

**TESTIMONY OF
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BUREAU OF WESTERN HEMISPHERE AFFAIRS
U.S. DEPARTMENT OF STATE
BEFORE THE
SUBCOMMITTEE ON THE WESTERN HEMISPHERE,
CIVILIAN SECURITY AND TRADE
OF THE COMMITTEE ON FOREIGN AFFAIRS
OF THE U.S. HOUSE OF REPRESENTATIVES
“THE TRUMP ADMINISTRATION’S RESPONSE TO COVID-19 IN LATIN AMERICA
AND THE CARIBBEAN”
July 1, 2020**

Chairman Sires, Ranking Member Rooney, and distinguished Members. It is an honor to be asked to discuss our response to the pandemic in the Western Hemisphere.

Latin America is currently experiencing the highest number of daily reported COVID-19 deaths in the world, with Chile, Brazil, Peru, and Mexico reporting the region’s highest infection rates. As of June 4, 2020, there have been 1,146,612 reported cases and 57,734 deaths in Latin America and the Caribbean.

Most countries implemented strict preventive measures such as stay-at-home orders, curfews, and border closures. Yet, while some countries have seen a lower peak, others have struggled to contain the spread of the virus. Ensuring widespread compliance with social distancing and other public health measures has been a consistent challenge, with large numbers of informal workers in the region engaged in high-contact jobs. In other countries, political controversy or unprepared health systems delayed the timely implementation of appropriate social distancing policies, allowing the virus to circulate freely.

The pandemic has gravely affected the region’s economies. In mid-June, the International Monetary Fund (IMF) adjusted down its 2020 forecasts for Latin America from a 4.2 percent to a 9.4 percent economic retraction.

Some of the region’s strongest economic drivers – agriculture, tourism, remittances, and light manufacturing – are labor-dependent and stand to be deeply affected. The pandemic struck a double blow to tourism, as it affected both local economies and the economies of their customers’ home nations. By closing borders quickly and implementing rigorous public health measures, most Eastern Caribbean nations managed to limit the spread of the virus, and as of June 15, 2020 have taken important steps to reopen their economies and welcome international tourists.

I would now like to turn to our response to the COVID-19 pandemic in the region. When the crisis first hit the Americas in late February, our attention first turned to U.S. citizens overseas.

The Department mounted the largest repatriation effort in its history to bring home Americans from around the world. As of June 16, 2020, the State Department's Repatriation Task Force has facilitated the return of more than 100,000 American citizens and permanent residents to the United States from 136 countries since the beginning of the pandemic. Of those, more than 64,000 were from Latin America and Caribbean countries. To accomplish this task, we used a wide variety of transport options, including commercial flights, U.S.-government chartered flights, Department of Homeland Security and Department of Defense resources, and specialized medevac flights.

Repatriation efforts were complicated by abrupt closures of airspace and land borders. To complicate matters, in many countries, U.S. citizens were spread out over the rural countryside or on far-flung islands, where local transportation is difficult even during normal times.

The complexity in repatriating American citizens is exemplified by the circumstances Embassy Lima confronted in Peru. In an attempt to stem the spread of COVID-19, President Martin Vizcarra declared a state of emergency on March 15, 2020 closing all land borders and civilian airports on March 16, 2020. The government instituted a military and police-enforced quarantine and a 6:00 pm-5:00 am curfew. Most travelers in Peru were unable to depart before the shutdown of commercial flights. With the closure of Peru's international airports, authorities strictly limited flight permits, allowing only a handful from countries all over the world to depart daily from a small military airport. We developed a plan with Peruvian authorities to use our U.S. government-funded hangar, the embassy's plane, chartered buses, boats, and charter flights to bring our people home. Peruvian authorities came to support our entry and exit permit requests. As of June 15, 2020, Embassy Lima and the Department facilitated the return of more than 11,000 Americans from Peru.

Another example were the coordinated actions to bring back American citizens from the Caribbean. Since Caribbean countries closed their borders in mid-March, U.S. Embassies and Consulates across the region coordinated more than 253 repatriation flights, which returned more than 28,000 Americans and legal permanent residents. Our posts in the Caribbean were faced with the novel challenge of coordinating one way, direct-charge ("ferry") flights with commercial airlines. The geography of the Caribbean as well as the small numbers of American citizens and residents spread across the region often created logistical as well as financial barriers to mounting these repatriation efforts. Our embassies fielded phone calls and established online forums to register requests for repatriation. Posts then worked with local government authorities and the commercial airlines to negotiate flight logistics.

The United States also stepped up to support the region through foreign assistance. My colleague Senior Deputy Assistant Administrator for Latin America and the Caribbean Josh Hodges will go into the details, but the Department of State and U.S. Agency for International Development (USAID) have provided nearly \$120 million in COVID supplemental and humanitarian assistance response in Latin America and the Caribbean. This includes \$21 million to El Salvador, Guatemala, and Honduras; \$13.5 million to Ecuador; \$13 million to Haiti; \$20.6 million to Colombia; \$13 million to Peru; \$12 million to the Venezuelan people; \$9.5 million to Brazil; nearly \$1.9 million to Mexico, and \$2 million to help 10 Caribbean countries.

Using humanitarian assistance funding from the U.S. Southern Command and the Department of Defense, security cooperation officers based at our diplomatic missions identified and implemented 183 COVID-related Humanitarian Assistance projects in 26 countries. These initial projects added up to more than 10 million dollars in rapidly-delivered support in the form of Personal Protective Equipment (PPE), cleaning equipment, hand sanitizer, field hospital tents, and other goods designed to protect medical personnel and other first responders – donations that were both sourced locally and procured via the Defense Logistics Agency (DLA).

Our All-of-America approach to combat COVID-19 extends beyond the State Department and USAID, as we closely coordinate with other U.S. Government agencies, including the Department of Health and Human Services (HHS), Centers for Disease Control and Prevention (CDC), the Department of Defense, and the White House COVID Task Force, as well as with academia and the private sector.

One of the essential commodities to provide care to patients affected by COVID-19 are programmable ventilators to support respiratory function on severely affected patients. As the pandemic expanded, many countries around the world found themselves lacking the number of ventilators they would need to provide care for their expected numbers of critically ill patients. Thanks to the expertise and flexibility of the American manufacturing base, it has been possible to deliver on President Trump's commitment to meet the requests from many foreign governments once projected U.S. needs had been met.

We have donated 950 ventilators to countries in the region, and we are currently processing nearly 2,000 more. To date, the recipient countries include Colombia, Brazil, El Salvador, Honduras, and Peru. In addition to the donations, the U.S. government has also facilitated commercial procurement of U.S. manufactured ventilators in the region. Notably, over 1,000 ventilators have been allocated for Mexico, with 400 received to date. The U.S. government helped industry prioritize these purchases to avoid a bidding war and to fairly allocate purchase opportunities to match needs.

The United States has also supported flexible and rapid financing packages to countries in the region through international financial institutions to aid in their economic recovery. With U.S. support, the IMF has deployed \$40 billion to 19 countries in the region. We have also supported increased assistance by the World Bank and Inter-American Development Bank, and shown flexibility on lending to upper-middle income countries. In addition, the U.S. International Development Finance Corporation (DFC) recently launched its Health and Prosperity initiative to mobilize private sector investment in support of global health resilience.

The Department coordinated with other government agencies, including the Department of Homeland Security (DHS) and HHS, to protect all persons in U.S. territory from the COVID-19 pandemic.

In this regard, sustained cooperation with other countries on the removal of foreign nationals is important. The expectation is that each country will continue to meet its international legal obligation to accept its own nationals. However, a country's special conditions can impact its willingness or ability to accept its citizens with final removal orders. When this occurs, U.S.

Immigration and Customs Enforcement (ICE) works directly with foreign governments and with the Department of State to address the situation. Whereas the Department does not have an operational role in the U.S. immigration detention and removals process, we provide diplomatic support to ICE when negotiating with foreign governments, and we have done so successfully during the pandemic. While continuing removal flights during the COVID-19 pandemic has been a challenge for some countries in the region, it has also helped avoid increasing the numbers of immigrants in ICE detention centers and thus risking exposure. Before deportees are placed on removals flights ICE provides them with medical screenings. Anyone who fails to pass the screening or is suspected of having a potentially contagious health condition is denied boarding and referred to an ICE-approved facility for further screening.

Out of more than 37,000 ICE removals to Latin America and the Caribbean from March to mid-June, Guatemala, Colombia, Ecuador, Brazil, Mexico, Jamaica, and Haiti reported that approximately 220 deportees tested positive after removal flights—including more than 190 from Guatemala. As a precaution, Guatemala temporarily suspended receiving ICE removals of single adult deportees from May 15 to June 9, 2020 though it continued to receive unaccompanied children and some family units. The Department worked closely with the Government of Guatemala and ICE to improve testing protocols and exchange information on quarantine procedures upon arrival. Through this enhanced cooperation, Guatemala agreed to resume receiving removal flights on a regular schedule.

On March 20, 2020 the CDC Director issued an order under Title 42 to suspend entry for certain individuals at the U.S. southern and northern borders and to return certain individuals to the country from which they entered the United States, their country of origin, or another location as practicable. The original order was renewed indefinitely in May, subject to review every 30 days by CDC, until it is determined that continuation of the order is no longer necessary. Pursuant to the Title 42 orders, from mid-March to May 31, 2020, U.S. Customs and Border Protection (CBP) expelled 43,551 persons along the U.S. southern and northern borders. Mexican single adults make up the majority of those being expelled under Title 42 authority and comprise about 58 percent of those encountered by CBP on the U.S. southern border in FY 2020 to date.

On June 16, 2020 Canada, Mexico, and the U.S. extended non-essential travel restrictions along the northern and southern borders. Under the currently applicable restrictions, those borders will remain closed to non-essential travel until July 21, 2020. We continue to work closely with DHS, HHS, and our Canadian and Mexican counterparts to protect U.S. as well as Canadian and Mexican citizens from the risk of further spread of the virus across our shared borders.

As the Western Hemisphere faces this severe health challenge, I want to take this opportunity to discuss a topic of great concern to the United States and to Secretary Pompeo. As you are aware, the Administration has ongoing concerns about the Pan American Health Organization's (PAHO's) involvement in the *Mais Medicos* program in Brazil, in which doctors were supplied by the Cuban regime for a large amount of money.

On June 10, 2020 Secretary Pompeo voiced the United States' concerns over PAHO's role in the program. The Secretary's remarks came after more than 18 months of U.S. engagement with PAHO's leadership to understand how PAHO came to be the middleman in this arrangement. Specifically, we have been asking that PAHO commence an external review that would yield the transparency necessary to understand what happened so that we can take the necessary steps to ensure trust in the future.

On June 23, 2020 the PAHO Executive Committee approved governance reform measures aimed to have the Executive Committee review and approve any programs that are of a high risk to PAHO, such as *Mais Medicos*. PAHO has also committed to conduct an independent, external evaluation of the *Mais Medicos* program. The United States, along with Canada and Brazil, is working with PAHO staff to move the external review forward. We are hopeful that soon the measures will be in place that will allow resumption of our assessed contributions to PAHO.

The combined and complex challenges of the COVID pandemic present a unique opportunity for the United States in confronting the crisis and its economic effects. The U.S. remains the partner of choice for almost all countries in the region. If we work together to mount a coordinated, cost-effective, disciplined, and comprehensive strategy to recover from the virus and advance prosperity and opportunity in the region, we will have gone a long way towards cementing our strong strategic partnerships with our closest neighbors.