

# COVID surge underway in Bolivia and Peru

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14 January 2025

Peru and Bolivia are witnessing a significant surge of COVID-19 cases, showing the continuing danger posed to workers globally by new variants of the deadly virus.

In the first week of 2025, 457 cases of COVID-19 were recorded in Bolivia, while at least four people have died from the virus in the current wave since December 28. On January 9, the Peruvian daily *El Comercio* reported that “in the last three weeks, five people died from COVID-19, most of them older adults.”

Given the lack of testing and active indifference by the governments and the corporate media, the real numbers of infections and deaths are undoubtedly far higher. However, the official reports and attention are all the more significant.

The ongoing COVID-19 pandemic has gravely exposed the healthcare systems in Bolivia, Peru and the region as some of the most deficient in the world. BBC News Mundo reported that of the “official” 15 million deaths during the pandemic worldwide, with the real death toll likely approaching 30 million, the “Latin American countries [had the] highest excess mortality.”

Peru and Bolivia recorded the highest confirmed death rate and excess mortality rate from COVID-19 in the world, respectively. By March 2022, Peru had registered 3,542,602 positive cases and 211,944 deaths since from COVID-19; that is nearly 5,735 deaths per million inhabitants. During the first two years of the pandemic, Bolivia recorded an estimated excess mortality due to COVID-19 of 735 deaths per 100,000 people, compared to the global average of 120.

In contrast, the UK, where one of the deadliest variants originated, fared worst among European countries and recorded 3,396 confirmed deaths per million inhabitants—60 percent of deaths in Peru—and an excess mortality rate of 127 per 100,000 people.

The arrival of the pandemic in 2020 caught Peru’s health system in disarray. While the OECD recommended a ratio of 12 ICU beds per 100,000 people, at the beginning of the pandemic Peru had just one per 100,000 people.

Bolivia fared no better. Its health system nearly collapsed in June 2020. Health centers reached their maximum capacity for patient admissions, and hundreds of people died without receiving hospital care. Additionally, cemeteries became overwhelmed.

In 2025, the Bolivian press is once again focused on a potential COVID outbreak. “We are in the first epidemiological week,” reported Minister of Health María Renéé Castro. “We have seen 369 positive cases in Santa Cruz, 45 in Cochabamba, 15 in Chuquisaca, and 14 in La Paz. Tarija reported four cases, while Beni, Potosí, and Oruro each confirmed one.”

Jaime Bilbao, the director of the Departmental Health Service (Sedes), noted that COVID-19 infections have increased for the past two weeks. The Vice Minister of Health Promotion, Epidemiological Surveillance, and Traditional Medicine, Max Enríquez, clarified that Santa Cruz reported an increase from 288 cases in the last week of December to 369 in the first week of January, representing a surge of 28.1 percent.

Health authorities are concerned because only 257 people sought vaccinations in the first week, a significantly low number compared to the 82,279 vaccinations administered by the end of last year. This low vaccination turnout amidst the current COVID-19 surge is attributable to the irresponsibility of the Movement Toward Socialism (MAS) government.

The government operates under the false assumption that the pandemic, which claimed the lives of tens of thousands of Bolivians from 2020 to 2023, is over.

Article One of Ministerial Resolution No. 0461, dated July 26, 2023, exemplifies the absence of any proactive public health policy to prevent future pandemics. The Ministry of Health and Sports declared that, “effective July 31, 2023, the national health emergency due to COVID-19 would be lifted throughout Bolivia.”

According to government health entities, COVID-19 is now considered “one more virus circulating in the country, similar to influenza.” This view was used to justify the limited measures introduced by the

government.

The government, however, has kept shifting responsibility for the resurgence of COVID-19 onto the population, stating that there is a “lack of concern among the public regarding the use of face masks and other safety measures to avoid infection.”

Now, as a palliative and entirely insufficient measure, four mobile hospitals have been set up in Santa Cruz to provide general medical, pediatric, nursing, and pharmacy services, aiming to reduce queues in larger hospitals. In La Paz, mobile immunization and diagnostic points will be strategically established, and within the next ten days, 500,000 new vaccine doses will arrive through the Covax mechanism.

Peru faces a similar situation, with a complete lack of concern from a government that is sinking in corruption, and the indifference of President Dina Boluarte, who, without asking for the permission required by law, took a leave of absence from her presidential duties to undergo plastic surgery recently. Peruvian Health Minister César Vásquez Sánchez attributed the recent deaths to the crowds caused by end-of-the-year celebrations.

Vásquez also specified that the cases registered during the first epidemiological week of 2025 were lower than those of 2024, relieving Minsa (Ministry of Health) of any responsibility for taking precautionary measures. He argued that there has been a “normal” increase in respiratory infections in various countries, implying that with time the virus has become weaker.

But the criminality of the Peruvian government’s real attitude is exposed in light of scientific assessments of the virus. The WSWS recently interviewed Dr. Arijit Chakravarty, a biologist who has written extensively about COVID-19 since its emergence in 2020, and commented: “it is false that viruses always evolve to become milder (they don’t), that immunity is building up in the population (it isn’t), or that somehow pretending everything is done has improved the state of the pandemic.”

The new COVID-19 surge in Bolivia and Peru results from the adoption of the pro-business healthcare policy imposed by the United States government, which advocates “learning to live with the virus” and refuses to deploy its vast resources to contain the virus around the world. The pandemic has demonstrated that under capitalism, profits will always be prioritized over human life.

The “learn to live with the virus” policy was spearheaded in South America by fascist former Brazilian

President Jair Bolsonaro. It led to the highest number of deaths on the continent. According to Datosmacro.com, by April 2024, Brazil had reported 37,511,921 COVID-19 infections—about one in five people—and 702,116 deaths, which equates to 3,250 deaths per million inhabitants.

Despite medical scientists’ warnings about a possible new wave of infections that could be as deadly as those from 2020 to 2022, the Bolivian minister of health insisted that COVID-19 will remain a concern for many more years. He noted that a vaccine is currently available that could help “reduce severe symptoms.”

This perspective overlooks the views of scientists who have studied COVID-19 extensively and oppose the “living with the virus” policy based on their findings. Bolivian authorities attribute the recent increase in cases to the Omicron variant and its subvariants—JN.1, XBB.1, XBB.1.5, and XBB.1.8—according to Vice Minister Enríquez. However, Dr. Chakravarty has warned that the virus can mutate and “could theoretically kill everyone it infects while still being transmitted without problems.”

Only the WSWS has insisted on the severity of the pandemic, emphasizing that it is not over. With COVID-19 being one of the most aggressive viruses, continuously mutating, it is possible that a strain resistant to the antibodies developed by humans due to the continuous exposure to the virus over the past four years, may result in an even more deadly new worldwide pandemic.

The WSWS launched a campaign to eradicate COVID-19 forever. It has interviewed hundreds of scientists and held several international seminars and is calling for the investment of trillions of dollars in health rather than in weapons of mass destruction.

This requires overthrowing the capitalist nation state system and establishing world socialism, such that production is guided by the satisfaction of human the needs—food, healthcare, housing, education, infrastructure, etc. Health policy decisions must be taken out of the hands of the profit-driven multibillion dollar pharmaceutical, hospital and insurance corporations and put in the hands of experts’ committees democratically elected by the doctors, nurses and health scientists of the world.



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