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

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Good morning. Let me thank you all of you who joined us for today's briefing.

In the last week we saw more than 2.5 million new cases of COVID-19 in the region of the Americas – that is more than half of all global infections. In the same period, 42 thousand people from the Americas have lost their lives to the pandemic.

This sustained boom in cases is sobering proof that our region, and our world, is failing to control this coronavirus. In far too many places public policies are not congruent with the severity of the situation. And many of us have relaxed the control measures that we know work, which have helped us stay healthy and kept hospitals functional up to now.

I am particularly concerned for the next few weeks. Throughout our region, especially in North and South America, many hospitals are operating at or very close to capacity.

The reports from Manaus, in Brazil, illustrate what happens when a health system lacks enough capacity to cope with the speed of new infections. But not just Manaus that it is at risk. We've had reports of oxygen being rationed in some locations in the United States of America and in Peru.

In fact, ICU occupancy rate stands at 90% in some parts of Peru. Several locations in Brazil and in Ecuador are operating close to their limit.

In Mexico City, the majority of beds are occupied by COVID-19 patients. And hospital capacity continues to be challenged in countries of the Southern Cone like Chile, Argentina and Uruguay.

In the Caribbean, the first week of 2021 saw the highest number of cases reported since the beginning of the pandemic. Barbados had a 61% increase in new cases over the past two weeks, mostly among the local population. And as cases rise, so does the demand for testing, severely stressing laboratory capacity.

The new variants detected in the United Kingdom, South Africa and Brazil are also concerning, as they may be playing a role in accelerating new infections throughout our region. We are studying the effects of variants on transmission and our genomic surveillance network of some 21 laboratories is tracking the emergence of variants in the Region.

Still, these factors highlight the fundamental truth that we must intensify public health interventions to limit exposure to this virus. Social distancing, limiting gatherings and the consistent use of masks in public settings and frequent hand washing are our absolute best hope for reducing the number of COVID-19 infections right now. We can't stress that sufficiently.

These measures remain the best option for places that are seeing cases rise to unprecedented levels and hospitals fill up fast. I urge the leadership of our region to embrace these measures to save lives. This is not the time to let our guard down.

Of course, vaccines will also help save lives and eventually halt the pandemic.

PAHO is both encouraged and inspired by the speed with which COVID-19 vaccines were developed. But we are also aware that there aren't yet enough doses to achieve a visible impact on transmission at this point in the short term. Currently, the doses available for use are very limited and will remain in short supply everywhere, as manufacturers race to meet global demand over the next few months.

The start of immunizations in some countries is the first step, but we have a long way to go to make this a reality for everyone across the whole region. In poor countries, development

countries alike. No one is safe until all are safe. Our vision is one of equity of access to vaccines, and we are working day and night to make this a reality.

PAHO and its partners are at the center of an effort not only to accelerate access, but to ensure that vaccinations reach everyone who wants to receive them. The goal is to start vaccinations in a comprehensive, safe manner, building sustainable campaigns and immunization programs that can help end the pandemic in every country of our region.

The COVAX facility remains the most equitable mechanism to make vaccines available in all countries in the Americas, regardless of the size of their population or their GDP. So far, COVAX has secured agreements for two billion doses of vaccines to be deployed this year. This is unprecedented in scale, but also in the fact that the vaccines will reach all participating countries virtually at the same time.

At least seven countries in the Americas are now vaccinating their populations as part of bilateral agreements. COVAX can complement this effort and indeed help other countries to commence immunizations early.

COVAX has agreements with AstraZeneca and the Serum Institute of India for the supply of AstraZeneca and Novavax licensed vaccines, as soon as these obtain the Emergency Use Listing approvals from the World Health Organization. As we speak, COVAX is actively negotiating deals with Pfizer and with further announcements that can be expected in the near-term. Vaccines are expected to reach countries by March if not a little earlier.

PAHO's Revolving Fund, which has four decades of experience procuring and distributing vaccines, will play a key role in this process, supporting countries along the way. In addition to vaccines, the Fund helps Member States with the acquisition of syringes, safety boxes, cold chain equipment and other supplies that allow vaccines to be safely delivered to every corner of our region.

So, as the delivery times approach, we know the process will take time due to demand and supply factors. Countries have only a few weeks to prepare for the vaccine's arrival. Having a comprehensive safe plan in place will greatly facilitate the successful vaccine rollout in any country.

All Member States participating in the COVAX Facility are developing a national vaccine deployment plan that is adapted to their context and their population.

These plans cover every step in a vaccine's journey and every stakeholder critical to its success:

- From the regulatory agencies that issue approvals and monitor safety data over time
- To the logistics systems that coordinate delivery of doses and monitor the state of cold chain systems
- To the recruiting and training of staff so health personnel throughout the country know how to deliver these vaccines
- To the public campaigns to ensure populations know where and when and why to receive their doses

PAHO is helping countries throughout this planning process. So far, 18 countries have shared their national vaccine deployment plans with PAHO for feedback, and 23 countries have completed the Vaccine Readiness Assessment tool.

The vaccine rollouts already underway are also generating important lessons for the region.

We're seeing, for instance, the importance of assessing the readiness of *each* health facility where vaccines will be distributed and administered. And we are also learning how critical it is to have strong information systems in place to find target populations and track vaccinated individuals.

By heeding these lessons now, countries will be better prepared to introduce the vaccines as soon as the doses are available.

For us in PAHO, a successful vaccine introduction must not simply be measured by its timeline but through the lens of fairness. We must not let vaccination campaigns fracture along the lines of inequity that have marked the health of our region.

Vaccine rollouts should prioritize those at risk – like health workers at those at the frontlines of our response, the elderly and those with pre-existing conditions.

They also should prioritize disenfranchised populations that often struggle to access that the care they need.

We have gained important knowledge and experience in reaching these groups: we do it every year through our seasonal flu campaigns that protect over 100 million people every year in the region. Additionally, our region has succeeded with other mass vaccination campaigns that have helped us eliminate smallpox, polio, rubella and measles. We have the tools that we need to move forward.

Our Member States have a wealth of experience to build on. Our foundation in immunization is strong and will pave the way for success.

There are nearly a billion people to immunize in our region. The task is daunting but not unrealistic. It will take many months of hard work, but here in the Americas we know where to start and we have the resolve to see this through by working together in solidarity and leaving no one behind.