidence that Cape Verde has an applied epidemiology training program available in country, but there is no evidence that it provides resources to send citizens to another country to participate in applied epidemiology training programs. According to Training Programs in Epidemiology and Public Health Interventions Network (TEPHINET), Cape Verde was included in the Burkina Faso Field Epidemiology Training Program in 2018. The program was formerly known as the West Africa Field Epidemiology Training Program. [1] Cape Verde is not a member of the regional Field Epidemiology Training Program (FETP) program African Field Epidemiology Network (AFENET). [2] There is no mention of collaboration with the Centers for Disease Control and Prevention (CDC) of the United States on FETP on its website or the website of the Ministry of Health and Social Security. [3][4] No evidence was found on any kind of resources provided by the government to send citizens to another country to participate in applied epidemiology training programs.

[1] TEPHINET. "Burkina Faso Field Epidemiology Training Program". [<https://www.tephinet.org/training-programs/burkina-faso-field-epidemiology-training-program>]. Accessed 21 February 2021.

[2] Africa Field Epidemiology Training. [<http://afenet.net>]. Accessed 21 February 2021.

[3] Field Epidemiology Training Program (FETP). CDC. [<https://www.cdc.gov/globalhealth/healthprotection/fetp/index.htm>]. Accessed 21 February 2021.

[4] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 21 February 2021.

2.6.1b

Are the available field epidemiology training programs explicitly inclusive of animal health professionals or is there a specific animal health field epidemiology training program offered (such as FETPV)?

Yes = 1 , No = 0

Current Year Score: 1

There is sufficient evidence that the Burkina Faso Field Epidemiology Training Program Cape Verde was included in 2018 covers animal health. According to Training Programs in Epidemiology and Public Health Interventions Network (TEPHINET), the Burkina Faso Field Epidemiology Training Program covers both human and animal health. [1] Cape Verde is not a member of the regional Field Epidemiology Training Program (FETP) program African Field Epidemiology Network (AFENET). [2] There is no mention of collaboration with the Centers for Disease Control and Prevention (CDC) of the United States on FETP on its website or the website of the Ministry of Health and Social Security. [3][4]

[1] TEPHINET. "Burkina Faso Field Epidemiology Training Program". [<https://www.tephinet.org/training-programs/burkina-faso-field-epidemiology-training-program>]. Accessed 21 February 2021.

[2] Africa Field Epidemiology Training. [<http://afenet.net>]. Accessed 21 February 2021.

[3] Field Epidemiology Training Program (FETP). CDC. [<https://www.cdc.gov/globalhealth/healthprotection/fetp/index.htm>]. Accessed 21 February 2021.

[4] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 21 February 2021.

2.6.2 Epidemiology workforce capacity

2.6.2a

Is there public evidence that the country has at least 1 trained field epidemiologist per 200,000 people?

Yes = 1 , No = 0

Current Year Score: 0

2020

Completed JEE assessments; Economist Impact analyst qualitative assessment based on official national sources, which vary by country

Category 3: Rapid response to and mitigation of the spread of an epidemic

3.1 EMERGENCY PREPAREDNESS AND RESPONSE PLANNING

3.1.1 National public health emergency preparedness and response plan

3.1.1a

Does the country have an overarching national public health emergency response plan in place which addresses planning for multiple communicable diseases with epidemic or pandemic potential?

Evidence that there is a plan in place, and the plan is publicly available = 2, Evidence that the plan is in place, but the plan is not publicly available OR, Disease-specific plans are in place, but there is no evidence of an overarching plan = 1, No evidence that such a plan or plans are in place = 0

Current Year Score: 0

There is no evidence that Cape Verde has an overarching national public health emergency response plan in place which addresses planning for multiple communicable diseases with epidemic or pandemic potential.

Cape Verde developed the National Strategy for Disaster Risk Reduction in June 2017. The document mentions the risks of epidemics and public health emergencies, but it does not provide a response plan for such events. [1]

The World Bank produced in 2020 the report "Cabo Verde Emergency Preparedness and Response Diagnostic: Building a Culture of Preparedness". The World Bank report recognizes the efforts of Cape Verde to improve its disaster preparedness and acknowledges the National Strategy for Disaster Risk Reduction of 2017. However, its coverage of public health emergencies in the diagnostic is scarce. It identifies challenges in Cape Verde's public health system, but it does not address or identify any response plan for health emergencies. [2]

The WHO's Joint External Evaluation of Cape Verde from 2019 also acknowledges the disaster risk reduction plan, but it does not explicitly recognize that it covers any public health emergencies. [3] No other relevant evidence was found on the websites of the Ministry of Health and Social Security and the National Institute of Public Health. [4][5]

[1] Government of Cape Verde. 20 June 2017. "National Strategy for Disaster Risk Reduction (Estratégia Nacional de Redução de Riscos de Desastres)". [https://www.preventionweb.net/files/64563_enrrdestrategianacionaldereducaoder.pdf]. Accessed 21 February 2021.

[2] World Bank. 2020. "Cabo Verde Emergency Preparedness and Response Diagnostic: Building a Culture of Preparedness". [https://www.gfdrr.org/sites/default/files/publication/R2R%20Diagnostic%20Cabo%20Verde%20-%20Diagnostic%20Report%20%28Web%29_0.pdf]. Accessed 21 February 2021.

[3] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-

8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 21 February 2021.

[4] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 21 February 2021.

[5] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 21 February 2021.

3.1.1b

If an overarching plan is in place, has it been updated in the last 3 years?

Yes = 1 , No /no plan in place= 0

Current Year Score: 0

There is no evidence that Cape Verde has an overarching national public health emergency response plan in place which addresses planning for multiple communicable diseases with epidemic or pandemic potential. Cape Verde developed the National Strategy for Disaster Risk Reduction in June 2017. The document mentions the risks of epidemics and public health emergencies, but it does not provide a response plan for such events. [1] No other relevant evidence was found in the websites of the Ministry of Health and Social Security and the National Institute of Public Health. [2][3]

[1] Government of Cape Verde. 20 June 2017. "National Strategy for Disaster Risk Reduction (Estratégia Nacional de Redução de Riscos de Desastres)". [https://www.preventionweb.net/files/64563_enrrdestrategianacionaldereducaoder.pdf]. Accessed 21 February 2021.

[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 21 February 2021.

[3] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 21 February 2021.

3.1.1c

If an overarching plan is in place, does it include considerations for pediatric and/or other vulnerable populations?

Yes = 1 , No /no plan in place= 0

Current Year Score: 0

There is no evidence that Cape Verde has an overarching national public health emergency response plan in place which addresses planning for multiple communicable diseases with epidemic or pandemic potential. Cape Verde developed the National Strategy for Disaster Risk Reduction in June 2017. The document mentions the risks of epidemics and public health emergencies, but it does not provide a response plan for such events. [1] No other relevant evidence was found in the websites of the Ministry of Health and Social Security and the National Institute of Public Health. [2][3]

[1] Government of Cape Verde. 20 June 2017. "National Strategy for Disaster Risk Reduction (Estratégia Nacional de Redução de Riscos de Desastres)". [https://www.preventionweb.net/files/64563_enrrdestrategianacionaldereducaoder.pdf]. Accessed 21 February 2021.

[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 21 February 2021.

[3] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 21 February 2021.

3.1.1d

Does the country have a publicly available plan in place specifically for pandemic influenza preparedness that has been updated since 2009?

Yes = 1 , No = 0

Current Year Score: 0

2020

WHO Strategic Partnership for IHR and Health Security (SPH)

3.1.2 Private sector involvement in response planning

3.1.2a

Does the country have a specific mechanism(s) for engaging with the private sector to assist with outbreak emergency preparedness and response?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that Cape Verde has specific mechanisms for engaging with the private sector to assist with outbreak emergency preparedness and response. The WHO's Joint External Evaluation for Cape Verde of 2019 does not mention such mechanisms with the private sector. Indeed, it notes that the country lacks coverage of the private healthcare in regards to surveillance on page 34. There is a lack cooperation and collaboration between the public healthcare system and private healthcare providers. [1] No other relevant evidence was found in the websites of the Ministry of Health and Social Security and the National Institute of Public Health. [2][3]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 21 February 2021.

[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 21 February 2021.

[3] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 21 February 2021.

3.1.3 Non-pharmaceutical interventions planning

3.1.3a

Does the country have a policy, plan and/or guidelines in place to implement non-pharmaceutical interventions (NPIs) during an epidemic or pandemic?

Yes, a policy, plan and/or guidelines are in place for more than one disease = 2, Yes, but the policy, plan and/or guidelines exist only for one disease = 1, No = 0

Current Year Score: 1

There is evidence that Cape Verde has a policy, plan, or guideline in place to implement non-pharmaceutical interventions (NPIs) during an epidemic or pandemic, but for one disease (covid-19).

The National Contingency Plan for COVID-19 mentions NPIs in the form of quarantines and isolation of suspected cases. The COVID-19 plan includes preparedness for health facilities to reserve an area, equipment, and personnel for suspected cases to be maintained in isolation. It also sets procedures for different severity stages of the pandemic in the country, such that isolation procedures become more strict when the pandemic situation aggravates. It also sets priorities for isolation and specific instructions to each hospital, given their location and capacity. [1]

The WHO's Joint External Evaluation for Cape Verde of 2019 does not mention any kind of plans to implement NPIs in cases of emergencies. [2] No other relevant evidence was found on the websites of the Ministry of Health and Social Security and the National Institute of Public Health. [3][4]

[1] Ministry of Health and Social Security. January 2020. "COVID-19: National Contingency Plan (COVID-19: Plano Nacional de Contingência)". [<https://covid19.cv/wp-content/uploads/2020/03/PLANO-NACIONAL-DE-CONTING%C3%8ANCIA.pdf>].

Accessed 21 February 2021.

[2] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>].

Accessed 21 February 2021.

[3] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 21 February 2021.

[4] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 21 February 2021.

3.2 EXERCISING RESPONSE PLANS

3.2.1 Activating response plans

3.2.1a

Does the country meet one of the following criteria?

- Is there evidence that the country has activated their national emergency response plan for an infectious disease outbreak in the past year?

- Is there evidence that the country has completed a national-level biological threat-focused exercise (either with WHO or separately) in the past year?

Needs to meet at least one of the criteria to be scored a 1 on this measure. , Yes for both = 1 , Yes for one = 1 , No for both = 0

Current Year Score: 1

There is evidence that Cape Verde activated a national emergency response plan in the past year, but there is no evidence that it has completed a national-level biological threat-focused exercise in the past year.

In the past year, Cape Verde developed and published its National Contingency Plan for COVID-19. The plan includes preparedness for health facilities to reserve an area, equipment, and personnel for suspected cases to be maintained in isolation. It also sets procedures for different severity stages of the pandemic in the country, such that isolation procedures become more strict when the pandemic situation aggravates. It also sets priorities for isolation and specific instructions to each hospital, given their location and capacity. [1]

The WHO's extranet on Simulation Exercise shows that Cape Verde has not conducted a simulation exercise. [2] No other relevant evidence was found in the websites of the Ministry of Health and Social Security and the National Institute of Public Health. [3][4]

[1] Ministry of Health and Social Security. January 2020. "COVID-19: National Contingency Plan (COVID-19: Plano Nacional de Contingência)". [<https://covid19.cv/wp-content/uploads/2020/03/PLANO-NACIONAL-DE-CONTING%C3%8ANCIA.pdf>].

Accessed 21 February 2021.

[2] World Health Organization. "Simulation Exercise". [<https://extranet.who.int/sph/simulation->

exercise?region=All&country=1271]. Accessed 21 February 2021.

[3] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 21 February 2021.

[4] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 21 February 2021.

3.2.1b

Is there evidence that the country in the past year has identified a list of gaps and best practices in response (either through an infectious disease response or a biological-threat focused exercise) and developed a plan to improve response capabilities?

Yes, the country has developed and published a plan to improve response capacity = 2 , Yes, the country has developed a plan to improve response capacity, but has not published the plan = 1 , No = 0

Current Year Score: 0

There is no evidence that Cape Verde has identified a list of gaps and best practices in response to a public health emergency and developed a plan to improve response capabilities in the past year. Cape Verde has conducted an after-action review of the Zika virus disease outbreak in 2015; however, the after-action review report was published in February/March 2019, which is over one year ago, and there is no evidence that it has developed a plan to improve its response capacity. The WHO extranet provides a summary of the after-action review, but the full report could not be obtained online, despite the WHO indicating that it is publicly available. [1] The link to the full report does not work. [2] The WHO's Joint External Evaluation of Cape Verde from 2019 acknowledges the after-action review of the Zika virus disease outbreak, but it does not indicate that there was any plan to improve response capacity. [3] No other relevant evidence was found in the websites of the Ministry of Health and Social Security and the National Institute of Public Health. [4][5]

[1] World Health Organization. "After Action Review". [<https://extranet.who.int/sph/after-action-review?region=All&country=1271>]. Accessed 21 February 2021.

[2] World Health Organization. "Cabo Verde Zika 2019". [<https://extranet.who.int/sph/cabo-verde-zika2019>]. Accessed 21 February 2021.

[3] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 21 February 2021.

[4] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 21 February 2021.

[5] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 21 February 2021.

3.2.2 Private sector engagement in exercises

3.2.2a

Is there evidence that the country in the past year has undergone a national-level biological threat-focused exercise that has included private sector representatives?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that Cape Verde has undergone a national-level biological threat-focused exercise that has included private sector representatives in the past year. Cape Verde has conducted an after-action review of the Zika virus disease outbreak in 2015; however, the after-action review report was published in February/March 2019, which is over one year ago, and there is no evidence that it has any considerations of private sector representatives. The WHO extranet provides a

summary of the after-action review, but the full report could not be obtained online, despite the WHO indicating that it is publicly available. [1] The link to the full report does not work. [2] The WHO's Joint External Evaluation of Cape Verde from 2019 acknowledges the after-action review of the Zika virus disease outbreak, but it does not indicate any private sector involvement. [3] No other relevant evidence was found on the websites of the Ministry of Health and Social Security and the National Institute of Public Health. [4][5] The WHO's extranet on Simulation Exercise shows that Cape Verde has not conducted a simulation exercise. [6]

[1] World Health Organization. "After Action Review". [<https://extranet.who.int/sph/after-action-review?region=All&country=1271>]. Accessed 21 February 2021.

[2] World Health Organization. "Cabo Verde Zika 2019". [<https://extranet.who.int/sph/cabo-verde-zika2019>]. Accessed 21 February 2021.

[3] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 21 February 2021.

[4] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 21 February 2021.

[5] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 21 February 2021.

[6] World Health Organization. "Simulation Exercise". [<https://extranet.who.int/sph/simulation-exercise?region=All&country=1271>]. Accessed 21 February 2021.

3.3 EMERGENCY RESPONSE OPERATION

3.3.1 Emergency response operation

3.3.1a

Does the country have in place an Emergency Operations Center (EOC)?

Yes = 1, No = 0

Current Year Score: 1

Cape Verde has in place two Emergency Operations Centres (EOCs): the National Center for Emergency Operations of Civil Protection (CNOEPC), which is part of the National Service of Civil Protection (SNPC), and the National Center for Public Health Emergency Operations, which is under National Institute of Public Health (INSP), according to the WHO's Joint External Evaluation of 2019. [1]

According to the World Health Organization (WHO), the National Center for Emergency Operations in Public Health of Cape Verde was inaugurated in 2018 allowing the country to strengthen coordination and articulation for an effective public health response to emergencies. The new facility responds to the recommendations of the International Health Regulations (IHR 2005) to address emergencies that have consequences for human health.

This Center is funded under the Emergency Assistance to Support Cape Verde Project Preparedness and Response Plan to fight the Zika Virus Outbreak, implemented by the World Health Organization (WHO) and the Government of Cape Verde, with funds from the African Development Bank (AfDB). The Center, which is based at the National Institute of Public Health (INSP), will also serve to reinforce the capacities of this institution in responding to health emergencies and other public health events. [2]

On the other hand, the CNOEPC is generalized for all types of national emergencies, including health care workers; there is no evidence that the EOC is specific to public health emergencies. [1] The website of the SNPC was not accessible at the time of research. [3] Law number 100 of 19 April 1999 creates the SNPC in Article 24 and the CNOEC in Article 27. [4]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 21 February 2021.

[2] World Health Organisation. 7 December 2018. "Cape Verde already has a National Center for Emergency Public Health Operations (Cabo Verde já conta com Centro Nacional de Operações de Emergência em Saúde Pública)". [<https://www.afro.who.int/pt/news/cabo-verde-ja-Conta-com-centro-nacional-de-operacoes-de-emergencia-em-saude-publica>]. Accessed 15 March 2021.

[3] National Service of Civil Protection. [<http://www.snpc.cv/>]. Accessed 21 February 2021.

[4] Government of Cape Verde. Law number 100 of 19 April 1999. [<https://www.ifrc.org/docs/IDRL/CapeVLei%20no%20100V99.pdf>]. Accessed 21 February 2021.

3.3.1b

Is the Emergency Operations Center (EOC) required to conduct a drill for a public health emergency scenario at least once per year or is there evidence that they conduct a drill at least once per year?

Yes = 1 , No = 0

Current Year Score: 0

There is insufficient evidence that the Center for Emergency Operations of Civil Protection (CNOEPC), Cape Verde's emergency operations center, requires a drill for public health emergency scenario at least once per year nor that it conducts a drill at least once per year.

The website of the National Service of Civil Protection (SNPC) was not accessible at the time of research and the CNOEPC does not have a website. [1] The WHO's Joint External Evaluation of 2019 does not mention any requirement or history of conducting drills by the SNPC or the CNOEPC. [2] The Law number 100 of 19 April 1999 that establishes the SNPC and the CNOEPC states in Article 27-1-e that the CNOEPC is responsible for conducting drills and training sessions that contribute to the efficacy of all intervening entities in civil protection actions. There is no mentions of frequency requirements for those exercises. [3] Cape Verde also has the National Center for Public Health Emergency Operations under the National Institute of Public Health (INSP), but it has no dedicated website and there is no information in the INSP website on any kind of requirement to conduct a drill for a public health emergency scenario at least once per year or is there evidence that they conduct a drill at least once per year. [4]

[1] National Service of Civil Protection. [<http://www.snpc.cv/>]. Accessed 21 February 2021.

[2] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 21 February 2021.

[3] Government of Cape Verde. Law number 100 of 19 April 1999. [<https://www.ifrc.org/docs/IDRL/CapeVLei%20no%20100V99.pdf>]. Accessed 21 February 2021.

[4] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 15 March 2021.

3.3.1c

Is there public evidence to show that the Emergency Operations Center (EOC) has conducted within the last year a coordinated emergency response or emergency response exercise activated within 120 minutes of the identification of the public health emergency/scenario?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence that the Center for Emergency Operations of Civil Protection (CNOEPC), Cape Verde's emergency operations center, performed within the last year a coordinated emergency response or emergency response exercise activated within 120 minutes of the identification of the public health emergency/scenario. The website of the the National Service of Civil Protection (SNPC) was not accessible at the time of research and the CNOEPC does not have a website. [1] No other relevant evidence was found in the websites of the Ministry of Health and Social Security and the National Institute of Public Health. [2][3] Cape Verde also has the National Center for Public Health Emergency Operations under the National Institute of Public Health (INSP), but it has no dedicated website and there is no information in the INSP that it has conducted within the last year a coordinated emergency response or emergency response exercise activated within 120 minutes of the identification of the public health emergency/scenario. [4]

[1] National Service of Civil Protection. [<http://www.snpc.cv/>]. Accessed 21 February 2021.

[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 21 February 2021.

[3] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 21 February 2021.

[4] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 15 March 2021.

3.4 LINKING PUBLIC HEALTH AND SECURITY AUTHORITIES

3.4.1 Public health and security authorities are linked for rapid response during a biological event

3.4.1a

Does the country meet one of the following criteria?

- Is there public evidence that public health and national security authorities have carried out an exercise to respond to a potential deliberate biological event (i.e., bioterrorism attack)?

- Are there publicly available standard operating procedures, guidelines, memorandums of understanding (MOUs), or other agreements between the public health and security authorities to respond to a potential deliberate biological event (i.e., bioterrorism attack)?

Needs to meet at least one of the criteria to be scored a 1 on this measure., Yes for both = 1, Yes for one = 1, No for both = 0

Current Year Score: 0

There is no public evidence that public health and national security authorities have carried out an exercise to respond to a potential deliberate biological event. There also is no publicly available standard operating procedures, guidelines, MOUs or other agreements between the public health and security authorities to respond to a potential deliberate biological event (i.e. bioterrorism attack). The website of the National Service of Civil Protection (SNPC) was not accessible at the time of research and the CNOEPC does not have a website. [1] Cape Verde also has the National Center for Public Health Emergency Operations under the National Institute of Public Health (INSP), but it has no dedicated website and there is no information in the INSP that it has conducted an exercise to respond to a potential deliberate biological event or that there are publicly available standard operating procedures, guidelines, memorandums of understanding (MOUs), or other agreements between the public health and security authorities to respond to a potential deliberate biological event. [2] The WHO's extranet on

Simulation Exercise shows that Cape Verde has not conducted a simulation exercise. [2]

[1] National Service of Civil Protection. [<http://www.snpc.cv/>]. Accessed 21 February 2021.

[2] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 21 February 2021.

[3] World Health Organization. "Simulation Exercise". [<https://extranet.who.int/sph/simulation-exercise?region=All&country=1271>]. Accessed 21 February 2021.

3.5 RISK COMMUNICATIONS

3.5.1 Public communication

3.5.1b

Does the risk communication plan (or other legislation, regulation or strategy document used to guide national public health response) outline how messages will reach populations and sectors with different communications needs (eg different languages, location within the country, media reach)?

Yes = 1 , No = 0

Current Year Score: 1

There is evidence of a risk communication plan that outlines how messages will reach populations and sectors with different communication needs.

According to the WHO's Joint External Evaluation of 2019, Cape Verde has risk communication sections in its disease-specific plans, but there is no overarching plan that applies to all public health emergencies. [1]

For the COVID-19 pandemic, Cape Verde developed a separate document that is dedicated to risk communication for the COVID-19 crisis. The Plan for Risk Communication and Community Engagement for the Prevention and Response to the COVID-19 Epidemic of March 2020 is specific to COVID-19 and there are no stipulations that it could be used for other public health emergencies. The risk communication plan for COVID-19 includes measures to reach populations and sectors with different population needs. It makes available informative and educational material in several languages in strategic public spaces. It will disperse messages through different media, such as television, radio, posters, and social media. It also engages with local influencers to disseminate information and promote its messages. [2]

The JEE states that there were plans specific to other diseases, but they were not available online. No other relevant evidence was found in the websites of the Ministry of Health and Social Security and the National Institute of Public Health. [3][4]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 22 February 2021.

[2] Ministry of Health and Social Security. March 2020. "Plan for Risk Communication and Community Engagement for the Prevention and Response to the COVID-19 Epidemic (Plano de Comunicação de Risco e Envolvimento Comunitário para a Prevenção e Resposta à Epidemia COVID-19)". [<https://covid19.cv/wp-content/uploads/2020/05/INSP-Plano-de-comunica%C3%A7%C3%A3o-COVID-19-dig.-01.pdf>]. Accessed 22 February 2021.

[3] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 22 February 2021.

[4] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 22 February 2021.

3.5.1 Risk communication planning

3.5.1a

Does the country have in place, either in the national public health emergency response plan or in other legislation, regulation, or strategy documents, a section detailing a risk communication plan that is specifically intended for use during a public health emergency?

Yes = 1 , No = 0

Current Year Score: 1

There is evidence that Cape Verde has a risk communication plan that is specifically intended for use during a public health emergency.

According to the WHO's Joint External Evaluation of 2019, Cape Verde has risk communication sections in its disease-specific plans, but there is no overarching plan that applies to all public health emergencies. [1]

For the COVID-19 pandemic, however, Cape Verde developed a separate document that is dedicated to risk communication for the COVID-19 crisis. The Plan for Risk Communication and Community Engagement for the Prevention and Response to the COVID-19 Epidemic of March 2020 is specific to COVID-19 although there is no stipulation that it could be used for other public health emergencies. The COVID-19 risk communication plan is comprehensive, including community engagement, plan monitoring and oversight, management of misinformation and false rumors, as well as differentiated communication tactics for different phases of the pandemic (alert phase, imminent risk phase, and emergency phase). It also includes a detailed budget for all its components. [2]

The JEE states that there were plans specific to other diseases, but they were not available online. No other relevant evidence was found in the websites of the Ministry of Health and Social Security and the National Institute of Public Health. [3][4]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 22 February 2021.

[2] Ministry of Health and Social Security. March 2020. "Plan for Risk Communication and Community Engagement for the Prevention and Response to the COVID-19 Epidemic (Plano de Comunicação de Risco e Envolvimento Comunitário para a Prevenção e Resposta à Epidemia COVID-19)". [<https://covid19.cv/wp-content/uploads/2020/05/INSP-Plano-de-comunica%C3%A7%C3%A3o-COVID-19-dig.-01.pdf>]. Accessed 22 February 2021.

[3] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 22 February 2021.

[4] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 22 February 2021.

3.5.1c

Does the risk communication plan (or other legislation, regulation or strategy document used to guide national public health response) designate a specific position within the government to serve as the primary spokesperson to the public during a public health emergency?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that Cape Verde has a risk communication plan that is specifically intended for use during a public health emergency; therefore, there is no designation of a spokesperson.

According to the WHO's Joint External Evaluation of 2019, Cape Verde has risk communication sections in its disease-specific plans, but there is no overarching plan that applies to all public health emergencies. [1]

For the COVID-19 pandemic, Cape Verde developed a separate document that is dedicated to risk communication for the COVID-19 crisis. The Plan for Risk Communication and Community Engagement for the Prevention and Response to the COVID-19 Epidemic of March 2020 is specific to COVID-19 and there are no stipulations that it could be used for other public health emergencies. The risk communication plan for COVID-19 does not designate a specific position within the government to serve as a primary spokesperson to the public during a public health emergency but the plan mentions the role of the spokesperson briefly, but it does not define who this person should be. [2]

The JEE states that there were plans specific to other diseases, but they were not available online. No other relevant evidence was found in the websites of the Ministry of Health and Social Security and the National Institute of Public Health. [3][4]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 22 February 2021.

[2] Ministry of Health and Social Security. March 2020. "Plan for Risk Communication and Community Engagement for the Prevention and Response to the COVID-19 Epidemic (Plano de Comunicação de Risco e Envolvimento Comunitário para a Prevenção e Resposta à Epidemia COVID-19)". [<https://covid19.cv/wp-content/uploads/2020/05/INSP-Plano-de-comunica%C3%A7%C3%A3o-COVID-19-dig.-01.pdf>]. Accessed 22 February 2021.

[3] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 22 February 2021.

[4] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 22 February 2021.

3.5.2 Public communication

3.5.2a

In the past year, is there evidence that the public health system has actively shared messages via online media platforms (e.g. social media, website) to inform the public about ongoing public health concerns and/or dispel rumors, misinformation or disinformation?

Public health system regularly shares information on health concerns = 2, Public health system shares information only during active emergencies, but does not regularly utilize online media platforms = 1, Public health system does not regularly utilize online media platforms, either during emergencies or otherwise = 0

Current Year Score: 2

Cape Verde's Ministry of Health and Social Security and National Institute of Public Health (INSP) has in the past year actively shared messages via Facebook to inform the public about ongoing public health concerns and dispel misinformation.

On 19 April 2020, the INSP dispelled a rumor that there were three confirmed cases of COVID-19 in Boa Vista Island. INSP stated that the tests were still pending and nothing had been confirmed. [1] The INSP has also provided useful information on

the prevention of COVID-19, such as its post from 5 March 2020 on washing hands. [2] The INSP also provided information on preventative measures against malaria on 13 July 2020 through a video, which originally posted on the Facebook page of the Ministry of Health and Social Security. [3] The Ministry of Health and Social Security, through its Facebook page, has informed on COVID-19 data, such as its post from 4 September 2020. The post was a video with text detailing the situation of the COVID-19 pandemic at that date in Cape Verde. [4]

[1] National Institute of Public Health. Facebook. 19 April 2020.

[<https://www.facebook.com/saudepublica.cv/posts/3176945072530094>]. Accessed 22 February 2021.

[2] National Institute of Public Health. Facebook. 5 March 2020.

[<https://www.facebook.com/saudepublica.cv/posts/3131458240412111>]. Accessed 22 February 2021.

[3] National Institute of Public Health. Facebook. 13 July 2020.

[<https://www.facebook.com/saudepublica.cv/posts/3262992647258669>]. Accessed 22 February 2021.

[4] Ministry of Health and Social Security. Facebook. 4 September 2020.

[<https://www.facebook.com/ministeriodasaude.cv/posts/2632844966979926>]. Accessed 22 February 2021.

3.5.2b

Is there evidence that senior leaders (president or ministers) have shared misinformation or disinformation on infectious diseases in the past two years?

No = 1, Yes = 0

Current Year Score: 1

No evidence has been found that President Jorge Carlos Fonseca or Minister of Health Arlindo do Rosário have shared misinformation or disinformation on infectious diseases in the past two years. No evidence was found on local and international media, such as DW, A Semana, or Expresso das Ilhas. [1][2][3]

[1] DW. [<https://www.dw.com/pt-002/not%C3%ADcias/cabo-verde/s-30383>]. Accessed 22 February 2021.

[2] A Semana. [<https://www.asemana.publ.cv/spip.php?ak=1&lang=pt>]. Accessed 22 February 2021.

[3] Expresso das Ilhas. [<https://expressodasilhas.cv/>]. Accessed 22 February 2021.

3.6 ACCESS TO COMMUNICATIONS INFRASTRUCTURE

3.6.1 Internet users

3.6.1a

Percentage of households with Internet

Input number

Current Year Score: 58.17

2019

International Telecommunication Union (ITU)

3.6.2 Mobile subscribers

3.6.2a

Mobile-cellular telephone subscriptions per 100 inhabitants

Input number

Current Year Score: 108.32

2019

International Telecommunication Union (ITU)

3.6.3 Female access to a mobile phone

3.6.3a

Percentage point gap between males and females whose home has access to a mobile phone

Input number

Current Year Score: 10.18

2018-2019

Gallup; Economist Impact calculation

3.6.4 Female access to the Internet

3.6.4a

Percentage point gap between males and females whose home has access to the Internet

Input number

Current Year Score: 9.62

2018-2019

Gallup; Economist Impact calculation

3.7 TRADE AND TRAVEL RESTRICTIONS

3.7.1 Trade restrictions

3.7.1a

In the past year, has the country issued a restriction, without international/bilateral support, on the export/import of medical goods (e.g. medicines, oxygen, medical supplies, PPE) due to an infectious disease outbreak?

Yes = 0, No = 1

Current Year Score: 1

There is no evidence that Cape Verde has issued a restriction, without international/bilateral support, on the export/import of medical goods due to an infectious disease outbreak. No evidence was found in the websites of the Ministry of Health and

Social Security and the Ministry of Agriculture and Environment. [1][2] The website of the Ministry of Foreign Relations was not accessible at the time of research. [3] No evidence was found on local and international media, such as DW, A Semana, or Expresso das Ilhas. [4][5][6]

[1] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 22 February 2021.

[2] Ministry of Agriculture and Environment. [<http://maa.gov.cv/>]. Accessed 22 February 2021.

[3] Ministry of Foreign Relations. (Not accessible). [<http://mirex.gov.cv/>]. Accessed 22 February 2021.

[4] DW. [<https://www.dw.com/pt-002/not%C3%ADcias/cabo-verde/s-30383>]. Accessed 15 March 2021.

[5] A Semana. [<https://www.asemana.publ.cv/spip.php?ak=1&lang=pt>]. Accessed 15 March 2021.

[6] Expresso das Ilhas. [<https://expressodasilhas.cv/>]. Accessed 15 March 2021.

3.7.1b

In the past year, has the country issued a restriction, without international/bilateral support, on the export/import of non-medical goods (e.g. food, textiles, etc) due to an infectious disease outbreak?

Yes = 0, No = 1

Current Year Score: 1

There is no evidence that Cape Verde has issued a restriction, without international/bilateral support, on the export/import of non-medical goods due to an infectious disease outbreak. No evidence was found in the websites of the Ministry of Health and Social Security and the Ministry of Agriculture and Environment. [1][2] The website of the Ministry of Foreign Relations was not accessible at the time of research. [3] No evidence was found on local and international media, such as DW, A Semana, or Expresso das Ilhas. [4][5][6]

[1] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 22 February 2021.

[2] Ministry of Agriculture and Environment. [<http://maa.gov.cv/>]. Accessed 22 February 2021.

[3] Ministry of Foreign Relations. (Not accessible). [<http://mirex.gov.cv/>]. Accessed 22 February 2021.

[4] DW. [<https://www.dw.com/pt-002/not%C3%ADcias/cabo-verde/s-30383>]. Accessed 15 March 2021.

[5] A Semana. [<https://www.asemana.publ.cv/spip.php?ak=1&lang=pt>]. Accessed 15 March 2021.

[6] Expresso das Ilhas. [<https://expressodasilhas.cv/>]. Accessed 15 March 2021.

3.7.2 Travel restrictions

3.7.2a

In the past year, has the country implemented a ban, without international/bilateral support, on travelers arriving from a specific country or countries due to an infectious disease outbreak?

Yes = 0, No = 1

Current Year Score: 0

Cape Verde has implemented bans without international or bilateral support on all international commercial flights from end-March 2020 until October 2020, owing to the COVID-19 pandemic. [1] Cabo Verde Airlines, the local airline, issued its own restrictions and suspended flights between Cape Verde and destinations in Europe and the US where the pandemic risk was high. It was not a government issued flight suspension, but one done from decisions within the company. Cabo Verde Airlines suspended flights in March 2020, coinciding with the government ban, but has not yet returned to its normal flight schedule as of March 2021. [2]

[1] Volta ao Mundo. 27 December 2020. "Cape Verde rises and already receives tourists (Cabo Verde levanta-se e já recebe turistas)". [<https://www.voltaaomundo.pt/2020/12/27/cabo-verde-levanta-se-e-ja-recebe-turistas/noticias/869696/>]. Accessed 22 February 2021.

[2] Dinheiro Vivo. 15 March 2021. "Cabo Verde Airlines prepares to return flights, but no date is set (Cabo Verde Airlines prepara retoma de voos mas sem prazos)". [<https://www.dinheirovivo.pt/economia/cabo-verde-airlines-prepara-retoma-de-voos-mas-sem-prazos-13458621.html>]. Accessed 15 March 2021.

Category 4: Sufficient and robust health sector to treat the sick and protect health workers

4.1 HEALTH CAPACITY IN CLINICS, HOSPITALS, AND COMMUNITY CARE CENTERS

4.1.1 Available human resources for the broader healthcare system

4.1.1a

Doctors per 100,000 people

Input number

Current Year Score: 78.14

2015

WHO; national sources

4.1.1b

Nurses and midwives per 100,000 people

Input number

Current Year Score: 129.83

2018

WHO; national sources

4.1.1c

Does the country have a health workforce strategy in place (which has been updated in the past five years) to identify fields where there is an insufficient workforce and strategies to address these shortcomings?

Yes = 1, No = 0

Current Year Score: 0

There is insufficient evidence that Cape Verde has a health workforce strategy in place, which has been updated in the past five years, to identify fields where there is an insufficient workforce and strategies to address these shortcomings.

According to the WHO's Joint External Evaluation of 2019, Cape Verde has a national plan for health workforce, which should already be in its second edition. [1; page 40] However, the plan could not be found online. The only plan found is the National Plan for Health Development 2008-2011 published in 2008. The plan has a chapter on the program to develop human resources in the health sector. [2] A newer edition of the plan was not found on the website of the Ministry of Health and Social Security, the Ministry of Education, or the National Institute of Public Health. [3][4][5] The Ministry of Justice and Labor does not have a website.

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 22 February 2021.

[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 22 February 2021.

[3] Ministry of Education. [<https://minedu.gov.cv/>]. Accessed 22 February 2021.

[4] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 22 February 2021.

4.1.2 Facilities capacity

4.1.2a

Hospital beds per 100,000 people

Input number

Current Year Score: 210

2010

WHO/World Bank; national sources

4.1.2b

Does the country have the capacity to isolate patients with highly communicable diseases in a biocontainment patient care unit and/or patient isolation room/unit located within the country?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence that Cape Verde has the capacity to isolate patients with highly communicable diseases in a biocontainment patient care unit and/or patient isolation facility located within the country.

The WHO's Joint External Evaluation of 2019 does not mention any biocontainment patient unit in the document. [1] No evidence has been found on the websites of the Ministry of Health and Social Security and the National Institute of Public Health that there are biocontainment patient care units in the country. [2][3]

The website of Hospital Dr. Agostinho Neto, the central hospital in the capital city of Praia, was not accessible at the time of research. [4] The website of Hospital Dr. Baptista de Sousa, a reference hospital, did not have any information on biocontainment patient care units. [5] No information on biocontainment patient care units in the context of the COVID-19

pandemic was found in any of the consulted sources mentioned above.

- [1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 22 February 2021.
- [2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 22 February 2021.
- [3] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 22 February 2021.
- [4] Hospital Dr. Agostinho Neto. (Not accessible). [<http://www.han.gov.cv/>]. Accessed 22 February 2021.
- [5] Hospital Dr. Baptista de Sousa. [<https://hospitalbaptistadesousa.cv/>]. Accessed 22 February 2021.

4.1.2c

Does the country meet one of the following criteria?

- Is there evidence that the country has demonstrated capacity to expand isolation capacity in response to an infectious disease outbreak in the past two years?
- Is there evidence that the country has developed, updated or tested a plan to expand isolation capacity in response to an infectious disease outbreak in the past two years?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence that Cape Verde has demonstrated the capacity to expand isolation capacity in response to an infectious disease outbreak in the past two years. Nor there is evidence that Cape Verde has developed, updated or tested a plan to expand isolation capacity in response to an infectious disease outbreak in the past two years.

The website of Hospital Dr. Agostinho Neto, the central hospital in the capital city of Praia, was not accessible at the time of research. [1] The website of Hospital Dr. Baptista de Sousa, a reference hospital, did not have any information on biocontainment patient care units. [2] No information on biocontainment patient care units in the context of the COVID-19 pandemic was found. There is no evidence that Cape Verde built temporary hospitals or expanding isolation capacity during the health crisis of covid-19.

The WHO's Joint External Evaluation of 2019 does not mention any plans to expand biocontainment patient units in the document. [3] No evidence has been found on the websites of the Ministry of Health and Social Security and the National Institute of Public Health that there are biocontainment patient care units in the country. [4][5]

- [1] Hospital Dr. Agostinho Neto. (Not accessible). [<http://www.han.gov.cv/>]. Accessed 22 February 2021.
- [2] Hospital Dr. Baptista de Sousa. [<https://hospitalbaptistadesousa.cv/>]. Accessed 22 February 2021.
- [3] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 22 February 2021.
- [4] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 22 February 2021.
- [5] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 22 February 2021.

4.2 SUPPLY CHAIN FOR HEALTH SYSTEM AND HEALTHCARE WORKERS

4.2.1 Routine health care and laboratory system supply

4.2.1a

Is there a national procurement protocol in place which can be utilized by the Ministries of Health and Agriculture for the acquisition of laboratory supplies (e.g. equipment, reagents and media) and medical supplies (e.g. equipment, PPE) for routine needs?

Yes for both laboratory and medical supply needs = 2, Yes, but only for one = 1, No = 0

Current Year Score: 2

There is sufficient evidence that Cape Verde has a procurement protocol in place that can be utilized by the Ministry of Health and Social Security and the Ministry of Agriculture and Environment for the acquisition of medical and laboratory supplies. There is additional evidence that the Ministry of Agriculture and Environment used the procurement protocol to purchase laboratory supplies in 2019.

Cape Verde has protocols for procurement that cover all government entities and all purchases. The protocols are publicly available on the public purchases website hosted by the Ministry of Finance. [1] The website provides manuals and best practices guides for providers and suppliers. [2] The website also publishes the annual purchase plans of government entities that provides those documents to the Ministry of Finance. Only 2019 and 2020 annual purchase plans are available. The Ministry of Health and Social Security provided no annual purchase plan for neither 2019 nor 2020. [3] The Ministry of Agriculture and Environment provided the annual purchase plan for 2019, but not 2020. In the 2019 plan, the Ministry of Agriculture and Environment included one item for the Directorate-General for Agriculture, Forestry and Livestock (DGASP), which is responsible for animal health surveillance. The DGASP, on the third page of the plan, asks for laboratory equipment. [4] However, according to the WHO's Joint External Evaluation of 2019, on page 32, an area that needs to be improved in Cape Verde is the implementation of an efficient multisectoral system for the acquisition of laboratory consumables and reagents. There are no other relevant mentions of public purchases in the JEE. [5]

[1] Ministry of Finance. "E Purchases (E Compras)". [<https://www.mf.gov.cv/web/ecompras>]. Accessed 23 February 2021.

[2] Ministry of Finance. "Manuals (Manuais)". [https://www.mf.gov.cv/web/ecompras/documentacao/-/document_library/20v1n73EEoGA/view/89409?_com_liferay_document_library_web_portlet_DLPortlet_INSTANCE_20v1n73EEoGA_redirect=https%3A%2F%2Fwww.mf.gov.cv%2Fweb%2Fecompras%2Fdocumentacao%3Fp_p_id%3Dcom_liferay_document_library_web_portlet_DLPortlet_INSTANCE_20v1n73EEoGA%26p_p_lifecycle%3D0%26p_p_state%3Dnormal%26p_p_mode%3Dview]. Accessed 23 February 2021.

[3] Ministry of Finance. "Annual Purchase Plan (Plano Anual de Aquisições)".

[https://www.mf.gov.cv/web/ecompras/documentacao/-/document_library/20v1n73EEoGA/view/206036?_com_liferay_document_library_web_portlet_DLPortlet_INSTANCE_20v1n73EEoGA_redirect=https%3A%2F%2Fwww.mf.gov.cv%2Fweb%2Fecompras%2Fdocumentacao%3Fp_p_id%3Dcom_liferay_document_library_web_portlet_DLPortlet_INSTANCE_20v1n73EEoGA%26p_p_lifecycle%3D0%26p_p_state%3Dnormal%26p_p_mode%3Dview]. Accessed 23 February 2021.

[4] Ministry of Finance. "PAA - Ministry of Agriculture and Environment (PAA - Ministério de Agricultura e Ambiente)".

[https://www.mf.gov.cv/web/ecompras/documentacao/-/document_library/20v1n73EEoGA/view_file/198341?_com_liferay_document_library_web_portlet_DLPortlet_INSTANCE_20v1n73EEoGA_redirect=https%3A%2F%2Fwww.mf.gov.cv%2Fweb%2Fecompras%2Fdocumentacao%2F%2Fdocument_library%2F20v1n73EEoGA%2Fview%2F757266%3F_com_liferay_document_library_web_portlet_DLPortlet_I

INSTANCE_2Ov1n73EEoGA_redirect%3Dhttps%253A%252F%252Fwww.mf.gov.cv%252Fweb%252Fecompras%252Fdocumentacao%252F-

%252Fdocument_library%252F2Ov1n73EEoGA%252Fview%252F206036%253F_com_liferay_document_library_web_portlet_DLPortlet_INSTANCE_2Ov1n73EEoGA_redirect%253Dhttps%25253A%25252F%25252Fwww.mf.gov.cv%25252Fweb%25252Fecompras%25252Fdocumentacao%25253Fp_p_id%25253Dcom_liferay_document_library_web_portlet_DLPortlet_INSTANCE_2Ov1n73EEoGA%252526p_p_lifecycle%25253D0%252526p_p_state%25253Dnormal%252526p_p_mode%25253Dview]. Accessed 23 February 2021.

[5] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 15 March 2021.

4.2.2 Stockpiling for emergencies

4.2.2a

Does the country have a stockpile of medical supplies (e.g. MCMs, medicines, vaccines, medical equipment, PPE) for national use during a public health emergency?

Yes = 2, Yes, but there is limited evidence about what the stockpile contains = 1, No = 0

Current Year Score: 2

There is some evidence that Cape Verde has a stockpile of medical supplies, including medical countermeasures (MCMs), medicines, vaccines, medical equipment, and PPEs, for national use during a public health emergency.

The WHO's Joint External Evaluation of 2019 states on page 45 that the country has a stockpile of supplies, but only sufficient for its current needs. It adds that it can acquire additional products and medications if there is an emergency. On page 28 the JEE states that Cape Verde has a Widened Programme for Vaccination (PAV) since 1977, which has a line in the State Budget since 1988 and stockpiles vaccines for tuberculosis, hepatitis B, polio, diphtheria, tetanus, whooping cough, meningitis (*Haemophilus influenzae*), measles, rubella, and mumps. The JEE adds that the PAV is capable of expanding its vaccine stockpile coverage to other diseases. [1]

A news article from 9 July 2020 reported that Cape Verde has sufficient supplies of MCMs for HIV/AIDS until at least the end of 2020. In the article, the executive secretary of the Coordination Committee for the Fight Against AIDS, Celina Ferreira, stated that owing to the low supply of MCMs worldwide due to the COVID-19 pandemic, Cape Verde went ahead and purchased a stockpile of HIV/AIDS MCMs, so that it can provide care for its patients until the beginning of 2021. [2]

A news article from 13 March 2020 reported that the EMPROFAC, a state-owned producer of pharmaceutical products in Cape Verde, would be rationing the sale of masks, gloves, and hand sanitizer to prevent running out of stock. [3] Another news article from 11 May 2020 reported that EMPROFAC bought seven tons worth of PPE, including 1.4 million masks, from China, to reinforce its stock of PPE. [4] No further evidence was found on the website of the Ministry of Health and Social Security and the National Institute of Public Health. [5][6] At the time of research, the website of the Ministry of Defense was under construction. [7]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 23 February 2021.

[2] Inforpress. 9 July 2020. "Cabo Verde with stock of medicines for HIV / AIDS patients guaranteed until the end of 2020 – responsible". [<https://inforpress.cv/cabo-verde-with-stock-of-medicines-for-hiv-aids-patients-guaranteed-until-the-end-of-2020-responsible/>]. Accessed 23 February 2021.

[3] Inforpress. 13 March 2020. "Covid 19: Emprofac rations the sale of masks, gloves and alcohol gel to prevent stockouts (Covid 19: Emprofac racionaliza venda de máscaras luvas e álcool gel para evitar ruptura de estoque)". [<https://inforpress.cv/covid-19-emprofac-racionaliza-venda-de-mascaras-luvas-e-alcool-gel-para-evitar-ruptura-de-estoque/>]. Accessed 23 February 2021.

[4] Panapress. 11 May 2020. "Cape Verde receives 1.4 million surgical masks purchased in China (Cabo Verde recebe 1,4 milhão de máscaras cirúrgicas compradas na China)". [https://www.panapress.com/Cabo-Verde-recebe-14-milhao-de-m-a_630641117-lang4-free_news.html]. Accessed 23 February 2021.

[5] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 23 February 2021.

[6] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 23 February 2021.

[7] Ministry of Defense. (Under construction). [<https://www.defesa.gov.cv/>]. Accessed 23 February 2021.

4.2.2b

Does the country have a stockpile of laboratory supplies (e.g. reagents, media) for national use during a public health emergency?

Yes = 2, Yes, but there is limited evidence about what the stockpile contains = 1, No = 0

Current Year Score: 0

There is insufficient evidence that Cape Verde has a stockpile of laboratory supplies for national use during a public health emergency. The WHO's Joint External Evaluation of 2019 states on page 45 that it has a stockpile of supplies but only sufficient for its current needs. It adds that it can acquire additional products and medications if there is an emergency. However, on page 51, the same report states that the country needs to organize a basic stockpile of medication, supplies, and equipment for public health emergencies. [1] No further evidence was found on the website of the Ministry of Health and Social Security and the National Institute of Public Health. [2][3] At the time of research, the website of the Ministry of Defense was under construction. [4] The National Center for Emergency Operations of Civil Protection (CNOEPC), which is part of the National Service of Civil Protection (SNPC), is the country's emergency operations center. [1] The website of the SNPC was not accessible at the time of research. [5] The National Center for Public Health Emergency Operations, which is under National Institute of Public Health, does not have a dedicated website. The Agency of Supervision of Pharmaceutical Products and Medicines (ARFA) does not mention any kind of stockpiling in its website. [6]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 23 February 2021.

[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 23 February 2021.

[3] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 23 February 2021.

[4] Ministry of Defense. (Under construction). [<https://www.defesa.gov.cv/>]. Accessed 23 February 2021.

[5] National Service of Civil Protection. [<http://www.snpc.cv/>]. Accessed 15 March 2021.

[6] Independent Health Regulatory Entity. "Presentation of the Agency (Apresentação da Agência)". [<https://www.eris.cv/index.php/noticias/162-apresentacao-da-agencia>]. Accessed 15 March 2021.

4.2.2c

Is there evidence that the country conducts or requires an annual review of the national stockpile to ensure the supply is sufficient for a public health emergency?

Yes = 1, No = 0

Current Year Score: 0

There is insufficient evidence that Cape Verde conducts or requires an annual review of the national stockpile to ensure the supply is sufficient for a public health emergency.

The WHO's Joint External Evaluation of 2019 states on page 45 that it has a stockpile of supplies (which from context includes medical supplies), but only sufficient for its current needs (i.e., non-emergency situation). On page 51, the same report states that the country needs to organize a basic stockpile of medication, supplies, and equipment for public health emergencies. On page 28 the JEE states that Cape Verde has a Widened Programme for Vaccination (PAV) since 1977, which has a line in the State Budget since 1988 and stockpiles vaccines for tuberculosis, hepatitis B, polio, diphtheria, tetanus, whooping cough, meningitis (*Haemophilus influenzae*), measles, rubella, and mumps. There is no indication that the review of the stockpile is conducted annually by a government entity, despite this information being available in the JEE. [1]

A news article from 9 July 2020 reported that Cape Verde has sufficient supplies of MCMs for HIV/AIDS until at least the end of 2020. In the article, the executive secretary of the Coordination Committee for the Fight Against AIDS (CCS/SIDA), Celina Ferreira, stated that owing to the low supply of MCMs worldwide due to the COVID-19 pandemic, Cape Verde went ahead and purchased a stockpile of HIV/AIDS MCMs, so that it can provide care for its patients until the beginning of 2021. This indicates that the CCS/SIDA conducts a review of the stockpile of HIV/AIDS medications, but there is no evidence that this review is done annually. [2] The CCS/SIDA does not have a website.

No further evidence was found on the website of the Ministry of Health and Social Security and the National Institute of Public Health. [3][4] At the time of research, the website of the Ministry of Defense was under construction. [5]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 23 February 2021.

[2] Inforpress. 9 July 2020. "Cabo Verde with stock of medicines for HIV / AIDS patients guaranteed until the end of 2020 – responsible". [<https://inforpress.cv/cabo-verde-with-stock-of-medicines-for-hiv-aids-patients-guaranteed-until-the-end-of-2020-responsible/>]. Accessed 23 February 2021.

[3] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 23 February 2021.

[4] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 23 February 2021.

[5] Ministry of Defense. (Under construction). [<https://www.defesa.gov.cv/>]. Accessed 23 February 2021.

4.2.3 Manufacturing and procurement for emergencies

4.2.3a

Does the country meet one of the following criteria?

- Is there evidence of a plan/agreement to leverage domestic manufacturing capacity to produce medical supplies (e.g. MCMs, medicines, vaccines, equipment, PPE) for national use during a public health emergency?
- Is there evidence of a plan/mechanism to procure medical supplies (e.g. MCMs, medicines, vaccines, equipment, PPE) for national use during a public health emergency?

Needs to meet at least one of the criteria to be scored a 1 on this measure., Yes for both = 1, Yes for one = 1, No for both = 0

Current Year Score: 0

There is no evidence that Cape Verde has a plan or agreement to leverage domestic manufacturing capacity to produce medical supplies, including medical countermeasures (MCMs), medicines, vaccines, equipment, and PPE, for national use during a public health emergency. There is also insufficient evidence that Cape Verde has a plan or mechanism to procure medical supplies, including MCMs, medicines, vaccines, equipment, and PPE, for national use during a public health emergency.

The WHO's Joint External Evaluation of 2019 states on page 45 that the country can acquire additional products and medications if there is an emergency, but it does not specify how. [1] A news article from 11 May 2020 reported that EMPROFAC, a state-owned pharmaceutical products supplier, bought seven tons worth of PPE, including 1.4 million masks, from China, to reinforce its stock of PPE. However, there is no indication that this is part of a plan or mechanism. [2] No further evidence was found on the website of the Ministry of Health and Social Security and the National Institute of Public Health. [3][4] At the time of research, the website of the Ministry of Defense was under construction. [5] The National Center for Emergency Operations of Civil Protection (CNOEPC), which is part of the National Service of Civil Protection (SNPC), is the country's emergency operations center. [1] The website of the SNPC was not accessible at the time of research. [6] The National Center for Public Health Emergency Operations, which is under National Institute of Public Health, does not have a dedicated website. The Agency of Supervision of Pharmaceutical Products and Medicines (ARFA) does not provide any evidence on the matter. [7]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 23 February 2021.

[2] Panapress. 11 May 2020. "Cape Verde receives 1.4 million surgical masks purchased in China (Cabo Verde recebe 1,4 milhão de máscaras cirúrgicas compradas na China)". [https://www.panapress.com/Cabo-Verde-recebe-14-milhao-de-m-a_630641117-lang4-free_news.html]. Accessed 23 February 2021.

[3] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 23 February 2021.

[4] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 23 February 2021.

[5] Ministry of Defense. (Under construction). [<https://www.defesa.gov.cv/>]. Accessed 23 February 2021.

[6] National Service of Civil Protection. [<http://www.snpc.cv/>]. Accessed 15 March 2021.

[7] Independent Health Regulatory Entity. "Presentation of the Agency (Apresentação da Agência)".

[<https://www.iris.cv/index.php/noticias/162-apresentacao-da-agencia>]. Accessed 15 March 2021.

4.2.3b

Does the country meet one of the following criteria?

- Is there evidence of a plan/agreement to leverage domestic manufacturing capacity to produce laboratory supplies (e.g. reagents, media) for national use during a public health emergency?

- Is there evidence of a plan/mechanism to procure laboratory supplies (e.g. reagents, media) for national use during a public health emergency?

Needs to meet at least one of the criteria to be scored a 1 on this measure., Yes for both = 1, Yes for one = 1, No for both = 0

Current Year Score: 0

There is no evidence that Cape Verde has a plan or agreement to leverage domestic manufacturing capacity to produce laboratory supplies for national use during a public health emergency. There is also no evidence that Cape Verde has a plan

or mechanism to procure laboratory supplies for national use during a public health emergency. The WHO's Joint External Evaluation of 2019 states on page 45 that the country can acquire additional products and medications if there is an emergency, but it does not specify how. The JEE also states on page 32 that the country needs to create and implement an efficient multisector system for the acquisition of laboratory consumables and reagents. [1] No further evidence was found on the website of the Ministry of Health and Social Security and the National Institute of Public Health. [2][3] At the time of research, the website of the Ministry of Defense was under construction. [4] The National Center for Emergency Operations of Civil Protection (CNOEPC), which is part of the National Service of Civil Protection (SNPC), is the country's emergency operations center. [1] The website of the SNPC was not accessible at the time of research. [5] The National Center for Public Health Emergency Operations, which is under National Institute of Public Health, does not have a dedicated website. The Agency of Supervision of Pharmaceutical Products and Medicines (ARFA) does not provide any evidence on the matter. [6]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 23 February 2021.

[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 23 February 2021.

[3] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 23 February 2021.

[4] Ministry of Defense. (Under construction). [<https://www.defesa.gov.cv/>]. Accessed 23 February 2021.

[5] National Service of Civil Protection. [<http://www.snpc.cv/>]. Accessed 15 March 2021.

[6] Independent Health Regulatory Entity. "Presentation of the Agency (Apresentação da Agência)". [<https://www.eris.cv/index.php/noticias/162-apresentacao-da-agencia>]. Accessed 15 March 2021.

4.3 MEDICAL COUNTERMEASURES AND PERSONNEL DEPLOYMENT

4.3.1 System for dispensing medical countermeasures (MCM) during a public health emergency

4.3.1a

Does the country have a plan, program, or guidelines in place for dispensing medical countermeasures (MCM) for national use during a public health emergency (i.e., antibiotics, vaccines, therapeutics and diagnostics)?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence that Cape Verde has a plan, program, or guidelines in place for dispensing medical countermeasures (MCMs) for national use during a public health emergency. The WHO's Joint External Evaluation of 2019 does not make any mention of any plan, program or guidelines for dispensing MCMs for national use during a public health emergency. [1] No further evidence was found in the website of the Ministry of Health and Social Security and the National Institute of Public Health. [2][3] At the time of research, the website of the Ministry of Defense was under construction. [4] The National Center for Emergency Operations of Civil Protection (CNOEPC), which is part of the National Service of Civil Protection (SNPC), is the country's emergency operations center. [1] The website of the SNPC was not accessible at the time of research. [5] The National Center for Public Health Emergency Operations, which is under National Institute of Public Health, does not have a dedicated website. The Agency of Supervision of Pharmaceutical Products and Medicines (ARFA) does not provide any evidence on the matter. [6]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de

missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 23 February 2021.

[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 23 February 2021.

[3] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 23 February 2021.

[4] Ministry of Defense. (Under construction). [<https://www.defesa.gov.cv/>]. Accessed 23 February 2021.

[5] National Service of Civil Protection. [<http://www.snpc.cv/>]. Accessed 15 March 2021.

[6] Independent Health Regulatory Entity. "Presentation of the Agency (Apresentação da Agência)".

[<https://www.eris.cv/index.php/noticias/162-apresentacao-da-agencia>]. Accessed 15 March 2021.

4.3.2 System for receiving foreign health personnel during a public health emergency

4.3.2a

Is there a public plan in place to receive health personnel from other countries to respond to a public health emergency?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence of a public plan in place to receive health personnel from other countries to respond to a public health emergency. The WHO's Joint External Evaluation of 2019 does not make any mention of any plan to receive health personnel from other countries to respond to a public health emergency. [1] No further evidence was found in the website of the Ministry of Health and Social Security and the National Institute of Public Health. [2][3] At the time of research, the website of the Ministry of Defense was under construction. [4] The National Center for Emergency Operations of Civil Protection (CNOEPC), which is part of the National Service of Civil Protection (SNPC), is the country's emergency operations center. [1] The website of the SNPC was not accessible at the time of research. [5] The National Center for Public Health Emergency Operations, which is under National Institute of Public Health, does not have a dedicated website.

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 23 February 2021.

[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 23 February 2021.

[3] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 23 February 2021.

[4] Ministry of Defense. (Under construction). [<https://www.defesa.gov.cv/>]. Accessed 23 February 2021.

[5] National Service of Civil Protection. [<http://www.snpc.cv/>]. Accessed 15 March 2021.

4.4 HEALTHCARE ACCESS

4.4.1 Access to healthcare

4.4.1a

Does the constitution explicitly guarantee citizens' right to medical care?

Guaranteed free = 4, Guaranteed right = 3, Aspirational or subject to progressive realization = 2, Guaranteed for some groups, not universally = 1, No specific provision = 0

Current Year Score: 3

2020

World Policy Analysis Center

4.4.1b

Access to skilled birth attendants (% of population)

Input number

Current Year Score: 91.4

2015

WHO/World Bank/United Nations Children's Fund (UNICEF)

4.4.1c

Out-of-pocket health expenditures per capita, purchasing power parity (PPP; current international \$)

Input number

Current Year Score: 103.18

2017

WHO Global Health Expenditure database

4.4.2 Paid medical leave

4.4.2a

Are workers guaranteed paid sick leave?

Paid sick leave = 2, Unpaid sick leave = 1, No sick leave = 0

Current Year Score: 2

2020

World Policy Analysis Center

4.4.3 Healthcare worker access to healthcare

4.4.3a

Has the government issued legislation, a policy, or a public statement committing to provide prioritized healthcare services to healthcare workers who become sick as a result of responding to a public health emergency?

Yes = 1, No = 0

Current Year Score: 0

There is insufficient evidence that Cape Verde has legislation or policy to provide prioritized healthcare services to healthcare workers who become sick as a result of responding to a public health emergency. The WHO's Joint External Evaluation of

2019 states on page 27 that Cape Verde should implement a prophylactic policy, such that it provides preventative care to health professionals based on their risk exposures. No other relevant evidence was mentioned in the JEE. [1] In the context of the COVID-19 pandemic, the government of Cape Verde developed a national vaccination plan which explicitly prioritizes healthcare professionals in receiving the vaccine against COVID-19 when available. However, there is no indication in the document that this policy could be used for other public health emergencies and prophylactic care (e.g., vaccines) are insufficient. [2] No further evidence was found on the website of the Ministry of Health and Social Security and the National Institute of Public Health. [3][4]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 23 February 2021.

[2] Government of Cape Verde. Resolution number 18 of 18 February 2021. [<https://ofcv.cv/images/Documentos-PDFs/Legislacao/2021/BO-19-RES-18-2021.pdf>]. Accessed 23 February 2021.

[3] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 23 February 2021.

[4] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 23 February 2021.

4.5 COMMUNICATIONS WITH HEALTHCARE WORKERS DURING A PUBLIC HEALTH EMERGENCY

4.5.1 Communication with healthcare workers

4.5.1a

Is there a system in place for public health officials and healthcare workers to communicate during a public health emergency?

Yes = 1 , No = 0

Current Year Score: 0

There is insufficient evidence that there is a system in place for public health officials and healthcare workers to communicate during a public health emergency.

The WHO's Joint External Evaluation of 2019 states on page 52 that there is internal coordination within the government entities and partners (which, from context, include healthcare workers) for communication during emergencies. There is a platform for coordination and a mechanism for communication between them. The JEE recognizes that it is a formal mechanism for internal communication during an emergency, which has been tested during the Dengue epidemic in 2009 and the Zika epidemic in 2015-2016. However, this is a risk communication system between different stakeholders and there is no evidence of a two-way emergency communication system between public health officials and healthcare workers. [1] No further evidence was found in the website of the Ministry of Health and Social Security and the National Institute of Public Health. [2][3]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 23 February 2021.

[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 23 February 2021.

[3] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 23 February 2021.

4.5.1b

Does the system for public health officials and healthcare workers to communicate during an emergency encompass healthcare workers in both the public and private sector?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that there is a system in place for public health officials and healthcare workers to communicate during a public health emergency includes both the public and the private sector.

The WHO's Joint External Evaluation of 2019 states on page 52 that there is an internal coordination within the government entities and partners (which, from context, include healthcare workers) for communication during emergencies. There is a platform for coordination and a mechanism for communication between them. The JEE recognizes that it is a formal mechanism for internal communication during an emergency, which has been tested during the Dengue epidemic in 2009 and the Zika epidemic in 2015-2016. However, the JEE also states that the health system in Cape Verde does not include the private system. Private sector healthcare is kept outside the system, including in the mechanism for surveillance. [1] No further evidence was found in the website of the Ministry of Health and Social Security and the National Institute of Public Health. [2][3]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 23 February 2021.

[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 23 February 2021.

[3] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 23 February 2021.

4.6 INFECTION CONTROL PRACTICES AND AVAILABILITY OF EQUIPMENT

4.6.1 Healthcare associated infection (HCAI) prevention and control programs

4.6.1a

Is there evidence that the national public health system is monitoring for and tracking the number of healthcare associated infections (HCAI) that take place in healthcare facilities?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that Cape Verde's national public health system is monitoring for and tracking the number of healthcare associated infections (HCAI) that take place in healthcare facilities. The WHO's Joint External Evaluation of 2019 does not mention HCAs. [1] No further evidence was found in the website of the Ministry of Health and Social Security and the National Institute of Public Health. [2][3]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de

missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 23 February 2021.

[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 23 February 2021.

[3] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 23 February 2021.

4.7 CAPACITY TO TEST AND APPROVE NEW MEDICAL COUNTERMEASURES

4.7.1 Regulatory process for conducting clinical trials of unregistered interventions

4.7.1a

Is there a national requirement for ethical review (e.g., from an ethics committee or via Institutional Review Board approval) before beginning a clinical trial?

Yes = 1, No = 0

Current Year Score: 1

There is a national requirement for ethical review (e.g. from an ethics committee or via Institutional Review Board approval) before beginning a clinical trial. Specifically, Decree Law 26/2007 creates a National Committee of Ethics (CNEPS) that oversees all studies and data related to human research. [1] There is no website of the National Committee of Ethics, but the law (26/2007) states that "the CNEPS is an autonomous and independent entity, multi-sectoral and multidisciplinary, which safeguards the dignity, rights, and safety of all potential participants' well-being in research for health." This decree mandates that approval must be secured prior to clinical trials.

[1] Government of Cape Verde. Decree-Law number 26 of 30 June 2007.

[<https://kiosk.incv.cv/V/2007/7/30/1.1.28.328/p517>]. Accessed 24 September 2018.

4.7.1b

Is there an expedited process for approving clinical trials for unregistered medical countermeasures (MCM) to treat ongoing epidemics?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence of an expedited process for approving clinical trials for unregistered medical countermeasures to treat ongoing pandemics. Such process is not discussed in the Decree-Law number 26 of 2007 that creates the clinical review board called the National Committee of Ethics). [1] The Review Board does not have a website. The WHO's Joint External Evaluation of 2019 does not mention any expedited process for clinical trials. [2] No further evidence was found in the website of the Ministry of Health and Social Security and the National Institute of Public Health. [3][4]

[1] Government of Cape Verde. Decree-Law number 26 of 30 June 2007.

[<https://kiosk.incv.cv/V/2007/7/30/1.1.28.328/p517>]. Accessed 24 September 2018.

[2] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 23 February 2021.

[3] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 23 February 2021.

[4] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 23 February 2021.

4.7.2 Regulatory process for approving medical countermeasures

4.7.2a

Is there a government agency responsible for approving new medical countermeasures (MCM) for humans?

Yes = 1 , No = 0

Current Year Score: 1

There is a government agency responsible for approving new medical countermeasures for humans. The agency is the Agency of Supervision of Pharmaceutical Products and Medicines (ARFA), and it regulates pharmaceuticals for human use and approves their use in Cape Verde. According to the mission of the agency on their website: "ARFA has regulatory, supervisory, sanctioning and advisory powers." There is no specific mention of whether this oversight involves medical countermeasures/pandemics.[1]

[1] Independent Health Regulatory Entity. "Presentation of the Agency (Apresentação da Agência)".

[<https://www.eris.cv/index.php/noticias/162-apresentacao-da-agencia>]. Accessed 23 February 2021.

4.7.2b

Is there an expedited process for approving medical countermeasures (MCM) for human use during public health emergencies?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that Cape Verde has an expedited process for approving medical countermeasures for human use during public health emergencies. The process for approving any MCM is described in Decree-Law Number 59 of 26 December 2006, which regulates the Authorization for Market Introduction (AIM) of a medication. There is no expedited process for approving MCMs for human use during public health emergencies in the document. The document, however, does include a mechanism that expedites approval processes, but it is not expedited because of emergencies. According to Article 24, approvals can be awarded in a expedited fashion if the medication has already been approved by another State, given that the Ministry of Health of that State follows the guidelines for approval of another organization that guarantees the quality of the medication or if the State allows inspection that the best practices employed follow international standards. [1] The Agency of Supervision of Pharmaceutical Products and Medicines (ARFA) refers to the Common Technical Document For The Registration Of Pharmaceuticals For Human Use (CTD) of the International Conference on Harmonisation of Technical Requirements for Registration of Pharmaceuticals for Human Use (ICH) as the international standard in use. [2]

[1] Government of Cape Verde. Decree-Law number 59 of 26 December 2006.

[<https://www.eris.cv/images/PDFs/Legislacao/2006/BO-38-DL-59-2006.pdf>]. Accessed 15 March 2021.

[2] Independent Health Regulatory Entity. "Procedures for Authorization for Market Introduction (Procedimentos de Autorização de Introdução no Mercado)". [<https://www.eris.cv/index.php/setor-farmaceutico/aim-autorizacao-de-introducao-no-mercado/procedimentos-de-aim>]. Accessed 15 March 2021.

Category 5: Commitments to improving national capacity, financing plans to address gaps, and adhering to global norms

5.1 INTERNATIONAL HEALTH REGULATIONS (IHR) REPORTING COMPLIANCE AND DISASTER RISK REDUCTION

5.1.1 Official IHR reporting

5.1.1a

Has the country submitted IHR reports to the WHO for the previous calendar year?

Yes = 1 , No = 0

Current Year Score: 1

2020

World Health Organization

5.1.2 Integration of health into disaster risk reduction

5.1.2a

Are epidemics and pandemics integrated into the national risk reduction strategy or is there a standalone national disaster risk reduction strategy for epidemics and pandemics?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that pandemics are integrated into the national risk reduction strategy or that there is a standalone national disaster risk reduction strategy for pandemics.

Cape Verde developed the National Strategy for Disaster Risk Reduction in June 2017. The document mentions the risks of epidemics and public health emergencies, but it does not provide a risk reduction strategy for them. [1] The World Bank produced in 2020 the report "Cabo Verde Emergency Preparedness and Response Diagnostic: Building a Culture of Preparedness". The World Bank report recognizes the efforts of Cape Verde to improve its disaster preparedness and acknowledges the National Strategy for Disaster Risk Reduction of 2017. However, its coverage of public health emergencies in the diagnostic is scarce. It identifies challenges in Cape Verde's public health system, but it does not address or identify any disaster risk reduction for health emergencies. [2] The WHO's Joint External Evaluation of Cape Verde from 2019 also acknowledges the disaster risk reduction plan, but it does not recognize that it covers risk reduction strategies for public health emergencies. [3] No other relevant evidence was found on the websites of the Ministry of Health and Social Security and the National Institute of Public Health. [4][5]

[1] Government of Cape Verde. 20 June 2017. "National Strategy for Disaster Risk Reduction (Estratégia Nacional de Redução de Riscos de Desastres)". [https://www.preventionweb.net/files/64563_enrrdestrategianacionaldereducaoder.pdf]. Accessed 23 February 2021.

[2] World Bank. 2020. "Cabo Verde Emergency Preparedness and Response Diagnostic: Building a Culture of Preparedness".

[https://www.gfdrr.org/sites/default/files/publication/R2R%20Diagnostic%20Cabo%20Verde%20-%20Diagnostic%20Report%20%28Web%29_0.pdf]. Accessed 23 February 2021.

[3] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 23 February 2021.

[4] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 23 February 2021.

[5] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 23 February 2021.

5.2 CROSS-BORDER AGREEMENTS ON PUBLIC HEALTH AND ANIMAL HEALTH EMERGENCY RESPONSE

5.2.1 Cross-border agreements

5.2.1a

Does the country have cross-border agreements, protocols, or MOUs with neighboring countries, or as part of a regional group, with regards to public health emergencies?

Yes = 2, Yes, but there is evidence of gaps in implementation = 1, No = 0

Current Year Score: 2

There is evidence that Cape Verde has cross-border agreements, protocols, or MOUs with neighboring countries, or as part of a regional group, with regards to public health emergencies. Cape Verde is a member state of the Economic Community of West African States (ECOWAS) and the West African Health Organization (WAHO). Through WAHO, Cape Verde is regionally involved in several public health programs, including a program to regionally tackle any kind of public health emergency. The program aims to build the member countries' capacities for surveillance, prevention, response and resilience to epidemics and emergencies. The program established a Regional Center for Disease Prevention and Control, which strengthened the network of laboratories amongst participants, increased collaboration, established a regional early warning and rapid intervention unit, supported member countries in their applications of International Health Regulations and established a regional fund for epidemic control. [1] Cape Verde is also involved in the Regional Program Support to Pandemic Prevention in the ECOWAS Region (RPPP), which was established in September 2016 and is expected to end in June 2021. It involves all 15 ECOWAS member states and it counts with the support from the EU. [2] No evidence has been found of any gaps in their implementation.

[1] West African Health Organization. "Epidemics and Other Health Emergencies". [<https://www.wahooas.org/web-ooas/en/programmes/p03-epidemics-and-other-health-emergencies>]. Accessed 23 February 2021.

[2] West African Health Organization. "Regional Program Support to Pandemic Prevention in the ECOWAS Region (RPPP)". [<https://www.wahooas.org/web-ooas/en/projets/rppp-regional-programme-support-pandemic-prevention-ecowas-region>]. Accessed 23 February 2021.

5.2.1b

Does the country have cross-border agreements, protocols, or MOUs with neighboring countries, or as part of a regional group, with regards to animal health emergencies?

Yes = 2, Yes, but there is evidence of gaps in implementation = 1, No = 0

Current Year Score: 0

There is no evidence that Cape Verde has any cross-border agreements, protocols, or MOUs with neighboring countries, or as part of a regional group, with regards to animal health emergencies. No evidence was found in the WHO's Joint External Evaluation of 2019 or in the websites of the Ministry of Health and Social Security, the National Institute of Public Health, or the West African Health Organization. [1][2][3][4]

[1] World Health Organization. "Joint External Evaluation of IHR Core Capacities - Republic of Cape Verde - Mission Report - 4-8 November 2019 (Avaliação Externa Conjunta das Principais Capacidades do RSI - República de Cabo Verde - Relatório de missão - 4-8 November 2019)". [<https://apps.who.int/iris/bitstream/handle/10665/336480/9789240014435-por.pdf?ua=1>]. Accessed 23 February 2021.

[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 23 February 2021.

[3] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 23 February 2021.

[4] West African Health Organization. [<https://www.wahooas.org/web-ooas/>]. Accessed 23 February 2021.

5.3 INTERNATIONAL COMMITMENTS

5.3.1 Participation in international agreements

5.3.1a

Does the county have signatory and ratification (or same legal effect) status to the Biological Weapons Convention?

Signed and ratified (or action having the same legal effect) = 2, Signed = 1, Non-compliant or not a member = 0

Current Year Score: 2

2021

Biological Weapons Convention

5.3.1b

Has the country submitted confidence building measures for the Biological Weapons Convention in the past three years?

Yes = 1, No = 0

Current Year Score: 0

2021

Biological Weapons Convention

5.3.1c

Has the state provided the required United Nations Security Council Resolution (UNSCR) 1540 report to the Security Council Committee established pursuant to resolution 1540 (1540 Committee)?

Yes = 1, No = 0

Current Year Score: 1

2021

Biological Weapons Convention

5.3.1d

Extent of United Nations Security Council Resolution (UNSCR) 1540 implementation related to legal frameworks and enforcement for countering biological weapons:

Very good (60+ points) = 4, Good (45–59 points) = 3, Moderate (30–44 points) = 2, Weak (15–29 points) = 1, Very weak (0–14 points) or no matrix exists/country is not party to the BWC = 0

Current Year Score: 1

2021

Biological Weapons Convention

5.3.2 Voluntary memberships

5.3.2a

Does the country meet at least 2 of the following criteria?

- Membership in Global Health Security Agenda (GHSA)
- Membership in the Alliance for Country Assessments for Global Health Security and IHR Implementation (JEE Alliance)
- Membership in the Global Partnership Against the Spread of Weapons and Materials of Mass Destruction (GP)
- Membership in the Australia Group (AG)
- Membership in the Proliferation Security Initiative (PSI)

Needs to meet at least two of the criteria to be scored a 1 on this measure. , Yes for five = 1 , Yes for four = 1 , Yes for three = 1 , Yes for two = 1 , Yes for one = 0 , No for all = 0

Current Year Score: 0

2021

Global Health Security Agenda; JE Alliance; Global Partnership; Australia Group; PSI

5.4 JOINT EXTERNAL EVALUATION (JEE) AND PERFORMANCE OF VETERINARY SERVICES PATHWAY (PVS)

5.4.1 Completion and publication of a Joint External Evaluation (JEE) assessment and gap analysis

5.4.1a

Has the country completed a Joint External Evaluation (JEE) or precursor external evaluation (e.g., GHSA pilot external assessment) and published a full public report in the last five years?

Yes = 1 , No = 0

Current Year Score: 1

2021

WHO Strategic Partnership for IHR and Health Security (SPH); Global Health Security Agenda

5.4.1b

Has the country completed and published, within the last five years, either a National Action Plan for Health Security (NAPHS) to address gaps identified through the Joint External Evaluation (JEE) assessment or a national GHSA roadmap that sets milestones for achieving each of the GHSA targets?

Yes = 1 , No = 0

Current Year Score: 0

2021

WHO Strategic Partnership for IHR and Health Security (SPH); Global Health Security Agenda

5.4.2 Completion and publication of a Performance of Veterinary Services (PVS) assessment and gap analysis

5.4.2a

Has the country completed and published a Performance of Veterinary Services (PVS) assessment in the last five years?

Yes = 1 , No = 0

Current Year Score: 0

2021

OIE PVS assessments

5.4.2b

Has the country completed and published a Performance of Veterinary Services (PVS) gap analysis in the last five years?

Yes = 1 , No = 0

Current Year Score: 0

2021

OIE PVS assessments

5.5 FINANCING

5.5.1 National financing for epidemic preparedness

5.5.1a

Is there evidence that the country has allocated national funds to improve capacity to address epidemic threats within the past three years?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that Cape Verde allocated national funds to improve capacity to address epidemic threats within the past three years. In the State Budget documents of 2018, 2019 and 2020, there are no mentions of epidemics, pandemics or other relevant terms. [1][2][3] No evidence was found in the websites of the Ministry of Health and Social Security and the Ministry of Agriculture and Environment. [4][5] No evidence was found on local and international media, such as DW, A Semana, or Expresso das Ilhas. [6][7][8]

[1] Government of Cape Verde. "State Budget 2018 (Orçamento do Estado 2018)". [https://mf.gov.cv/web/mf/orcamento/-/document_library/GhhPar8YFVSB/view_file/94961?_com_liferay_document_library_web_portlet_DLPortlet_INSTANCE_GhhPar8YFVSB_redirect=https%3A%2F%2Fmf.gov.cv%2Fweb%2Fmf%2Forcamento%2F-%2Fdocument_library%2FGhhPar8YFVSB%2Fview%2F94110]. Accessed 23 February 2021.

[2] Government of Cape Verde. "State Budget 2019 (Orçamento do Estado 2019)". [<https://www.governo.cv/wp-content/uploads/2019/05/orcamento-estado-2019-1.pdf>]. Accessed 23 February 2021.

[3] Government of Cape Verde. "State Budget 2020 (Orçamento do Estado 2020)". [https://www.mf.gov.cv/web/dnocr/or%3A7amento-estado-2020/-/document_library/nYZEuCMAckDr/view_file/764491?_com_liferay_document_library_web_portlet_DLPortlet_INSTANCE_nYZEuCMAckDr_redirect=https%3A%2F%2Fwww.mf.gov.cv%2Fweb%2Fdnocr%2For%25C3%25A7amento-estado-2020%2F-%2Fdocument_library%2FnYZEuCMAckDr%2Fview%2F764454%3F_com_liferay_document_library_web_portlet_DLPortlet_INSTANCE_nYZEuCMAckDr_redirect%3Dhttps%253A%252F%252Fwww.mf.gov.cv%252Fweb%252Fdnocr%252For%2525C3%2525A7amento-estado-2020%253Fp_p_id%253Dcom_liferay_document_library_web_portlet_DLPortlet_INSTANCE_nYZEuCMAckDr%2526p_p_lifecycle%253D0%2526p_p_state%253Dnormal%2526p_p_mode%253Dview]. Accessed 23 February 2021.

[4] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 22 February 2021.

[5] Ministry of Agriculture and Environment. [<http://maa.gov.cv/>]. Accessed 22 February 2021.

[6] DW. [<https://www.dw.com/pt-002/not%C3%ADcias/cabo-verde/s-30383>]. Accessed 15 March 2021.

[7] A Semana. [<https://www.asemana.publ.cv/spip.php?ak=1&lang=pt>]. Accessed 15 March 2021.

[8] Expresso das Ilhas. [<https://expressodasilhas.cv/>]. Accessed 15 March 2021.

5.5.2 Financing under Joint External Evaluation (JEE) and Performance of Veterinary Services (PVS) reports and gap analyses

5.5.2a

Does the Joint External Evaluation (JEE) report, National Action Plan for Health Security (NAPHS), and/or national GHSA roadmap allocate or describe specific funding from the national budget (covering a time-period either in the future or within the past five years) to address the identified gaps?

Yes = 1 , No/country has not conducted a JEE = 0

Current Year Score: 0

2021

WHO Strategic Partnership for IHR and Health Security (SPH); Global Health Security Agenda

5.5.2b

Does the Performance of Veterinary Services (PVS) gap analysis and/or PVS assessment allocate or describe specific funding from the national budget (covering a time-period either in the future or within the past five years) to address the identified gaps?

Yes = 1 , No/country has not conducted a PVS = 0

Current Year Score: 0

2021

OIE PVS assessments

5.5.3 Financing for emergency response

5.5.3a

Is there a publicly identified special emergency public financing mechanism and funds which the country can access in the face of a public health emergency (such as through a dedicated national reserve fund, an established agreement with the World Bank pandemic financing facility/other multilateral emergency funding mechanism, or other pathway identified through a public health or state of emergency act)?

Yes = 1 , No = 0

Current Year Score: 1

There are publicly identified special emergency public financing mechanism and funds which the country can access in the face of a public health emergency. As an eligible borrower under the World Bank's International Development Association, Cape Verde is able to borrow from the World Bank's Pandemic Emergency Financing Facility, launched in 2017 [1][2]. Cape Verde is not part of a country-based pooled fund associated with United Nations Office for the Coordination of Humanitarian Affairs. [3]

[1] World Bank Pandemic Financing Facility. [<http://pubdocs.worldbank.org/en/119961516647620597/PEF-Operational-Brief-Dec-2017.pdf>]. Accessed 28 September 2018.

[2] World Bank. 2017. "Pandemic Emergency Financing Facility: Frequently Asked Questions". [<http://www.worldbank.org/en/topic/pandemics/brief/pandemic-emergency-financing-facility>]. Accessed 28 September 2018.

[3] United Nations Office for the Coordination of Humanitarian Affairs(UNOCHA). "Country-Based Pooled Funds (CBPF)". [<https://www.unocha.org/our-work/humanitarian-financing/country-based-pooled-funds-cbpf>]. Accessed 28 September 2018.

5.5.4 Accountability for commitments made at the international stage for addressing epidemic threats

5.5.4a

Is there evidence that senior leaders (president or ministers), in the past three years, have made a public commitment either to:

- Support other countries to improve capacity to address epidemic threats by providing financing or support?
- Improve the country's domestic capacity to address epidemic threats by expanding financing or requesting support to improve capacity?

Needs to meet at least one of the criteria to be scored a 1 on this measure., Yes for both = 1, Yes for one = 1, No for both = 0

Current Year Score: 0

No evidence has been found that senior leaders of the government have made public commitments to either support other countries to improve capacity to address epidemic threats by providing financing or support, or improve the country's

domestic capacity to address epidemic threats by expanding financing or requesting support to improve capacity. No evidence was found in the website of the Ministry of Health and Social Security. [1] At the time of research, the website of the Ministry of Foreign Relations was not accessible. [2] No evidence was found in media outlets.

[1] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 23 February 2021.

[2] Ministry of Foreign Relations. (Not accessible). [<http://mirex.gov.cv/>]. Accessed 23 February 2021.

5.5.4b

Is there evidence that the country has, in the past three years, either:

- Provided other countries with financing or technical support to improve capacity to address epidemic threats?
- Requested financing or technical support from donors to improve the country's domestic capacity to address epidemic threats?

Needs to meet at least one of the criteria to be scored a 1 on this measure., Yes for both = 1, Yes for one = 1, No for both = 0

Current Year Score: 1

There is evidence that Cape Verde invested finances from donors to improve its own domestic capacity to address epidemic threats in the past three years; but there is no evidence that it has provided other countries with the same support.

According to the Global Health Security Tracking Dashboard, Cape Verde received US\$28.6 million in aid between 2014 and 2020. The largest recipients of the funds were the national laboratory system, emergency response operations, and workforce development. The three largest donors were the Global Fund to Fight AIDS, Tuberculosis and Malaria, Belgium, and the International Development Association. [1]

There is no evidence that Cape Verde has supported other countries to improve capacity to address epidemic threats by providing financing or support in the past three years. No evidence was found on the website of the Ministry of Health and Social Security. [2] At the time of research, the website of the Ministry of Foreign Relations was not accessible. [3] There are no data of Cape Verde being a funder in the Global Health Security Tracking Dashboard. [4]

[1] Georgetown University Medical Center. GHS Tracking Dashboard. [<https://tracking.ghscosting.org/details/905/recipient>]. Accessed 23 February 2021.

[2] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 23 February 2021.

[3] Ministry of Foreign Relations. (Not accessible). [<http://mirex.gov.cv/>]. Accessed 23 February 2021.

[4] Georgetown University Medical Center. GHS Tracking Dashboard. [<https://tracking.ghscosting.org/details/905/funder>]. Accessed 14 May 2021.

5.5.4c

Is there evidence that the country has fulfilled its full contribution to the WHO within the past two years?

Yes = 1, No = 0

Current Year Score: 1

2021

Economist Impact analyst qualitative assessment based on official national sources, which vary by country

5.6 COMMITMENT TO SHARING OF GENETIC AND BIOLOGICAL DATA AND SPECIMENS

5.6.1 Commitment to sharing genetic data, clinical specimens, and/or isolated specimens (biological materials) in both emergency and nonemergency research

5.6.1a

Is there a publicly available plan or policy for sharing genetic data, clinical specimens, and/or isolated specimens (biological materials) along with the associated epidemiological data with international organizations and/or other countries that goes beyond influenza?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence that Cape Verde has a plan or policy for sharing genetic data, clinical specimens, and/or isolated specimens (biological materials) along with the associated epidemiological data with international organizations and/or other countries that goes beyond influenza. No relevant evidence was found in the websites of the Ministry of Health and Social Security, the National Institute of Public Health or the Ministry of Agriculture and Environment. [2][3][4]

[1] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 23 February 2021.

[2] National Institute of Public Health. [<https://www.insp.gov.cv/index.php>]. Accessed 23 February 2021.

[3] Ministry of Agriculture and Environment. [<http://maa.gov.cv/>]. Accessed 23 February 2021.

5.6.1b

Is there public evidence that the country has not shared samples in accordance with the Pandemic Influenza Preparedness (PIP) framework in the past two years?

Yes = 0, No = 1

Current Year Score: 1

There is no public evidence that the country has not shared samples in accordance with the PIP framework in the past year. There is no reference to sharing influenza data on the Ministry of Health and Social Security website and there has not been any reports of Cape Verde not sharing samples in either national and international media. [1] The latest External evaluation of the Pandemic Influenza Preparedness Partnership Contribution, published in 2016, does not refer to Cape Verde not sharing samples and does not list Cape Verde as a priority country where to "improve the national ability to detect, monitor and share novel influenza viruses". [2]

[1] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 23 February 2021.

[2] WHO. 2016. "External evaluation of the Pandemic Influenza Preparedness Partnership Contribution - High-Level Implementation Plan 2013- 2016". [http://www.who.int/about/evaluation/pip_evaluation_report.pdf]. Accessed 23 February 2021.

5.6.1c

Is there public evidence that the country has not shared pandemic pathogen samples during an outbreak in the past two years?

Yes = 0, No = 1

Current Year Score: 1

There is no public evidence that Cape Verde has not shared pandemic pathogen samples during an outbreak in the past two years. There is no evidence of this on the Ministry of Health and Social Security website or the National Institute of Health website. [1, 2] There is also no information regarding Cape Verde on the World Health Organization Blueprint Priority Disease website which details sample sharing among effected countries. [3] There is evidence that Cape Verde sent COVID-19 samples to Portugal for testing in 2020. [4]

[1] Ministry of Health and Social Security. [<http://www.minsaude.gov.cv/>]. Accessed 23 February 2021.

[2] National Institute of Public Health. [<http://www.insp.gov.cv/>]. Accessed 23 February 2021.

[3] World Health Organization. "R & D Blueprint". [<https://www.who.int/teams/blueprint/>]. Accessed 23 February 2021.

[4] RTC. 14 July 2020. "COVID-19: Cape Verde continues to send samples to Portugal (Covid-19: Cabo Verde continua a enviar amostras para Portugal)". [<https://www.rtc.cv/noticia/noticia-details?id=5334>]. Accessed 15 March 2021.

Category 6: Overall risk environment and vulnerability to biological threats

6.1 POLITICAL AND SECURITY RISK

6.1.1 Government effectiveness

6.1.1a

Policy formation (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 3

2020

Economist Intelligence

6.1.1b

Quality of bureaucracy (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 2

2020

Economist Intelligence

6.1.1c

Excessive bureaucracy/red tape (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 1

2020

Economist Intelligence

6.1.1d

Vested interests/cronyism (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 2

2020

Economist Intelligence

6.1.1e

Country score on Corruption Perception Index (0-100, where 100=best)

Input number

Current Year Score: 58

2020

Transparency International

6.1.1f

Accountability of public officials (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 2

2020

Economist Intelligence

6.1.1g

Human rights risk (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 3

2020

Economist Intelligence

6.1.2 Orderly transfers of power

6.1.2a

How clear, established, and accepted are constitutional mechanisms for the orderly transfer of power from one government to another?

Very clear, established and accepted = 4, Clear, established and accepted = 3, One of the three criteria (clear, established, accepted) is missing = 2, Two of the three criteria (clear, established, accepted) are missing = 1, Not clear, not established, not accepted = 0

Current Year Score: 3

2021

Economist Intelligence

6.1.3 Risk of social unrest

6.1.3a

What is the risk of disruptive social unrest?

Very low: Social unrest is very unlikely = 4, Low: There is some prospect of social unrest, but disruption would be very limited = 3, Moderate: There is a considerable chance of social unrest, but disruption would be limited = 2, High: Major social unrest is likely, and would cause considerable disruption = 1, Very high: Large-scale social unrest on such a level as to seriously challenge government control of the country is very likely = 0

Current Year Score: 2

2021

Economist Intelligence

6.1.4 Illicit activities by non-state actors

6.1.4a

How likely is it that domestic or foreign terrorists will attack with a frequency or severity that causes substantial disruption?

No threat = 4, Low threat = 3, Moderate threat = 2, High threat = 1, Very high threat = 0

Current Year Score: 4

2021

Economist Intelligence

6.1.4b

What is the level of illicit arms flows within the country?

4 = Very high, 3 = High, 2 = Moderate, 1 = Low, 0 = Very low

Current Year Score: 3

2020

UN Office of Drugs and Crime (UNODC)

6.1.4c

How high is the risk of organized criminal activity to the government or businesses in the country?

Very low = 4, Low = 3, Moderate = 2, High = 1, Very high = 0

Current Year Score: 2

2021

Economist Intelligence

6.1.5 Armed conflict

6.1.5a

Is this country presently subject to an armed conflict, or is there at least a moderate risk of such conflict in the future?

No armed conflict exists = 4, Yes; sporadic conflict = 3, Yes; incursional conflict = 2, Yes, low-level insurgency = 1, Yes; territorial conflict = 0

Current Year Score: 4

2021

Economist Intelligence

6.1.6 Government territorial control

6.1.6a

Does the government's authority extend over the full territory of the country?

Yes = 1, No = 0

Current Year Score: 1

2021

Economist Intelligence

6.1.7 International tensions

6.1.7a

Is there a threat that international disputes/tensions could have a negative effect?

No threat = 4, Low threat = 3, Moderate threat = 2, High threat = 1, Very high threat = 0

Current Year Score: 4

2021

Economist Intelligence

6.2 SOCIO-ECONOMIC RESILIENCE

6.2.1 Literacy

6.2.1a

Adult literacy rate, population 15+ years, both sexes (%)

Input number

Current Year Score: 86.8

2015

United Nations Development Programme (UNDP); United Nations Educational, Scientific and Cultural Organization (UNESCO);
The Economist Intelligence Unit

6.2.2 Gender equality

6.2.2a

United Nations Development Programme (UNDP) Gender Inequality Index score

Input number

Current Year Score: 0.63

2018

United Nations Development Programme (UNDP); The Economist Intelligence Unit

6.2.3 Social inclusion

6.2.3a

Poverty headcount ratio at \$1.90 a day (2011 PPP) (% of population)

Input number

Current Year Score: 0.7

2015

World Bank; Economist Impact

6.2.3b

Share of employment in the informal sector

Greater than 50% = 2, Between 25-50% = 1, Less than 25% = 0

Current Year Score: 1

According to the National Statistics Institute (INE) of Cape Verde, informal workers account for 43% of the workforce in the country in 2019. [1]

[1] Notícias do Norte. 9 October 2019. "Informal sector guarantees 43% of "jobs" in Cape Verde (Setor informal garante 43% dos "empregos" em Cabo Verde)". [<https://noticiasdonorte.publ.cv/94952/setor-informal-garante-43-dos-empregos-em-cabo-verde/>]. Accessed 23 February 2021.

6.2.3c

Coverage of social insurance programs (% of population)

Scored in quartiles (0-3, where 3=best)

Current Year Score: 1

2016, or latest available

World Bank; Economist Impact calculations

6.2.4 Public confidence in government

6.2.4a

Level of confidence in public institutions

Input number

Current Year Score: 1

2021

Economist Intelligence Democracy Index

6.2.5 Local media and reporting

6.2.5a

Is media coverage robust? Is there open and free discussion of public issues, with a reasonable diversity of opinions?

Input number

Current Year Score: 2

2021

Economist Intelligence Democracy Index

6.2.6 Inequality

6.2.6a

Gini coefficient

Scored 0-1, where 0=best

Current Year Score: 0.42

Latest available.

World Bank; Economist Impact calculations

6.3 INFRASTRUCTURE ADEQUACY

6.3.1 Adequacy of road network

6.3.1a

What is the risk that the road network will prove inadequate to meet needs?

Very low = 4, Low = 3, Moderate = 2, High = 1, Very high = 0

Current Year Score: 2

2021

Economist Intelligence

6.3.2 Adequacy of airports

6.3.2a

What is the risk that air transport will prove inadequate to meet needs?

Very low = 4, Low = 3, Moderate = 2, High = 1, Very high = 0

Current Year Score: 4

2021

Economist Intelligence

6.3.3 Adequacy of power network

6.3.3a

What is the risk that power shortages could be disruptive?

Very low = 4, Low = 3, Moderate = 2, High = 1, Very high = 0

Current Year Score: 2

2021

Economist Intelligence

6.4 ENVIRONMENTAL RISKS

6.4.1 Urbanization

6.4.1a

Urban population (% of total population)

Input number

Current Year Score: 66.19

2019

World Bank

6.4.2 Land use

6.4.2a

Percentage point change in forest area between 2006–2016

Input number

Current Year Score: 0.74

2008-2018

World Bank; Economist Impact

6.4.3 Natural disaster risk

6.4.3a

What is the risk that the economy will suffer a major disruption owing to a natural disaster?

Very low = 4, Low = 3, Moderate = 2, High = 1, Very high = 0

Current Year Score: 1

2021

Economist Intelligence

6.5 PUBLIC HEALTH VULNERABILITIES

6.5.1 Access to quality healthcare

6.5.1a

Total life expectancy (years)

Input number

Current Year Score: 72.78

2018

United Nations; World Bank, UNICEF; Institute for Health Metrics and Evaluation (IHME); Central Intelligence Agency (CIA)
World Factbook

6.5.1b

Age-standardized NCD mortality rate (per 100 000 population)

Input number

Current Year Score: 512.8

2019

WHO

6.5.1c

Population ages 65 and above (% of total population)

Input number

Current Year Score: 4.7

2019

World Bank

6.5.1d

Prevalence of current tobacco use (% of adults)

Input number

Current Year Score: 14.04

2018

World Bank

6.5.1e

Prevalence of obesity among adults

Input number

Current Year Score: 11.8

2016

WHO

6.5.2 Access to potable water and sanitation

6.5.2a

Percentage of homes with access to at least basic water infrastructure

Input number

Current Year Score: 87.08

2017

UNICEF; Economist Impact

6.5.2b

Percentage of homes with access to at least basic sanitation facilities

Input number

Current Year Score: 73.85

2017

UNICEF; Economist Impact

6.5.3 Public healthcare spending levels per capita

6.5.3a

Domestic general government health expenditure per capita, PPP (current international \$)

Input number

Current Year Score: 240.38

2018

WHO Global Health Expenditure database

6.5.4 Trust in medical and health advice

6.5.4a

Trust medical and health advice from the government

Share of population that trust medical and health advice from the government , More than 80% = 2, Between 60-80%, or no data available = 1, Less than 60% = 0

Current Year Score: 1

2018

Wellcome Trust Global Monitor 2018

6.5.4b

Trust medical and health advice from medical workers

Share of population that trust medical and health advice from health professionals , More than 80% = 2, Between 60-80%, or no data available = 1, Less than 60% = 0

Current Year Score: 1

2018

Wellcome Trust Global Monitor 2018