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

**CATEGORY 1: PREVENTING THE EMERGENCE OR RELEASE OF PATHOGENS WITH POTENTIAL FOR INTERNATIONAL CONCERN**

1.1 Antimicrobial resistance (AMR)
   - 4

1.2 Zoonotic disease
   - 8

1.3 Biosecurity
   - 14

1.4 Biosafety
   - 23

1.5 Dual-use research and culture of responsible science
   - 26

1.6 Immunization
   - 30

**CATEGORY 2: EARLY DETECTION AND REPORTING FOR EPIDEMICS OF POTENTIAL INTERNATIONAL CONCERN**

2.1 Laboratory systems strength and quality
   - 30

2.2 Laboratory supply chains
   - 34

2.3 Real-time surveillance and reporting
   - 35

2.4 Surveillance data accessibility and transparency
   - 38

2.5 Case-based investigation
   - 43

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**CATEGORY 3: RAPID RESPONSE TO AND MITIGATION OF THE SPREAD OF AN EPIDEMIC**

3.1 Emergency preparedness and response planning
   - 47

3.2 Exercising response plans
   - 51

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   - 56

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   - 56

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   - 60
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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
4.2 Supply chain for health system and healthcare workers
4.3 Medical countermeasures and personnel deployment
4.4 Healthcare access
4.5 Communications with healthcare workers during a public health emergency
4.6 Infection control practices and availability of equipment
4.7 Capacity to test and approve new medical countermeasures

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
5.2 Cross-border agreements on public health and animal health emergency response
5.3 International commitments
5.4 Joint External Evaluation (JEE) and Performance of Veterinary Services Pathway (PVS)
5.5 Financing
5.6 Commitment to sharing of genetic and biological data and specimens

CATEGORY 6: OVERALL RISK ENVIRONMENT AND VULNERABILITY TO BIOLOGICAL THREATS

6.1 Political and security risk
6.2 Socio-economic resilience
6.3 Infrastructure adequacy
6.4 Environmental risks
6.5 Public health vulnerabilities
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: 0

There is insufficient evidence that São Tomé & Príncipe has a national AMR plan for the surveillance, detection and reporting of priority AMR pathogens.

In May 2019, the WHO published the Joint External Evaluation report for São Tomé & Príncipe. On page 16 of the JEE, it states that the country’s Multisectorial Committee has developed a National Action Plan for AMR; however, the plan has not been finalized. [1] The mentioned National Action Plan for AMR has not been found. The document could not be found in the official website of the Ministry of Health of São Tomé & Príncipe. [2] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [3]


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
There is sufficient evidence that São Tomé & Príncipe has national laboratories. The country’s laboratories can conduct tests for one of the priority AMR pathogens: resistant Mycobacterium tuberculosis.

According to the WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019, on page 32, the country has laboratories. There is a central laboratory in each of its six districts, plus a laboratory in Hospital of Principe, another in Hospital Dr. Ayres de Menezes, and two reference laboratories, one for tuberculosis and another for HIV, that serve as national laboratories. However, the JEE also clearly states that there is no laboratory system in the country, such that the Ministry of Health does not coordinate or manage the laboratory in an integrated system. [1]

In addition, according to the JEE, the country has one national laboratory for animal health: the Center for Agronomic and Technological Research (CIAT) under the Ministry of Agriculture, Fisheries and Rural Development. The country’s laboratories can conduct tests for malaria, tuberculosis, HIV, typhoid fever and brucellosis. [1]

On page 16 of the JEE, it states that the country’s Multisectoral Committee has developed a National Action Plan for AMR; however, the plan has not been finalized. [1] The mentioned National Action Plan for AMR has not been found. The document could not be found in the official website of the Ministry of Health of São Tomé & Príncipe. [2] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [3] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [4] There is no evidence of a national AMR plan in the WHO Library of National Action Plans. [5] The country is not part of the Global Antimicrobial Resistance Surveillance System (GLASS). [6]


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 government of São Tomé & Principe conducts environmental detection or surveillance activities for antimicrobial residues or AMR organisms.
According to the WHO’s Joint External Evaluation Report of May 2019, on page 32, the laboratory of the Water and Electricity Company (EMAE) analyzes the quality of water, but there is no mention of AMR surveillance in the waterways. There are no mentions of AMR surveillance in the soil in the JEE document.

On the other hand, the JEE states that the country has a national surveillance system (VIDR), which was created in 2012. There are no mentions that the VIDR conducts environmental detection or surveillance activities in soil or waterways for antimicrobial residues or AMR organisms. [1]

In the website of the Ministry of Health, there is evidence that the country has a National Endemic Center, which is the institution under the Ministry of Health responsible for organizing and coordinating surveillance, prevention and combat against infectious diseases. There is no evidence that the National Endemic Center conducts environmental detection or surveillance activities in soil or waterways for antimicrobial residues or AMR organisms. [2]

On page 16 of the JEE, it states that the country’s Multisectoral Committee has developed a National Action Plan for AMR; however, the plan has not been finalized. [1] The mentioned National Action Plan for AMR has not been found. The document could not be found in the official website of the Ministry of Health of São Tomé & Príncipe. [3] There is no evidence of a national AMR plan in the WHO Library of National Action Plans. [4]


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: 0

There is no publicly available evidence of any national legislation in place requiring prescriptions for antibiotic use for humans.

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019, on page 17, states that the country does not have a legislative framework that specifically regulates the import, commerce, sale, transport and storage of pharmaceutical products, explicitly mentioning antibiotics, for human use. [1]

On the other hand, the Ministry of Health has published in 2019 the National Pharmaceutical Policy, which outlines policies that include the requirement of medical prescriptions for some medications, but it does not mention antibiotics. On page 25 of the National Pharmaceutical Policy, which goes from 2019 through 2029, there is a section of the promoting of rational use of medications. However, it does not have any evidence that legislation or regulation requiring prescriptions for antibiotic use for humans.

COUNTRY SCORE JUSTIFICATIONS AND REFERENCES

www.ghsindex.org
use for humans in place. [2]

No evidence was found on the website of the Ministry of Health. [3] There is no evidence of a national AMR plan in the WHO Library of National Action Plans. [4] The representative of the WHO took part in a campaign to promote the rational use of antibiotics in November 2018. [5] Some academic work has also evidenced the sale of some antibiotics on the informal market (no prescription required). [6]


**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 no publicly available evidence of any national legislation in place requiring prescriptions for antibiotic use for animals.

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019, on page 18, explicitly states that the use of antimicrobial medications and antibiotics on animals is not regulated. [1]

The Ministry of Health’s National Pharmaceutical Policy 2019-2029 makes no mention of animal health. [2] No evidence was found on the website of the Ministry of Health. [3] There is no evidence of a national AMR plan in the WHO Library of National Action Plans. [4] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [5] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [6] There is some evidence that an OIE PVS Evaluation report for São Tomé & Principe was published in 2013; however, the actual document cannot be accessed as the link is broken. [7]

1.2 ZOONOTIC 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: 0

There is no publicly available evidence of a national law, plan, or equivalent strategy document, on zoonotic disease.

On page 21, the WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 explicitly states that the a weakness in the country is the need to develop and approve a policy, strategy or plan of action for zoonotic events. On page 19, the document states that specific legislation for the prevention and control of zoonoses is inexistent or not updated, and therefore, incapable of responding to current issues and needs. [1]

No evidence was found on the website of the Ministry of Health. [2] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [3] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [4] There is some evidence that an OIE PVS Evaluation report for São Tomé & Príncipe was published in 2013; however, the actual document cannot be accessed as the link is broken. [5]

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 insufficient evidence of a national strategy which includes measures for risk identification and reduction for zoonotic disease spillover events from animals to humans.  

São Tomé & Príncipe has the National Strategic Plan for the Elimination of Malaria, which was last updated in 2016 and it covers the years 2017 through 2021. The Plan includes measures to pulverize in residences insecticides against Aedes Aegypti, the mosquito that spreads malaria, dengue, chikungunya, the Zika virus and other diseases. The government uses organophosphate insecticides to reduce the risk of disease spillover events. In 2021, the government will start using SumiShield 50WG, a chemical developed by Sumitomo Chemical specifically to combat the spread of vector diseases. [1] There is no further evidence on risk identification and reduction for zoonotic disease spillover events.  


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 no publicly available evidence of national legislation, plans, or guidelines that account for the surveillance and control of multiple zoonotic pathogens of public health concern.  

On page 21, the WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 explicitly states that the a weakness in the country is the need to develop and approve a policy, strategy or plan of action for zoonotic events. It also state that the country needs to have some mechanism that would function between animal and human health to manage zoonotic events. On page 19, the document states that specific legislation for the prevention and control of zoonoses is inexistent or not updated, and therefore, incapable of responding to current issues and needs. However, on page 20, the document states that the country has a surveillance system in the central slaughtershouse, which include inspections. [1]  

No evidence was found on the website of the Ministry of Health. [2] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [3] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [4] There is some evidence that an OIE PVS Evaluation report for São Tomé & Príncipe was published in 2013; however, the actual document cannot be accessed.
as the link is broken. [5]


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 São Tomé & Príncipe has a department, agency, or similar unit dedicated to zoonotic disease that functions across ministries.

On pages 19-20, the WHO’s Joint External Evaluation Report for São Tomé & Principe of May 2019 explicitly states that while there is some data sharing between the Ministry of Health and the Ministry of Agriculture, Fisheries and Rural Development on some zoonotic issues, such as rabies, ebola and avian flu, there is no systematic data sharing of reports and information between ministries. There are no mentions of any specific agencies that are dedicated to zoonotic diseases that function across ministries in the document. [1]

No evidence was found on the website of the Ministry of Health. [2] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [3] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [4] There is some evidence that an OIE PVS Evaluation report for São Tomé & Principe was published in 2013; however, the actual document cannot be accessed as the link is broken. [5]


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 publicly available evidence that São Tomé & Príncipe has a national mechanism for owners of livestock to conduct and report on disease surveillance to a central government agency.

The WHO's Joint External Evaluation Report for São Tomé & Príncipe of May 2019 makes no mention of any national mechanism for owners of livestock to conduct and report on disease surveillance to a central government agency. [1]

No evidence was found on the website of the Ministry of Health. [2] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [3] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [4] There is some evidence that an OIE PVS Evaluation report for São Tomé & Príncipe was published in 2013; however, the actual document cannot be accessed as the link is broken. [5]


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 publicly available evidence that São Tomé & Príncipe has legislation and/or regulations that safeguard the confidentiality of information generated through surveillance activities for animals. The WHO's Joint External Evaluation Report for São Tomé & Príncipe of May 2019 makes no mention of any legislation and/or regulations that safeguard the confidentiality of information generated through surveillance activities for animals. [1] However, São Tomé & Príncipe has Law 3 of 2016 on the protection of personal data. Law 3 of 2016 makes no mention of any safeguards concerning the confidentiality of information generated through surveillance activities of animals. It covers data protection in general and there are mentions surrounding human health. Article 7 on the treatment of sensitive data includes health information of individuals as a protected group of data. The article states that health data could be treated if it does not maintain the data...
unidentifiable. Article 11 states that personal health data can only be divulged to the doctor if the data owner allows. Article 16 adds another layer of security to health information, such as the separation of health data from any other personal data.

[2] No evidence was found on the website of the Ministry of Health. [3] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [4] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [5] There is some evidence that an OIE PVS Evaluation report for São Tomé & Principe was published in 2013; however, the actual document cannot be accessed as the link is broken. [6]


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 no publicly available evidence that São Tomé & Principe conducts surveillance of zoonotic disease in wildlife.

The WHO’s Joint External Evaluation Report for São Tomé & Principe of May 2019 makes no mention of any surveillance of zoonotic disease in wildlife. [1]

No evidence was found on the website of the Ministry of Health. [2] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [3] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [4] There is some evidence that an OIE PVS Evaluation report for São Tomé & Principe was published in 2013; however, the actual document cannot be accessed as the link is broken. [5]


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: 6.51

2018
OIE WAHIS database

1.2.4b
Number of veterinary para-professionals per 100,000 people
Input number
Current Year Score: 23.71

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 publicly available evidence that São Tomé & Príncipe conducts a national plan on zoonotic diseases or any related legislation regulations or plans; therefore, there cannot be any mechanism for working with the private sector in controlling or responding to zoonoses.

On page 21, the WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 explicitly states that the weakness in the country is the need to develop and approve a policy, strategy or plan of action for zoonotic events. On page 19, the document states that specific legislation for the prevention and control of zoonoses is inexistent or not updated, and therefore, incapable of responding to current issues and needs. There are no mentions in the document of any mechanisms for working with the private sector in controlling or responding to zoonoses. [1]

No evidence was found on the website of the Ministry of Health. [2] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [3] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [4] There is some evidence that an OIE PVS Evaluation report for São Tomé & Príncipe was published in 2013; however, the actual document cannot be accessed as the link is broken. [5]


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 São Tomé & Príncipe has a record of the facilities in which especially dangerous pathogens and toxins are stored or processed.

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 states on page 26 that an area of improvement for the country is to compile an inventory of infectious agents and toxins that are processed in different
facilities. This indicates that there is no such record in place in the country. [1]

No evidence was found on the website of the Ministry of Health. [2] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [3] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [4] There is evidence that São Tomé & Príncipe has a Ministry of Defense and Internal Order, but no website or social media presence was found. [5]

Although São Tomé & Príncipe is party to the Biological Weapons Convention (BWC), there is no evidence it has submitted Confidence Building Measure reports which would have information on this. [6] The VERTIC database does not have any relevant evidence. [7]

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 publicly available evidence of any legislation and/or regulations related to biosecurity in São Tomé & Príncipe 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's Joint External Evaluation Report for São Tomé & Príncipe of May 2019 states on page 26 that an area of improvement for the country is to create legislations and norms on biosecurity and biosafety, which indicates that the country does not have in place legislations or regulations on the matter. [1]

No evidence was found on the website of the Ministry of Health. [2] The official website of the Ministry of Agriculture,
Fisheries and Rural Development was not online at the time of research. [3] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [4]

There is evidence that São Tomé & Príncipe has a Ministry of Defense and Internal Order, but no website or social media presence was found. [5] Although São Tomé & Príncipe is party to the Biological Weapons Convention (BWC), there is no evidence it has submitted Confidence Building Measure reports which would have information on this. [6] The VERTIC database does not have any relevant evidence. [7]


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 of any agency responsible for the enforcement of biosecurity legislation and regulations in São Tomé & Príncipe.

The WHO Joint External Evaluation Report for São Tomé & Príncipe of May 2019 addresses the issue of biosecurity in a section that goes from pages 25 through 27. The report is in Portuguese, so there is no distinction in the language for biosecurity and biosafety. The section addresses this issue by clearly stating that biosecurity in the report refers to both biosafety and biosecurity. To further clarify this distinction, it also uses the additional term biological security to refer to biosecurity. On page 26 of the report, the WHO recommends São Tomé & Príncipe to create a commission for biosecurity at the national level, indicating that there is no established agency responsible for the enforcement of biosecurity legislation and regulations (which also do not exist in the country). [1]

No evidence was found on the website of the Ministry of Health. [2] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [3] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [4]
There is evidence that São Tomé & Príncipe has a Ministry of Defense and Internal Order, but no website or social media presence was found. [5] Although São Tomé & Príncipe is party to the Biological Weapons Convention (BWC), there is no evidence it has submitted Confidence Building Measure reports which would have information on this. [6] The VERTIC database does not have any relevant evidence. [7]


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 publicly available evidence that São Tomé & Príncipe has taken action to consolidate its inventories of especially dangerous pathogens and toxins into a minimum number of facilities.

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 states on page 26 that the country needs to take inventory of the infectious agents and toxins that it handles in the different facilities. This indicates that, first, there is no such inventory and therefore there cannot be control over its concentration into a minimum number of facilities. [1]

No evidence was found on the website of the Ministry of Health. [2] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [3] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [4]

There is evidence that São Tomé & Príncipe has a Ministry of Defense and Internal Order, but no website or social media presence was found. [5] Although São Tomé & Príncipe is party to the Biological Weapons Convention (BWC), there is no evidence it has submitted Confidence Building Measure reports which would have information on this. [6] The VERTIC
database does not have any relevant evidence. [7]


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 insufficient evidence of any in-country capacity to conduct Polymerase Chain Reaction (PCR)-based diagnostic testing for anthrax and/or Ebola in that São Tomé & Príncipe.

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 makes no mention of any PCR-based diagnostic testing capabilities, be it for anthrax or for Ebola. It mentions anthrax only once on page 28, and it is a passing reference to note that anthrax is a disease that is transmissible from animal to human. No mention of any testing capability of anthrax in the document exists. In regards to Ebola, the JEE notes on page 35 that only contingency plan that São Tomé & Príncipe has developed is for Ebola in 2014. However, the actual plan could not be found online. There are no mentions of any PCR-based diagnostic testing capability for Ebola in the JEE. [1]

No evidence was found on the website of the Ministry of Health. [2] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [3] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [4] There is evidence that São Tomé & Príncipe has a Ministry of Defense and Internal Order, but no website or social media presence was found. [5]

Although São Tomé & Príncipe is party to the Biological Weapons Convention (BWC), there is no evidence it has submitted Confidence Building Measure reports which would have information on this. [6] The VERTIC database does not have any relevant evidence. [7]
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 public evidence that São Tomé & Príncipe requires biosecurity training, using a standardised, required approach, such as through a common curriculum or a train-the-trainer programme, for personnel working in facilities housing or working with especially dangerous pathogens, toxins, or biological materials with pandemic potential.

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 mentions on page 25 that the country lack formation and capacitation of technical personnel on the best practices involving biosecurity and biosafety. [1]

No evidence was found on the website of the Ministry of Health. [2] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [3] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [4] There is evidence that São Tomé & Príncipe has a Ministry of Defense and Internal Order, but no website or social media presence was found. [5]

Although São Tomé & Príncipe is party to the Biological Weapons Convention (BWC), there is no evidence it has submitted Confidence Building Measure reports which would have information on this. [6] The VERTIC database does not have any relevant evidence. [7]

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 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 checks such as drug testing, background checks, and psychological or mental fitness checks.

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 mentions on page 25 that there are no regulations on biosecurity in the country. As such, there is no evidence of any licensing conditions. The document makes no mention of any checks for personnel, including drug testing, background checks or psychological or mental fitness checks. [1]

No evidence was found on the website of the Ministry of Health. [2] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [3] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [4] There is evidence that São Tomé & Príncipe has a Ministry of Defense and Internal Order, but no website or social media presence was found. [5]

Although São Tomé & Príncipe is party to the Biological Weapons Convention (BWC), there is no evidence it has submitted Confidence Building Measure reports which would have information on this. [6] The VERTIC database does not have any relevant evidence. [7]

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: 0

There is no evidence that São Tomé & Príncipe has publicly available information on national regulations on the safe and secure transport of infectious substances.

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 mentions on page 25 that there are no regulations on biosecurity in the country. However, the same document also mentions on the same page that the country has certified technicians to transport infectious substances, but they are not governed by any regulations or protocols. There are no mentions of Categories A or B. [1]

No evidence was found on the website of the Ministry of Health. [2] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [3] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [4] There is evidence that São Tomé & Príncipe has a Ministry of Defense and Internal Order, but no website or social media presence was found. [5]

Although São Tomé & Príncipe is party to the Biological Weapons Convention (BWC), there is no evidence it has submitted Confidence Building Measure reports which would have information on this. [6] The VERTIC database does not have any relevant evidence. [7]


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

There is no publicly available evidence of any 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 in São Tomé & Príncipe.

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 mentions on page 25 that there are no regulations on biosecurity in the country, which include any legislation or regulations to oversee the cross-border transfer and end-user screening of especially dangerous pathogens, toxins and pathogens with pandemic potential. However, the same document also mentions on the same page that the country has certified technicians to transport infectious substances, but they are not governed by any regulations or protocols. [1]

No evidence was found on the website of the Ministry of Health. [2] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [3] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [4] There is evidence that São Tomé & Príncipe has a Ministry of Defense and Internal Order, but no website or social media presence was found. [5]

Although São Tomé & Príncipe is party to the Biological Weapons Convention (BWC), there is no evidence it has submitted Confidence Building Measure reports which would have information on this. [6] The VERTIC database does not have any relevant evidence. [7]

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 public evidence of any have national biosafety legislation and/or regulations in São Tomé & Príncipe.

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 states on page 26 that an area of improvement for the country is to create legislations and norms on biosecurity and biosafety, which indicates that the country does not have in place legislations or regulations on the matter. The report is in Portuguese, so there is no distinction in the language for biosecurity and biosafety. The section addresses this issue by clearly stating that biosecurity in the report refers to both biosafety and biosecurity. To further clarify this distinction, it also uses the additional term biological security to refer to biosecurity. [1]

No evidence was found on the website of the Ministry of Health. [2] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [3] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [4] There is evidence that São Tomé & Príncipe has a Ministry of Defense and Internal Order, but no website or social media presence was found. [5]

Although São Tomé & Príncipe is party to the Biological Weapons Convention (BWC), there is no evidence it has submitted Confidence Building Measure reports which would have information on this. [6] The VERTIC database does not have any relevant evidence. [7]

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 of an established agency responsible for the enforcement of biosafety legislation and regulations in São Tomé & Príncipe.

The WHO Joint External Evaluation Report for São Tomé & Príncipe of May 2019 addresses the issue of biosecurity and biosafety in a section that goes from pages 25 through 27. The report is in Portuguese, so there is no distinction in the language for biosecurity and biosafety. The section addresses this issue by clearly stating that biosecurity in the report refers to both biosafety and biosecurity. To further clarify this distinction, it also uses the additional term biological security to refer to biosecurity. On page 26 of the report, the WHO recommends São Tomé & Príncipe to create a commission for biosecurity/biosafety at the national level, indicating that there is no established agency responsible for the enforcement of biosecurity/biosafety legislation and regulations (which also do not exist in the country). [1]

No evidence was found on the website of the Ministry of Health. [2] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [3] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [4] There is evidence that São Tomé & Príncipe has a Ministry of Defense and Internal Order, but no website or social media presence was found. [5]

Although São Tomé & Príncipe is party to the Biological Weapons Convention (BWC), there is no evidence it has submitted Confidence Building Measure reports which would have information on this. [6] The VERTIC database does not have any relevant evidence. [7]


2020.


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 publicly available evidence that São Tomé & Príncipe requires biosafety training, using a standardised, 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’s Joint External Evaluation Report for São Tomé & Principe of May 2019 mentions on page 25 that the country lack formation and capacitation of technical personnel on the best practices involving biosecurity and biosafety. [1]

No evidence was found on the website of the Ministry of Health. [2] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [3] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [4] There is evidence that São Tomé & Príncipe has a Ministry of Defense and Internal Order, but no website or social media presence was found. [5]

Although São Tomé & Príncipe is party to the Biological Weapons Convention (BWC), there is no evidence it has submitted Confidence Building Measure reports which would have information on this. [6] The VERTIC database does not have any relevant evidence. [7]


26 November 2020.


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 São Tomé & Príncipe 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’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 does not mention any assessment to determine whether ongoing research is occurring on especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research. [1]

No evidence was found on the website of the Ministry of Health. [2] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [3] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [4] There is evidence that São Tomé & Príncipe has a Ministry of Defense and Internal Order, but no website or social media presence was found. [5]

Although São Tomé & Príncipe is party to the Biological Weapons Convention (BWC), there is no evidence it has submitted Confidence Building Measure reports which would have information on this. [6] The VERTIC database does not have any relevant evidence. [7]


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 of any national policy requiring oversight of dual use research, such as research with especially dangerous pathogens, toxins, and/or pathogens with pandemic potential in São Tomé & Príncipe.

The WHO's Joint External Evaluation Report for São Tomé & Príncipe of May 2019 does not mention any legislation and/or regulation requiring oversight of research with especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research. [1]

No evidence was found on the website of the Ministry of Health. [2] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [3] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [4] There is evidence that São Tomé & Príncipe has a Ministry of Defense and Internal Order, but no website or social media presence was found. [5]

Although São Tomé & Príncipe is party to the Biological Weapons Convention (BWC), there is no evidence it has submitted Confidence Building Measure reports which would have information on this. [6] The VERTIC database does not have any relevant evidence. [7]

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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 publicly available evidence of any agency responsible for oversight of research with especially dangerous pathogens, pathogens with pandemic potential, and/or other dual use research in São Tomé & Príncipe.

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 does not mention any legislation and/or regulation requiring oversight of research with especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research. As there is no evidence of regulations, there is no evidence of any agency responsible for those regulations. The document makes no mention of any such agency. [1]

No evidence was found on the website of the Ministry of Health. [2] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [3] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [4] There is evidence that São Tomé & Príncipe has a Ministry of Defense and Internal Order, but no website or social media presence was found. [5]

Although São Tomé & Príncipe is party to the Biological Weapons Convention (BWC), there is no evidence it has submitted Confidence Building Measure reports which would have information on this. [6] The VERTIC database does not have any relevant evidence. [7]

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

There is no publicly available evidence of any national legislation, regulation, policy, or other guidance, requiring the screening of synthesized DNA before it is sold in São Tomé & Príncipe.

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 does not mention any legislation and/or regulation requiring screening of synthesized DNA (deoxyribonucleic acid) against lists of known pathogens and toxins before it is sold. [1]

No evidence was found on the website of the Ministry of Health. [2] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [3] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [4] There is evidence that São Tomé & Príncipe has a Ministry of Defense and Internal Order, but no website or social media presence was found. [5]

Although São Tomé & Príncipe is party to the Biological Weapons Convention (BWC), there is no evidence it has submitted Confidence Building Measure reports which would have information on this. [6] The VERTIC database does not have any relevant evidence. [7]


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 no publicly available evidence that the national laboratory system has the capacity to conduct diagnostic tests for at least 5 of the 10 WHO-defined core tests in São Tomé & Príncipe.

According to the WHO’s Joint External Evaluation Report of May 2019, São Tomé & Príncipe’s laboratories has the capacity to
conduct diagnostic tests for four of those diseases: tuberculosis, malaria, HIV and typhoid (page 32). In addition to those four, São Tomé & Príncipe can test for brucellosis, which is not core tests. However, the JEE does not specify if the tests for those diseases match the core tests: microscopy for tuberculosis, rapid testing for malaria, serology for HIV, or bacterial culture for typhoid fever. Furthermore, the JEE states on page 33 that the country has not completed the risk evaluation to determine the 10 priority diseases for analysis. [1]

The Ministry of Health has been designing a national laboratory plan. A central laboratory is due to be certified in order to "develop and implement a national programme to check the quality of diagnostic tests". [2] There is no evidence that this has been achieved. In January 2018, a national laboratory for tuberculosis was set up in São Tomé & Príncipe, thanks to a Brazilian assistance programme. [3] It was described by the local media as "the first reference laboratory of São Tomé & Príncipe". [4,5] There is no public evidence that the laboratory has its own website. In an official report, the Ministry of Health also says that almost all suspected patients have been tested for malaria. [6] The Brazilian Ministry of Health says that cooperation with São Tomé & Príncipe extends to HIV and malaria prevention. [7]


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: 1

There is evidence of a disease-specific national plan that includes conducting testing during a public health emergency, and it includes considerations for scaling capacity. However, there is insufficient evidence that it considers testing for novel
The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 notes on page 35 that the only contingency plan that São Tomé & Príncipe has developed is for Ebola in 2014. However, the actual plan could not be found online. [1]

In 2020, the Ministry of Health developed the Contingency Plan for the COVID-19 Epidemic. The Plan presents no evidence that it can be applied to other diseases. Furthermore, the Plan does not consider testing for novel or unknown pathogens. The Plan includes considerations for scaling capacity, as it is a key objective for the Plan. On page 7, it mentions that its objectives is to strengthen the country’s capacity to deter transmission of the virus among the population especially among health professionals, to detect and notify prevocuously cases of infections, to isolate and provide care to suspect and confirmed cases, to communicate the risks, promote health habits and engage with the community, and to develop multisectorial partnership to better prepare a response to minimize social and economic impact.

The Plan does not have specific goals for testing, but it has objectives to improve its testing capabilities. On page 18, it includes objectives related to laboratories. Such objectives include an assessment of its current laboratorial capacity and capabilities, solicit technical assistance to install equipment and train technicians to perform the diagnostic tests, strengthen the capacity of 20 technicians in the collection, storage and transportation of samples for diagnostic testing of COVID-19, and identify the needs in terms of inputs (e.g. reagents) for testing. [2]

No further evidence was found on the website of the Ministry of Health. [3] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [4] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [5]


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 insufficient evidence of any national laboratory in São Tomé & Principe that serves as an accredited reference facility.
The first reference laboratory in the country was inaugurated in 2018 (for tuberculosis). The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 states that the laboratory at the Hospital Dr. Ayres de Menezes and the national reference laboratory for tuberculosis are registered in the external quality assessment of Portugal in the area of human health for biochemistry, parasitology, coagulation and some exams in hematology and bacilloscopy. However, it does not mention that they are accredited.

In addition, the laboratory of the Center for Agronomic and Technological Research (CIAT) under the Ministry of Agriculture, Fisheries and Rural Development is under the process to receive the accreditation ISO 17025. The CIAT laboratory is not a medical laboratory.

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: 1

There is evidence that a national laboratory in São Tomé & Príncipe that serves as a reference facility is subject to external quality assurance review.

According to the WHO’s Joint External Evaluation Report for São Tomé & Príncipe, which was conducted in May 2019, on page 32, the laboratory at the Hospital Dr. Ayres de Menezes and the national reference laboratory for tuberculosis are registered in the external quality assessment of Portugal in the area of human health for biochemistry, parasitology, coagulation and some exams in hematology and bacilloscopy.

The National Institute of Health of Portugal (INSA) has some documents that show that some facilities in São Tomé & Príncipe are under their external quality assurance review. Evidence on the specific facilities that are under the external reviews in the INSA source could not be found.

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 publicly available evidence that São Tomé & Príncipe has a national specimen transport system.

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 explicitly states on page 25 that the country has capable professionals for the transportation of dangerous specimen, but there is no system or protocols for the transportation of those substances. On page 33, the document explicitly states that an area of weakness of the country is the need to develop a transportation system for infectious substances at the national and international level, as well as the need to create a systematic way to collect and send specimen. [1]

No evidence was found on the website of the Ministry of Health. [2] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [3] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [4]


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 São Tomé & Príncipe has in place a plan 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’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 does not mention any such plan in place.
The Ministry of Health’s Contingency Plan for the COVID-19 Epidemic of 2020 does not mention any plan to rapidly authorize or license laboratories to supplement the capacity of the national public health laboratory system to scale-up testing during an outbreak. However, it does mention on page 51 the creation of an accreditation system for laboratories and other diagnostic centers, but it does not indicate that the accreditation system will have a mechanism for rapid approval to supplement capacity during a public health emergency. [2]

No evidence was found on the website of the Ministry of Health. [3] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [4] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [5]


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 São Tomé & Príncipe is conducting ongoing event-based surveillance and analysis for infectious disease.

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 states on page 35 that the country publishes monthly bulletins on epidemiological surveillance, but it also explicitly states that the bulletins are not available to the public. [1]

The Ministry of Health’s Contingency Plan for the COVID-19 Epidemic of 2020 mentions the establishment of regularly published information on the evolution of the disease in the country. However, such publication was not found anywhere online. [2]
According to the Ministry of Health website, in December 2019, it was established a Health Information System (SIS), which has the objective of collecting, processing, analyzing and distributing necessary information for health services. However, the actual system was not accessible, as the page was blank. The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found.


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 São Tomé & Príncipe reported a potential PHEIC to the WHO within the last two years. The WHO Weekly Bulletin on Outbreaks and Other Emergencies for the Regional Office for Africa notes that São Tomé & Principe notified the WHO of COVID-19 outbreak on 6 April 2020, after the WHO announced it as a public health emergency on 31 January 2020. [1] The WHO’s page on disease outbreaks for São Tomé & Principe is blank. [2]


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 insufficient evidence that São Tomé & Príncipe operates an electronic reporting surveillance system at both the national and the sub-national level.

The WHO's Joint External Evaluation Report for São Tomé & Príncipe of May 2019 states on page 35 that the country publishes monthly bulletins on epidemiological surveillance, but it also explicitly states that the bulletins are not available to the public. It is an electronic system named SIMRHEBO and it has a team that is responsible for maintaining it and updating it. The data is checked every quarter with the districts to make sure that all the information is consistent and uniform. However, the JEE also points out that the data collection is done by Excel and its access is very limited to other data analysis tools. [1]

The Ministry of Health’s Contingency Plan for the COVID-19 Epidemic of 2020 mentions the establishment of regularly published information on the evolution of the disease in the country. However, such publication was not found anywhere online. [2]

According to the Ministry of Health website, in December 2019, it was established a Health Information System (SIS), which has the objective of collecting, processing, analyzing and distributing necessary information for health services. [3] However, the actual system was not accessible, as the page was blank. [4]

The National Center of Endemic Diseases under the Ministry of Health is the responsible agency for surveillance, but there is no information on an electronic reporting surveillance system in its website. [5] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [6] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [7]


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 insufficient evidence that São Tomé & Príncipe’s electronic reporting surveillance system collect ongoing or real-time laboratory data.

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 states on page 35 that the country publishes monthly bulletins on epidemiological surveillance, but it also explicitly states that the bulletins are not available to the public. It is an electronic system named SIMRHEBO and it has a team that is responsible for maintaining it and updating it. There is no evidence in the JEE that the data collection includes ongoing or real-time laboratory data. The data is checked every quarter with the districts to make sure that all the information is consistent and uniform. However, the JEE also points out that the data collection is done by Excel and its access is very limited to other data analysis tools. [1]

The Ministry of Health’s Contingency Plan for the COVID-19 Epidemic of 2020 mentions the establishment of regularly published information on the evolution of the disease in the country. However, such publication was not found anywhere online. [2]

According to the Ministry of Health website, in December 2019, it was established a Health Information System (SIS), which has the objective of collecting, processing, analyzing and distributing necessary information for health services. [3] However, the actual system was not accessible, as the page was blank. [4]

The National Center of Endemic Diseases under the Ministry of Health is the responsible agency for surveillance, but there is no information on an electronic reporting surveillance system in its website. [5] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [6] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [7]


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: 0

There no evidence that electronic health records are commonly in use in São Tomé & Príncipe.

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 states does not mention any kind of health records or electronic health records of individuals being used. [1] No evidence was found on the website of the Ministry of Health. [2] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [3] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [4]


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 no evidence that the national public health system have access to electronic health records of individuals in São Tomé & Príncipe.

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 states does not mention any kind of health records or electronic health records of individuals being used. [1] No evidence was found on the website of the Ministry of Health. [2] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [3] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [4]

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 evidence that the electronic health records of individuals in São Tomé & Príncipe follow data standards to ensure data is comparable. The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 states that there is no evidence of any kind of health records or electronic health records of individuals being used. [1] No evidence was found on the website of the Ministry of Health. [2] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [3] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [4]


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 no public evidence of established mechanisms at the relevant ministries responsible for animal, human and wildlife surveillance to share data in São Tomé & Príncipe.

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 explicitly states on page 33 that there is currently no formal mechanism for data sharing between laboratories and entities that deal with zoonotic diseases and those that deal with human and animal health. [1]

No evidence was found on the website of the Ministry of Health. [2] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [3] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [4]

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 no public evidence that São Tomé & Príncipe makes de-identified health surveillance data on infectious diseases publicly available via reports on government websites.

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe conducted in May 2019 explicitly states on page 35 that while there are bulletins of data on infectious diseases published monthly, they are not available to the public. [1] No evidence was found on the website of the Ministry of Health. [2] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [3] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [4]


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: 0

There is insufficient evidence that São Tomé & Príncipe makes de-identified COVID-19 surveillance data available on government websites. The Ministry of Health supposedly has a webportal for COVID-19; however, the website was offline at the time of research. [1] No other government website was found that would have COVID-19 data. The Ministry of Health has a Facebook page and it has posted COVID-19 surveillance data through its Facebook page. However, Facebook is not an official government website. [2]
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

There is evidence of laws that safeguard the confidentiality of identifiable health information for individuals, such as that generated through health surveillance activities in São Tomé & Príncipe.

Law 3 of 2016 is on the protection of personal data. Article 7 on the treatment of sensitive data includes health information of individuals as a protected group of data. The article states that health data could be treated if it does not maintain the data unidentifiable. Article 11 states that personal health data can only be divulged to the doctor the data owner allows. Article 16 adds another layer of security to health information, such as the separation of health data from any other personal data. [1]


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 the laws safeguarding the confidentiality of identifiable health information for individuals, such as that generated through health surveillance activities, include mention of protections from cyber attacks. Principe.

Law 3 of 2016 is on the protection of personal data. While it imposes safeguards on personal health data, there is no explicit mention of protections from cyber attacks. [1] However, São Tomé & Príncipe has Law 17 of 2017 on Cybercrime. It does not specifically mention personal health data, but it does have general protections against cyber attacks. [2] No other evidence was found on the websites of the Ministry of Health or the National Agency for Personal Data Protection (ANPDP), the responsible agency for data protection in São Tomé & Príncipe. [3,4]


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 public evidence that the government of São Tomé & Príncipe has 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.

The Ministry of Health has not reported any such commitment. [1] Nevertheless, São Tomé & Príncipe has agreed to join eight other Central African countries under the auspices of Africa CDC in 2017 to "strengthen surveillance, emergency response and prevention of infectious and non-communicable diseases". "Regional Collaborating Centres will translate these bold commitments to concrete action by using all public assets that exist in the sub-region to effectively network and sustain collaboration for disease control," said Dr. John Nkengasong, the Director of the Africa Centres of Disease Control and Prevention. [2]


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 public evidence that there is a national system in place 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 Report for São Tomé & Príncipe of May 2019 makes no mention of such system. There are no mentions of contact tracing in the document. [1] The Ministry of Health’s Contingency Plan for the COVID-19 Epidemic of 2020 also makes no mention of such system. There are no mentions of contact tracing in the document. [2] No other evidence was found on the websites of the Ministry of Health. [3]


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 public evidence that São Tomé & Príncipe 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 Report for São Tomé & Príncipe of May 2019 does not mention any kind of wraparound services for those who self-isolate. [1]

The Ministry of Health’s Contingency Plan for the COVID-19 Epidemic of 2020 does not mention any kind of wraparound services for those who self-isolate. It mentions some social assistance for those who were affected by the disease or who are in vulnerable positions in the aftermath of the pandemic (page 25), but not those who self-isolate because they are identified as confirmed or suspected cases. [2] No other evidence was found on the websites of the Ministry of Health. [3]


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

There is no public evidence that São Tomé & Príncipe makes de-identified data on contact tracing efforts for COVID-19 available via daily reports (or other format) on government websites.

The Ministry of Health’s Contingency Plan for the COVID-19 Epidemic of 2020 makes no mention of contact tracing. [1] The Ministry of Health supposedly has a webportal for COVID-19; however, the website was offline at the time of research. [2] No other government website was found that would have COVID-19 data. No other evidence was found on the website of the Ministry of Health. [3]


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: 0

There is no evidence that São Tomé & Príncipe 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 a public health emergency. The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 explicitly states on page 60 that the country has no capacity to prevent, detect, or respond to public health emergencies at airports or ports. Even the capacity for routine situations are very limited. On page 61, the JEE notes, however, that the Ministry of Health has a surveillance service that works with agents in ports of entry at an informal level. They engage at the multisectorial level, albeit informally, with migration services, customs, airport administration, port administration, livestock control, the Center for Agronomic and Technological Research (CIAT), fiscal police and the national police. The National Company of Air Navigation (ENASA) in Sao Tome has a commission for facilitation and security (FALSEC), which has a plan that considers health emergency situations with travellers; however, the plan itself is not comprehensive and only stipulates the provision of an ambulance from the fire corps stationed at the airport. They can administer first aid and/or evacuate the ill to health units, with the possibility of communication with health authorities. The actual plan could not be found. [1] The country’s customs agency does not have significant information pertinent to the question nor does it have evidence of a cooperative agreement between the public health system and border control authorities. The website has many pages where it is still under construction with filler text and images. [2] The Migration and Border Services of São Tomé
& Príncipe does not have an official website or social media presence. The Ministry of Health’s Contingency Plan for the COVID-19 Epidemic of 2020 only mentions that there should be more collaboration between the Ministry of Health and airports and ports; there are no mentions of any joint plan or cooperative agreement. [3] No other evidence was found on the website of the Ministry of Health. [4]


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: 0

There is no publicly available evidence that an applied epidemiology training program (such as FETP) is available in country or that resources are provided by the government of São Tomé & Príncipe to send citizens to another country to participate in applied epidemiology training programs (such as FETP).

There is no relevant information on the website of the Ministry of Health. [1] There is no mention of any training programme in the country on the website of Africa CDC. São Tomé & Príncipe is not affiliated to the African Field Epidemiology Network (AFENET) and to the Training Programmes in Epidemiology and Public Health Interventions Network (TEPHINET). [2,3]

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: 0

There is no public evidence that the available field epidemiology training programmes are explicitly inclusive of animal health professionals or if there is a specific animal health field epidemiology training programme offered. There is no relevant information on the website of the Ministry of Health. [1] There is no mention of any training programme in the country on the website of Africa CDC. São Tomé & Príncipe is not affiliated to either AFENET, the 31-member Africa Field Epidemiology Network, or TEPHINET (Training Programmes in Epidemiology and Public Health Interventions Network). [2,3]


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: 1

There is insufficient evidence that a national public health emergency response plan which addresses planning for multiple communicable diseases with pandemic potential is in place in São Tomé & Príncipe. However, it does have a disease-specific plan.

The WHO's Joint External Evaluation Report for São Tomé & Príncipe of May 2019 states on page 35 that the only contingency plan the country has developed is the one for Ebola in 2014. However, the actual Ebola plan could not be found online. There is no indication that the Ebola plan covers other or multiple communicable diseases. The JEE also notes that São Tomé & Príncipe has a National Council for Preparation and Response to Catastrophes (CONPREC). The CONPREC has developed a contingency plan against catastrophes. The coordination of responses to catastrophers include orientation from the Ministry of Health, according to the JEE. The actual plan could not be found online. There is no evidence that CONPREC's Contingency Plan includes a health emergency response plan or that it covers multiple communicable diseases. The JEE, also on page 47, states that the National Health Service of São Tomé & Príncipe has developed a contingency plan to respond to health emergencies. However, such document was not found online. [1]

The Ministry of Health’s Contingency Plan for the COVID-19 Epidemic of 2020 is a disease-specific plan, but it provides no evidence that it could be used for other communicable disease besides COVID-19. [2] No other evidence was found on the website of the Ministry of Health. [3]


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 public evidence that a national public health emergency response plan which addresses planning for multiple communicable diseases with pandemic potential is in place in São Tomé & Príncipe, and therefore, it cannot have been updated within the last three years.

The WHO's Joint External Evaluation Report for São Tomé & Príncipe of May 2019 states on page 35 that the only contingency plan the country has developed is the one for Ebola in 2014. However, the actual Ebola plan could not be found online. There is no indication that the Ebola plan covers other or multiple communicable diseases.

The JEE also notes that São Tomé & Príncipe has a National Council for Preparation and Response to Catastrophes
The CONPREC has developed a contingency plan against catastrophes. The coordination of responses to catastrophes include orientation from the Ministry of Health, according to the JEE. The actual plan could not be found online and the date of its publication or update could not be determined. There is no evidence that CONPREC’s Contingency Plan includes a health emergency response plan or that it covers multiple communicable diseases nor that it has been updated in the last three years.

The JEE, also on page 47, states that the National Health Service of São Tomé & Príncipe has developed a contingency plan to respond to health emergencies. However, such document was not found online. [1] The Ministry of Health’s Contingency Plan for the COVID-19 Epidemic of 2020 provides no evidence that it could be used for other communicable disease besides COVID-19. [2] No other evidence was found on the website of the Ministry of Health. [3]


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 public evidence that a national public health emergency response plan which addresses planning for multiple communicable diseases with pandemic potential is in place in São Tomé & Príncipe, and therefore, it cannot include consideration for pediatric or other vulnerable populations.

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 states on page 35 that the only contingency plan the country has developed is the one for Ebola in 2014. However, the actual Ebola plan could not be found online. There is no indication that the Ebola plan covers other or multiple communicable diseases.

The JEE also notes that São Tomé & Príncipe has a National Council for Preparation and Response to Catastrophes (CONPREC). The CONPREC has developed a contingency plan against catastrophes. The coordination of responses to catastrophes include orientation from the Ministry of Health, according to the JEE. The actual plan could not be found online and if it includes considerations for pediatric or other vulnerable populations could not be determined. There is no evidence that CONPREC’s Contingency Plan includes a health emergency response plan or that it covers multiple communicable diseases.

The JEE, also on page 47, states that the National Health Service of São Tomé & Príncipe has developed a contingency plan to respond to health emergencies. However, such document was not found online. [1] The Ministry of Health’s Contingency Plan for the COVID-19 Epidemic of 2020 provides no evidence that it could be used for other communicable disease besides COVID-19. [2] No other evidence was found on the website of the Ministry of Health. [3]
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 publicly available evidence that São Tomé & Príncipe has a specific mechanism for engaging with the private sector to assist with outbreak emergency preparedness and response.

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 rarely mentions the private sector. The only relevant reference to private sector in the document states that there is no formal mechanism for communication and coordination between government, civil society and private sector during an emergency. [1]

The Ministry of Health’s Contingency Plan for the COVID-19 Epidemic of 2020 scantily mentions the private sector in the document. It mentions that during a crisis, the Ministry of Health should engage with civil society, NGO, religious organizations, and the private sector to combat the spread of the disease. No further details are provided on the matter. The document also mentions that there should be coordination with public and private sector health units to better detect cases of COVID-19. [2] No other evidence was found on the website of the Ministry of Health. [3]


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 São Tomé & Príncipe has a plan in place to implement non-pharmaceutical interventions (NPIs) during the COVID-19 pandemic. However, there is no public evidence that there is any document that establishes similar measures for other diseases or public health emergencies.

The Ministry of Health’s Contingency Plan for the COVID-19 Epidemic of 2020 mentions NPIs such as isolation and quarantine measures on suspected or confirmed cases of the disease. In its action plan section that starts on page 15 of the document, there are procedures to identify and classify cases where isolation or quarantine measures would be required. Action 3 in its action plan refers to management of cases, which includes measures of isolation and quarantine. [2] However, the NPI measures are limited to the COVID-19 plan and there is no indication that it can be used for other diseases.

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 does not mention any NPIs. It mentions quarantine for those who have already been infected, but not as a preventative measure for a population. [1] No other evidence was found on the website of the Ministry of Health. [3]


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 public evidence that São Tomé & Príncipe has activated a national emergency response plan for an infectious disease outbreak in the past year. However, there is no evidence that it has completed a national-level biological threat-focused exercise (either with WHO or separately) in the past year.

The Ministry of Health has developed and published a Contingency Plan for the COVID-19 Epidemic of 2020, and even though it provides no evidence that it could be used for other communicable diseases besides COVID-19, it was activated in the past year and did serve as a national emergency response plan. [1]

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe which was conducted in May 2019 prior to the covid-19 Pandemic states on page 35 that the only contingency plan the country had developed is the one for Ebola in 2014. However, the actual Ebola plan could not be found online. There is no indication that the Ebola plan covers other or multiple communicable diseases and that it serves as a national emergency response plan. [2]

There is no evidence that São Tomé & Príncipe completed a national-level biological threat-focused exercise in the past year. There are no records of such exercise in the WHO website. [3] No other evidence was found on the website of the Ministry of Health. [4]


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: 1

There is evidence that São Tomé & Príncipe in the past year has identified a list of gaps and best practices in response and developed a plan to improve response capabilities.

There is evidence that the country has conducted an after action review between 30 September 2019 and 4 October 2019; however, there is not a report published in the WHO After Action Review website. [1] No relevant publications were found in the WHO website, the WHO country page, or the WHO regional page. [2,3,4] No other evidence was found on the website of
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 São Tomé & Príncipe in the past year has undergone a national-level biological threat-focused exercise that has included private sector representatives. [1] No relevant publications were found on the World Health Organization (WHO) website, the WHO country page, or the WHO regional page. [2,3,4] No other evidence was found on the website of the Ministry of Health. [5]


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: 0

There is insufficient evidence that São Tomé & Príncipe has an emergency operations center. According to the WHO's Joint External Evaluation Report for São Tomé & Príncipe of May 2019, on page 47, the country has the National Council for Preparation and Response to Catastrophes (CONPREC), which includes the representation from the Ministry of Health. The JEE notes that it focuses on natural disasters but has capability to incorporate public health emergencies to its activities.
According to the JEE on page 13, CONPREC has developed a contingency plan for several accidents and disasters, and it also includes potential epidemics and other health threats; however, it also notes that those public health risks are not well developed and need to be revised to be more effective. [1] CONPREC's Multi-Sectorial Plan for Investments to Integrate Resilience to Climate Change and Disaster Risk in the Management of Coastal Zones in São Tomé & Príncipe exists and is available online. It was published in June 2017. Indeed epidemics and public health emergencies are mentioned only briefly in reference to disaster events of the past (page 33) and as two actions: to create a epidemiological database for potential diseases associated with climate change (page 101) and to correlate data on diseases of vector origin, in particular malaria, through GIS system, to predict the spacial risk of the problem (page 102). [2] An actual website or social media presence of CONPREC could not be found. There is no further information on the website of the Ministry of Health. [3]

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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 São Tomé & Príncipe has a fully developed public-health oriented emergency operations center. And, there is no evidence that it conducts/is required to conduct a drill on annual basis.

According to the WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019, on page 47, the country has the National Council for Preparation and Response to Catastrophes (CONPREC), which includes the representation from the Ministry of Health. The JEE notes that it focuses on natural disasters but has capability to incorporate public health emergencies to its activities. According to the JEE on page 13, CONPREC has developed a contingency plan for several accidents and disasters, and it also includes potential epidemics and other health threats; however, it also notes that those public health risks are not well developed and need to be revised to be more effective. [1]

CONPREC’s Multi-Sectorial Plan for Investments to Integrate Resilience to Climate Change and Disaster Risk in the Management of Coastal Zones in São Tomé & Príncipe exists and is available online. It was published in June 2017. Indeed epidemics and public health emergencies are mentioned only briefly in reference to disaster events of the past (page 33) and as two actions: to create a epidemiological database for potential diseases associated with climate change (page 101) and to correlate data on diseases of vector origin, in particular malaria, through GIS system, to predict the spacial risk of the problem (page 102). [2] An actual website or social media presence of CONPREC could not be found. There is no further information on the website of the Ministry of Health. [3]
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 insufficient evidence that São Tomé & Príncipe has an emergency operations center. According to the WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019, on page 47, the country has the National Council for Preparation and Response to Catastrophes (CONPREC), which includes the representation from the Ministry of Health. The JEE notes that it focuses on natural disasters but has capability to incorporate public health emergencies to its activities. According to the JEE on page 13, CONPREC has developed a contingency plan for several accidents and disasters, and it also includes potential epidemics and other health threats; however, it also notes that those public health risks are not well developed and need to be revised to be more effective. [1] CONPREC’s Multi-Sectorial Plan for Investments to Integrate Resilience to Climate Change and Disaster Risk in the Management of Coastal Zones in São Tomé & Príncipe exists and is available online. It was published in June 2017. Indeed epidemics and public health emergencies are mentioned only briefly in reference to disaster events of the past (page 33) and as two actions: to create a epidemiological database for potential diseases associated with climate change (page 101) and to correlate data on diseases of vector origin, in particular malaria, through the GIS system, to predict the spatial risk of the problem (page 102). [2] An actual website or social media presence of CONPREC could not be found. There is no further information on the website of the Ministry of Health. [3]

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 publicly available evidence that public health and national security authorities of São Tomé & Príncipe have carried out an exercise to respond to a potential deliberate biological event or that there are 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.

The WHO's Joint External Evaluation Report for São Tomé & Príncipe of May 2019 makes no mention of any exercise to respond to a potential deliberate biological attack nor does it mention any 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. [1] No other evidence was found on the website of the Ministry of Health. [2]


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: 0

There is no publicly available evidence that São Tomé & Príncipe has a risk communication plan that outlines how messages will reach populations and sectors with different communications needs. The WHO's Joint External Evaluation Report for São Tomé & Príncipe of May 2019 explicitly states on page 56 that there is no formal mechanism for official communication of
risks. On page 57, the WHO further recommends the country to create a national policy on risk communication. On page 58, one of the areas of improvement that the JEE notes is for the need to train communicators to better divulge information in local languages as well as reinforce the capabilities of technicians and journalists to use media to reach the population in case of emergencies. The JEE also notes that the country should also use social media to reach the younger population. [1] No other evidence was found on the website of the Ministry of Health. [2]


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: 0

There is no public evidence that São Tomé & Príncipe has 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.

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 explicitly states on page 56 that there is no formal mechanism for official communication of risks. On page 57, the WHO further recommends the country to create a national policy on risk communication.

Furthermore, the JEE states on page 35 that the only contingency plan the country has developed is the one for Ebola in 2014. However, the actual Ebola plan could not be found online. There is no indication that the Ebola plan covers other or multiple communicable diseases or that it includes a risk communication plan.

The JEE also notes that São Tomé & Príncipe has a National Council for Preparation and Response to Catastrophes (CONPREC). The CONPREC has developed a contingency plan against catastrophes. The coordination of responses to catastrophers include orientation from the Ministry of Health, according to the JEE. The actual plan could not be found online. There is no evidence that CONPREC’s Contingency Plan includes a health emergency response plan or that it covers multiple communicable diseases nor that it includes a risk communication plan.

The JEE, also on page 47, states that the National Health Service of São Tomé & Príncipe has developed a contingency plan to respond to health emergencies. However, such document was not found online. [1] No other evidence was found on the website of the Ministry of Health. [2]

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: 1

There is evidence that São Tomé & Príncipe’s risk communication plan designate a specific position within the government to serve as the primary spokesperson to the public during a public health emergency.

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 notes on page 57 that one of the country's strengths in the area is the existence of a designated government spokesperson to communicate with the public during an emergency. However, it does not note the existence of any plan, legislation, regulation or strategy document where such practice is explicitly stated. The JEE states that the country does not have a risk communication plan or section in another larger plan. [1] No other evidence was found on the website of the Ministry of Health. [2]


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

There is sufficient public evidence that the public health system has shared messages via online media platforms to inform the public about ongoing public health concerns. There is no evidence that it has posted to dispel rumors, misinformation or disinformation.

The Ministry of Health has a Facebook page. During the COVID-19 pandemic, it has published several posts on health concerns, data and evolution of the disease in the country, and health orientation on how to deal with the pandemic. There is no evidence that the Ministry of Health has used its Facebook page to dispel rumors, misinformation or disinformation. The Facebook page has posts that date back to 2015 on issues on health concern. [1]


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

There is no evidence that senior leaders have shared misinformation or disinformation on infectious diseases in the past two years. After a thorough search of news outlets for shared misinformation or disinformation on infectious diseases in the past two years by President Evaristo Carvalho (2016–present), Prime Minister Jorge Bom Jesus (2018–present) and Minister of Health Edgar Neves (2018–present), no evidence was found. [1,2,3]

3.6 ACCESS TO COMMUNICATIONS INFRASTRUCTURE

3.6.1 Internet users

3.6.1a
Percentage of households with Internet
Input number

Current Year Score: 29.93

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: 77.08

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
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, in the past year, São Tomé & Príncipe issued a restriction, without international or bilateral support, on the export or import of medical goods due to an infectious disease outbreak.

In the past year, the only infectious disease outbreak that has affected São Tomé & Príncipe was the COVID-19 pandemic. No evidence was found on the website of the Ministry of Health. [1] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [2] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [3] There is evidence that São Tomé & Príncipe has a Ministry of Foreign Affairs, Cooperation and Communities, but no official website was found, only its Facebook page. No relevant information or evidence was found. [4]


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, in the past year, São Tomé & Príncipe issued a restriction, without international or bilateral support, on the export or import of non-medical goods due to an infectious disease outbreak. In the past year, the only infectious disease outbreak that has affected São Tomé & Príncipe was the COVID-19 pandemic. No evidence was found on the website of the Ministry of Health. [1] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [2] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [3] There is evidence that São Tomé & Príncipe has a Ministry of Foreign Affairs, Cooperation and Communities, but no official website was found, only its Facebook page. No relevant information or evidence was found. [4]
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

There is evidence that, in the past year, São Tomé & Príncipe issued a restriction, without international or bilateral support, on travelers due to an infectious disease outbreak. In the past year, the only infectious disease outbreak that has affected São Tomé & Príncipe was the COVID-19 pandemic. São Tomé & Príncipe prohibited the entry of charter flights, ships crew, and passengers of cruise ships from entering its territory from 19 March 2020 to 1 July 2020. [1,2] There is not evidence of any support for the ban. In a post from 29 February 2020, the WHO recommended against imposing travel or trade restrictions to countries experiencing COVID-19 outbreaks. [3]

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: 5.31

2017

WHO; national sources

4.1.1b
Nurses and midwives per 100,000 people
Input number
Current Year Score: 192.42

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: 1

There is publicly available evidence that São Tomé & Príncipe 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. The Ministry of Health's National Policy on Human Resources published in October 2018 is a workforce strategy that was created less than five years ago where it identifies the strengths and weaknesses of the country’s healthcare professionals workforce. The plan notes that the country has 87 medical doctors per 100,000 inhabitants in 2017, below the global average of 146 doctors per 100,000 inhabitants. The more important weakness is that the doctors are not well distributed throughout the country. It also notes the country does not have good working conditions, insufficient medical goods and lack of incentives, which contribute to low motivation of healthcare workers (page 11). On page 21, the Plan states that the it will be updated every five years. The plan includes guidelines on how to develop and graduate more professionals in the health sector, which include a decentralization of health human resources, an alignment of the strategy
with universities and schools, and a coordinated strategy to elaborate long-term plans for health human resources. [1]


4.1.2 Facilities capacity

4.1.2a

Hospital beds per 100,000 people

Input number

Current Year Score: 290

2011

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 insufficient evidence that São Tomé & Príncipe has 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. The WHO's Joint External Evaluation Report for São Tomé & Príncipe of May 2019 asserts on page 50 that the country has infrastructure to impose quarantine and isolation at times of public health emergencies. The JEE does not detail the type of isolation unit the country has available. [1] There are reports that the country's main hospital, Hospital Aires de Menezes, has an isolation center in its facility. No detail on the type of isolation center was found. [2] During the COVID-19 pandemic, to increase its capacity to receive cases of the disease, the government built a temporary hospital with capacity for 50 patients. [2]


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 São Tomé & Príncipe has demonstrated capacity to expand isolation capacity in response to an infectious disease outbreak or that it has developed updated or tested a plan to expand isolation capacity in response to an infectious disease outbreak in the past two years.

During the COVID-19 pandemic, the government of São Tomé and Príncipe established temporary hospitals to prevent an overflow of patients into their current healthcare system. However, there are reports that the temporary hospitals lacked basic infrastructure and goods, besides having structural problems. There were reports that the temporary hospitals flooded whenever it rained and suffered from mosquitos infestations. No evidence was found that the temporary hospitals had any isolation capacity or measures in place. [1]

The Contingency Plan for the COVID-19 Pandemic of 2020 states in its action plan that the government would be guaranteeing isolation of patients in individual rooms as well as the establishment of an isolation center; however, no evidence of any of those measures were found. The Contingency Plan mentions actions that involve the instalment of isolated beds, but it does not provide an outline, targets or process on how those actions will be enacted. [2]


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: 0

There is insufficient evidence that São Tomé & Príncipe has a national procurement protocol in place which can be utilized by the Ministries of Health and Agriculture, Fisheries and Rural Development for the acquisition of laboratory and medical supplies for routine needs.

The 2009 Regulation on Bids and Public Procurement (RBPP) is the key legislation regulating the award of public contracts, according to Vieira de Almeida, a law firm. The actual legislation could not be found online. The legislation establishes
procurement protocols, rules and regulations for the government to issue public contracts on all types of services and goods from the private sector. Vieira de Almeida mentions that in some specific economic sectors, specific laws can be approved to safeguard the specific characteristics of those sectors, but it does not explicitly say if the acquisition of laboratory or medical needs by the above ministries feature among those specific sectors. Nevertheless, the legislation, according to the law firm, should cover all public contracts, which include the Ministry of Health and the Ministry of Agriculture, Fisheries and Rural Development. However, specific documentation of procurement for laboratory and medical goods for the Ministry of Health and the the Ministry of Agriculture, Fisheries and Rural Development could not be found. [1]

There is a National Medications Fund within the Ministry of Health but there is no evidence that a protocol or functioning procurement system is already in place. [2] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [3] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [4]


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: 0

There is insufficient evidence that São Tomé & Príncipe has a stockpile of medical supplies, including MCMs, medicines, vaccines, medical equipment, and PPE, for national use during a public health emergency.

The Ministry of Health has the National Medications Fund, which among other responsibilities, it aims to guarantee the stock of essential medication and hospital consumables. However, there is no evidence that it actually has stock of those goods in their inventory. [1] The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 states on page 52 that the National Medications Fund does not have significant reserves of medications for public health emergencies. There are no mentions of other medical supplies, such as PPE and equipment. [2]

The Ministry of Health’s National Plan of Health Development (PNDS) for 2017-2021 does not mention any stockpile of medical supplies or intention to stockpile medical supplies. [3] There is evidence that São Tomé & Príncipe has a Ministry of Defense and Internal Order, but no website or social media presence was found. [4]

Indeed, in an UN news article from 1 May 2020, São Tomé & Príncipe is one of the countries that have suffered from the lack of vaccines to immunize its population from measles and polio during the Vaccination Week, an initiative that occurs every
year and is sponsored by UNICEF. This indicates a lack of stockpile of some MCMs. [5]

The Contingency Plan for the COVID-19 Epidemic mentions on pages 16 and 20 the need to guarantee the stock and make available medical supplies, but it does not indicate that there is a stockpile of those goods. [6]


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 São Tomé & Príncipe has a stockpile of laboratory supplies for national use during a public health emergency.

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 does not mention any stockpile of laboratory supplies. [1]

The Ministry of Health’s National Plan of Health Development (PNDS) for 2017-2021 does not mention any stockpile of laboratory supplies or intention to stockpile laboratory supplies. [2] No evidence was found on the website of the Ministry of Health. [3] There is evidence that São Tomé & Príncipe has a Ministry of Defense and Internal Order, but no website or social media presence was found. [4]

The Contingency Plan for the COVID-19 Epidemic mentions on pages 16 and 20 the need to guarantee the stock and make available laboratory supplies, but it does indicate that there is a stockpile already of those goods. [5]
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 no evidence that São Tomé & Príncipe conducts or requires an annual review of national stockpile to ensure the supply is sufficient for a public health emergency.

The Ministry of Health has the National Medications Fund, which among other responsibilities, aims to guarantee the stock of essential medication and hospital consumables. However, there is no evidence that it actually has stock of those goods in their inventory nor that it conducts or requires an annual review of stockpile levels. [1] The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 states on page 52 that the National Medications Fund does not have significant reserves of medications for public health emergencies. There are no mentions of other medical supplies, such as PPE and equipment. The document also makes no mentions of any requirement to review the stockpile levels nor that it conducts any reviews. [2]

The Ministry of Health’s National Plan of Health Development (PNDS) for 2017-2021 does not mention any stockpile of medical supplies or intention to stockpile medical supplies. [3] There is evidence that São Tomé & Príncipe has a Ministry of Defense and Internal Order, but no website or social media presence was found. [4]

The Contingency Plan for the COVID-19 Epidemic mentions on pages 16 and 20 the need to guarantee the stock and make available medical supplies, but it does not indicate that there is a stockpile of those goods nor that the stockpiles is review or is required to be reviewed on an annual basis. [5]


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 São Tomé & Príncipe has a plan/agreement/mechanism to leverage domestic manufacturing capacity to produce or procure medical supplies, which includes MCMs, medicines, vaccines, equipment, and PPE, for national use during a public health emergency.

There is no evidence that São Tomé & Príncipe has domestic manufacturing capacity to produce medical supplies. In addition, no evidence was found of any plan or mechanism to procure medical supplies for a public health emergency. According to an interview given by a pharmacist at the Ministry of Health, all medications produced in São Tomé & Príncipe are those of traditional medicine (not conventional modern medicine). [1]

São Tomé & Príncipe has received donations of medical supplies from several countries, including China and the EU. [2,3] No evidence was found on the website of the Ministry of Health. [4] There is evidence that São Tomé & Príncipe has a Ministry of Defense and Internal Order, but no website or social media presence was found. [5]

The Contingency Plan for the COVID-19 Epidemic mentions as ones of its activities to acquire medical supplies and medications specific to combat COVID-19 on page 16; however, there is no mention whether it will be done through local production or through procurement. There are no mentions of production or procurement of medical supplies. [6]


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 São Tomé & Príncipe has a plan/agreement to leverage domestic manufacturing capacity to produce laboratory supplies for national use during a public health emergency or that it has a plan/mechanism to procure laboratory supplies for national use during a public health emergency.

There is no evidence that São Tomé & Príncipe has domestic manufacturing capacity to produce laboratory supplies. In addition, no evidence was found of any plan or mechanism to procure laboratory supplies for a public health emergency. São Tomé & Príncipe has received donations of laboratory supplies from Portugal. [1] No evidence was found on the website of the Ministry of Health. [2] There is evidence that São Tomé & Príncipe has a Ministry of Defense and Internal Order, but no website or social media presence was found. [3]

The Contingency Plan for the COVID-19 Epidemic mentions as ones of its activities to investigate the needs and acquire laboratory supplies on page 23; however, there is no mention whether it will be done through local production or through procurement. There are no mentions of production or procurement of laboratory supplies. [4]

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 insufficient evidence that São Tomé & Príncipe 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 Report for São Tomé & Príncipe of May 2019 states on page 52 that the country has means to receive, store and distribute MCMs during a public health emergency through the National Medications Fund, Hospital Ayres de Menezes and other health units.

There is no mention of a plan, program or guidelines for dispensing MCMs for national use during a public health emergency.


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 publicly available evidence that São Tomé & Príncipe has 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 Report for São Tomé & Príncipe of May 2019 has a section dedication to the mobilization of health personnel on pages 52-54.

There no mentions of any such plan in place in the Ministry of Health’s National Plan of Health Development (PNDS) for 2017-2021. It mentions that the country can request and receive health personnel through its partners, namely the WHO, UNICEF, UN Population Fund (UNFPA), and others. No plan on the matter is mentioned. [2]

There is, however, cases where São Tomé & Príncipe has received health personnel from the EU in May 2020 to combat the COVID-19 pandemic. [3] No evidence was found on the website of the Ministry of Health. [4] There is evidence that São Tomé & Príncipe has a Ministry of Defense and Internal Order, but no website or social media presence was found. [5]

The Contingency Plan for the COVID-19 Epidemic, on page 18, includes measures to receive health personnel from other countries to help in the response to the pandemic. It mentions that it will request international technical assistance to help train four technicians on techniques of molecular biology (real-time PCR) to diagnose COVID-19. On page 19, it mentions that it will request help from international experts on training local communication professionals on risk communication. There is no indication that the COVID-19 plan will be applicable to other public health emergencies. No further detail, beyond what has been reported was available in the plan. [6]


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: 0

2020

World Policy Analysis Center

4.4.1b
Access to skilled birth attendants (% of population)
Input number

Current Year Score: 92.5

2014


4.4.1c
Out-of-pocket health expenditures per capita, purchasing power parity (PPP; current international $)
Input number

Current Year Score: 28.83

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
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 no public evidence that São Tomé & Príncipe has issued legislation, a policy or a public statement committing to provide prioritized health care services to healthcare workers who become sick as a result of responding to a public health emergency.

There are no mentions of such prioritization in the WHO's Joint External Evaluation Report for São Tomé & Príncipe of May 2019 or in the Ministry of Health's National Plan of Health Development (PNDS) for 2017-2021. [1,2] The Contingency Plan for the COVID-19 Epidemic mentions priorization of healthcare services only for those patients who are fatal risk. [3] No evidence was found on the website of the Ministry of Health. [4]


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 São Tomé & Príncipe has a system in place for public health officials and healthcare workers to communicate during a public health emergency.

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 mentions on page 57 that there is a formal mechanism to coordinate communication between internal and external healthcare workers and government entities during a national response to a public health emergency. However, there is no detail on what this formal mechanism is. [1]

No mention of such formal mechanism was found in the Ministry of Health’s National Plan of Health Development (PNDS) for 2017-2021. [2] The Contingency Plan for the COVID-19 Epidemic mentions on page 16 as one of the initial steps for preparation the institutionalization of communication between the Ministry of Health and other health institutions to obtain precise information on the evolution of the pandemic. No further detail was found in the document. [3] No evidence was found on the website of the Ministry of Health. [4]


**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 insufficient evidence that the system for public health officials and healthcare workers to communicate during an emergency encompass healthcare workers in both the public and private sector.

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 mentions on page 57 that there is a formal mechanism to coordinate communication between internal and external healthcare workers and government entities during a national response to a public health emergency. However, there is no detail on what this formal mechanism and there is no differentiation between public and private sector workers. [1]

No mention of such formal mechanism was found in the Ministry of Health’s National Plan of Health Development (PNDS) for 2017-2021. [2] The Contingency Plan for the COVID-19 Epidemic mentions on page 16 as one of the initial steps for preparation the institutionalization of communication between the Ministry of Health and other health institutions to obtain precise information on the evolution of the pandemic. No further detail was found in the document and the reference does not differentiate between public and private sector healthcare workers. [3] No evidence was found on the website of the Ministry of Health. [4]
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: 1

There is sufficient evidence that the national public health system of São Tomé & Príncipe is monitoring for and tracking the number of healthcare associated infections that take place in healthcare facilities.

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 explicitly states on page 17 that the country has an action plan to prevent and control HCAI. It also mentions that there is a proposal to test for the most common germs associated with HCAI in the Hospital Ayres de Menezes, the main hospital in the country. The document also explicitly states that there is an active system of surveillance of HCAI at the Hospital Ayres de Menezes. However, actual data on HCAI and other documents supporting the findings of the JEE could not be found anywhere online. [1] The Ministry of Health’s National Plan of Health Development (PNDS) for 2017-2021 does not mention HCAI. [2] No further evidence was found on the website of the Ministry of Health. [3]


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: 0

There is no public evidence that there is a national requirement for ethical review before beginning a clinical trial in São Tomé & Príncipe.

The Ministry of Health has developed a Director Plan for the Pharmaceutical Sector for 2016-2020. On page 8, the Director Plan explicitly states that the country does not have norms or procedures for clinical trials, which indicates that there is no national requirement for ethical review. [1]

There are no mentions of clinical trials or ethical reviews in the WHO's Joint External Evaluation Report for São Tomé & Príncipe of May 2019 or the Ministry of Health's National Plan of Health Development (PNDS) for 2017-2021. [2,3]

On the other hand, the Ministry of Health has developed a National Pharmaceutical for 2019-2029, which on page 18 states that it is urgent the establishment of a Directorship of Pharmacy and Medications (DFM), which, among other things, would be responsible for establishing rules and procedures for clinical trials and approving new medications. While it is in the plan, there is no evidence that the DFM has been created. [4] No further evidence was found on the website of the Ministry of Health. [5]


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
There is no public evidence of an expedited process for approving clinical trials for unregistered medical countermeasures to treat ongoing pandemics in São Tomé & Príncipe.

On page 8, the Director Plan explicitly states that the country does not have norms or procedures for clinical trials, which indicates that there is no expedited process for approving clinical trials to treat ongoing epidemics. [1]

There are no mentions of clinical trials in the WHO’s Joint External Evaluation Report for São Tomé & Principe of May 2019 or the Ministry of Health’s National Plan of Health Development (PNDS) for 2017-2021. [2,3]

On the other hand, the Ministry of Health has developed a National Pharmaceutical for 2019-2029, which on page 18 states that it is urgent the establishment of a Directorship of Pharmacy and Medications (DFM), which, among other things, would be responsible for establishing rules and procedures for clinical trials and approving new medications. While it is in the plan, there is no evidence that the DFM has been created. [4] No further evidence was found on the website of the Ministry of Health. [5]


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: 0

There is no public evidence of the existence of a government agency responsible for approving new medical countermeasures for humans in São Tomé & Príncipe.

On page 8, the Director Plan explicitly states that the country does not have norms or procedures for clinical trials, registration of medications, control of quality, control of imports, inspection, etc., which indicates that there is no government agency responsible for approving new medical countermeasures for humans. [1]

There are no mentions of such organization in the WHO’s Joint External Evaluation Report for São Tomé & Principe of May 2019 or the Ministry of Health’s National Plan of Health Development (PNDS) for 2017-2021. [2,3]
On the other hand, the Ministry of Health has developed a National Pharmaceutical for 2019-2029, which on page 18 states that it is urgent the establishment of a Directorship of Pharmacy and Medications (DFM), which, among other things, would be responsible for establishing rules and procedures for clinical trials and approving new medications and MCMs. While it is in the plan, there is no evidence that the DFM has been created. [4] No further evidence was found on the website of the Ministry of Health. [5]


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 public evidence of the existence of an expedited process for approving medical countermeasures (MCMs) for human use during public health emergencies.

On page 8, the Director Plan explicitly states that the country does not have norms or procedures for clinical trials, registration of medications, control of quality, control of imports, inspection, etc., which indicates that there is no expedited process for MCMs for human use during public health emergencies. [1]

There are no mentions of such mechanism in the WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 or the Ministry of Health’s National Plan of Health Development (PNDS) for 2017-2021. [2,3]

On the other hand, the Ministry of Health has developed a National Pharmaceutical for 2019-2029, which on page 18 states that it is urgent the establishment of a Directorship of Pharmacy and Medications (DFM), which, among other things, would be responsible for establishing rules and procedures for clinical trials and approving new medications and MCMs. While it is in the plan, there is no evidence that the DFM has been created or that any such procedures have been developed. [4] No further evidence was found on the website of the Ministry of Health. [5]


COUNTRY SCORE JUSTIFICATIONS AND REFERENCES www.ghsindex.org
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 of any risk reduction strategy in São Tomé & Príncipe that would integrate pandemics or a standalone national disaster risk reduction strategy for pandemics. There is no relevant information on the website of the Ministry of Health. [1] There is no evidence of an emergency management agency in the country. São Tomé & Príncipe has a national risk reduction strategy, but it is limited to natural disasters. [2]
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 neighbouring 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: 0

There is no publicly available evidence that São Tomé & Príncipe has any cross-border agreements, protocols or MOUs with neighbouring countries, or as part of a regional group, with regards to public health emergencies.

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 explicitly states on page 6 that a priority action is for the country to establish protocols or procedures with neighboring countries to reinforce multisectorial collaboration. On page 7, it explicitly states that another priority action should be to formalize regional agreements to send and receive medical countermeasures and personnel for support during a public health emergency. [1]

There is no other relevant information on the website of the Ministry of Health. [2] No other outside source or documentation was found. (Note: São Tomé & Príncipe is an archipelago which is over 100 miles away distant from the West African coast).


5.2.1b Does the country have cross-border agreements, protocols, or MOUs with neighbouring 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 public evidence that São Tomé & Príncipe has any cross-border agreements, protocols or MOUs with neighbouring countries, or as part of a regional group, with regards to animal health emergencies.

The WHO’s Joint External Evaluation Report for São Tomé & Príncipe of May 2019 explicitly states on page 6 that a priority
action is for the country to establish protocols or procedures with neighboring countries to reinforce multisectorial collaboration. There is no differentiation in regards to animal and human health. On page 7, it explicitly states that another priority action should be to formalize regional agreements to send and receive medical countermeasures and personnel for support during a public health emergency. There is no differentiation in regards to animal and human health. [1] There is no other relevant information on the website of the Ministry of Health. [2] No other outside source or documentation was found. (Note: São Tomé & Príncipe is an archipelago which is over 100 miles away distant from the West African coast).


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


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

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

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
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

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 publicly available evidence that São Tomé & Príncipe has allocated national funds to improve capacity to address epidemic threats within the past three years. There are no allocated national funds to address epidemic threats in the State budget of 2019 or 2020. [1,2] The 2018 State budget was not found.


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 is a special emergency public financing mechanism and funds which the country can access in the face of a public health emergency. As an IDA eligible borrowing country, São Tomé & Príncipe is eligible for the World Bank pandemic emergency financing facility [1,2]. Nevertheless, the website of the Ministry of Health does not share information on the issue. [3]


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

There is no publicly available evidence that senior leaders of São Tomé & Príncipe have made a public commitment to support other countries to improve capacity to address epidemic threats by providing financing or support in the past three years or to improve its own domestic capacity to address epidemic threats by expanding financing or requesting support to improve capacity in the past three years.

There are no relevant statements in the website of the Ministry of Health. [1] There is evidence that São Tomé & Príncipe has a Ministry of Foreign Affairs, Cooperation and Communities, but no official website was found, only its Facebook page. No relevant information or evidence was found. [2] The official government portal is currently under construction. [3] There is no evidence in the international news media, or from United Nations and WHO press releases that senior leaders have made a request for such funding in the last three years.


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 São Tomé & Príncipe has requested financing or technical support from donors to improve its own domestic capacity to address epidemic threats in the last three years. There is no evidence that São Tomé & Príncipe has provided other countries with financing or technical support to improve capacity to address epidemic threats.

According to GHSA Funding Tracker, São Tomé & Príncipe was committed to receive US$18.55m in 2017-2020, of which US$18.76m has been disbursed. The GHSA Funding Tracker does not divide the recipient target program by year, but in 2014-2020, US$32.67m was disbursed to real-time surveillance, US$13.31m to reporting, US$13.25m to immunization and US$11.88m to the national laboratory system. Other programs that also received funding from donors include the emergency response operations, workforce development, national legislation, and antimicrobial resistance. São Tomé & Príncipe, according to the GHSA Funding Tracker, has no record of providing funds to other countries. [1]

No relevant press releases or policy documents were found on the websites of the Ministry of Health. [2] There is evidence that São Tomé & Príncipe has a Ministry of Foreign Affairs, Cooperation and Communities, but no official website was found, only its Facebook page. No relevant information or evidence was found. [3] No relevant public statement was identified in the local media or from the WHO. Meanwhile, there has been no evidence that São Tomé & Príncipe has supported other countries to improve capacity to address epidemic threats in the past three years.


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: 0

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 of a publicly available plan or policy in São Tomé & Príncipe for sharing genetic data, epidemiological data, clinical specimens, and/or isolated specimens (biological materials) with international organisations and/or other countries that goes beyond influenza.

There is no relevant information on the websites of the Ministry of Health. [1] The official website of the Ministry of Agriculture, Fisheries and Rural Development was not online at the time of research. [2] The Ministry of Agriculture, Fisheries and Rural Development has a Facebook page, but no relevant information or evidence was found. [3] There is no mention of such a plan in the Country Cooperation Strategy, a publication of the Pan American Health Organisation (PAHO) and the World Health Organisation (WHO) Regional Office for the Americas. [4]


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 São Tomé & Príncipe has not shared samples in accordance with the Pandemic Influenza Preparedness (PIP) framework in the past year. There has not been any reports of the country not sharing samples, according to WHO and international media sources. [1,2]

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 has been no public evidence that the São Tomé & Príncipe has not shared pandemic pathogen samples during an outbreak in the past two years. The World Health Organisation Disease Outbreak News site reports no recent outbreaks of reportable diseases there (the São Tomé & Príncipe country page is blank). [1] There have been no reports in international media of pandemic pathogen outbreaks in São Tomé & Príncipe in the last two years.


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: 1

2020
6.1.1c
Excessive bureaucracy/red tape (Economist Intelligence score; 0-4, where 4=best)
Input number
Current Year Score: 0
2020

6.1.1d
Vested interests/cronyism (Economist Intelligence score; 0-4, where 4=best)
Input number
Current Year Score: 1
2020

6.1.1e
Country score on Corruption Perception Index (0-100, where 100=best)
Input number
Current Year Score: 47
2020

6.1.1f
Accountability of public officials (Economist Intelligence score; 0-4, where 4=best)
Input number
Current Year Score: 1
2020

6.1.1g
Human rights risk (Economist Intelligence score; 0-4, where 4=best)
Input number
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: 1

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: 1

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
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: 3

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: 92.82

2018

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: 0.45

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: 13.1

2017
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: 2

The share of employment in the informal sector is 75.74% in 2015. Based on the chart on page 17 of the Project for National Labor Policy of São Tomé & Príncipe, the figure was obtained by summing workers without a contract (trabalhador por conta de outrem sem contrato), autonomous workers (trabalhador por conta própria), family worker with no wage (trabalhador familiar não remunerado), and self-subsistence workers (trabalhador na produção para o próprio consumo no alojamento). [1] No other sources had more recent data on São Tomé & Príncipe, including the ILO and the World Bank.


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: 0.56

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: 1

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: 2

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: 0

2021
Economist Intelligence

6.4 ENVIRONMENTAL RISKS

6.4.1 Urbanization

6.4.1a
Urban population (% of total population)
Input number

Current Year Score: 73.6

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: -5.22

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: 2

2021
6.5 PUBLIC HEALTH VULNERABILITIES

6.5.1 Access to quality healthcare

6.5.1a
Total life expectancy (years)
Input number

Current Year Score: 70.17

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: 613.2

2019

WHO

6.5.1c
Population ages 65 and above (% of total population)
Input number

Current Year Score: 2.96

2019

World Bank

6.5.1d
Prevalence of current tobacco use (% of adults)
Input number

Current Year Score: 5.4

2018

World Bank
6.5.1e
Prevalence of obesity among adults
Input number
Current Year Score: 12.4
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: 84.29
2017
UNICEF; Economist Impact

6.5.2b
Percentage of homes with access to at least basic sanitation facilities
Input number
Current Year Score: 42.97
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: 94.04
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