Global Governmental Response to COVID-19 in accordance to WHO guidelines

Actions taken by Suriname to prevent the spread of COVID-19 as of March 29, 2021.

Omar S. Abdellatif, Ali Behbehani
The UN Compliance Research Group is a global organization which specializes in monitoring the work of the United Nations (UN). Through our professional team of academics, scholars, researchers and students we aim to serve as the world's leading independent source of information on members' compliance to UN resolutions and guidelines. Our scope of activity is broad, including assessing the compliance of member states to UN resolutions and plan of actions, adherence to judgments of the International Court of Justice (ICJ), World Health Organization (WHO) guidelines and commitments made at UN pledging conferences. We’re proud to present the international community and global governments with our native research findings on states’ annual compliance with the commitments of the UN and its affiliated agencies. Our goal as world citizens is to foster a global change towards a sustainable future; one which starts with ensuring that the words of delegates are transformed into action and that UN initiatives don’t remain ink on paper. Hence, we offer policy analysis and provide advice on fostering accountability and transparency in UN governance as well as tracing the connection between the UN policy-makers and Non-governmental organizations (NGOs). Yet, we aim to adopt a neutral path and do not engage in advocacy for issues or actions taken by the UN or member states. Acting as such, for the sake of transparency. The UN Compliance Research Group dedicates all its effort to inform the public and scholars about the issues and agenda of the UN and its affiliated agencies.
Purpose

The International Health Regulations (2005) are legally binding on 196 States Parties, including all WHO Member States. The IHR aims to keep the world informed about public health risks, through committing all signatories to cooperate together in combating any future “illness or medical condition, irrespective of origin or source, that presents or could present significant harm to humans.” Under IHR, countries agreed to strengthen their public health capacities and notify the WHO of any such illness in their populations. The WHO would be the centralized body for all countries facing a health threat, with the power to declare a “public health emergency of international concern,” issue recommendations, and work with countries to tackle a crisis.

Although, with the sudden and rapid spread of COVID-19 in the world, many countries varied in implementing the WHO guidelines and health recommendations. While some countries followed the WHO guidelines, others imposed travel restrictions against the WHO’s recommendations. Some refused to share their data with the organization. Others banned the export of medical equipment, even in the face of global shortages. The UN Compliance Research group will focus during the current cycle on analyzing the compliance of the WHO member states to the organization’s guidelines during the COVID-19 pandemic.
### School/educational institutions:
- Decision makers should consider the following if they decide to open or close schools: Current understanding about COVID-19 transmission and severity in children, Local situation and epidemiology of COVID-19 where the school(s) are located, School setting and ability to maintain COVID-19 prevention and control measures.
- Recommended to promote: Hygiene and environmental cleaning to limit exposure, Screening and management of sick students, teachers and other school staff, Communication with parents and students, Physical distancing at school, Tele-schooling and distance learning.

### Workplaces and institutions:
- Partial closure of workplaces as of early March.
- Hand hygiene: Regular and thorough handwashing, Hand hygiene stations.
- Respiratory hygiene: Promote respiratory etiquette, Develop a policy on wearing a mask or a face covering.
- Physical distancing: less people, implementing shifts.
- Reduce and manage work-related travels.
- Regular environmental cleaning and disinfection.
- Risk communication, training, and education: Provide posters, videos, and electronic message boards.
- Management of people with COVID-19 or their contacts: introduce thermal screening.
- Take more measures when it comes to jobs at medium and high risk.

### Public events:
- Restriction to host gatherings or events that exceed a large number of individuals. ex) sport games, religious functions, restaurants, etc.
- Planning phase: Liaison with all relevant stakeholders, Development of a preparedness and response plan, Assessment of capacities and resources.
- Operational phase: Modifications of the event, Risk communication, Surveillance of participants, aimed at detecting and managing individuals developing symptoms during the event.
- Post-event phase: Liaison between event organizers and health authorities.

### Public Transport:
- Reduce crowding, limit access to, or close public spaces, restaurants, sporting events, 24 sports clubs, entertainment venues, places of worship, 25 or venues with limited ventilation.
- Encourage physical distancing in public places and transportation.
- Reduce mixing between individuals and households.
- Communicate to recommend wearing masks in public.
<table>
<thead>
<tr>
<th>WHO Guidelines and Recommendations</th>
</tr>
</thead>
</table>

### Public Information Campaign:
- Communicate risk clearly with information on how to protect oneself and others.
- Simplify messages, encourage sharing of information.
- Engage with communities in decision-making and to strengthen engagement for public health measures.
- Identify local networks and engage communities, businesses, religious leaders, and local influencers.

### Domestic/International Travel:
- Reduction in Travel to prevent the spread of COVID-19.
- International travel should not occur unless in an emergency.
- Recommended to adhere to safety measures while travelling.
- Establish effective contingency plans and arrangements for responding a Public Health Emergency.

### Testing Framework:
- Set up testing centers in large venues or in check points.
- Require travellers to self-quarantine after being tested.
- Molecular (e.g. PCR) testing of respiratory tract samples is the recommended method for the identification and laboratory confirmation of COVID-19 cases.
- To inform WHO policy on the use of immunodiagnostic rapid tests for COVID-19.

### Contact Tracing:
- Set up relational databases linking lists of contacts to line lists of cases.
- Allow for tailored case investigation forms, contact listing forms, and contact follow-up forms to be set up.
- Used for self-checking and self-reporting of signs and symptoms by people through mobile phone apps or SMS technology.

### Lockdown/Curfew:
- Implementation of curfew hours.
- Require citizens to stay in home unless of an emergency.
- Monitor locations to abide by the curfew hours.
This report draws on the methodology developed by the G8 Research Group, which has been monitoring G7/8 compliance since 1996 (the International Organisations Research Institute at the Higher School of Economics (IORI HSE) joined this multi-year project in 2005, and Bond University participated in 2014). The use of this methodology builds cross-institutional and cross-member consistency and also allows compatibility with compliance assessments of other institutions. The methodology uses a scale from −1 to +1, where +1 indicates full compliance with the stated commitment, −1 indicates a failure to comply or action taken that is directly opposite to the stated instruments or goal of the commitment, and 0 indicates partial compliance or work in progress, such as initiatives that have been launched but are not yet near completion and whose full results can therefore not be assessed. Each member assessed receives a score of −1, 0 or +1 for each commitment. For convenience, the scores in the tables have been converted to percentages, where −1 equals 0 percent and +1 equals 100 percent.
## Scoring Guidelines

<table>
<thead>
<tr>
<th>Score</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>-1</td>
<td>State does not comply with the International Health Regulations (IHR 2005), nor does it comply with any of the World Health Organization's guidelines and recommendations to curb the spread of the Coronavirus.</td>
</tr>
<tr>
<td>0</td>
<td>State complies with the IHR and partially complies with the WHO recommendations on combating the Coronavirus, through implementing policies and actions which adhere to at least two commitments of the WHO guidelines on curbing the pandemic.</td>
</tr>
<tr>
<td>+1</td>
<td>State fully complies with the IHR and the WHO guidelines on combating the Coronavirus, through implementing policies and actions which adhere to all nine areas of the WHO guidelines on curbing the pandemic.</td>
</tr>
</tbody>
</table>
Assessment

<table>
<thead>
<tr>
<th>Country</th>
<th>No Compliance</th>
<th>Partial Compliance</th>
<th>Full Compliance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suriname</td>
<td></td>
<td>0</td>
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</table>

* Suriname complied with the International Health Regulations (IHR) but partially complied with the World Health Organization’s guidelines and recommendations on curbing the Coronavirus (COVID-19), through implementing complying policies and actions only in some commitment features. Thus, Suriname receives a compliance score of 0.
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Suriname

On 29 March 2020, the government of Suriname announced a nationwide curfew that will be in effect as of today until 12 April. The timings of the curfew are from 20:00-06:00 daily. All non-essential businesses and entertainment venues are ordered to shut.

As of 12 April 2020, the government of Suriname announced that the restrictive measures in place along with the lockdown will be extended until 26 April.

As of 26 April 2020, the restrictive lockdown measures and the curfew have been lifted. However, individuals are recommended to remain at home and wear masks at all times.

As of 4 June 2020, Suriname has announced the implementation of a new nationwide lockdown which will last until 12 June. Starting from 18:00 on 4 June until 06:00 on 12 June. Residents are heavily recommended to stay at home and to only leave for essential purposes. Essential locations like grocery stores, pharmacies and bakeries will be open from 8am-5pm.

As of 12 June 2020, authorities have extended curfew measures until 13 August.

As of 23 August 2020, the government has extended curfew measures until 6 September.

On 4 September 2020, Suriname has announced a nationwide lockdown from 8pm until 5am on 7 September. No movement is allowed excluding movement of essential workers.

As of 7 September 2020, the government has announced that the nationwide lockdown will be extended until 11 October.

As of 11 October 2020, Suriname has extended curfew and movement restrictions until 25 October.

As of 25 October 2020, authorities have extended curfew and lockdown measures until 10 November.

On 10 November 2020, Suriname has announced that lockdown measures and curfew restrictions will be extended until 22 November.

As of 22 November 2020, the curfew has been extended to 7 December.

As of 7 December 2020, curfew restrictions remain in place. However, the new curfew time is from 11pm-5am.

As of 16 December 2020, the curfew remains in affect with a new time change of 7pm-5am.

As of 24 January 2021, authorities have extended COVID-19 related restrictions to until 6 February.

As of 11 February 2021, the new curfew hours are from 21:00-05:00. On the weekend the curfew hours are from 17:00-05:00. Only essential workers are exempt from the curfew and only one family member may enter stores. Non-essential businesses like casinos, nightclubs and restaurants may open. This is said to last until 23 February.

As of 24 February 2021, the government announced that weekday curfew hours will be from 10pm-5am and weekend curfew hours will be from 8pm-5am. This is said to last until 9 March.

As of 12 March 2021, Suriname announced that curfew hours during the week will now be from 11pm-5am and during the weekends from 9pm-5am. The same restrictions still remain in place and are said to last until 25 March.
### Suriname

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<table>
<thead>
<tr>
<th>Educational Institutions</th>
<th>Domestic/International Travel</th>
<th>Workplace and Institutions</th>
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<tbody>
<tr>
<td>As of 6 February 2020, the government of Suriname announced that all passengers arriving from China are required to quarantine for at least 14 days. All non-residents who have been in China for at least 14-days since the start of the pandemic are denied entry into Suriname.</td>
<td>As of 16 March 2020, the government announced the closure of all educational institutions.</td>
<td>As of 25 March 2020, Suriname announced the closure of workplaces and advised people to work from home.</td>
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<tr>
<td>As of 13 March 2020, President Adhin announced that all ports of entry and airports will be closed until further notice.</td>
<td>As of early May 2020, the government has started to adopt forms of online learning a gradual reopening of schools begun.</td>
<td>On 4 September 2020, the government announced the reopening of some workplaces. Workplaces are not allowed to have more than 50 workers present at the same time.</td>
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<td>As of 29 March 2020, the government of Suriname has officially banned international and domestic flights until further notice. This is said to last until 12 April.</td>
<td>On 8 June 2020, the government has resorted back to closing all schools.</td>
<td>As of early November 2020, Suriname shutdown several government workplaces due to high COVID-19 cases.</td>
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<td>On 10 April 2020, the government has extended the ban on travel until 26 April.</td>
<td>As of 21 June 2020, the government has resumed in-person teaching and reopened schools, universities and all educational institutions.</td>
<td>As of 11 February 2021, Suriname announced that government offices may begin to reopen.</td>
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<td>As of 26 April 2020, the government has continued to maintain the ban on international flights until 12 June. Ferry services to Guyana have also been suspended.</td>
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<td>As of 12 June 2020, authorities have extended the travel ban until 13 August.</td>
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<td>As of 23 August 2020, the government has officially banned all forms of international travel until further notice.</td>
<td>As of 30 September 2020, the government has modified travel restrictions and has now resumed international flights. Travellers from the Netherlands and Dutch-speaking Caribbean countries are allowed to enter Suriname. Travellers must provide a valid negative PCR test certificate and will be required to quarantine for 10-days. Domestic travel flights are also permitted to resume under strict guidelines.</td>
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<td>As of 22 December 2020, all commercial flights have been suspended and only work visas will be permitted.</td>
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<td>As of 25 February 2021, the government of Suriname announced the closure of land and sea borders. This suspension will be lifted until further notice.</td>
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### Public Transportation

- **As of 16 March 2020**, the government of Suriname announced that public transport will operate at a reduced capacity to limit the spread of COVID-19.
- **On 4 June 2020**, the government announced that taxis are only required to carry a maximum of two people onboard.
- **As of 5 February 2021**, the government of Suriname announced that buses and taxis can operate with almost maximum capacity but passengers and drivers must wear face masks.

### Public Events

- **On 29 March 2020**, the government announced that there is a ban on public gatherings of more than 10 people. Nightclubs and bars are only allowed to provide take-out services and tour buses heading to local attractions have been suspended. This is said to last until 12 April.
- **As of 10 April 2020**, the ban on public gathering facilities and public events has been extended until 26 April.
- **As of 26 April 2020**, the government announced that public gatherings are now allowed, however face masks are required.
- **On 4 June 2020**, the government announced that gatherings of more than 5 people are prohibited.
- **As of 4 September 2020**, Suriname announced that no more than 50 people are allowed to be present in religious and funeral events.
- **As of 30 September 2020**, public gatherings are now allowed to commence with a maximum limit of 10 people.
- **As of 7 December 2020**, gatherings are now limited to 30 people max. Religious gatherings are permitted however the rule is that per 5 square meters there should be one person. Restaurants and bars are only allowed to serve outside dining or takeout. Outdoor sports and recreational centers are now opened. However, safety measures still remain.
- **As of 16 December 2020**, public gatherings are now reduced to a maximum of 10 people.
- **As of 27 January 2021**, public gatherings are now limited to 5 people.
- **As of 21 February 2021**, the government announced that public gatherings are now limited to 10 people.

### Public Info Campaign

- **As of 7 April 2020**, Suriname has launched critical information and regulations in order to avoid the COVID-19 virus, which include wearing masks, standing 6-feet apart, and the increase in use of hygiene.
- **As of 27 January 2021**, the government of Suriname has created a hotline for individuals to call if they have any COVID-19 cases.
- **As of 23 February 2021**, Suriname has continued to publish information regarding efficient and effective ways to avoid catching COVID-19. This is located on the website for the Ministry of Health.

### Testing Framework

- **As of 16 March 2020**, Suriname announced the beginning of COVID-19 testing where individuals who report to have symptoms will get tested.
- **As of 12 May 2020**, the government of Suriname has began increasing the testing capacity to 200 people in a day.
- **As of 22 June 2020**, Suriname has adopted drive-through and walk-by testing.
- **On 9 March 2021**, the government of Suriname announced that testing on arrival is required for all individuals.
- **As of 28 March 2021**, Suriname has conducted a total of 75,318 tests per 1 million people.
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### Suriname

<table>
<thead>
<tr>
<th>Contact Tracing</th>
<th>Vaccine</th>
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<tbody>
<tr>
<td>❖ <strong>As of 4 April 2020</strong>, the government of Suriname has announced that with the help of the BOG, they have set up a system to collect and store data regarding COVID-19 cases which will analyze and generate reports on cases. Through this the BOG and the government of Suriname can track down and trace back cases as to where they came from and who might have COVID-19 at that moment in time. This system also provides a follow-up check-up for individuals who have caught COVID-19 and are seeking treatment.</td>
<td>❖ <strong>As of 11 February 2021</strong>, the government of Suriname has been given the AstraZeneca-Oxford vaccine from Barbados with a batch of 1,000 doses. This was distributed to the health workers.</td>
</tr>
<tr>
<td>❖ <strong>As of 6 September 2020</strong>, in collaboration with the Canadian government, the government of Suriname has increased the efficiency of surveillance systems and the capacity for case investigation in regards to contact tracing.</td>
<td>❖ <strong>As of 23 February 2021</strong>, the government of Suriname announced that they have invested $300,000 into the COVID-19 vaccine fund.</td>
</tr>
<tr>
<td>❖ <strong>As of 25 January 2021</strong>, contact tracing has not stopped in Suriname with individuals who have been in direct contact with individuals who turn out to have COVID-19 are immediately being monitored and surveillance in order to prevent the spread of the virus.</td>
<td>❖ <strong>As of 28 February 2021</strong>, the government of Suriname announced that India has sent over 50,000 doses of the AstraZeneca-Oxford vaccine. This was distributed and is continued to be distributed to the health workers, the elderly and the rest of the population, respectively. The national vaccination campaign officially kicked off.</td>
</tr>
</tbody>
</table>
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Sources


