The Covid-19 Pandemic in Latin America and the Caribbean

Among major world regions, South America stands out both in the absolute number of Covid-19 deaths in the pandemic thus far and in deaths per 1000 population. Two recent reports of the Economic Commission for Latin America and the Caribbean (ECLAC), one prepared in conjunction with the Pan American Health Organization (PAHO), describe the scale of the pandemic in the ECLAC region at the end of the second year and record its disruptive effects. Excerpts from them are reprinted below. The age-sex pyramids showing reported Covid cases and deaths (Figure 1) offer a summary picture. The effects of the pandemic amount to “the most serious economic contraction of the past 120 years” experienced by the region and “a steady deterioration of the social development process.”

ECLAC has long been noteworthy among the UN regional commissions not only for the empirical and analytical depth of its reports but also for its forceful advocacy of a growth-plus-equity development agenda. This didactic element is seen throughout these documents, as, for example, in the last sentences of the ECLAC-PAHO report:

Policies for transformative recovery must recognize the interdependence of the health, social, economic and environmental dimensions and form part of a strategy for structural change based on a big investment push for economic, social, and environmental sustainability. … The prolongation of the health crisis has exposed and deepened the region’s historical gaps; and it has underscored the urgency of strengthening the welfare state and implementing universal, redistributive and solidarity-based policies with a rights approach, to ensure that no one is left behind. The welfare state must be geared towards guaranteeing that people can exercise their rights, and consolidating sustainable development.

More specifically (from the excerpt below), the pandemic has “revealed the weaknesses of the economic, social and environmental aspects of the region’s development model…[Its impacts] underscore the region’s vulnerability.”

Sources: ECLAC, Social Panorama of Latin America, 2021 (Santiago, 2022), pp. 17–21; and ECLAC-PAHO, COVID-19 Report: The prolongation of the health crisis and its impact on health, the economy and social development (October 2021), pp. 3, 12. References are omitted.
The concentration of COVID-19 deaths in Latin America and the Caribbean

Latin America and the Caribbean has the highest number of reported COVID-19 deaths of any region in the world (1,562,845 by 31 December 2021), and sadly the figures will only grow while the pandemic continues. That is 28.8% of total reported COVID-19 deaths in the world, even though the region accounts for just 8.4% of the world’s population. The region also has the most COVID-19 deaths per 1,000 people (2.37 deaths), followed by North America (2.28) and Europe (2.04). Peru is the country with the highest number of reported COVID-19 deaths per 1,000 inhabitants, at 6, almost three times the average for the region. At the regional level, Brazil is next, with 2.89 deaths per 1,000 people. It is followed by Argentina (2.57 deaths per 1,000 people), Colombia (2.53), Mexico (2.30), Paraguay (2.30), Guadeloupe (2.08) and Chile (2.03).

As the pandemic has spread, new strains of the virus have been detected and the World Health Organization (WHO) has classified five variants of concern: alpha, beta, delta, gamma and omicron. These variants are considered critical because they are more transmissible and result in more severe illness. In addition, antibodies from previous infections provide significantly less protection against these variants (meaning greater likelihood of reinfection), treatments and vaccines may prove less effective in combating them, and they can cause misdiagnosis. By the end of December 2021, all of these variants of concern had been detected in Latin America and the Caribbean and towards the end of October the delta variant had become the predominant variant in the region. At the beginning of 2022, the Omicron variant was detected in 22 of 33 Latin American and Caribbean countries just one month after the first case was reported in the region, owing to its high rate of infection. WHO has indicated that there is still a risk of new variants emerging, because of the evolutionary nature of the virus. In the first half of 2021, the new variants overwhelmed and even collapsed health systems in the region, which were already structurally weak.

The increased transmissibility and severity of infections in 2021 meant that people initially not at risk of death because they had no comorbidities or pre-existing chronic diseases and not in the age group initially considered at risk died during the new wave of the disease. Analysing COVID-19 deaths by age group, all countries with available information recorded significant increases in reported deaths among those aged under 60, a group which at the beginning of the pandemic had lower proportions of reported COVID-19 deaths. With the exception of Mexico, in all the countries there were already more COVID-19 deaths in under-60s in the first half of 2021 than in all of 2020.

While reported COVID-19 deaths are a better indicator than the number of notified cases, they may represent only a fraction of total COVID-19 deaths. This is because there are significant differences between countries in terms of access to testing and health services for diagnosis of the virus, completeness of death records, quality of data classification by cause of death, and disease monitoring in emergency situations.

The COVID-19 pandemic and the ongoing health crisis have affected the health of the population in ways that go beyond infection or death from the virus, and will continue to do so. The saturation of health systems and their reorganization to respond to the pandemic, as well as changes in people’s behaviour because of the perceived threat of the virus, have together created new obstacles to access to health care, deepening pre-existing inequality, and directly affecting the care and health of the population.

In 2020, the health crisis sparked the most serious economic contraction of the past 120 years in Latin America and the Caribbean, which also saw the worst economic performance of all the developing regions. Even before the pandemic hit, the
region was already troubled by sluggish growth and, although the economy is expected to expand by 5.9% for 2021, this will not be enough for it to regain the GDP levels of 2019. In the labour market, both employment and the labour force participation rate are at record lows, and unemployment, poverty and inequality have reached peak levels. It is estimated that 2020 pushed 22 million more people into poverty, with a significant impact on children. The loss of jobs—and thus of income—has pushed up poverty rates and heightened income inequality. The situation of vulnerable persons, such as informal workers, women and youth, indigenous people, persons of African descent, migrants and persons with disabilities has worsened. The effect of all this on young people’s schooling raises the risk of a lost generation in terms of education. The crisis has also led to the closure of a large number of small and medium-sized enterprises (SMEs) and to the destruction of human capital and jobs. These factors are exacerbating the heterogeneity of the region’s production sector, which is compounded by low levels of investment.

Thus, in addition to giving rise to an alarming public health situation in the countries of Latin America and the Caribbean, the pandemic has also revealed the weaknesses of the economic, social and environmental aspects of the region’s development model. The multiple and profound impacts that the health crisis has had and continues to have, despite the economic recovery, underscore the region’s vulnerability.

The COVID-19 pandemic has highlighted the need for comprehensive policies and the importance of recognizing the interdependence of health care, the economy, social development and the environment, and its prolongation has served to cement the central role of State action. The role that the State has played during this protracted crisis has been fundamental in containing and mitigating its profound repercussions and the erosion of social and economic development. The extensive fiscal measures announced and implemented by the countries of the region have proven to be a key economic policy tool in mounting a response to the crisis.

Figure 1 displays the population age pyramid for Latin America and the Caribbean, overlaid with COVID-19 cases, both male and female, and COVID-19 deaths, also by gender. Although all age groups have been affected in terms of cases, Figure 1A shows that case rates are similar between men and women, but more concentrated in the 25–39 age group. In terms of mortality, Figure 1B reveals that men have been more susceptible than women, and that the largest number of deaths occur in the 65–74 year age bracket.
FIGURE 1  Latin America and the Caribbean (19 countries): confirmed COVID-19 cases and deaths, by sex and age group, 2021

A. Confirmed COVID–19 cases

B. COVID–19 deaths

NOTE: The horizontal bars with black borders represent confirmed COVID-19 cases and reported deaths.

SOURCE: Pan American Health Organization (PAHO).