
WEEKLY PRESS BRIEFING ON COVID-19: DIRECTOR'S REMARKS—10 NOV 2020

10 NOVEMBER 2021

Good morning. Let me thank you for joining today's press briefing and today I am speaking to you from Dominica, my homeland, a tiny island.

After two consecutive months of decline, COVID infections are increasing in some countries in the Americas.

Over the last week, 700,000 new cases and 13,000 COVID-related deaths were reported in our region.

We are seeing jumps in cases in parts of Colombia and Bolivia. In the Southern Cone countries, we've seen an upward trend after public health measures were relaxed.

In the Caribbean, while Cuba, Jamaica and Puerto Rico have reported decreases in new infections, cases are rising in the Dominican Republic, Trinidad and Tobago and Barbados.

The Cayman Islands and Dominica are also experiencing a high number of cases.

The good news is that vaccinations continue to pick up in our region. Some 48% of people in Latin America and the Caribbean have been fully immunized against COVID.

But coverage is still much lower in some countries and territories.

In Jamaica, St. Vincent and the Grenadines and Guatemala, less than one in five people have been vaccinated and protected. In Nicaragua, coverage remains in the single digits and in Haiti, less than one percent of people have been fully vaccinated. This inequity must be addressed.

PAHO is committed to helping countries in our region secure the vaccines that they need to protect their people, - through donations, via COVAX and through direct procurement.

We are already working with manufacturers to secure additional doses on behalf of our region. PAHO has signed supply agreements with 3 manufactures of WHO EUL listed vaccines and it is in final negotiation with a fourth supplier, a mRNA vaccine producer. We are doing this to expand vaccine options for our countries in 2021 and certainly 2022. We invite our Member States to join this initiative using the Revolving Fund, our established and proven mechanism for equitable access to vaccine supplies, guided by evidence-based recommendations.

With an eye on the future, we are working directly with public institutions and private companies in Argentina and Brazil to strengthen their capacity to develop and produce COVID mRNA vaccines in our region that will benefit all countries in Latin America and the Caribbean. This is a strategic and long-term project to reduce our vulnerability and dependence by establishing regional capacity for this innovative technology. In the future, this can also help us combat other viral diseases of importance in the Region.

And we have partnered with the Coalition for Epidemic Preparedness Innovations (CEPI) to analyze our region's manufacturing potential with the hope of strengthening our role at every step of the supply chain to reduce our reliance on pharmaceutical imports.

But for now, too many people in our region remain vulnerable and do not have access to the vaccines that they need.

Over the last year and a half, we have seen how the health of our populations, the state of our economies and the wellbeing of our security and society are interconnected.

That's why today I want to talk about the importance of resilient health systems that can help our economies and our societies recover from this pandemic.

Health systems have been weakened by the pandemic.

As countries worked to quickly build ICU bed capacity and ramp up hospital services to care for COVID patients, other essential health services suffered.

More than half of countries in our region reported disruptions to mental health services and routine immunization programs.

Reproductive health services, nutrition care and support for managing chronic conditions were interrupted in more than 40% of countries.

These services have one thing in common: they are offered at the first level of care.

Primary care, as you have heard us say over and over again, is the backbone of our health systems.

Strong primary care services can meet most people's health needs, close to the communities that they serve. It's also at the primary health care level that prevention takes a big focus. So, when countries deprioritize these services, they leave patients with fewer of the services and care they need to stay healthy.

That's why building more resilient health systems should start here, at the first level of care.

This is especially true during a pandemic, as it is at the primary care level that COVID testing, contact tracking and tracing and immunizations take place.

It's essential to bring more people into the system and improve access for all, because even before the pandemic, nearly 30% of people in our region could not access health services because of who they are, where they live or because the cost was simply too high.

To address these inequities, countries must prioritize public investments in their health systems to leave no one behind.

Chronic underinvestment has made the Americas vulnerable to COVID-19. Few countries invest as much public spending in their health systems as they should, leaving them prone to shortages in health personnel and essential supplies, as well as crumbling infrastructure and underfunded essential public health functions.

But we've seen throughout this pandemic that countries can increase public spending on health.

Public investments in health during the pandemic increased in many countries to improve health service capacities for COVID-19, to maintain essential health services, and to deploy COVID-19 vaccines. Many governments obtained support for new loans or reprogrammed existing loans from international financial institutions.

Several countries are moving forward with special allocations and programs to reinforce health services at the primary care level. Chile, for example, had the highest increase in primary care spending in 15 years. Uruguay approved extending national health insurance to workers that lost their jobs. Peru posted a 13% increase in its health budget to prioritize primary care. Bolivia has pledged that 10% of public expenditures would go to health over five years.

But this cannot be a short-term trend. All countries should increase public expenditures to the recommended 6% of GDP or higher in their health systems, and they should ensure that 30% of this funding goes to the first level of care.

Increased public investments were key during the pandemic and will be so after it recedes.

Financial institutions are making additional loans available, and donors are pledging their support, so there's never been a better time for countries to take advantage of these resources to maximize their public investments in health.

But it's not just about spending more, it's about spending smart - that is why governance is key.

Our health systems should be properly managed and guided by evidence to ensure they are effective and can keep us safe.

We also need greater dialogue between health, finance institutions, industry, industrial partners as well as civil society, so decisions affecting our health systems reflect the expertise of our health authorities, and that health policies are transparent, harmonized, and efficient.

Insufficient public investments in health threaten our ability to recover from this pandemic and could have ripple effects for years to come.

As economies remain strained, countries face choices about how to spend limited funds-and these are tough choices.

But we cannot forget that health is an investment, not an expense.

As we learned with COVID-19, health is at the core of vibrant societies. It keeps people working, it keeps kids in schools, and companies productive and economies growing.

Without it, we are more vulnerable to economic and political instability.

Now, more than ever, we must rebuild with the vision of health for all as our guide.