Good morning, thank you for joining today’s press briefing.

As of July 20, 7.7 million, and more than 311,000 deaths have been reported in the Americas. The COVID-19 pandemic is showing no signs of slowing down in our region. During the last week, there were almost 900,000 new cases and nearly 22,000 deaths reported in our region—most of these within Brazil, Mexico and the United States.

While most countries in North America are witnessing a surge in cases, Canada has been able to flatten its epidemic curve. Further south, several Caribbean countries have implemented effective travel restrictions and managed to control clusters of outbreaks, and as a result, have now resumed non-essential travel.

Most countries in Meso America are reporting their highest weekly increases of COVID-19 cases since the pandemic began.

In South America, COVID-19 continues to spread in the Amazon basin, with countries such as Bolivia, Ecuador, Colombia and Peru seeing significant surges in cases, particularly in localized hot spots. Also, in the past weeks we have observed the virus spreading to the countries of the Guianese shield such as French Guiana, Suriname and Guyana.

Countries in the Southern Cone, like Chile, Argentina and Uruguay, have made important progress in strengthening influenza surveillance and carrying out flu vaccination campaigns in the last few months. There has been very low circulation of influenza reported in those countries, which suggests that hand hygiene and social distancing can also contribute to the reduction of other respiratory viruses.

Countries must rely on accurate and timely data about the spread of COVID-19 to guide their actions. Analyzing this data in real time will help leaders determine whether it’s safe to consider reopening, or if it’s more important than ever to boost hospital capacity and implement the public health measures we know save lives.

It’s through better, more detailed data that we’ve learned that some people are more prone to get sick from COVID-19 than others.
Research shows that certain underlying, chronic conditions like diabetes, kidney disease and hypertension, as well as infectious diseases, such as HIV and tuberculosis, place people at increased risk for more severe COVID-19 disease.

Unfortunately, many of these medical conditions are widespread in the Americas, which leaves our region more vulnerable to severe illness.

Thanks to a new partnership with the London School of Hygiene and Tropical Medicine, PAHO has developed a data model that provides a more accurate picture of the prevalence of health conditions in our region.

What we see is worrisome.

Across the Americas, three out of ten people – or nearly 325 million people – are at increased risk of developing severe COVID-19 illness due to underlying health conditions. We are talking about 186 million people in Latin America and the Caribbean, and in the Northern America subregion, which includes the U.S. and Canada, the data show that one in three are at increased risk of severe COVID-19.

Among people with co-morbidities in the Americas, there are 43 million at high risk, which means they would require hospitalization due to their underlying health conditions. And within this group, men are twice as likely as women to be at high risk of developing severe COVID-19.

Since the likelihood of developing multiple health conditions increases with age, people over the age of 65 are at greater risk of experiencing more severe disease.

But working-age adults – which refers to people from 15-64 – are not immune, as many of them live with one or more underlying health condition. Diabetes and chronic kidney disease, in particular, are especially prevalent among adult populations.

Over the next few weeks, PAHO will be rolling out a new tool for Members States based on the adapted model we developed with the London School of Hygiene and Tropical Medicine.

It will enable countries to use regional and country-specific data on the prevalence of co-morbidities to adapt their COVID-19 responses and better protect vulnerable populations from chronic conditions that threaten their health. Again, data must underpin our actions.

**First**, knowing who is at risk will help countries develop strategies to protect people with co-morbidities. From self-isolation with assistance, to providing adequate resources and support systems, such interventions can help countries reduce deaths among vulnerable groups, while also helping to flatten the curve and preserve the capacity of health services.

**Second**, with the surge in COVID-19 patients, many health systems lack the staff, space and supplies to adequately offer routine care. Such disruptions have delayed treatments for cancer patients and dialysis for those with chronic kidney disease. People with diabetes are running out of insulin, and HIV patients have to worry about continuing their treatment.
With the new tool, countries can tailor their response to protect vulnerable groups from risk and implement innovative programs to help people safely and more consistently manage their conditions. This includes increasing telemedicine capabilities and establishing surge points for care, which allows people with chronic conditions to be seen by a doctor away from suspected COVID-19 patients.

PAHO has been supporting countries since the onset of the pandemic by conducting needs assessments and helping countries expand their supplies and staff to protect the resiliency of health systems while fighting COVID-19.

**Third**, countries can also issue more specific guidance to people prone to severe COVID-19. For instance, vulnerable groups should be advised to connect with their health care providers to ensure they have the medications and supplies they need to safely manage their conditions.

This is also the time to rely on their friends and families to run errands so they can minimize trips outside their homes. And as much as possible, people should maintain a healthy routine at home that includes regular exercise and nutritious food.

Taken together, these strategies can minimize COVID-19’s spread, reduce deaths and protect health systems.

The arrival of COVID-19 introduced a grave new threat to the health of our societies. But it also has shone a revealing light on the prevalence of diseases and conditions that have plagued our region for decades.

The impact of co-morbidities on the spread of the virus should be a clarion call to every country in the Americas: use data to tailor your response and make health your top priority.

Strengthen your health systems by responding to emerging needs informed by better data. Boost your capacity, improve your quality of care, and make health more accessible to the poorest and most vulnerable.

Let’s ensure our response to the pandemic does more than stop COVID-19. Let’s build a healthier, more resilient region that’s better prepared to take on the next challenge.