

EDITORIAL INTRODUCTION

TOWARDS AN EFFECTIVE PANDEMIC RESPONSE WHERE NO ONE IS LEFT BEHIND

Christine C. Leyns, MD^a and Sandra van Dulmen, PhD^b

Corresponding Author: Christine Leyns, Ghent University, C. Heymanslaan 10, ingang 42—6th floor, 9000 Gent, Belgium.

E-mail: Christine.Leyns@ugent.be

INTRODUCTION

When a country is hit by a disaster or an epidemic, global solidarity is called upon and resources are mobilized, largely from high-income countries. The current pandemic scenario was different, even more in the beginning. All countries were hit, and they needed their own resources to reduce the impact on their health system and population. Many factors have been identified to hamper an optimal response to the pandemic like a delayed country-level and WHO response, a lack of coordination among governments, public opposition to routine public health and social measures, and the failure to properly address the profoundly unequal effects of the pandemic [1].

A PRIMARY HEALTH CARE-BASED HEALTH SYSTEM WITH AN EMPOWERED COMMUNITY

Latin America, the most unequal continent where many depend on informal work for their livelihood and where historically trust in formal institutions is low, was disproportionately hard hit by the pandemic [2]. Official mortality data related to COVID-19 fail to show the true burden suffered in this continent. In 2021, only Peru revised its data tripling its official death toll [3] while becoming the

^a Family physician and researcher, Department of Public Health and Primary Care, Ghent University, Belgium; Associate researcher, faculty of social sciences, Universidad Mayor de San Simon, Bolivia.

^b Nivel (Netherlands institute for health services research), Utrecht, Netherlands; Radboud University Medical Center, Radboud Institute for Health Sciences, Department of Primary and Community Care, Nijmegen, Netherlands; Faculty of Caring Science, Work Life and Social Welfare, University of Borås, Borås, Sweden.

number one with the highest number of deaths per million in the world [4]. Excess mortality during the pandemic, the number of additional people that died during the pandemic compared to the number of people projected to die in that period, shows more accurately the devastating effect the pandemic had in the region [5]. While in worse affected European countries like the UK the highest peak of excess mortality was 107%, two times more people died than expected, in Bolivia, Peru, and Mexico this was respectively 245%, 210%, and 167% and in Uruguay 71% [6].

During the first COVID-19 wave, Uruguay presented a negative excess mortality, meaning that less people died than would have been expected without the event of a pandemic. The key factors of this successful response are described by Escalante [7]. Essential were a significant support to unemployed people, solidarity mechanisms to alleviate poverty, trust in the government, transparent information, and community participation. An additional strength in Uruguay was the continuity and even the strengthening of a health system based on primary health care. Access was facilitated by mobile teams and tele-health without closing the in-person primary health consultations. This excellent pre-hospital care system led to an unchanged number of people who reached the hospital with an acute appendicitis and an increase, possibly related to stress or changed diets, in people who accessed for an acute cholecystitis as described by Trostchansky et al [8]. Beside the beforementioned factors, Uruguay and Chile are the only high-income countries of the region and Uruguay is the country of the region with the highest state legitimacy index. Notwithstanding this seeming advantage, Uruguay ranks 11th and Chile 6th in the world on the Gini inequality index [9], illustrating that intersectoral poverty relief measures, participation of well-informed community representatives, and a primary healthcare-driven health system may have facilitated the populations compliance with preventive public health and social measures.

LEAVE NO ONE BEHIND (LNOB)

Beside country-level experiences and measures, it is important to revise the data within countries, between regions and related to gender and vulnerable populations. A striking example is a close to four times higher excess mortality observed in the indigenous populations of Ecuador than in the majority mestizo population [10]. This illustrates the importance of analyzing the people behind the numbers. Who were most affected? Were there population groups that seemed to have been left behind? What are the determinants that caused the high mortality rate in Latin American countries with populations much younger than in Europe?

The leave no one behind (LNOB) principle is at the heart of the 2030 Agenda for Sustainable Development and its Sustainable Development Goals (SDGs). It

represents the commitment to eradicate poverty in all its forms, end discrimination and exclusion, and reduce the inequalities and vulnerabilities that leave people behind and undermine the potential of individuals and of humanity. It states that progress can no longer be measured in averages but to benefit all people [11]. This principle is essential in analyzing data related to the current pandemic and to draw lessons for the future. The analysis presented by Mezzich et al. in this issue illustrates the complex nature of an inclusive person-centered healthcare response to a global healthcare crisis, where no one is left behind [12]. Beside analyzing factors that affect health, the need to build on primary healthcare integrating public health principles and the perspective on historical and current alternatives to the biomedical model, the concept of care for the self and others is strongly emphasized. This care model calls for a shift from a health structure centered to a people-centered model of care. To guarantee a sustainable and cost-effective way toward health equity, the participation of all people and all sectors supported by strong primary health care as the integrator is needed.

The commitment to eradicate discrimination is another essential element of the LNOB principle. Transgender and gender-diverse people suffer from a broad range of stressors that can negatively affect their health and lead to mental health problems, including suicidality. During the pandemic they reported higher unemployment rates and greater financial difficulties. Although telehealth to some extent facilitated access to health care, the specialised services for gender related care were often closed [13]. Marega and Mezzich describe the progressive gender identity law enacted in Argentina in 2014 with special amendments added in 2020 in the light of the pandemic [14]. This example shows the importance of the legislation in consolidating change and rights for people. The health system response is important but will have little sustainable impact in isolation.

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