



**Pan American
Health
Organization**



**World Health
Organization**
REGIONAL OFFICE FOR THE
Americas

59th DIRECTING COUNCIL

73rd SESSION OF THE REGIONAL COMMITTEE OF WHO FOR THE AMERICAS

Virtual Session, 20-24 September 2021

CD59/DIV/10
Original: English

**REMARKS BY DR. JOANNE LIU
UPON RECEIVING THE PAHO AWARD
FOR HEALTH SERVICES MANAGEMENT AND LEADERSHIP 2021**

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**59th Directing Council of PAHO
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Thank you very much, Mr. President,
Dear Directing Council,

I would like to thank PAHO for this prestigious prize. It is such an immense honor for me to receive this recognition.

The COVID-19 pandemic caught most of the countries by surprise. Many countries initially believed that this distant virus was non-threatening; they thought they were safe. Consequently, they adopted a wait-and-see approach. The synergistic combination of a lethal virus and a passive stance led to the disastrous outcomes that we know; overwhelmed healthcare systems, infected gasping for more oxygen, abandoned elderly homes by sickened staff and drastic lockdowns impoverishing further the most vulnerable.

Even here, in Quebec, it seems so unbelievable that our aging parents died of hunger and thirst in soiled diapers in long-term care homes. But it did happen, and it was not an isolated event. We were completely unprepared, beyond our imagination.

Tackling epidemics is always a very humbling exercise. Often, Murphy's Law applies: what can go wrong, goes wrong. There are three basic lessons learned through time: no wishful thinking, proactive mindset and prepare for the worst-case scenario.

The year 2021 held so many promises, mainly but not solely, from the amazing breakthrough discoveries of vaccines against COVID-19 at the end of 2020. After months fighting the two waves of infected patients with COVID-19, with healthcare workers sweating in burdensome personal protective equipment caring for them, we sighed in collective relief, caught our breath, and focused to get to the finish line of COVID-19.

Science literally saved the day. But greedy politics spoiled the day. The sickening race between wealthy countries in hoarding worldwide stockpiles of COVID-19 vaccines unsurprisingly mirrored the phenomenon of hoarding equipment the year before. This is a dramatic illustration of the structural and political problems that perpetuate global health inequalities today and likely for many years to come, if nothing happens.

The leftover scraps of vaccines supplies given to the low- and middle-income countries (LMICs) are not enough. The Access to COVID-19 Tools Accelerator, ACT-A, through its distribution pillar, COVAX, failed to deliver to the LMICs in 2021. So far, it delivered 25 million vaccines to PAHO countries. But in the long run, a vaccine re-distribution platform based on a charity model, the capricious good will of the wealthy to share, is not sustainable. For the future, we need to transform ACT-A into a truly global end-to-end platform to deliver a comprehensive basket of global public goods, including vaccines, therapeutics, and diagnostics.

But in fact, countries in the Americas do not stand still. Two public institutions in Brazil made technology transfer agreements with AstraZeneca and Sinovac. Local manufacturing is happening now. Furthermore, there is agreement between Argentina and Mexico with AstraZeneca to manufacture COVID-19 vaccines for the Region. And beyond the US Operation Warp Speed, four vaccines were developed in Cuba, two of them already released by the Cuban Regulatory Agency.

Health inequity, it does not matter how we call it – vaccine nationalism, vaccine hoarding, vaccine apartheid – the outcomes are the same: excess deaths, trillions of lost in economy, new and deadly variants.

But there are even darker sides of the COVID-19: surfing on large back of COVID-19 or the pushback of migrants. It's an issue that should be everybody's concern, including PAHO, although it's not its full responsibility.

The pandemic gave a blank check for countries to strengthen nationalists and nationalist discourse leading to the criminalization of people on the move, the migrants. For decades people have been fleeing extreme violence and extreme poverty from Central America, Mexico, and other countries. Through their journey towards their American dream, they repeatedly suffered extreme violence, sexual assault, and widespread discrimination. They are as well a source of business for the smugglers and the narcotraffickers. From early 2021, the US government has enforced over 900,000 expulsions under the Title 42, a policy that exploits the pandemic to essentially shut down the border to those asylum seekers in order quote-on-quote "to help prevent the introduction of COVID-19 in border facilities and within the country." Only unaccompanied children are not expelled in an expeditious way. Each day, by thousands they arrive. Mostly teenagers, 20% are in the tender age of five to ten. They are living in inhumane conditions, packed in poorly designed shelters. All should be reunited with their families or be placed in a foster care.

The aftershock of COVID-19 pandemic will be felt for years.

We must avoid the double fault of not being prepared and not learning.

While I'm talking to you, while the UNGA is unfolding in New York City, PAHO countries should strongly support a Political Declaration endorsed by Member States that would mobilize political and financial alignment on tackling the full range of issues relating to pandemic preparedness and response, and create consensus around the critically necessary reforms in access to global public goods, global governance, and financing.

And let me end on this note that the dark side of COVID-19 is something somehow that could be completely preventable. It is within our power. The reality is no extremely violent journey, no walls, no drastic policies will discourage parents to dream for their child's future – that's what my parents did. This is human survival. This is universal, so my plea will be that Title 42 be suspended, the Migrant Protection Protocols must be re-established. It is about our dignity, it is about safety, but above all and beyond it is about our common humanity.

Thank you very much.
