The World Bank – PAHO Lancet regional health Americas commission on primary health care and resilience in Latin America and the Caribbean



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Since the Declaration of Alma-Ata of 1978, Primary Health Care (PHC) has been acknowledged as a fundamental component of health systems and has been continuously used in response to countless health challenges. In Latin America and the Caribbean (LAC), many countries have adopted and tailored the PHC approach, resulting in considerable success in health outcomes, but its development and priority vary across the region.1 During the COVID-19 pandemic PHC was typically underutilized throughout the response phase, as political and policy priorities were mainly placed on hospital care and vaccines. Despite noteworthy innovations in some countries during the pandemic, there was significant untapped potential within the realm of PHC for prevention and epidemic control, as well as for sustaining essential health services.2,3

The COVID-19 pandemic, along with emerging and pre-existing public health challenges such as climate change, have further underscored the imperative of employing a PHC approach to attain universal access to health and universal health coverage. PHC not only offers integrated, people-centred services close to the community, but can build trust between communities and health systems, and relay complex health messages-all critical at the time of crisis. Further, the COVID-19 pandemic was marked by significant inequalities based on socioeconomic status, gender and ethnicity amongst other dimensions,4 PHC both through its prioritization of equity and its commitment to providing services for all, following Universal Health Coverage principles, offers a means to ensure more equitable pandemic responses in the future.5

In LAC, the commitment to PHC has been articulated in regional resolutions by Member States of the Pan American Health Organization (PAHO), ^{1.6} which called for the transformation of health systems based on a PHC approach that considers the needs of populations. This shift aims to accelerate pandemic recovery, recuperate

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and sustain public health gains, and retake the path toward universal health. In addition, the World Bank (WB) has published regional and global reports calling for investments to prepare for future public health emergencies, protect lives and the economy, and foster human capital, including through a high-performing PHC-based health system. This is closely linked to the surge in policy attention to resilience as a critical feature of health systems now and in the future. 9,10

The new WB-PAHO Lancet Regional Health Americas Commission on PHC and Resilience in LAC seeks to advance knowledge that will inform decision-making for the future development of PHC and resilience within the region. Despite existing efforts in LAC, a great need persists to understand how PHC systems can be transformed to effectively prevent, prepare for, respond, and adapt to public health emergencies, such as the ones arising from climate change, pandemic risks, natural disasters, fragility, conflict and violence, and other related factors. The LAC region is confronted by a convergence of such risks that might trigger significant public health emergencies. These risks are exacerbated by pre-existing health system weaknesses including fragmentation, constrained budgets, eroded public trust in institutions, and long-standing social and economic hardship and inequalities.

In light of these complex challenges, the Commission is posed to:

- Develop a comprehensive policy framework for PHC and resilience that outlines the key policy domains, roles, and functions that PHC needs to develop and strengthen to contribute to the resilience of the health system
- Use the policy framework to identify pivotal strategies and policies to be developed and define the key investments that LAC countries could pursue, and
- Conduct a thorough assessment of the foreseeable consequences of not building such resilience in PHC for LAC countries, encompassing potential effects on population health, and social and/or economic outcomes so as to understand the economic arguments for investment.

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Comment

The Commission is co-chaired by senior specialists from the WB and PAHO, with scholars from Johns Hopkins University (USA) and the Getulio Vargas Foundation (Brazil) as academic chairs. A multidisciplinary team of experts, managers, policymakers, and civil society leaders will serve as commissioners, ensuring robust representation from LAC as well as gender balance and broad technical expertise. The Commission plans to publish its report by early 2025, together with policy briefs translated into Spanish and Portuguese summarising the key findings and main recommendations for decision-makers and other stakeholders in LAC and elsewhere. During the time of work, technical and policy exchanges are planned to be conducted to promote dialogue in the region and enrich the Commission's work.

The Commission welcomes evidence and insight from stakeholders across the region and beyond and encourages anyone with relevant information to contact the Comment authors.

Contributors

All authors conceptualised the manuscript. CAH wrote the first draft and all authors provided comments and approved the final version.

Declaration of interests

We declare no competing interests.

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