
DIRECTOR'S REMARKS — PAHO/ECLAC PRESS BRIEFING 30 JULY 2020

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For over three months, our region has reported the highest number of new COVID-19 cases globally, and several Latin American countries are currently at the very epicentre of this pandemic.

Exactly six months ago, the World Health Organization declared COVID-19 a public health emergency of international concern. At that time, our region had just eight cases, none of them in Latin America and the Caribbean. No one could have imagined then what the future would bring.

As we fast forward, we see a starkly different picture: as of today, the region has reported almost nine million COVID-19 cases, nearly half of them in Latin America, and nearly 350,000 deaths. And transmission keeps accelerating throughout the region.

It's no surprise that a pandemic of this magnitude has ushered a triple crisis across our region as it ravages our health systems, fractures our social protection and destabilizes our economies.

Despite vigorous and early action from many countries in the region, COVID-19 has cut thousands of lives short, and it has disproportionately impacted the poor, those with underlying health conditions, and those for whom health care is out of reach.

This pandemic has been fueled by inequality and laid bare how people across our diverse region are being left behind.

COVID-19 has exposed the inter-dependency between health, social protection, and the economy: a stable and productive economy depends on a population that is healthy and well; as Alicia so well said, and a strong economy, in turn, supports the health and well-being of the population.

Unfortunately, the pandemic has disrupted many essential health services, including programs people depend on to manage conditions like chronic diseases, HIV, TB and malaria, immunization programs, programs for mother and child. And we're beginning to see that as a result of these disruptions, patients across our region are dying from these treatable conditions at higher rates than normal. Today, the Americas are at risk of losing years of health gains in a matter of months! This is tragic.

We face a challenge without precedent. One that requires strong and well-funded health systems to see us through this crisis and allow us to recover. There is no doubt that countries need significant and sustained interventions to suppress COVID-19, to protect health gains and to tackle the mounting poverty and inequalities throughout the region. We must affirm that health is not a privilege nor a commodity. It is a fundamental human right and a public health good. The health of our communities and the health of our economies depend on it.

The Pan American Health Organization recognized the evolving triple crisis of health, social protection and the economy early on during this pandemic. Realizing that we needed a multi-faceted approach, I reached out to my dear friend and colleague, Ms. Alicia Barcena, who is the Secretary General of the Economic Commission for Latin America and the Caribbean (ECLAC) so that our organizations would work together to support countries as they face this unprecedented crisis.

So, with Ms. Barcena and ECLAC, PAHO worked jointly and today we are launching this new report: *'Health and the Economy: A Convergence Needed to Address COVID-19 and Retake the Path of Sustainable Development in Latin America and the Caribbean'*. My sincere thanks to Alicia for having said yes.

The report recognizes that the structural deficiencies that we are witnessing in the health sector are the result of years of inadequate public investment. Over the past decades, public spending in health, while slowly increasing, has been persistently low, and in many cases, totally inadequate, and far from PAHO's recommended 6% of GDP^[1].

Now, we face an almost impossible challenge: economies are strained, impacting investments in health and social services for the foreseeable future as so well demonstrated in Alicia's presentation. At the same time, significant additional financing is needed to control the pandemic and recuperate public health losses, enhance social protection and support economic recovery.

This is a reality we have been dealing with way before the COVID-19 pandemic: Health outcomes in the region are intrinsically linked to our economies, to the social determinants of health, and the safety nets that have been established to protect health and wellbeing.

That's why we must integrate our approaches for health and social protection, and in so doing, we can mitigate against the terrible impact of COVID-19 on our economic livelihoods, so those who are sick don't have to choose between their health and having a roof over their heads or food for their families – or worse yet, of falling into poverty from a medical bill. Today, households across our region cover more than a third of health care costs from their own pocket, what we call out of pocket payments, and what is worse, many of those have to boot them at the point of care– and for nearly 95 million of us, these bills are catastrophic, and for well 12 million people or more it causes financial impoverishment Health should address inequities in our region and lift people from poverty, not the other way around.

It's for this reason that universal health care remains a core tenet of health and development. Even in this time of crisis, where we must ensure that everyone, irrespective of income, ethnicity or gender, has access to quality care when they need it, without incurring financial hardships.

Our joint report recognizes these challenges and looks ahead with recommendations on what countries can do to recover.

Countries must avoid thinking that they must make a choice between reopening economies and protecting the health and well-being of their people. This, in fact, is a false choice. And I want to say it again. This is a false choice. The choice between health and restarting the economy.

We have seen time and time again that full economic activity cannot resume unless we have the virus under control. And to attempt otherwise places lives at risk and extends the uncertainty brought by the pandemic.

In this report, we have outlined policy recommendations to tackle the challenges across three different phases of recovery: control, reactivation and rebuilding and Ms. Barcena referred to those. Although these are distinct phases for which we have specific guidance, the recommended actions should be grounded on a core set of principles to help countries converge their health and economic policy:

- Health and well-being must be seen as prerequisites for reactivating the economy in the context of COVID-19. Health protection is both an ethical imperative and a necessary condition for restoring productive capacity. In short, if the pandemic is not brought under control, economic reactivation is inconceivable.
- Reducing inequalities is a central linchpin for all phases of the recovery process. Countries must work to minimize the financial impact of this public health emergency on the most vulnerable by removing barriers to care, providing financial safety nets, and supporting basic needs like food and water. Social protection is key both as a response to the immediate crisis and as we rebuild more inclusive, equitable societies.
- Prioritizing health and strengthening health systems based on the primary health care approach, is at the very foundation of our pathway towards recovery. Stronger, resilient health systems require countries in our region to increase public investment in a highly resolute first level of care. We also need to accelerate digital transformation that the countries are already beginning to invest in and position health at the center of such efforts to improve access while also making data readily available.
- We must strengthen the interaction and agreements between government, civil society, and the private sector to formulate strategies with multiple actors and support from broad sectors of society – and this must be managed with transparency and favoring intersectoral collaborations.

Let me remind you that reactivating our economies must be done gradually, based on evolving data about the virus's spread and our health systems' capacity. Data must always guide our actions against this virus. And PAHO and ECLAC are providing a benchmark, but each country will need to be responsive to their own national and local contexts.

All of this will require strong political leadership and significant investment to affect change. Recognizing the impact of this crisis, we call on all countries today to invest the recommended 6% of GDP to strengthen health systems, it's the right thing to do and it will help us be better prepared to face future waves of this pandemic, but also future outbreaks.

The Pan American Health Organization is committed to working with our Member States in accelerating the response against COVID-19, and to addressing its vast consequences in the Americas. We welcome ECLAC as a key partner in the work that they are doing but also in the joint effort towards recovery.

This pandemic has underscored that health is a right, and that right should be guaranteed for all. And our national governments have the responsibility to guarantee that right. When some are left behind, all of us are at greater risk. And this pandemic has shown that. Even as we continue to be challenged by COVID-19 and its health and economic impact, we must not lose

sight of realizing our vision of Health for All. Now more than ever we should work towards equity, ensuring that everyone across the Americas can have a healthier, longer life. Now more than ever we must create the necessary health and economic conditions so that we truly leave no one behind.

-----Thank you, and with me today is Dr. Barbosa, our Assistant Director, and he with me will contribute to answer your various questions

^[1] Insert data on regional health expenditures compared to OECD