



## **Epidemiological report of SARS-CoV-2 on the Dutch Caribbean CAS- and BES-islands:**

**April 2022 (week 13-17)**

Produced by the National Institute for Public Health and the Environment of the Netherlands - RIVM  
*4 May 2022, 19:00 pm AST*

### **Summary of SARS-CoV-2 epidemiological surveillance on the CAS-BES islands**

The number of SARS-CoV-2 positive test results on the CAS-BES islands was higher in April than in March 2022, but to a much smaller extent than the increase seen due to the omicron wave in January 2022. 4,058 positive test results were reported by the CAS-BES islands in April, as compared to 3,262 in March 2022. There is currently a downward trend visible in the weekly number of new SARS-CoV-2 positive test results on all islands. COVID-19-related hospital occupancy remained low on all islands during April. The VOC “Omikron L” (subvariant BA.2) caused most of the infections on the ABC islands and St. Maarten in April (data available up to week 15).

Curaçao reported the most new infections last month (weeks 13-17) with 1,649 new positive SARS-CoV-2 test results. This is almost the same as the number of reports in March (1,710). The island reported 20 COVID-19-related hospitalizations and six new COVID-19-related deaths in April; all deceased cases were 75+ years of age and four of them were hospitalized. In week 17 (April 25 to May 2, 2022), 180 people per 100,000 inhabitants in Curaçao (number of inhabitants approx. 164,000) received a positive SARS-CoV-2 test result and the test positivity was at 14%.

In Aruba, the number of positive test results increased in April, partly due to the number of travelers to the US who had themselves tested before departure. 874 positive test results, 12 COVID-19-related hospitalizations and no new COVID-19-related deaths were reported by the island in April. In week 17, 217 people per 100,000 inhabitants in Aruba (number of inhabitants approx. 125,000) received a positive SARS-CoV-2 test result and the test positivity was at 8%.

On St. Maarten, the downward trend of new positive SARS-CoV-2 test results continued in April. The island reported 307 positive test results, 5 COVID-19-related hospitalizations and no new COVID-19-related deaths in April. In week 17, 75 people per 100,000 inhabitants on Sint Maarten (number of inhabitants approx. 62,000) received a positive SARS-CoV-2 test result and the test positivity was at 3%. As of April 26, 2022, the island will no longer offer free SARS-CoV-2 tests and no more source and contact tracing will be performed. The actual number of persons with a SARS-CoV-2 infection will (likely) be higher than the number of infections reported through surveillance after April 26, 2022.

At the beginning of April, Bonaire saw an increase in the number of positive test results, after which a decrease set in. 932 positive test results and one COVID-19 related death were reported by the island in April. In week 15, the number of persons getting tested fell sharply due to a lower willingness to test during the Easter holiday. In week 17, 311 people per 100,000 inhabitants on Bonaire (number of inhabitants approx. 23,000) received a positive SARS-CoV-2 test result and the test positivity was at 63%. No COVID-19-related hospitalizations were reported on the island in April.

Last month, 117 new positive test results were reported on St. Eustatius, of which 27% were vaccinated with at least 1 dose. The number of positive test results on the island has decreased sharply compared to a month earlier. The incidence in week 17 was 782 people per 100,000 inhabitants (population approx. 3,000) and the test positivity was at 10%. There were two COVID-19-related hospitalizations and no deaths reported by the island in April.

Last month 208 new positive test results were reported on Saba, of whom 77% (161) were vaccinated with at least 1 dose and 60% (125) was aged 18 years or older. The incidence in week 17 was 64 people per 100,000 inhabitants (number of inhabitants approx. 1,900) and the test positivity was 9%. There was a sharp downward trend of new positive test results in April. No COVID-19-related hospitalizations or deaths were reported on the island in April.

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## Information on surveillance of COVID-19 on the CAS- and BES-islands

The Caribbean part of the Kingdom of the Netherlands entails the countries Curaçao, Aruba, and Dutch St Maarten (CAS-islands), as well as the overseas municipalities Bonaire, St Eustatius, and Saba (BES-islands). Surveillance data of SARS-CoV-2 cases is collected on each island in collaboration with local medical professionals, laboratories, and public health departments. These surveillance data are shared by the CAS- and BES-islands through daily updates and stored in the SARS-CoV-2 IHR Daily Overview Dutch Caribbean; an overview of the spread of SARS-CoV-2 on the CAS- and BES-islands.

This report has been generated using surveillance data registered at the RIVM between March 22nd 2020 and 3 May 2022. Sometimes surveillance data is reported to the RIVM one or multiple days later than documented on the islands. The data presented in this report are based on the date of registration at the RIVM. Because islands retrospectively correct surveillance data, the crude estimates in this report may differ slightly from the data shared by each island. The data reported here may lag behind in case more recent data has not yet been reported to the RIVM by respective islands. It is not known from all positive cases if they were admitted to the hospital or have passed away. This is due to the mainland Netherlands, the CAS-, and the BES-islands not being obligated to report on hospital admissions and deaths from persons with a positive test result for SARS-CoV-2. The actual numbers are therefore (probably) higher than the reported numbers. Everyone with symptoms of COVID-19 can get tested. However, it is plausible that not all individuals with a SARS-CoV-2 infection are tested. The actual numbers of cases can therefore be higher than the numbers reported here. The CAS- and BES-islands also register when individuals with a positive SARS-CoV-2 test result have recovered. These data are used to report the current number of active cases in Table 3. The number of active cases refers to the number of individuals who tested positive for SARS-CoV-2 and who have not yet recovered at the time of producing this report.

## Information on COVID-19 vaccination monitoring on the CAS and BES islands

The COVID-19 vaccination campaign on the CAS-BES islands started in February 2021. Each island has their own vaccination campaign. The actual implementation of these vaccination campaigns depends on, among other things, the approval, operation, delivery and distribution of the vaccines, and on people's willingness to vaccinate. In this document we report the estimated total number of vaccinated persons and the vaccination coverage on the CAS-BES islands. The current report is based on data on vaccinations administered up to and including 3 May 2022 using monitoring data received by the RIVM from the CAS-BES islands.

## Disclaimer

Though this weekly report has been produced with the utmost care, it could possibly contain errors. Feedback on this overview is welcome.

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# 1 Overview of reported SARS-CoV-2 infections on the CAS- and BES-islands

Table 1: Number of laboratory confirmed cases with a positive test result for SARS-CoV-2 over the past 2 weeks, as reported to the RIVM by the CAS- and BES-islands<sup>1</sup>

Island	Period	Number of tests	Number of laboratory confirmed positive test results	Positivity rate %
Aruba <sup>2</sup>	18-04-2022 - 24-04-2022	3213	222	6.9
Aruba	25-04-2022 - 01-05-2022	3359	272	8.1
Bonaire	18-04-2022 - 24-04-2022	170	119	70
Bonaire	25-04-2022 - 01-05-2022	114	72	63.2
Curaçao <sup>3</sup>	18-04-2022 - 24-04-2022	2620	312	11.9
Curaçao	25-04-2022 - 01-05-2022	2286	289	12.6
Saba	18-04-2022 - 24-04-2022	-	-	-
Saba	25-04-2022 - 01-05-2022	-	-	-
Sint Eustatius	18-04-2022 - 24-04-2022	164	18	11
Sint Eustatius	25-04-2022 - 01-05-2022	40	4	10
Sint Maarten <sup>4</sup>	18-04-2022 - 24-04-2022	969	41	3
Sint Maarten	25-04-2022 - 01-05-2022	974	35	3

<sup>1</sup> A '-' sign indicates there is insufficient data available at the RIVM to present in this table.

<sup>2</sup> This estimate concerns a crude positivity rate for Aruba. The Directie Volksgezondheid Aruba reports a corrected positivity rate through: <https://www.facebook.com/desaruba>.

<sup>3</sup> The Public Health Department on Curaçao estimates a corrected positivity rate. Therefore, estimates presented here may differ from positivity rates reported by Curaçao.

<sup>4</sup> As of April 26, 2022, the island will no longer offer free SARS-CoV-2 tests and no more source and contact tracing will be performed. The actual number of persons with a SARS-CoV-2 infection will likely be higher than the number of infections reported in surveillance after April 26, 2022.

Table 2: Number of laboratory confirmed cases with a positive SARS-CoV-2 test result, number of hospital admissions and number of deceased cases, cumulative and for the previous week, on the CAS- and BES-islands, as reported to RIVM<sup>1-3</sup>

Island	Last updated on	Total cumulative			Past 4 weeks <sup>5</sup>		
		Number of cases	Hospital admissions	Deceased <sup>1</sup>	Number of cases	Hospital admissions	Deceased
Aruba	2022-05-02	34965	1412	212	898	12	0
Bonaire	2022-05-02	8356	86	29	932	0	1
Curaçao	2022-05-02	42330	1004	274	1581	19	7
Saba	2022-05-02	558	1	0	189	0	0
Sint Eustatius	2022-05-02	922	14	5	109	2	0
Sint Maarten <sup>4</sup>	2022-05-02	10065	354	86	299	5	0

<sup>1</sup> The number of hospital admissions cannot be displayed for the previous week due to a delay in reporting these data. The current number of persons hospitalized due to or with COVID-19 is reported in Table 3.

<sup>2</sup> As of March 8, 2022, SARS-CoV-2 positive test results will no longer be reported by the islands on a daily basis. It is possible that SARS-CoV-2 positive test results of more than one day are reported by an island within one reporting date. Data presented in this report may therefore be underreported if the update falls within an incomplete calendar week. Missing data does not mean that there are no positive SARS-CoV-2 test results, but that those data are reported by the island cumulatively at a later time, for example in the form of weekly data.

<sup>3</sup> Actual number of hospitalised COVID-19 patients or (probable) COVID-19 deaths may be higher than the number of admitted or deceased patients reported in the surveillance. This is because there is no reporting obligation for hospital admissions in the European Netherlands as well as on the CAS and BES islands

<sup>4</sup> As of April 26, 2022, the island will no longer offer free SARS-CoV-2 tests and no more source and contact tracing will be performed. The actual number of persons with a SARS-CoV-2 infection will likely be higher than the number of infections reported in surveillance after April 26, 2022.

<sup>5</sup> These have been reported to the RIVM between 26 March 2022 and 3 May 2022.

Table 3: Number of active SARS-CoV-2 infections and current status<sup>1</sup> of hospital occupancy of COVID-19 patients reported to RIVM by the CAS-BES islands<sup>2,3</sup>

Island	Last updated on	Active cases	General care local	ICU local	Overseas admissions
Aruba	2022-05-02	133	3	0	1
Bonaire <sup>4</sup>	2022-05-02	37	1	0	0
Curaçao	2022-05-02	304	1	1	0
Saba	2022-05-02	15	0	0	0
Sint Eustatius	2022-05-02	2	0	0	0
Sint Maarten <sup>5,6</sup>	2022-05-02	66	0	0	0

<sup>1</sup> As of March 8, 2022, SARS-CoV-2 positive test results will no longer be reported by the islands on a daily basis. The last reporting date for data presented in this report may therefore per island.

<sup>2</sup> Number of active SARS-CoV-2 infections is defined as the number of persons with a SARS-CoV-2 infection of which the recovery has not been registered by the local public health department at the time of registration by the RIVM. These numbers can also be delayed if the contact tracing capacity at the public health department is limited.

<sup>3</sup> Actual number of hospitalised COVID-19 patients or (probable) COVID-19 deaths may be higher than the number of admitted or deceased patients reported in the surveillance. This is because there is no reporting obligation for hospital admissions in the European Netherlands as well as on the CAS and BES islands

<sup>4</sup> Covid patients admitted to the Special Care unit on Bonaire are mentioned under the column ICU-local.

<sup>5</sup> As of April 26, 2022, the island will no longer offer free SARS-CoV-2 tests and no more source and contact tracing will be performed. The actual number of persons with a SARS-CoV-2 infection will likely be higher than the number of infections reported in surveillance after April 26, 2022.

<sup>6</sup> Per September 1, 2021, admissions to the OB/GYN and pediatric wards are reported separately for St Maarten. The other islands are currently not reporting these data separately.

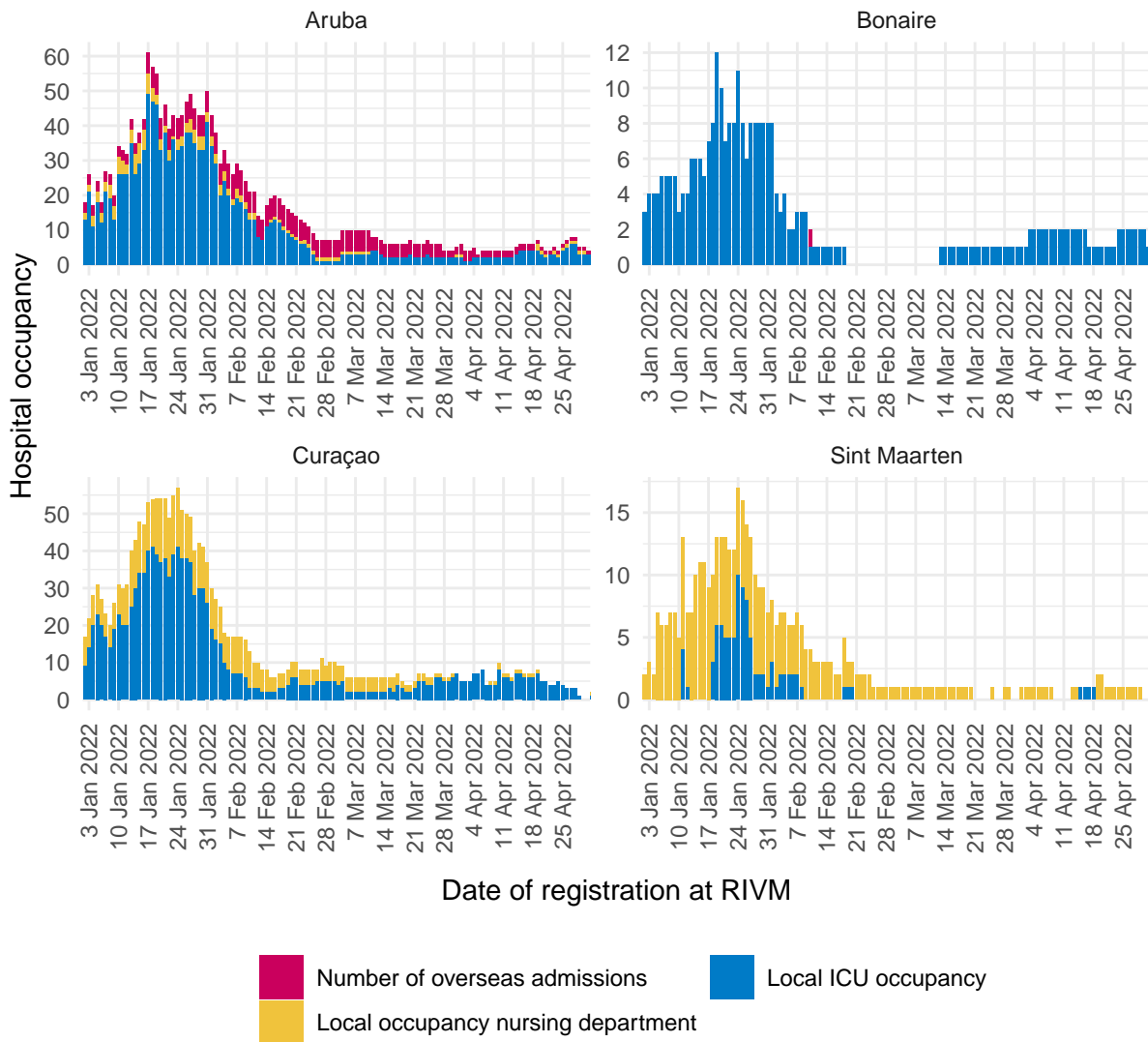


Figure 1: Total COVID-19 related hospital occupancy over time <sup>1-6</sup>

<sup>1</sup> There is no distinction made in the COVID-19 surveillance on the islands between people who have been hospitalized due to COVID-19 and already admitted patients who later tested positive for SARS-CoV-2. For this reason, in this figure, COVID-19 related hospital occupancy is understood to mean: 'The number of SARS-CoV-2 positive people who have been admitted due to or with COVID-19 complaints, as well as the number of people who were admitted due to another indication and then tested positive for SARS-CoV-2.'

<sup>2</sup> This refers to the number of reported COVID-19 related hospital admissions and deaths that are publicly reported. However, the date of notification to the local Public Health Department or date of death registry may fall in a different week. The actual number of COVID-19 related hospital admissions or deaths is (likely) higher than the number of admitted or deceased patients reported through the surveillance. This is because in both the European and Caribbean Netherlands there is no reporting obligation for hospitalizations or deaths of persons with a positive SARS-CoV-2 test result.

<sup>3</sup> The pink bars in the graph illustrate the local IC occupancy over time, per island. The blue bars illustrate the hospital occupancy on the local nursing wards over time, per island.

<sup>4</sup> Due to the low numbers of hospital admissions on Saba and Sint Eustatius, these islands are not included in the above figure.

<sup>5</sup> For 234 people who have tested positive for SARS-CoV-2 since January 2021 on Bonaire, their hospitalization status is unknown. These data are not included in the figure above.

<sup>6</sup> The data presented above are presented by date of registration at the RIVM. The above figures may lag be behind if the most recent data have not yet been reported to RIVM.

Table 4: SARS-CoV-2 incidence rate per 100,000 residents on the CAS- and BES-islands, as reported to RIVM <sup>1</sup>

Island	Last updated on	Incidence per 100,000	
		Previous week	Previous two weeks
Aruba	2022-05-03	178	390
Bonaire	2022-05-03	311	824
Curaçao	2022-05-03	142	363
Saba	2022-05-03	574	1564
Sint Eustatius	2022-05-03	127	382
Sint Maarten <sup>2</sup>	2022-05-03	47	212

<sup>1</sup> The calculated incidence rates include the estimated number of undocumented migrants on each island, see Table 5.

<sup>2</sup> As of April 26, 2022, the island will no longer offer free SARS-CoV-2 tests and no more source and contact tracing will be performed. The actual number of persons with a SARS-CoV-2 infection will likely be higher than the number of infections reported in surveillance after April 26, 2022.

<sup>3</sup> The incidence rate per 100,000 persons, for the previous week, has been calculated from 26 April 2022 until 3 May 2022.

<sup>4</sup> The incidence rate per 100,000 residents, for the previous two weeks, has been calculated from 20 April 2022 until 3 May 2022.

Table 5: Number of residents and acreage of the CAS- and BES-islands<sup>1</sup>

Island	Capital city	Residents	Acreage	Political status
Aruba	Oranjestad	125.282	180 km <sup>2</sup>	Country within the Kingdom of The Netherlands
Bonaire	Kralendijk	23.173	288 km <sup>2</sup>	Dutch municipality
Curaçao	Willemstad	164.223	444 km <sup>2</sup>	Country within the Kingdom of The Netherlands
Saba	The Bottom	1.918	13 km <sup>2</sup>	Dutch municipality
Sint Maarten	Philipsburg	62.323	34 km <sup>2</sup>	Country within the Kingdom of The Netherlands
Sint Eustatius	Oranjestad	3.142	21 km <sup>2</sup>	Dutch municipality

<sup>1</sup> These numbers refer to the 2021 population sizes. Each island counts a substantial population of undocumented migrants. The reported incidence rates include the estimated population of undocumented migrants. On Aruba, Curaçao, and Dutch St Maarten the population size is estimated to be between 8,000 and 20,000 migrants in 2021. On Bonaire the population size is estimated around 1,400 migrants. These data are relevant to include as these populations are difficult to reach for local public health services and often have less access to curative care.



## 2 SARS-CoV-2 progression over time

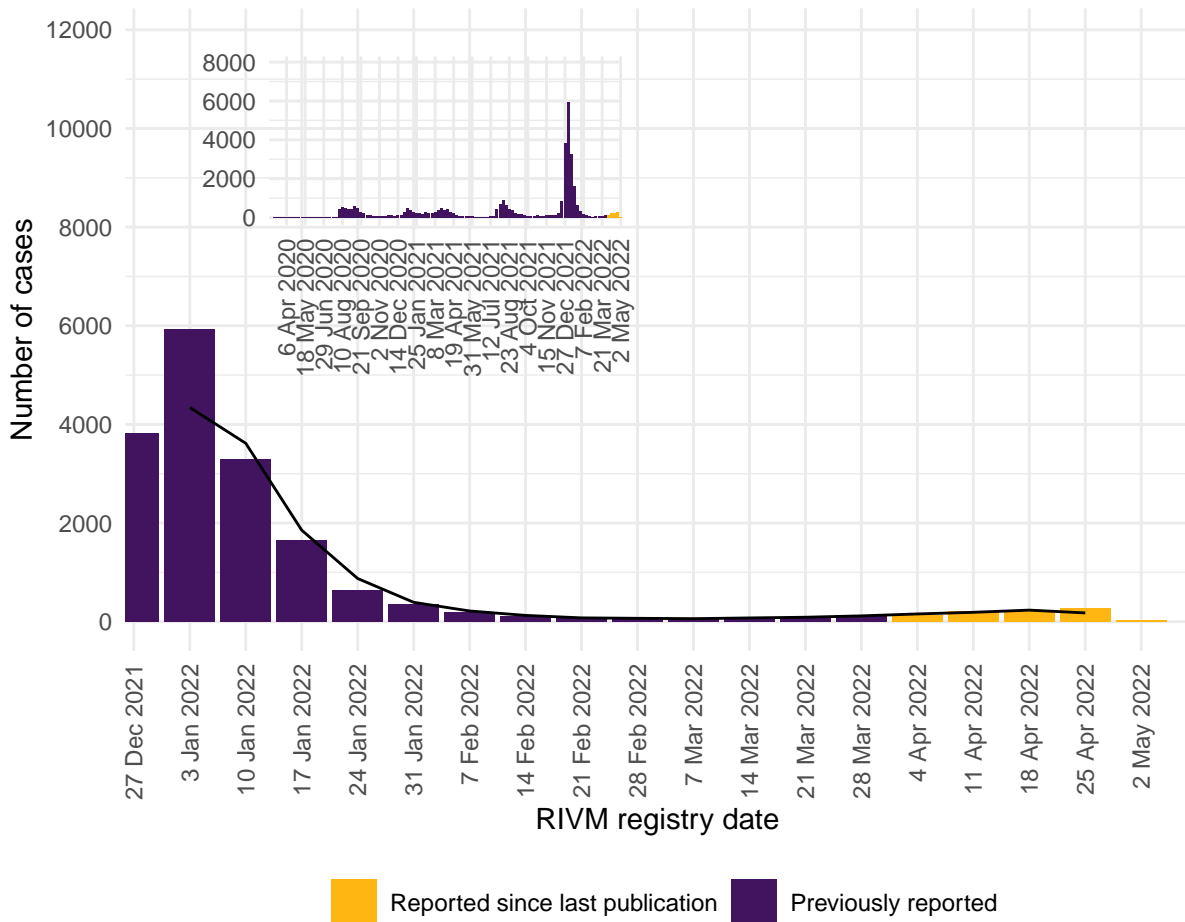


Figure 2: Number of weekly reported positive SARS-CoV-2 test results on Aruba, presented by RIVM registry date<sup>1-3</sup>.

<sup>1</sup> These data show the weekly number of new SARS-CoV-2 infections by registration date at the RIVM. The black line in the epicurve represents the 3-week average in the number of newly detected SARS-CoV-2 infections.

<sup>2</sup> Due to underlying differences between the islands in the number of reported infections differ on the Y axes of these figures. The reported data has been presented by the date of reporting to the RIVM. These numbers can lag behind when the most recent data has not yet been reported to the RIVM.

<sup>3</sup> As of March 8, 2022, SARS-CoV-2 positive test results will no longer be reported by the islands on a daily basis. It is possible that SARS-CoV-2 positive test results of more than one day are reported by an island within one reporting date. Data presented in this report may therefore be underreported if the update falls within an incomplete calendar week. Missing data does not mean that there are no positive SARS-CoV-2 test results, but that those data are reported by the island cumulatively at a later time, for example in the form of weekly data.

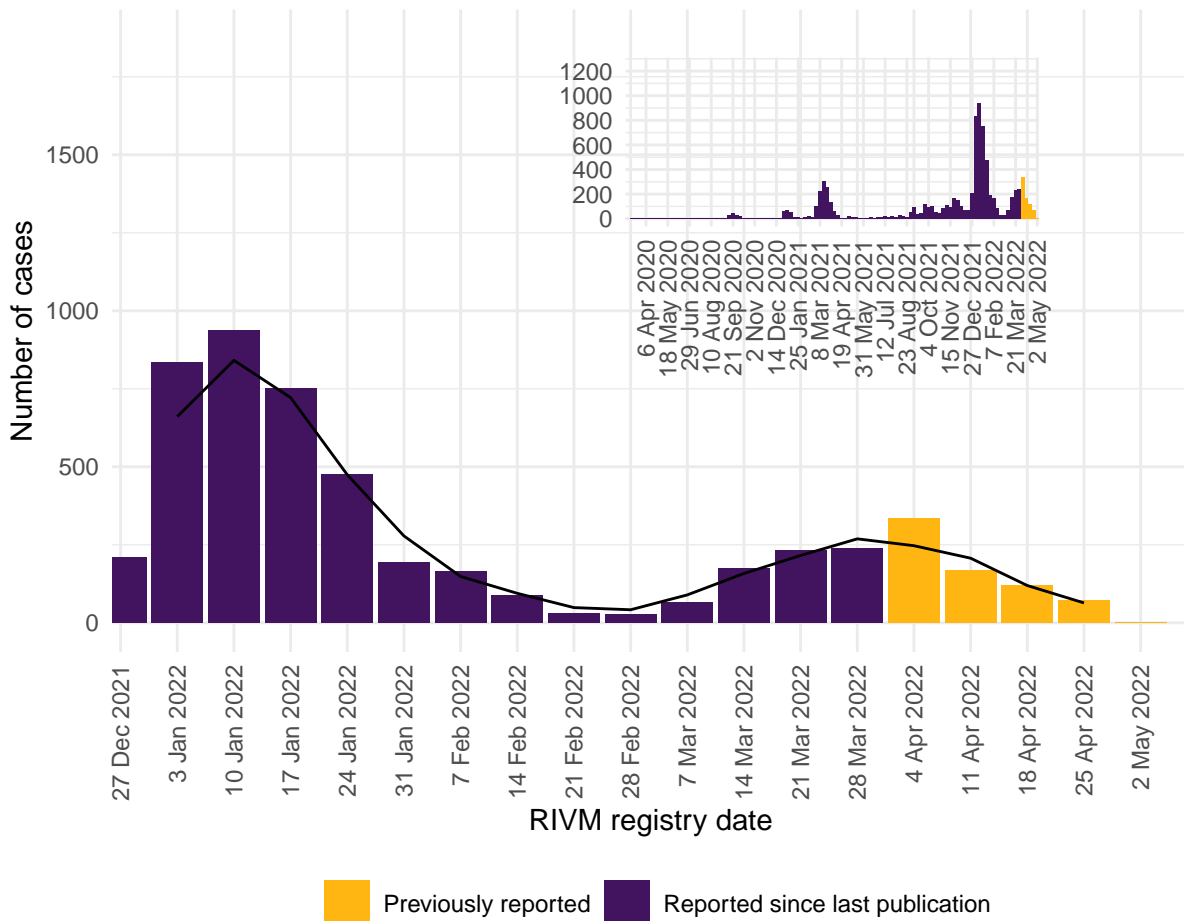


Figure 3: Number of weekly reported positive SARS-CoV-2 test results on Bonaire, presented by RIVM registry date<sup>1-3</sup>.

<sup>1</sup> These data show the weekly number of new SARS-CoV-2 infections by registration date at the RIVM. The black line in the epicurve represents the 3-week average in the number of newly detected SARS-CoV-2 infections.

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<sup>3</sup> As of March 8, 2022, SARS-CoV-2 positive test results will no longer be reported by the islands on a daily basis. It is possible that SARS-CoV-2 positive test results of more than one day are reported by an island within one reporting date. Data presented in this report may therefore be underreported if the update falls within an incomplete calendar week. Missing data does not mean that there are no positive SARS-CoV-2 test results, but that those data are reported by the island cumulatively at a later time, for example in the form of weekly data.

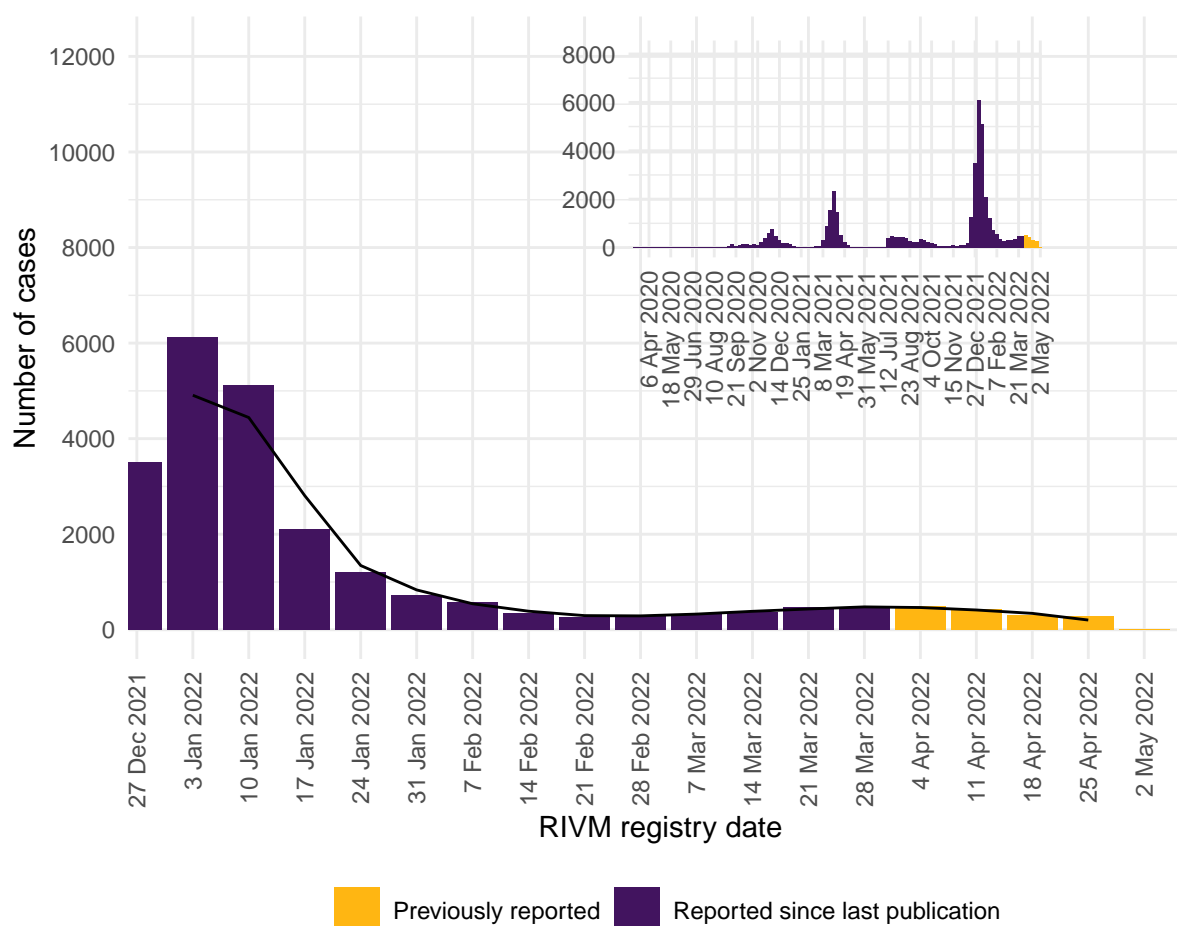


Figure 4: Number of weekly reported positive SARS-CoV-2 test results on Curaçao, presented by RIVM registry date<sup>1-3</sup>.

<sup>1</sup> These data show the weekly number of new SARS-CoV-2 infections by registration date at the RIVM. The black line in the epicurve represents the 3-week average in the number of newly detected SARS-CoV-2 infections.

<sup>2</sup> Due to underlying differences between the islands in the number of reported infections differ on the Y axes of these figures. The reported data has been presented by the date of reporting to the RIVM. These numbers can lag behind when the most recent data has not yet been reported to the RIVM.

<sup>3</sup> As of March 8, 2022, SARS-CoV-2 positive test results will no longer be reported by the islands on a daily basis. It is possible that SARS-CoV-2 positive test results of more than one day are reported by an island within one reporting date. Data presented in this report may therefore be underreported if the update falls within an incomplete calendar week. Missing data does not mean that there are no positive SARS-CoV-2 test results, but that those data are reported by the island cumulatively at a later time, for example in the form of weekly data.

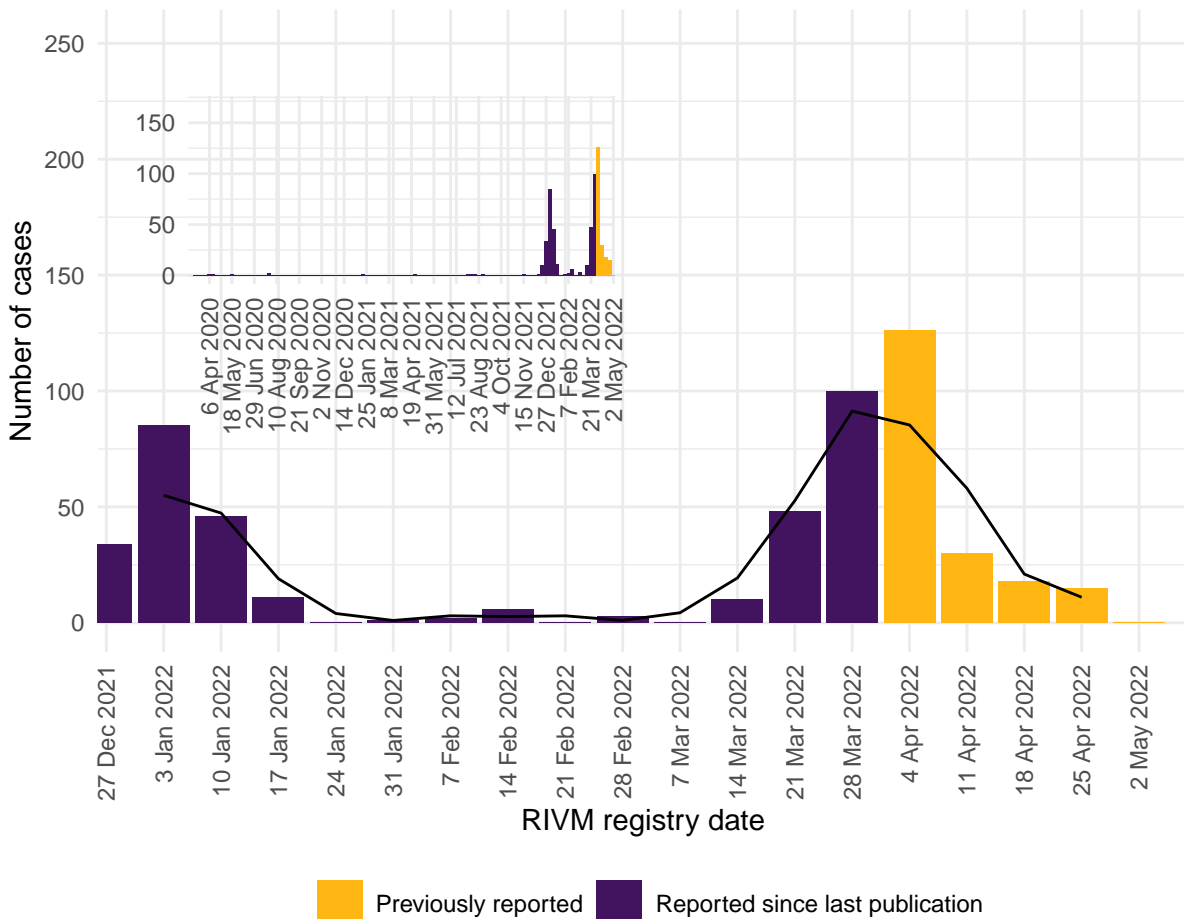


Figure 5: Number of weekly reported positive SARS-CoV-2 test results on Saba, presented by RIVM registry date<sup>1-3</sup>.

<sup>1</sup> These data show the weekly number of new SARS-CoV-2 infections by registration date at the RIVM. The black line in the epicurve represents the 3-week average in the number of newly detected SARS-CoV-2 infections.

<sup>2</sup> Due to underlying differences between the islands in the number of reported infections differ on the Y axes of these figures. The reported data has been presented by the date of reporting to the RIVM. These numbers can lag behind when the most recent data has not yet been reported to the RIVM.

<sup>3</sup> As of March 8, 2022, SARS-CoV-2 positive test results will no longer be reported by the islands on a daily basis. It is possible that SARS-CoV-2 positive test results of more than one day are reported by an island within one reporting date. Data presented in this report may therefore be underreported if the update falls within an incomplete calendar week. Missing data does not mean that there are no positive SARS-CoV-2 test results, but that those data are reported by the island cumulatively at a later time, for example in the form of weekly data.

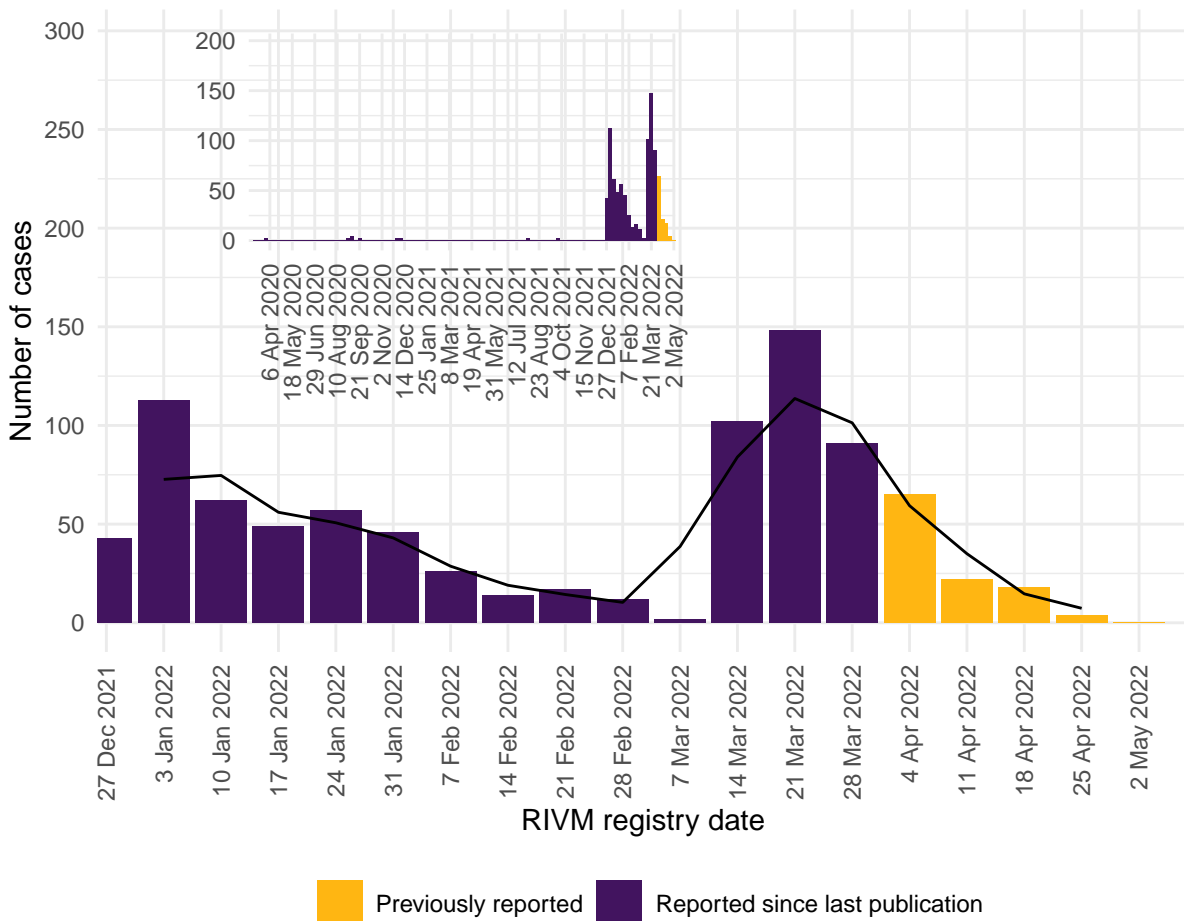


Figure 6: Number of weekly reported positive SARS-CoV-2 test results on St Eustatius, presented by RIVM registry date<sup>1-3</sup>.

<sup>1</sup> These data show the weekly number of new SARS-CoV-2 infections by registration date at the RIVM. The black line in the epicurve represents the 3-week average in the number of newly detected SARS-CoV-2 infections.

<sup>2</sup> Due to underlying differences between the islands in the number of reported infections differ on the Y axes of these figures. The reported data has been presented by the date of reporting to the RIVM. These numbers can lag behind when the most recent data has not yet been reported to the RIVM.

<sup>3</sup> As of March 8, 2022, SARS-CoV-2 positive test results will no longer be reported by the islands on a daily basis. It is possible that SARS-CoV-2 positive test results of more than one day are reported by an island within one reporting date. Data presented in this report may therefore be underreported if the update falls within an incomplete calendar week. Missing data does not mean that there are no positive SARS-CoV-2 test results, but that those data are reported by the island cumulatively at a later time, for example in the form of weekly data.

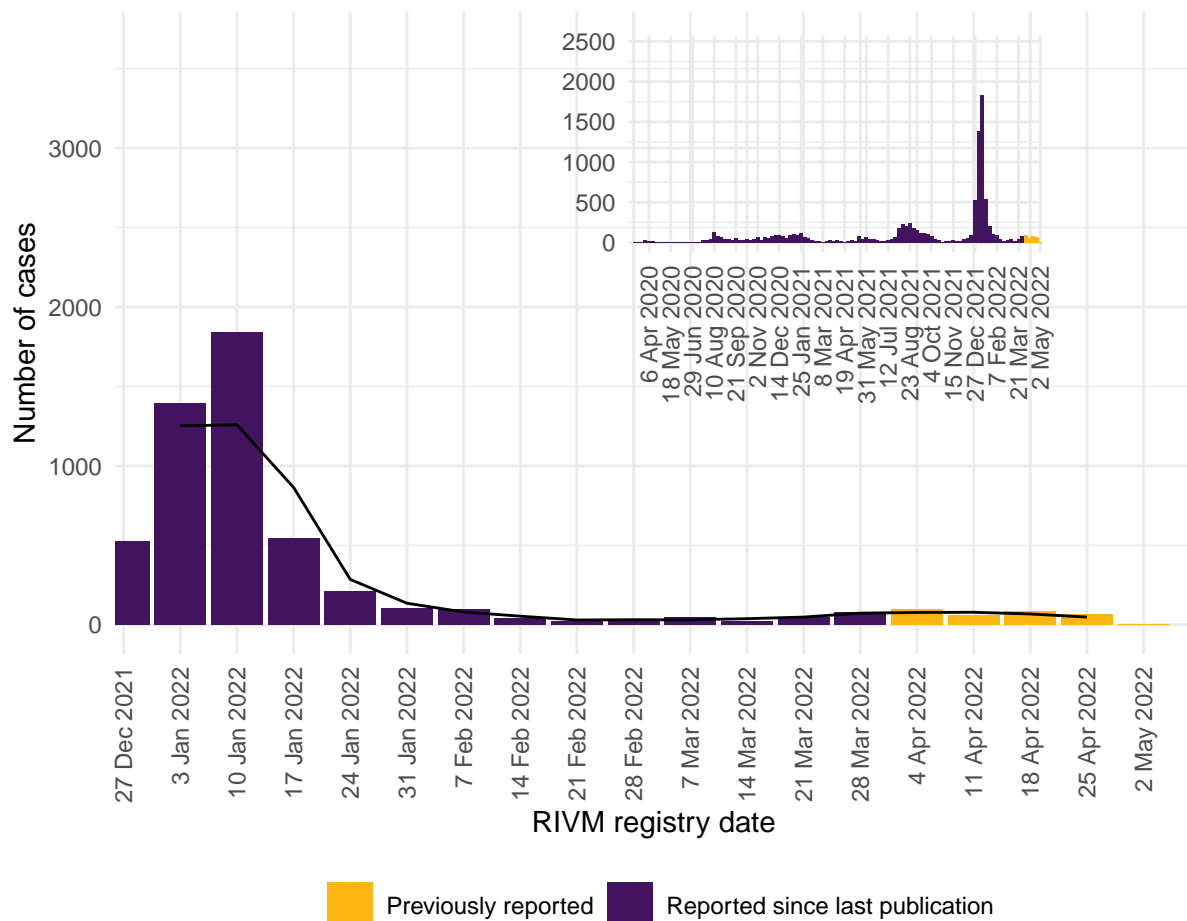


Figure 7: Number of weekly reported positive SARS-CoV-2 test results on Dutch St Maarten, presented by RIVM registry date<sup>1-3</sup>.

<sup>1</sup> These data show the weekly number of new SARS-CoV-2 infections by registration date at the RIVM. The black line in the epicurve represents the 3-week average in the number of newly detected SARS-CoV-2 infections.

<sup>2</sup> As of April 26, 2022, the island will no longer offer free SARS-CoV-2 tests and no more source and contact tracing will be performed. The actual number of persons with a SARS-CoV-2 infection will likely be higher than the number of infections reported in surveillance after April 26, 2022.

<sup>3</sup> As of March 8, 2022, SARS-CoV-2 positive test results will no longer be reported by the islands on a daily basis. It is possible that SARS-CoV-2 positive test results of more than one day are reported by an island within one reporting date. Data presented in this report may therefore be underreported if the update falls within an incomplete calendar week. Missing data does not mean that there are no positive SARS-CoV-2 test results, but that those data are reported by the island cumulatively at a later time, for example in the form of weekly data.

### 3 SARS-CoV-2 three week average incidence rate, progression over time

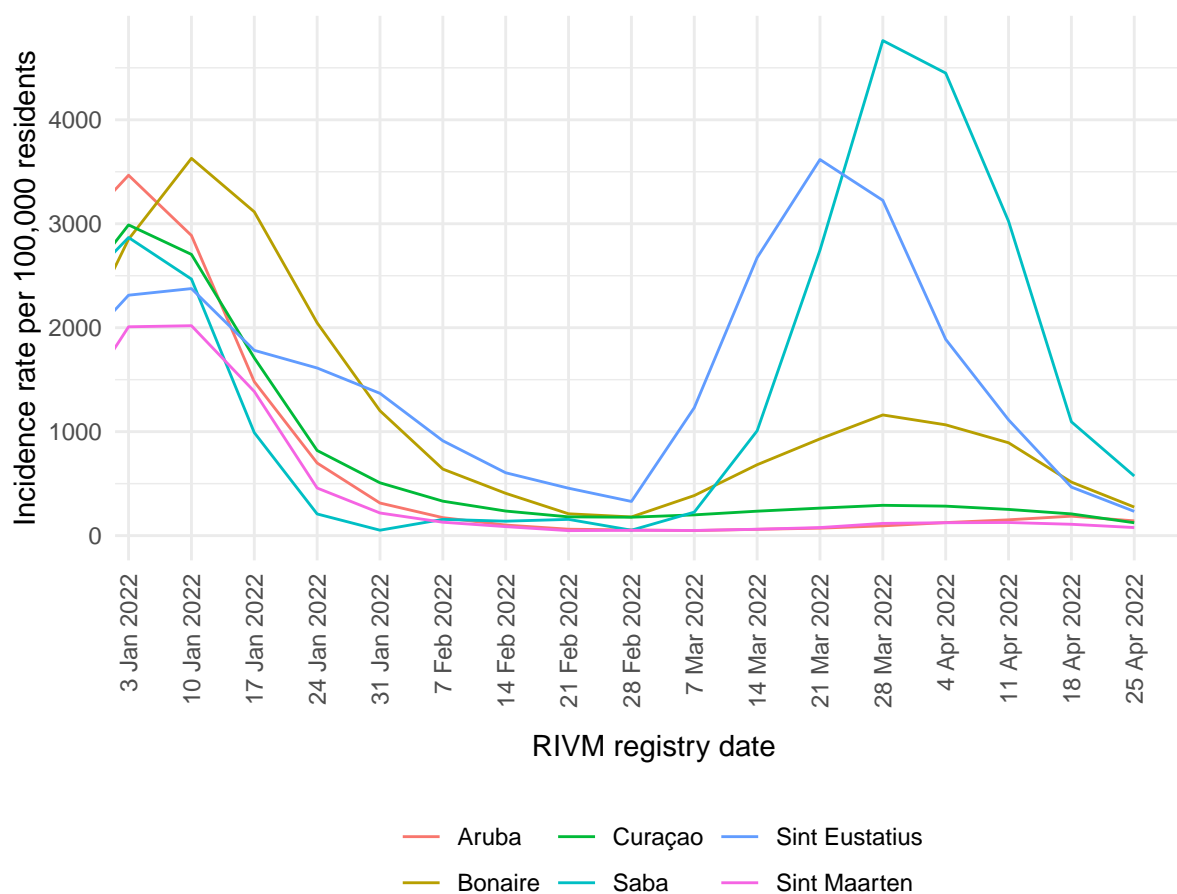


Figure 8: Three week<sup>1</sup> average number of reported cases per 100,000 residents by RIVM registry date, on Curaçao, Aruba, Dutch St Maarten<sup>2</sup>, Saba, Sint Eustatius, and Bonaire.

<sup>1</sup> This figure displays the 3-week average incidence rate per island per 100,000 residents, including the population of undocumented migrants on each island. Each line on the vertical axis indicates a weekly average of the incidence rate (defined as the number of new cases per 100,000 persons per week, over the total population) over a period of three weeks.

<sup>2</sup> As of April 26, 2022, the island will no longer offer free SARS-CoV-2 tests and no more source and contact tracing will be performed. The actual number of persons with a SARS-CoV-2 infection will likely be higher than the number of infections reported in surveillance after April 26, 2022.

## 4 Number of COVID-19 vaccine doses administered on the CAS-BES islands

Table 6: Number of first and second doses of COVID-19 vaccine administered until 2 May 2022<sup>1</sup>.

	Aruba	Bonaire	Curaçao	Saba	Sint Eustatius	Sint Maarten <sup>2</sup>
Number of persons who have received their first dosis (aged 12+ years)	87126	17523	105782	1594	1791	29164
Number of persons who have received their first and second dosis (aged 12+ years)	80204	15841	98998	1577	1686	25915
Number of fully vaccinated persons (aged 12+ years) <sup>3</sup>	81681	15841	100566	1577	1686	25915
Number of persons with a booster or third dose	27963	7886	40700	1099	848	9362
Number of high risk persons (aged 18-59 years) who have received their first dosis <sup>4,5</sup>	4209	-	9066	-	-	3127
Number of fully vaccinated high risk persons (aged 18-59 years) <sup>5</sup>	4209	-	9066	-	-	3127

<sup>1</sup> The vaccination coverage data presented here is reported by the islands to the RIVM on a weekly basis. These data may lag behind from the vaccination coverage data presented by the island officials.

<sup>2</sup> These data refer to the numbers of vaccinated persons on the Dutch side of St Maarten. Vaccination coverage on the French side of St Martin is reported by Santé Publique France on a weekly basis.

<sup>3</sup> The number of fully vaccinated persons is defined as the number of completed vaccinations. This also includes persons who only require one dose of vaccine to be considered as fully vaccinated, due to having a history of SARS-CoV-2 infection. Both Aruba and Curaçao are reporting these data separately from the number of persons who have received two doses of vaccine. Dutch St Maarten and the BES-islands are currently not reporting these data. The number of completed vaccinations on those islands may therefore be an underestimation.

<sup>4</sup> For the BES islands, no information was collected about high- and low-risk groups, because all residents within this age group could register for a vaccination at the same time.

<sup>5</sup> Vaccination data for persons aged 60+ cannot be displayed here because these data are not reported to RIVM.



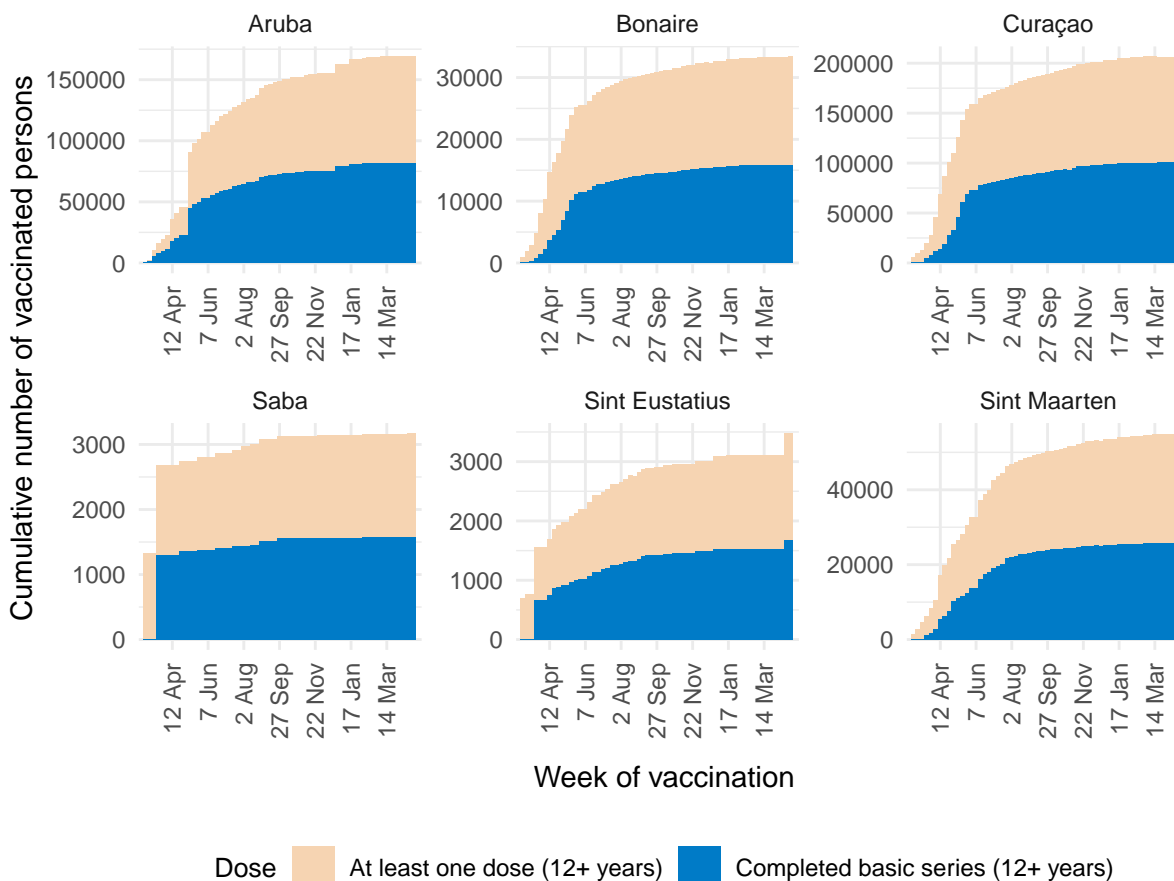


Figure 9: Number of first and second doses of COVID-19 vaccine administered, cumulative by vaccination date, until 2 May 2022<sup>1,2,3</sup>.

<sup>1</sup> The vaccination coverage data presented here is reported by the islands to the RIVM on a weekly basis. These data may lag behind from the vaccination coverage data presented by the island officials.

<sup>2</sup> These data refer to the numbers of vaccinated persons on the Dutch side of St Maarten. Vaccination coverage on the French side of St Martin is reported by Santé Publique France on a weekly basis.

<sup>3</sup> The number of fully vaccinated persons is defined as the number of completed vaccinations. This also includes persons who only require one dose of vaccine to be considered as fully vaccinated, due to having a history of SARS-CoV-2 infection. Both Aruba and Curaçao are reporting these data separately from the number of persons who have received two doses of vaccine. Dutch St Maarten and the BES-islands are currently not reporting these data. The number of completed vaccinations on those islands may therefore be an underestimation.

## 5 Vaccination coverage on the CAS-BES islands

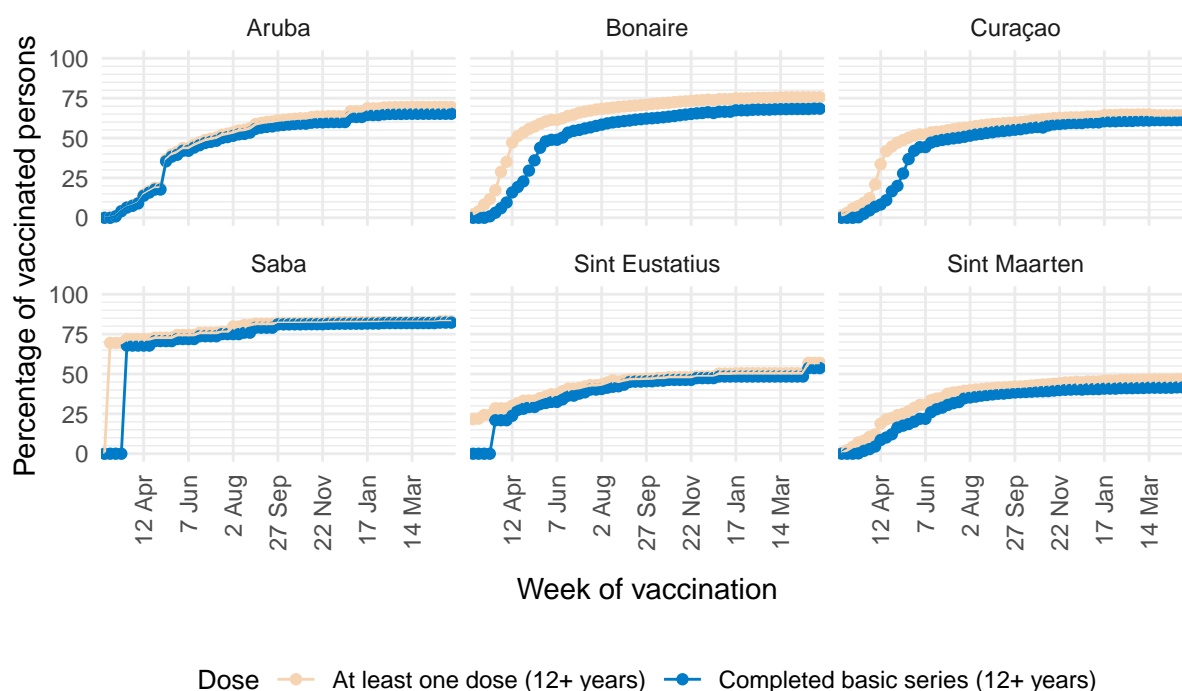


Figure 10: Percentage of residents aged 12 years or older who have received at least one vaccination dose and the percentage of residents aged 12 or older who have been fully vaccinated according to the current vaccination schedule of the vaccines used<sup>1-4</sup>.

<sup>1</sup> The vaccination coverage data presented here is reported by the islands to the RIVM on a weekly basis. These data may lag behind from the vaccination coverage data presented by the island officials.

<sup>2</sup> These data refer to the numbers of vaccinated persons on the Dutch side of St Maarten. Vaccination coverage on the French side of St Martin is reported by Santé Publique France on a weekly basis.

<sup>3</sup> The vaccination coverage is defined as: Persons aged 12+ who have received at least one dose. A one-dose schedule is sufficient for persons who have indicated that they have demonstrably experienced COVID-19 in the past six months. They are included in the 'fully vaccinated' percentages presented in this figure. These numbers are reported separately per week 21 by Curaçao and week 22 by Aruba.

<sup>4</sup> The number of fully vaccinated persons is defined as the number of completed vaccinations. This also includes persons who only require one dose of vaccine to be considered as fully vaccinated, due to having a history of SARS-CoV-2 infection. Both Aruba and Curaçao are reporting these data separately from the number of persons who have received two doses of vaccine. Dutch St Maarten and the BES-islands are currently not reporting these data. The number of completed vaccinations on those islands may therefore be an underestimation.