

A man wearing a straw hat and a black face mask is shown in a greenhouse, tending to plants. He is wearing a teal button-down shirt. The background shows the structure of the greenhouse and some foliage.

Social Citizenship and COVID-19 in the NCCA: A Dysfunctional Relationship

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EXECUTIVE SUMMARY

The pandemic generated by COVID-19 led to profound consequences across the globe, affecting the protection of Economic, Social and Cultural Rights (ESCR) at all levels. Clearly, the impacts will differ from region to region and country to country, depending on the preconditions, the way in which each government manages the pandemic, and the capacity of citizens to assert their rights. For the Northern Countries of Central America (NCCA) the data is of concern, given the high poverty rates in each of these countries. According to the Economic Commission for Latin America and the Caribbean (ECLAC) estimates, in the course of a year, extreme poverty in the subregion, could increase by up to 4 percentage points in El Salvador, 7 points in Guatemala, and 9 in Honduras, without taking into account the monetary transfers made. In a hypothetical scenario with cash transfers, extreme poverty in El Salvador would reach 8%, in Guatemala 18.7%, but in Honduras it would remain the same. In other words, the monetary transfers made could offset the drop in extreme poverty rates by up to 5% in Guatemala and 1.2% in El Salvador, although in Honduras there would be no changes, given the low amounts¹.

Despite this exceptional situation, States are required to seek ways to guarantee ESCR for their citizens at all times and in all circumstances, without discrimination, maintaining their progressiveness and using the maximum possible resources, as established in the International Convention on Economic, Social and Cultural Rights (ICESCR) and the Inter-American Commission on Human Rights (IACHR) resolutions 1/2020 and 1/2021.

The research presented here attempts to understand how the NCCA fulfilled this mandate during the COVID-19 pandemic, especially those related to health and education. This work sought to identify what the NCCA were doing to ensure that even in the midst of the crisis the ESCR of citizens were not further eroded. For this purpose, an analysis was of how the social policies implemented during the crisis respected the criteria of progressiveness and non-discrimination, especially in the areas of health, education, and relief to the poor. Likewise, the budgets of the policies and programs that the NCCA governments implemented during the pandemic to guarantee ESCR were analyzed to determine whether they met the criteria to apply the maximum possible resources necessary.

In a study like this, it is impossible to avoid addressing corruption as a cross-cutting phenomenon for all countries and the way it affects the protection and guarantee of rights. This problem was repeatedly referred to in the media and in journalistic investigations for the three NCCA. It is appropriate to examine its connections with the non-compliance of the State's obligations with regard to the pandemic and the respect for ESCR given irregular contracts and purchases under emergency decrees that ignored the established controls. Resolution 1/2021 of the IACHR addresses this aspect and defines recommendations to guarantee access to information, transparency, and the fight against corruption.

A first finding of the study reveals that the actions taken by the three countries to prevent infections and to care for the health of their citizens were scattered and uncoordinated. The preferred option was to take measures with a police and military approach amid widespread allegations of corruption related to the looting of the State, the high rates of indebtedness, and the shortfalls in the democracies of each of these countries.

¹ Economic Commission for Latin America and the Caribbean ECLAC (2020) "Panorama social de América Latina [Social Panorama of Latin America]." United Nations publication, Santiago, Chile.

Anti-poverty policies during the period focused on cash transfers, food and health supplies, and **were not part of a comprehensive, coherent and coordinated strategy**; therefore, although some pre-existing mechanisms of anti-poverty programs were implemented, actions during the pandemic had no continuity with respect to previous policies.

They also did not respect the dignity, autonomy, and agency of beneficiaries, given that no feedback mechanisms were established for citizens to provide inputs and make requests and suggestions. Lack of consultation with affected populations contributed to criticism of the process.

Likewise, there were no provisions to **ensure coverage and non-discrimination** and the actions to prioritize individuals and groups in vulnerable conditions and groups historically in vulnerable situations were insufficient; these have the least resources even to access monetary and in-kind transfers.

In this sense, monetary and in-kind transfers were not **accessible** to those who most needed them and there are signs of discrimination in their delivery based on political affinity and partisan use, so it is possible that they were not even entirely available to citizens living in the most precarious conditions. Finally, the products delivered were not necessarily of optimum **quality** and there is criticism not only of food safety, but also of whether the goods corresponded to the advertised contents.

The principles of **coverage and non-discrimination** were also not fully achieved in the case of the right to health. Some countries kept information segmented by sex and age to report on infected, dead, and recovered persons, as well as the impact by geographical location, even at the municipal level. An example of successful use of disaggregated information would be the percentages of vaccinated population. By December 31, 2021, El Salvador had almost 63.8% of its population vaccinated with two doses, while in Guatemala this percentage is only 25.7%. Honduras is in an intermediate situation with almost 42.7%, despite the fact that all countries started their vaccination processes at the end of February 2021. Similarly, El Salvador is ahead in terms of the application of booster doses, while Honduras and Guatemala have not made much progress in this regard².

In the vaccination program, priority has been given to vulnerable groups such as the elderly, health personnel, and people with any previous condition that increases their vulnerability. However, there is no information on whether any other groups in a situation of historical inequality have been particularly prioritized, nor is there detailed information on the indigenous population or people with disabilities.

² <https://www.as-coa.org/articulos/cronologia-rastreando-el-camino-hacia-la-vacunacion-en-america-latina>

In terms of **equality**, no progress has been made in the right to health, and the population covered is in danger of suffering a decrease in their access to this right. Progress on the Sustainable Development Goals for sexual and reproductive health could fall due to the suspension of medical services that were not directly related to COVID-19. Thus, state services aimed at assisting pregnant women, services for victims of violence, and family planning were reduced. In fact, pregnancy-related consultations decreased by 40% in the region, in accordance with the information shared by the Technical Secretariat for Women of the Council of Women's Ministers of Central America and the Dominican Republic STM-COMMCA³. Available estimates project that access to and availability of these services may have decreased by 10 to 25%⁴, increasing the likelihood of a rise in deaths of pregnant women, newborns, and pregnant adolescents. Indeed, all three countries have reported significant increases in teenage pregnancy in 2020 compared to 2019. In El Salvador, this increase was 79% in girls aged 10 to 14 years and 71.6% in adolescents aged 15 to 19 years⁵.

Violence against women is another problem that increased with the pandemic. During the first month of lockdown in El Salvador, there were more femicides reported than deaths due to COVID-19⁶. In the first half of 2020, 57 femicides occurred, being the first months of the quarantine the ones with the highest rates. In Guatemala, women's organizations reported that between March and May 2020 there were 83 femicides, while in Honduras there were 163 violent deaths of women, of which 94 occurred during the period of lockdown.

However, none of the outcome indicators have shown improvement over the last year, and while some hospital facilities may have improved their infrastructure, it is still insufficient and these advances have high levels of corruption, improvisation, and negligence.

The most affected dimensions are **transparency and accountability**, as well as **citizen participation**. All three countries have comprehensive public health information systems that provide data on the progress of the disease, care, and other government measures. However, data are not reliable and the respective scientific communities in each of these countries report serious shortcomings.

All have withheld information from the public, a situation that can be corroborated by analyzing the excess deaths in 2020⁷. In accordance with this index, El Salvador would be the country with the highest gap between the official figures and the estimated number of deaths, followed by Honduras and finally Guatemala. In any case, these data are much higher than the averages for Latin America and the Caribbean. For this region, the gap between official figures and excess deaths is +50 and excess deaths are between 330 and 370 per 100,000 population.

No instruments exist to guarantee the **participation** of the affected population and users of the services. Although in all three countries commissions were set up by civil society entities and even by the scientific and medical community, there are complaints that they were ineffective and were not empowered to fulfill the task for which they were created.

³ COMMCA (2020) "Diferenciados en los ámbitos económico y social de la COVID 19 en la situación y condición de las mujeres de los países miembros del SICA [Differentiated in the economic and social areas of COVID-19 in the situation and condition of women in SICA member countries]." SICA, Antiguo Cuscatlán, El Salvador.

⁴ Vernooij, Marco (2021) "El escenario de COVID-19 en América Latina para la Salud Materna- infantil [The COVID-19 scenario for Maternal and Child Health in Latin America]." Lo que se sabe, lo que se proyecta [The known, the projected]. Bolivia, Ecuador, El Salvador, Honduras. https://www.researchgate.net/publication/353195287_El_escenario_de_COVID-19_en_America_Latina_para_la_Salud_Materna-_Infantil

⁵ <https://plan-international.org/es/latin-america/embarazos-covid-19>

⁶ <https://violentasencuarentena.distintaslatitudes.net/>

⁷ <https://www.economist.com/graphic-detail/coronavirus-excess-deaths-tracker>

As far as education is concerned, it is possible to state that, although it is the area in which most progress has been made in recent years, especially in the area of primary education, all three countries were not ready to overcome the challenges implied by such a prolonged suspension of classes. The infrastructure of the educational centers had been deficient even before the pandemic and did not always meet the minimum sanitary conditions; therefore, there would be a lack of **availability**, since the educational facilities were not sufficient and suitable to meet the needs of the student population.

School facilities were also not significantly modified, so accessibility problems remained the same as before the pandemic, with the aggravating factor that children and adolescents did not have access to the technologies needed to maintain educational dynamics, despite the efforts of the three countries to provide their students with virtual platforms. In fact, only 34.9% of households in the Central America region as of 2020 had access to information technologies, with only 30% of households having access to a computer prior to the pandemic⁸.

Curricula adapted to the needs arising from the pandemic were in fact available, although with little encouragement for the teaching staff to attend to the educational dynamics without overloading their work.

In terms of **acceptability and adaptability**, it can be concluded that the curricula aimed to be relevant and appropriate; however, the learning gaps existing before the pandemic may have increased as all data suggest that students coming from higher income families are less likely to drop out of school as they have greater access to technologies and equipment that allow them to maintain quality distance education.

In terms of **coverage and non-discrimination**, in no case did we find any policies that incorporated gender-differentiated criteria for the care of the population. Despite the availability of data on how the pandemic affects girls and boys differently, none of the countries established actions to prevent gender-based violence at home or early warning systems to identify girls at risk of dropping out of school, either because of pregnancy or because they are responsible for caregiving and housework. On the other hand, there were some actions in Honduras and Guatemala that sought to serve populations with difficulties in accessing education, especially those belonging to the indigenous and Afro-Central American populations, although these processes were not able to address the historical lack of attention to these peoples in each of the countries.

The principle of **coverage** could not be applied in this case either, since there were drops in student population coverage in all countries included in the study.

The principles of **transparency and accountability**, as well as the principle of participation in the fulfillment of the right to education, suffered the same fate as the right to health and the fight against poverty: a clear setback, although complaints of corruption in the field of education were significantly lower than in health.

⁸ Enríquez, Alberto & Carlos Saénz (2021) "Primera lecciones y desafíos de la pandemia del COVID-19 para los países del SICA [First lessons and challenges of the COVID-19 pandemic for SICA countries]." Series "Estudios y Perspectivas [Studies and perspectives]" 189. ECLAC. ECLAC Subregional Headquarters in Mexico.

The analysis of budget allocations in the area of education, when evaluating the criterion of **maximum available resources** versus the **availability of resources**, showed that the NCCA allocate a considerable proportion of their budgets to this item and this is a trend that has been kept during the five years under analysis.

The NCCA have allocated between 15% and 21% of their annual budgets to education, so it is considered that they are making a considerable effort in the allocation of resources. However, all three countries are far from meeting recommended budget allocation standards, which usually stand at 6% of GDP. To achieve these goals, greater sources of financing must be sought. As of 2022, in all three countries, this expenditure is mostly from current revenues (taxes, levies, etc.), but opportunities for fundraising and budget reinforcement through public debt or cooperation can be explored.

When evaluating the allocation to priority groups, serious deficiencies are found in terms of the existence of specialized programs. Most of the education allocations in the three countries are for programs that do not have special considerations for the most vulnerable population groups. Some countries such as Honduras and Guatemala have some programs for women and indigenous populations; however, these allocations have not exceeded 1% of the total education budget of these countries.

In health, budget allocations are not as high as those for education. When evaluating the criterion of **maximum available resources** versus the **availability of resources**, it was found that the NCCA allocate a ratio of around 10% of their budgets, and this is a trend that has been kept throughout the five years analyzed. However, Guatemala stands out as having the lowest NACP allocation.

In any case, for none of the NCCA was the budgetary effort sufficient to fulfill the right to health, so the budget allocation to this item should be improved. None of the three countries meet recommended budget allocation standards (6% of GDP), and there is still room for their current allocations to be more significant in their annual budgets and exceed the 10% they currently represent.

In terms of poverty alleviation, and in contrast to education and health allocations, El Salvador and Guatemala do not have significant budgets. In the period under analysis, the allocations of these two countries to the protection of this ESCR hardly exceeded 4% of their budgets. Honduras, on the other hand, maintains a special well-resourced poverty reduction program. Thus, the evaluation of the criteria of **maximum resources** and **existing availability** concludes that there are serious shortcomings in the financial allocation and existence of anti-poverty programs.

It should be noted that none of the regulations for the use of public funds in the context of the pandemic focused on ensuring effective coverage of the right to health and education. Even though Honduras and Guatemala have specialized portals for the monitoring and control of funds, public procurement and even liquidation of the use of funds, reports of corruption have always been at the top of the agenda of citizen complaints and journalistic investigations. However, the situation in El Salvador seems much worse since the government only presents a general report on the use of funds by sector but lacks the tools to control public procurement and the use of funds. For all these reasons, the use of public funds during the pandemic was characterized by arbitrariness that did not allow for an efficient and effective use of public resources to protect and guarantee citizens' rights.

In short, the pandemic posed an unusual and great challenge to the NCCA, which still have historical shortcomings and huge deficits in ESCR. Quality social policies have been absent in each of these States and the population has suffered the most detrimental effects of the absence of quality health care, an education that allows them to exercise their citizens' rights, and a situation of poverty that prevents them from accessing basic goods, even when these are provided by governments.

In addition, the governments of these countries did not respond by offering the quality of services that the population needed, and their inefficiency and reluctance to invest made the crisis take an even greater toll and caused the region to fall back several years in terms of achieving the Sustainable Development Goals. The northern Central American subregion ends up even more battered after this crisis, having even weaker institutions and higher levels of corruption than in the past. In addition, it is very likely that gaps and inequalities have increased significantly during this period, which could result in state interventions being harmful and placing the population in an even more unequal situation in terms of access to resources to meet health, education and poverty needs.

The scenarios of greater authoritarianism, excessive corruption, lack of governmental transparency, and decreased citizen participation could be indicators that the countries of northern Central America are approaching a turning point in the development of their incipient democracies. Emerging from these setbacks will surely take years and the support of different actors across society to protect and guarantee economic, social and cultural rights in El Salvador, Guatemala and Honduras.