

## International Seminar: **Brazilian Tragedy: a risk for our Common Home?**

4-6 May 2021

Fifth Panel: ***Pandemic and health crisis in Brazil*** (May 6, 10:00 to 11:10 a.m.)

### Current statistics:

Weekly cases as at 26.4.2021: 421,933 (out of 5,711,215 globally)

Weekly deaths as at 26.4.2021: 17,365 (out of 93,555)

Current total of confirmed cases: 14,779,529 (out of 153,738,171 globally)

Current total deaths: 408,622 (out of 3,217,281 globally)

No nation has escaped the tragic direct and indirect impacts of the COVID-19 pandemic. It is, by definition and par excellence, a global pandemic that threatens each and every one of us. But at this moment, it has two particularly dramatic geographic centres – India and Brazil.

On Monday, the World Health Organization said that together, India and Brazil accounted for more than half of all new infections in the whole world last week. In the week of 26 April, Brazil recorded 421,933 new infections (out of just over 5,700,000 globally), and 17,365 deaths (out of 93,500 globally) – almost one-fifth of the global total!

WHO Director-General Dr Tedros Adhanom Gebreyesus rightly observed that what is happening in India and Brazil can happen anywhere, unless public health precautions that WHO has been calling for since the beginning of the COVID-19 pandemic, like wearing masks, social distancing, and proper hygiene, are taken. And although vaccination campaigns are now proceeding more rapidly, at least in some countries, as Dr Tedros said, "Vaccines are part of the answer, but they are not the only answer."

COVID-19 infections and mortality rates have continued to surge in Brazil, causing terrible suffering for many families and communities. Brazil has now lost well over 400,000 lives to the virus – a death toll second only to that of the USA – and confirmed a total of approx. 14,780,000 infections (approx. 7% of the total population), putting unbearable pressure on Brazil's health services.

The evidence from Brazil has also shown that the idea that children are at zero risk from COVID-19 is a tragic misconception. Figures from the Brazilian Ministry of Health show that between February 2020 and 15 March 2021, the virus killed at least 852 of Brazil's children up to the age of nine, including 518 babies under one year old. But it is likely that the actual toll among this age group is more than twice that number. Taking into account the ten-fold increase in deaths from unspecified acute respiratory syndrome during the pandemic, the estimated toll rises to 2,060 children under nine years old, including 1,300 babies.

Brazilian society was already one of the most unequal in the world before the pandemic, which has amplified the vulnerability of poor and marginalized communities.. As in similarly unequal societies, poverty and access to health care have been major factors in the course of the pandemic, and very often it is children who are among the most vulnerable.

A study of 5,857 Covid-19 patients under the age of 20, carried out by Brazilian paediatricians led by Dr Braian Sousa from the São Paulo school of medicine, identified both comorbidities and socioeconomic vulnerabilities as risk factors for the worst outcome of Covid-19 in children.

In the Brazilian context, the most vulnerable are black children, and those from very poor families, as they have the most difficulty accessing help, and consequently are the most at risk of death. Moreover, the crowded housing conditions in which most poor people live make it impossible to socially distance when infected. Poor communities typically lack access to adequate hygiene facilities let alone intensive care health services, further worsening their prospects.

In addition, Brazil's once envied health care system had already been severely weakened by economic austerity policies. The COVID-19 pandemic magnified the adverse impacts of the 2016 constitutional amendment that capped public expenditure in Brazil for 20 years. Consequently, at the time the pandemic hit, only 10% of Brazilian municipalities had intensive care beds, and the Unified Health System did not even have half the number of hospital beds recommended by the WHO. So it is no surprise, and no accident, that this weakened public health system is buckling under the current strain.

Moreover, with the ending of the basic income payments made by the government from April to December 2020, millions of Brazilians who had been briefly lifted out of poverty swiftly fell back down. Indeed, within one year, the number of people living below the poverty line went from 7 million to 21 million. Malnutrition is too often the result, and of course malnutrition also has a major impact of the strength of the immune system.

On Tuesday, we heard testimony from Brazil's former health minister Luiz Henrique Mandetta to the Senate inquiry looking into the government's handling of this crisis that President Bolsonaro repeatedly ignored warnings that his response to the pandemic risked causing the health system to collapse. I expect that we will hear more testimony of this kind as the inquiry proceeds.

President Bolsonaro is accused of – and in many cases is actually on record – downplaying COVID-19 as a “little flu”, disregarding expert scientific advice on face masks and stay-at-home measures, resisting vaccines, and promoting unproven remedies. He has argued since the beginning of the pandemic that the economic impact of national lockdown measures would do more damage than the virus itself.

Now obviously, those in positions of government leadership are often called upon – especially in such a crisis situation – to make extremely difficult decisions balancing different interests and objectives, in many cases implying compromise and imperfect outcomes. However, President Bolsonaro's stated priority of protecting the economy in the midst of

this pandemic begs some important questions. Can an economy actually continue to function in a society where so many people are becoming ill and dying, and essential health services are teetering on the brink of collapse? And if so, what sort of economy is that, and for whose interests does it operate?

It is a false dichotomy to pretend that one can choose protecting the economy over addressing this public health emergency – or public health over the economy, for that matter. Each can only operate in tandem with the other.

As Dr Christos Christou, President of MSF, said in a statement in mid-April, “Public health measures have become a political battlefield in Brazil.” “The Brazilian authorities have overseen the unmitigated spread of COVID-19 over the past year,” he said. “Their refusal to adapt evidence-based public health measures has sent far too many to an early grave. The response in Brazil needs an urgent, science-based and well-coordinated reset to prevent further avoidable deaths and the destruction of the once prestigious Brazilian health system.”

Brazil succeeded in vaccinating 92 million people against H1N1 (Swine Flu) in just three months in 2009, but today the COVID-19 vaccination campaign is running at half speed. The government refused to buy vaccines several times last year, based on political grounds and conspiracy theories, and this has put Brazil at the end of the line in terms of vaccine supply today. As of mid-April, around 11% of people had received at least one dose. This means that millions of lives inside Brazil, and even beyond its borders, are at risk from more than 90 variants of the virus currently circulating in the country, as well as any new variants which may emerge.

It is important also to underline that it is increasingly acknowledged that the risk of new zoonotic diseases (i.e. diseases spread from animals to humans) and related pandemics is increased by accelerating deforestation and encroachment on remaining wildlife habitats. In addition to being at the forefront of the current pandemic crisis, Brazil is also at the leading edge of the deforestation crisis, with potentially significant implications for future pandemic risks.

The WCC, as the leading instrument of the international ecumenical movement and a global fellowship of churches, always seeks to be a voice and advocate for the churches and their ministries in their contexts. We have a special priority for the poor and most vulnerable, and for care for creation, our shared home and all that lives on it. We seek also to encourage and support the diaconal ministries of the churches in promoting peace and human rights and in responding to suffering and injustice.

Tomorrow, Friday 7 May, WCC will join the Catholic Bishops Conference of India, the National Council of Churches in India, and the Evangelical Fellowship of India in marking a day of prayer and fasting for the healing of India, in solidarity with the Indian people’s struggle in the teeth of the pandemic. Today, for the same reasons, we are joining all of you in this seminar recognizing the tragedy afflicting Brazil.

The situation in Brazil - including in the context of the pandemic and its impacts - fully warrants closer accompaniment and support by the WCC and all international ecumenical partners. We have, and will continue to engage in consultation with the churches of the country in order to identify ways in which that accompaniment and support can be offered constructively, in the midst of such extreme political polarization.

Ultimately, it will be for the people of Brazil to form their own views, based on evidence and experience rather than polemic, and to exercise their electoral power to ensure that government serves the interests of its people – all its people, starting with those whose vulnerability, poverty, marginalization and exclusion has been deepened during this pandemic.