
WEEKLY PRESS BRIEFING ON COVID-19 DIRECTOR'S REMARKS—28 JULY 2021

Good morning and thank you for joining today's press briefing. Over the last week there were over 1.26 million COVID-19 cases and nearly 29,000 deaths reported in the Americas.

COVID continues to have a devastating toll in our region, with Argentina, Colombia, Cuba, Ecuador, and Paraguay among the countries reporting the world's highest weekly death rates.

Cases have more than doubled in the U.S. over the last week, mainly among unvaccinated people. The Mexican states of Baja California Sur, Quintana Roo and Yucatan are also reporting a rise in new infections.

In Central America, cases are accelerating in Guatemala and they remain high in Panama.

Meanwhile, in the Caribbean, Cuba is experiencing higher COVID infection and death rates than at any point in the pandemic, and all age groups are affected: in the last week, more than 7,000 minors and nearly 400 pregnant women have tested positive for COVID-19.

Cases are decreasing among several South American countries, although hotspots have been reported in Argentinian provinces bordering Bolivia and Chile, and among Colombia's Amazon region.

As COVID continues to circulate, too many places have relaxed the public health and social measures that have proven so effective against this virus.

And as people move more easily and mingle without precautions, COVID follows.

At the same time, our region has yet to access the vaccines that it needs to keep our populations safe. So far, just 16.6% of the population of Latin America and the Caribbean has been fully vaccinated against COVID-19.

And while vaccination coverage is higher in countries like the U.S., Chile, and Uruguay, it remains below 20% for more than half of the countries and territories in our region.

As countries have dedicated resources, staff, and attention to their COVID-19 responses, many have been hard-pressed to keep up other essential health services that people need.

In a recent survey of health services in the region, 97% of participating countries and territories reported disruptions. 45% reported disruptions in at least half of their health services.

These disruptions are having an inordinate impact on our first level of care.

The first level of care is the foundation of our health systems. It is here where children go to for immunizations, where expectant mothers receive prenatal check-ups and where people living with chronic conditions receive their medications. It's also here where the most COVID-19 testing and contact tracing takes place.

Disruptions at the first level of care have worsened over the course of this pandemic, and the consequences have been devastating – particularly for routine immunizations.

More than 300,000 children – mostly in Brazil and Mexico – missed out on their routine immunizations last year, leaving them vulnerable to deadly, yet preventable infections.

We are seeing as well dangerous drops in measles vaccinations throughout our region. Coverage of the first dose of measles vaccines dropped by 10% in eight countries in the Americas, including Venezuela, Panama, and Brazil, and dropped as much as 20% in Suriname.

If we do not reverse these trends, we risk an avalanche of worsening health issues in the Americas.

Soon, COVID-19 will not be the only health crisis demanding countries' attention.

We therefore urge countries to ensure their COVID-19 responses do not leave other essential health services, like routine immunizations, behind.

These services are not optional, so countries must maintain them as they control COVID-19 outbreaks.

PAHO has worked with governments across our region to help them adjust and rethink how essential care is delivered at the first level, and we are continuing to work daily with them.

Many health systems, including in Chile and Peru, have embraced telemedicine and others have launched community outreach programs so patients can continue to be seen by providers from the comfort of their homes.

As the demands on our health systems grow, countries must hire and train additional staff – and ensure that every health worker has the tools and resources to safely offer care during a pandemic. Equally important is ensuring that healthcare workers are fairly compensated for their extraordinary efforts. Chile for example recently approved a pay bump to providers who have been so critical to the COVID-19 response.

We know that the economic blowback of this pandemic is forcing countries to make difficult choices on where to prioritize spending. But we cannot afford to cut corners on health. Because make no mistake: sooner or later countries will assume the costs.

And that is why investing in the first level of care now is a smart choice so we can reverse trends that more efficiently and equitably than if we wait for health crises to surface. As the

adage goes: "an ounce of prevention is worth a pound of cure." This is also true for health: prevention is much more affordable than treatment.

So as countries debut new COVID funding or seek loans from financial institutions, they must see investments in the first level of care as an essential component of their COVID-19 responses.

Countries must make care more accessible by reducing out-of-pocket costs because no one should have to choose between their health and providing for their families.

Today, we commemorate World Hepatitis Day, and we're reminded that too many people still cannot access the essential services they need to live long and healthy lives.

So, as we continue to be challenged by COVID-19, we must ensure our responses do not widen the gap in access to health by ensuring that our health systems have the resources that they need to be resilient.

By committing the necessary and overdue investments in our health systems, countries can safely respond to the pandemic and keep people healthy and protect them from a multitude of other diseases.