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The Role of International Cooperation in the Implementation of SDG 3 in Latin America: The Case of the EU and China

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Abstract. The countries of Latin America and the Caribbean (LAC) have adopted the Sustainable Development Goals (SDGs) and incorporated these goals into their development plans. The coronavirus pandemic worsened the socio-economic situation in the region, negatively impacting the achievement of the SDGs, particularly SDG-3 (good health and well-being). The weak pace of the post-COVID recovery raised the issue of developing a regional strategy to ensure self-sufficiency in healthcare and pharmaceutical production, expanding interregional cooperation, joint scientific research, and the use of digital technologies. Latin America has adopted the Regional Health Self-Sufficiency Plan and the Sustainable Health Agenda for the Americas 2018–2030, which emphasizes the significance of interregional cooperation, along with the need to increase investment in healthcare infrastructure. The purpose of the article is to compare the approaches of the European Union (EU) and China in promoting the development of the healthcare system in LAC. In 2021, the EU adopted the Global Gateway strategy, thereby declaring its expanding strategic and economic interest in the region. China continued developing the Belt and Road Initiative (BRI), complementing it with the Health Silk Road (HSR) and the Digital Silk Road (DSR). The authors rely on the theory of power transition, the principles of historicism and scientific objectivity, and a problem-chronological approach as their methodology. They conclude that China's assistance to the region's development is long-term and comprehensive, within the framework of implementing the concept of a “shared future for humanity,” while the EU is seeking to transform the emerging configuration of relations between China and the LAC region by expanding its position in renewable energy and healthcare projects. In turn, the EU is beginning to view China as a systemic threat. China's influence in the region is now comparable to that of the United States, and there is ongoing rivalry between the EU and the United States for control of the region. Against the backdrop of increasing defense spending by European states, this will also facilitate closer cooperation between LAC countries and China.

Key words: SDGs, healthcare, COVID-19, vaccines, pharmaceuticals, European Union, EU, Global Gateway, China, development

Conflicts of interest. The authors declare no conflicts of interest.

Authors' contributions. A.Yu. Borzova: conceptualization, development of research methodology, data collection, manuscript drafting. A.R. Borzov: visualization, data collection, software development. E.A. Piven: data collection, research execution, manuscript editing.

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Роль международного сотрудничества в реализации ЦУР 3 в Латинской Америке на примере ЕС и КНР

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Аннотация. Страны Латинской Америки и Карибского бассейна (ЛАКБ) приняли Цели устойчивого развития (ЦУР) и включают эти цели в планы развития. Пандемия коронавируса усугубила социально-экономическую ситуацию в регионе, что негативно отразилось на достижении ЦУР, и больше всего на ЦУР 3 (хорошее здоровье и благополучие). Слабые темпы постковидного восстановления поставили вопрос о выработке региональной стратегии по обеспечению самодостаточности в вопросах здравоохранения и производства лекарств, расширении межрегионального взаимодействия, совместных научных исследований, использовании цифровых технологий. В Латинской Америке был принят План по обеспечению самодостаточности в вопросах здравоохранения для региона, подготовлена Повестка дня по устойчивому развитию здравоохранения в Америке на 2018–2030 гг., где наряду с необходимостью увеличения инвестиций в инфраструктуру здравоохранения отмечается важность межрегионального сотрудничества. Цель исследования — сравнить подходы Европейского союза (ЕС) и Китая в содействии развитию системы здравоохранения в ЛАКБ. ЕС принял стратегию *Global Gateway* (2021), где заявляет о расширении стратегического и экономического интереса к региону. Китай продолжает развивать инициативу «Один пояс, один путь» (ОПОП), дополняя ее «Шелковым путем здоровья» и «Цифровым шелковым путем». В качестве методологии авторы опираются на теорию властного транзита, принципы историзма и научной объективности и проблемно-хронологический подход. Сделан вывод, что китайское содействие развитию региона носит долгосрочный, комплексный характер в рамках реализации концепции «единой судьбы человечества», а ЕС стремится изменить в свою пользу складывающуюся конфигурацию отношений КНР и ЛАКБ, расширяя свои позиции в проектах возобновляемых источников энергии (ВИЭ) и здравоохранения. В свою очередь ЕС начинает определять для себя Китай, чье влияние в регионе уже фактически сопоставимо с американским, как системную угрозу наряду с соперничеством за регион, развернувшимся между ЕС и США. Последнее на фоне увеличения расходов европейских государств на оборону также будет содействовать расширению сотрудничества стран ЛАКБ с Китаем.

Ключевые слова: цели устойчивого развития, здравоохранение, COVID-19, вакцины, фармацевтика, Европейский союз, ЕС, *Global Gateway*, КНР, развитие

Заявление о конфликте интересов. Авторы заявляют об отсутствии конфликта интересов.

Вклад авторов. Борзова А.Ю.: концептуализация, разработка методологии исследования, обеспечение данных, подготовка черновика рукописи. Борзов А.Р.: визуализация, обеспечение данных, работа с программным обеспечением. Пивень Е.А.: обеспечение данных, проведение исследования, редактирование рукописи.

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Introduction

In 2015, all UN member states adopted 17 Sustainable Development Goals (SDGs) as part of the 2030 Agenda for Sustainable Development (Agenda 2030), which served as a universal call for concrete action and

resource mobilization to eradicate poverty, develop healthcare, improve quality of life, and combat climate change.

The dynamics of achievements and challenges in implementing the SDGs in Latin America and the Caribbean (LAC) are examined in scientific monographs

by the Institute of Latin America of the Russian Academy of Sciences (Simonova, 2023) and in the works of several authors (Martynov, Borzova & Nekrasov, 2020), which identify the reasons for the slowdown in achieving the SDGs. The pandemic has caused serious damage to the region's economy, increased political instability, and exposed the healthcare system's inability to develop an effective response to a global threat (Volosyuk & Shkolyar, 2021). The lessons of the pandemic,¹ the direction of healthcare development, and the challenges of achieving the stated indicators of SDG 3 have been explored in a number of studies (Rubinstein, 2025; Ortiz-Prado et al., 2021; Ganchev, 2024). In this regard, it is of interest to study the assistance of extra-regional actors in the post-pandemic recovery of LAC, primarily from the European Union (EU) (Tayar & Ponomarev, 2023; Kosevich, 2023; Corral et al., 2018) and the People's Republic of China (PRC).² Comparing European aid to the region in healthcare development with China's "Health Silk Road" and identifying the achievements and challenges in its implementation is particularly relevant in the context of a rapidly changing global situation, the development of the Ukrainian conflict (Yakovlev, 2022), and changing US foreign policy priorities.

In theoretical and methodological terms, the study is based on the theory of power transition, the principles of historicism and

scientific objectivity, as well as a problem-chronological approach. According to this theory, the logic of states' international behavior is determined by six components that make up the national potential index, and the dynamics of their changes influence leadership abilities (Degterev, Ramich & Tsvyk, 2021, p. 213). The competition for leadership in the Latin American region leads to a shift in the balance of power, but in this case, it is unlikely to lead to serious conflicts, as the dynamically developing People's Republic of China is increasing its influence there through trade, the deepening of technical cooperation, and the financing of investment projects. Concurrently, the European Union, operating within the framework of the "alliance transit theory," is expanding its influence through trade, investment, and official development assistance in the form of various programs. However, the influence of the United States (which is beyond the scope of this study) in the military, economic, and investment spheres should not be underestimated, thus rendering the chosen theory highly relevant.

SDG Indicators for LAC

In 2016, a coordination group for the development of SDG indicators for the region was established in Latin America.³ The development of common criteria was also initiated. This facilitated the unification of approaches and provided insight into the

¹ Esteves P. Latin America's Uncoordinated Response in Tackling COVID-19 // South African Institute of International Affairs: Policy Insights. 2020. Vol. 97. P. 1–17. URL: <https://saiaa.org.za/wp-content/uploads/2020/12/Policy-Insights-97-Esteves.pdf> (accessed: 12.03.2025).

² Heldt E.C. China's 'Health Silk Road' Offensive: How the West Should Respond // Global Policy. 2020. Vol. 12, iss. 5. P. 1–3. URL: <https://www.globalpolicyjournal.com/blog/09/12/2020/chinas-health-silk-road-offensive-how-west-should-respond> (accessed: 12.03.2025). See also: (Safronova, 2021; Arsentyeva, 2024).

³ Grupo de coordinación estadística para la Agenda 2030 en América Latina y el Caribe. Objetivos de Desarrollo Sostenibles — ODS // CEPAL. URL: <https://www.cepal.org/es/organos-subsidiarios/conferencia-estadistica-americas/grupo-coordinacion-estadistica-la-agenda-2030-america-latina-caribe> (accessed: 25.03.2025).

real situation in each country to identify areas for regional and interstate cooperation on the SDGs.⁴

At the 9th meeting of the Statistical Conference (Mexico, 2017), 154 SDG indicators were identified for the region, of which 120 formed part of the global framework, 30 were additionally introduced, and four were indirect. These 154 indicators covered all 17 SDGs and included 94 of the 169 targets from the global indicator framework.⁵ Since 2017, the Sustainable Development Forum has been held annually, becoming a regional mechanism for implementing Agenda 2030, and countries submit voluntary reports on the SDGs, and indicators for their achievement are incorporated into development strategies (Martynov, Borzova & Nekrasov, 2020, pp. 116–117).

The largest number of indicators — 29 — was developed for SDG 3, as Latin American countries faced significant challenges in the area of health. However, in recent years the progress in such areas as maternal mortality, mortality from noncommunicable diseases, and access to essential health services has slowed down.⁶ In addition to the global targets, regional goals were set to reduce the spread of HIV/AIDS and to promote family planning, as well as to discourage early marriage and early motherhood.

Post-COVID-19 Healthcare Challenges

In 2019, the first Global Health Security Index (GHS Index) presented a comprehensive picture of the global health security situation. Brazil, Argentina, Chile, and Mexico ranked among the most countries that performed best in preventing the emergence and spread of pathogens (22nd, 25th, 27th, and 28th places), followed closely by Ecuador, Peru, Costa Rica, Colombia, and El Salvador. Brazil and Chile demonstrated the strongest epidemic containment capabilities, while Argentina, Mexico, Nicaragua, Brazil, and Peru were found to have the most effective healthcare systems. Experts believed the remaining LAC countries were at risk, with political instability, climate change, and a number of other negative factors potentially leading to the spread of a pandemic.⁷

The emergence and subsequent spread of the coronavirus in 2019 revealed the ambiguity of these findings. Brazil, Argentina, Colombia, and Chile, which had the most effective healthcare systems according to the 2019 GHS, were among the countries with the highest numbers of COVID-19 cases and deaths. Latin America has been hit hardest by the pandemic: the region accounts for 8.4 % of the global population, but accounted for 20.1 % of cases and 38 % of deaths as of August 30, 2021.⁸ The situation has not improved significantly in 2024, and the

⁴ Indicadores priorizados para el seguimiento de los ODS en América Latina y el Caribe // Agenda 2030 en América Latina y el Caribe. URL: <https://agenda2030lac.org/estadisticas/indicadores-priorizados-seguimiento-ods.html> (accessed: 25.03.2025).

⁵ Capacidades nacionales para la producción de los indicadores de los Objetivos de Desarrollo Sostenible // Agenda 2030 en América Latina y el Caribe. URL: <https://agenda2030lac.org/estadisticas/capacidades-nacionales-produccion-indicadores-ods.html> (accessed: 25.03.2025).

⁶ The Challenge of Accelerating the 2030 Agenda in Latin America and the Caribbean: Transitions towards Sustainability // ECLAC. April 12, 2024. URL: <https://www.cepal.org/en/publications/69133-challenge-accelerating-2030-agenda-latin-america-and-caribbean-transitions> (accessed: 25.03.2025).

⁷ GHS Index. The Global Health Security Index: Strengthening Engagement and Transparency // GHS Index. 2019. (In Russian). URL: https://ghsindex.org/wp-content/uploads/2020/12/NTI_RussianGHSIndex.pdf (accessed: 25.03.2025).

⁸ Health at a Glance: Latin America and the Caribbean // OECD. April 18, 2023. URL: https://www.oecd.org/en/publications/health-at-a-glance-latin-america-and-the-caribbean-2023_532b0e2d-en.html (accessed: 25.03.2025).

percentage of the vaccinated population varies greatly across countries (Table 1).

The measures taken by countries were limited to vaccinating their populations, but this proved insufficient given the lack of domestic vaccines and a shortage of vaccines purchased from external manufacturers.⁹

Chile used the Chinese Sinovac vaccine, Mexico used the *AstraZeneca* vaccine (the “Oxford vaccine”), and Argentina used *Sputnik V*, which is manufactured in Russia. Brazil purchased 600 million doses from various manufacturers: *Pfizer/BioNTech* (developed by the German biotechnology company *BioNTech* in collaboration with the American *Pfizer* and the Chinese *Fosun Pharma*) — 300 million, *AstraZeneca* — 102 million, *Sinovac* — 100 million, *CanSino Biologics* (the Chinese vaccine) — 60 million, *Janssen* (the Netherlands) — 38 million doses.¹⁰ Several countries relied on humanitarian aid through the COVAX program, a global initiative that aims to ensure equitable access to vaccines for low- and middle-income countries.

In the 2021 GHS Index, the countries that demonstrated the highest level of preparedness to prevent, detect, and respond to biological threats were already Mexico (25th place), Chile (28th place), Peru (32nd place), Argentina (34th place), Panama (37th place), Colombia (38th place), Brazil (43rd place), and Ecuador (44th place), with the remaining countries lagging far behind on all indicators.¹¹ In October 2024, the Economic

Commission for Latin America and the Caribbean (ECLAC), together with the Pan American Health Organization (PAHO), prepared a report on the health system in LAC. It was noted that the COVID-19 pandemic had exacerbated the situation, which, combined with the development crisis, jeopardizes the achievement of SDG 3: “Inequalities in access to health care, gaps in the quality of care received, and high out-of-pocket costs not only highlight the urgency of increasing public health spending along with effective resource management, but also highlight the need to advance the financial sustainability of investments to strengthen the resilience of health systems.”¹²

Regional Strategy for Health System Development

In this situation, there was a need to revise the regional health strategy and change priorities related to productive and technological capacity. One of the targets for increasing public health spending remains elusive: public health spending in LAC increased by 25 % between 2000 and 2014 during the so-called “golden decade,” but these expenditures declined between 2015 and 2019, driven by economic crises. This, in turn, exacerbated the situation after the onset of the pandemic. In 2021, average expenditures amounted to 4.5 % of gross domestic product (GDP), with only a third of countries in the region achieving the target of 6 % of GDP proposed by PAHO/WHO (Table 2).

⁹ Esteves P. Latin America’s Uncoordinated Response in Tackling COVID-19 // South African Institute of International Affairs: Policy Insights. 2020. Vol. 97. P. 1–17. URL: <https://saiaa.org.za/wp-content/uploads/2020/12/Policy-Insights-97-Esteves.pdf> (accessed: 12.03.2025).

¹⁰ Number of Confirmed Doses of COVID-19 Vaccines for Brazil as of June 1, 2022, by Vaccine Producer (In Millions) // Statista. URL: <https://www.statista.com/statistics/1288270/brazil-confirmed-doses-covid-vaccine/> (accessed: 25.03.2025).

¹¹ Leading Countries Based on the Global Health Security (GHS) Index in Latin America in 2021 // Statista. URL: <https://www.statista.com/statistics/1105787/latin-america-global-health-security-index-overall/> (accessed: 25.03.2025).

¹² ECLAC and PAHO Call for Prioritizing Investment in Health to Reduce Inequality and Achieve the SDGs in Latin America and the Caribbean // ECLAC. October 21, 2024. URL: <https://www.cepal.org/en/pressreleases/eclac-and-paho-call-prioritizing-investment-health-reduce-inequality-and-achieve-sdgs> (accessed: 25.03.2025).

In 2021, only 61 % of healthcare expenditures were allocated from the state budget, while 28 % were covered by out-of-pocket payments, or payments by the population. This exacerbated inequalities in access to healthcare, as by 2023, 22.5 % of the region's population were living below the poverty line.¹³

Table 1. Key Indicators on Coronavirus Incidence, Mortality, and Vaccination in Latin America as of June 28, 2024

Country	Number of people infected	Number of deaths	Number of vaccine doses per 100 people	Percentage of population fully vaccinated by December 23, 2022	The number of vaccines allocated under the COVAX program by September 22, 2023
Brazil	37 511 921	702.116	225.92	82.3	25 882 560
Argentina	10 113 117	130.686	257.04	83.5	7 066 000
Mexico	7 618 633	334.537	175.02	64.1	34 618 440
Colombia	6 390 900	142.727	175.29	72.4	30 131 880
Chile	5 401 026	62.730	341.08	92.6	2 307 800
Peru	4 526 977	220.975	248.47	86.1	8 261 570
Guatemala	1 250 370	20.203	114.11	41.1	6 593 140
Costa-Rica	1 234 701	9.372	262.06	84.1	2 559 330
Bolivia	1 212 145	22.387	120.18	53.4	8 649 260
Cuba	1 113 662	8.530	410.23	88.3	The vaccine was not delivered
Ecuador	1 077 288	36.050	219.79	80.6	6 345 330
Panama	1 044 821	8.748	201.72	73.3	484 320
Uruguay	1 041 329	7.682	264	83.3	148 800

Source: compiled by A.R. Borzov based on: Number of Confirmed Cases of the Novel Coronavirus (COVID-19) in Latin America and the Caribbean as of July 28, 2024, by Country // Statista. URL: <https://www.statista.com/statistics/1101643/latin-america-caribbean-coronavirus-cases/> (accessed: 25.03.2025).

Table 2. Allocation of Funds for Healthcare in 2021–2023

Country	Share of GDP on healthcare in 2021, %	Health expenditure per capita, USD	Number of general practitioners and specialists per 1000 people in 2023
Argentina	9.71	1 045 (2021)	4
Bolivia	8.16	761 (2021)	2.4
Brazil	10.7	1 258 (2023)	2.5
Chile	9.0*	2 699 (2022)	3
Colombia	9.02	1 640 (2022)	3
Costa-Rica	7.57	1 658 (2022)	3.5
Ecuador	8.29	494 (2022)	2.9
Guatemala	6.90	341 (2022)	0.4
Mexico	6.08	1 181 (2022)	3
Panama	9.68	1 415 (2022)	2.4
Peru	6.16	412 (2021)	1.9
Uruguay	9.36	1 620 (2021)	5

Note. * — Chile's GDP share is for 2022.

Source: compiled by A.R. Borzov based on: Health Spending per Capita — Country Rankings // The Global Economy. URL: https://www.theglobaleconomy.com/rankings/Health_spending_per_capita/Latin-Am/ (accessed: 25.03.2025).

¹³ Latin American Economic Outlook 2024: Financing Sustainable Development // OECD. URL: <https://doi.org/10.1787/c437947f-en> (accessed: 25.03.2025).

Chile came out on top in per capita healthcare expenditure, with Uruguay, Panama, Colombia, Costa Rica, and Brazil also having significant expenditures. In Ecuador, the public healthcare system provides free medical care to all residents, but access is limited in rural areas, resulting in out-of-pocket expenditures reaching 33.83 %. Similar situations are observed in Bolivia, El Salvador, Nicaragua, the Dominican Republic, Belize, Suriname, Guyana, Honduras, and Haiti, where approximately 90 % of the population lives in poverty. Significant differences are also observed in the number of general practitioners and specialists. The highest rate is observed in Cuba, at approximately 8.4 doctors per 1,000 people, while the lowest is in Haiti (0.2 doctors per 1,000 people). The regional average is 3.5 per 1,000 people.¹⁴ As José Manuel Salazar-Shirinachs, Executive Secretary of ECLAC, noted: “The health sector remains chronically underfunded, fragmented, and segmented. Now more than ever, a significant transformation of the region’s development models is needed, with health care a key factor in expanding social protection and moving toward more productive, inclusive, and sustainable development.”¹⁵

During Mexico’s presidency of the Community of Latin American and Caribbean

States (CELAC) in 2021, a Health Self-Sufficiency Plan for the region¹⁶ was developed. At the CELAC Summit in Argentina (2023), the importance of ensuring the continuity of the adopted plan was emphasized and the Sanitation Self-Sufficiency Plan for Countries was endorsed, which focuses not only on the procurement and distribution of medicines but also on supporting research and technological development aimed at developing and producing domestic medicines.¹⁷

To implement these decisions, PAHO adopted the 2020–2025 Strategic Plan,¹⁸ which presents the Sustainable Health Index Expanded Plus (SHIe+), a set of indicators covering the economic, social, and environmental situation. This plan became the basis for the Sustainable Health Agenda for the Americas 2018–2030 (SHAA2030), which identifies 11 goals that address the issue of reducing inequalities in access to health services, increasing life expectancy, reducing mortality, combating malnutrition, early marriage, smoking, and drug use, and improving women’s status (Rubinstein, 2025). For 2024–2025, PAHO has allocated USD 700 million for the implementation of programs, while the WHO Programme Budget allocation for programs in the region is USD 295.6 million.¹⁹

Along with the need to increase investment in health infrastructure, PAHO also emphasizes the importance of developing interregional cooperation.

¹⁴ Health at a Glance: Latin America and the Caribbean // OECD. April 18, 2023. URL: https://www.oecd.org/en/publications/health-at-a-glance-latin-america-and-the-caribbean-2023_532b0e2d-en.html (accessed: 25.03.2025).

¹⁵ ECLAC and PAHO Call for Prioritizing Investment in Health to Reduce Inequality and Achieve the SDGs in Latin America and the Caribbean // ECLAC. October 21, 2024. URL: <https://www.cepal.org/en/pressreleases/eclac-and-paho-call-prioritizing-investment-health-reduce-inequality-and-achieve-sdgs> (accessed: 25.03.2025).

¹⁶ Plan for Self-Sufficiency in Health Matters in Latin America and the Caribbean: Lines of Action and Proposals // ECLAC. September 18, 2021. URL: <https://www.cepal.org/en/publications/47253-plan-self-sufficiency-health-matters-latin-america-and-caribbean-lines-action-and> (accessed: 25.03.2025).

¹⁷ VII Summit of Heads of State and Government of the Community of Latin American and Caribbean states (CELAC) Declaration of Buenos Aires. Buenos Aires, January 24, 2023 // EU — LAC. URL: <https://eulacfoundation.org/sites/default/files/attachments/Declaration%20of%20Buenos%20Aires.pdf> (accessed: 25.03.2025).

¹⁸ Strategic Plan of the Pan American Health Organization 2020–2025: Equity at the Heart of Health. URL: <https://iris.paho.org/handle/10665.2/52473> (accessed: 25.03.2025).

¹⁹ Alignment of PAHO — WHO Planning and Budget Frameworks. URL: <https://www.who.int/about/accountability/budget/programme-budget-digital-platform-2024-2025/alignment-of-paho-who-planning-and-budget-frameworks> (accessed: 25.03.2025).

EU — LAC Interregional Health Development Projects

EU — LAC relations have developed comprehensively in the 25 years since the First Interregional Summit in 1999 (Casanueva, 2020). In the health sector, the first step was the multifaceted *EUROSociAL* project, which included the program “Strengthening the Health Sector in Latin America as a Vector of Social Cohesion.” As part of one aspect of the *EUROSociAL*/Salud project (2005–2009), the EU provided technical assistance to LAC countries in developing governance systems in health services and the delivery of quality primary care. Funded by the EU and coordinated by Spain, Brazil, and Colombia, the project supported initiatives on equitable access to health services, public health policy development, human resource development, and the rational distribution of medicines (Salgado, 2024). The project “EU Health — Latin America and the Caribbean (2011–2017): A Roadmap for Collaborative Health Research” aimed to develop scientific and technical research and build expert networks. In the EU, these expenditures accounted for 18 % of total R&D expenditure, while in Latin America, they accounted for 9.5 %.²⁰ The project resulted in the creation of a Strategic Roadmap for Health Research Programs and the subsequent funding of 13 projects with an estimated total of 16 million euro. The countries with the highest levels of researcher

participation were Germany, Spain, Argentina, Chile, Ecuador, Uruguay, Poland, and Brazil (Corral et al., 2018).

The pandemic changed this collaboration. To combat the coronavirus, the EU provided 3 billion euro in healthcare support to the region, delivered over 130 million doses of vaccines, and became the leading sponsor of the COVAX program, which has delivered over 50 million doses of vaccine to the region.²¹ In 2020, the EU reoriented its cooperation programs to combat the pandemic, allocating 918 million euros for this purpose, and the European Investment Bank (EIB) — another 325 million euros (Tayar & Ponomarev, 2023, p. 117). The EU has developed mechanisms for coordinating actions through the *EUROSociAL* programme for health emergency management (Kosevich, 2023).

The EU Global Gateway programme (2021–2027) has allocated 48.7 billion euro to LAC over four years for approximately 130 projects in renewable energy, bridging the investment gap, the digital transition, and developing healthcare and education.²² At the EU — CELAC Summit (2023), the EU — CELAC Roadmap for 2023–2025 was adopted, which included the signing of a 3.8 million euro partnership agreement between the EU and PAHO for access to new technologies and joint research,²³ as well as a declaration establishing a Digital Alliance. In 2024, the Team Europe Initiative was launched as part of the *EUROSociAL* project, which plans to mobilize over 1 billion euro, with the

²⁰ EU — LAC Health // COHRED. URL: <https://www.cohred.org/eulac/> (accessed: 25.03.2025).

²¹ EU — Latin America and Caribbean Leaders' Meeting Via Video Conference, 2 December 2021 // European Council. Council of the European Union. URL: <https://www.consilium.europa.eu/en/meetings/international-summit/2021/12/02/> (accessed: 25.03.2025).

²² EU — LAC Global Gateway Investment Agenda // European Commission. URL: https://international-partnerships.ec.europa.eu/policies/global-gateway/eu-lac-global-gateway-investment-agenda_en (accessed: 25.03.2025).

²³ Global Gateway: EU Builds New Partnership for Improved Latin American and Caribbean Health Technologies with Pan American Health Organization // European Commission. July 17, 2023. URL: https://international-partnerships.ec.europa.eu/news-and-events/news/global-gateway-eu-builds-new-partnership-improved-latin-american-and-caribbean-health-technologies-2023-07-17_en (accessed: 25.03.2025).

EU contributing 268 million euro, to strengthen health institutions and promote social innovation in the LAC region.²⁴

China's "Health Silk Road" in LAC

Along with the development of the BRI initiative, China put forward the establishment of the "Health Silk Road" (HSR) in the 2016 Beijing Communiqué on Health Cooperation, and signed a Memorandum of Understanding and an Action Plan for Cooperation with the WHO in 2017.²⁵ The HSR project was proposed as a part of the BRI, sparking debates about China's objectives, with China's actions viewed in a variety of ways, ranging from its desire to replace the existing health governance system to improving existing institutions (Zeng, Ding & Liu, 2023; Xu & Wang, 2022). According to A. Santiago and C. Rodriguez, the initiative's goals were to strengthen health infrastructure, enhance international cooperation in disease research and control, and promote the Chinese model of health development as an alternative to the Western model (Santiago & Rodrigues, 2023).

In Latin America, the most significant HSR projects were the construction of three hospitals in Ecuador in 2013, 2015, and 2018, but the coronavirus pandemic dramatically changed the situation (Zeng, Ding & Liu, 2023).

China was the first country to organize an airlift to deliver essential supplies and doctors to Venezuela, Colombia, Peru, Bolivia,

Brazil, Ecuador, Guyana, Chile, Argentina, and Uruguay. In 2020, China allocated USD 215 million for personal protective equipment (PPE), PCR tests, and ventilators, with almost half of this amount — USD 100 million — designated for Venezuela. Colombia received USD 1.5 million in humanitarian aid from China, and *Alibaba*, *Huawei*, and the *Three Gorges* sent USD 1.5 million worth of medical supplies to Peru, Bolivia, and Argentina. The *Tencent Global Foundation* donated 2.2 tons of medical equipment (120 000 masks and 5 000 protective suits), and China National Petroleum Corporation (CNPC) sent 9.3 tons of consumables to Ecuador (Fuenzalida & Fulchéron, 2020). Chile received 15 tons of equipment worth USD 2.5 million. Aid from China even reached countries that maintain relations with Taiwan: for example, USD 53,000 worth of aid was sent to Paraguay via the Brazilian embassy (Safronova, 2021). In 2020, China announced a USD 1 billion loan to countries in the region to purchase Chinese vaccines.²⁶ The United States, preoccupied with the coronavirus situation in its own country, only allocated USD 153 million to LAC countries for the purchase of PPE during the same period.²⁷

In 2021, China began co-producing and distributing vaccines: *Sinovac* in Brazil and Chile, *Sinopharm* in Argentina and Peru, and *CanSino* and *Walvax* in Mexico. *Sinovac* is producing 100 million doses of the *CoronaVac* vaccine in São Paulo, Peru began

²⁴ EU Launches New Initiative for More Inclusive and Equitable Societies // FIAP. March 27, 2023. URL: <https://www.fiap.gob.es/en/noticias/eu-launches-new-initiative-for-more-inclusive-and-equitable-societies/> (accessed: 25.03.2025).

²⁵ Lo C., van de Pas R. China's Global Health Diplomacy: Possibilities and Limitations for Cooperation // Maastricht University. 2023. URL: https://cris.maastrichtuniversity.nl/files/143732052/China_Global_Health_Diplomacy.pdf (accessed: 12.03.2025).

²⁶ Ray R., Albright C.Z., Wang K. China — Latin America Economic Bulletin: 2021 Edition. Boston: Boston University Global Development Policy Center, 2021. URL: https://www.bu.edu/gdp/files/2021/02/China-LatAm-Econ-Bulletin_2021.pdf (accessed: 12.03.2025).

²⁷ Rudolf M. China's Health Diplomacy During COVID-19 The Belt and Road Initiative (BRI) in Action // SWP Comment. 2021. No. 9. URL: <https://www.econstor.eu/bitstream/10419/256670/1/2021C09.pdf> (accessed: 12.03.2025).

distributing 300,000 doses of the *Sinopharm* vaccine in February 2021, and Mexico approved *CanSino's* single-shot vaccine and ordered 7 million doses.²⁸ Chile's vaccination program has become one of the most advanced in the world, with almost three-quarters of its vaccine doses ordered from *Sinovac*. This active humanitarian assistance, as well as the Chinese vaccines, has improved public opinion of China in LAC countries and enhanced its reputation relative to that of the United States.²⁹ China's entire anti-COVID campaign in the region was carried out under the slogans of strengthening cooperation in the fight "against a common enemy" and creating a Chinese-Latin American "community of shared future" as an important step toward forming a "community of shared destiny for all humanity" (Safronova, 2021, pp. 189–190).

The China — CELAC Action Plan (Vadell, 2021) outlined the joint production and development of vaccines and the exchange of best practices in clinical medicine in the healthcare section. China provided access to concessional loans for the construction of healthcare infrastructure in the region, and also expressed its commitment to continue performing cataract surgeries as part of the Brightness Action project.³⁰

Challenges of the Pharmaceutical Industry in LAC

The pandemic has demonstrated the importance of domestic vaccine production in the fight against diseases. However, while the region's share of global merchandise exports in 2020 accounted for 5.4 %, its share of global pharmaceutical exports was only 0.7 % a figure which has been in decline, falling by 32 % from a peak of USD 7.1 billion in 2012 to USD 4.9 billion in 2020. As a result, these countries are experiencing persistent shortages in drug supplies, and their imports in 2020 were six times higher than their exports (Ortiz-Prado et al., 2021).

In 2023, Brazil had the largest pharmaceutical market, valued at USD 37.3 billion, followed by Mexico (USD 12.9 billion). In 2021, Brazil imported USD 11 billion worth of medicines, while exports decreased from USD 1.57 billion in 2014 to USD 1.24 billion in 2023.³¹ EU countries account for over 50 % of Brazil's imported medicines (primarily from Belgium and Germany), while American drugs account for 12 %.³²

From 2019 to 2023, global pharmaceutical and biotechnology research expenditures increased from USD 180 billion to USD 255 billion, IT expenditures increased from USD 220 billion to USD 300 billion, and medical equipment expenditure increased

²⁸ Ray R., Albright C.Z., Wang K. China — Latin America Economic Bulletin: 2021 Edition. Boston: Boston University Global Development Policy Center, 2021. URL: https://www.bu.edu/gdp/files/2021/02/China-LatAm-Econ-Bulletin_2021.pdf (accessed: 12.03.2025).

²⁹ Heldt E.C. China's 'Health Silk Road' Offensive: How the West Should Respond // *Global Policy*. 2020. Vol. 12, iss. 5. P. 1–3. URL: <https://www.globalpolicyjournal.com/blog/09/12/2020/chinas-health-silk-road-offensive-how-west-should-respond> (accessed: 12.03.2025). See also: (Urdinez, 2024).

³⁰ China — CELAC Joint Action Plan for Cooperation in Key Areas (2022–2024) // Ministry of Foreign Affairs of the People's Republic of China. December 7, 2021. URL: https://www.mfa.gov.cn/eng/zy/jj/2020zt/kjgzbdffyq/202112/t20211207_10463459.html (accessed: 25.03.2025).

³¹ Pharma Market Value in Latin America 2023, by Country (In billion U.S. dollars) // Statista. URL: <https://www.statista.com/statistics/418021/revenue-from-pharmaceutical-industry-in-latin-america-by-major-country/> (accessed: 25.03.2025).

³² Pharmaceutical Market Around the World: Latin America // RNC Pharma. March 15, 2024. (In Russian). URL: <https://telegra.ph/Farmrynok-vokrug-sveta-Latinskaya-Amerika-03-15?ysclid=m87mp7daao722470778> (accessed: 25.03.2025).

from USD 15 billion to USD 20 billion.³³ In LAC, Brazil alone allocates 1.1 % of its GDP to R&D,³⁴ including clinical medicine, biology and biochemistry, neuroscience, immunology, biotechnology, and robotics. The *Fiocruz Institute* is the largest research center and vaccine producer in Latin America, and Brazil is committed to expanding collaboration in medical research.

In 2022, the European Union launched a project with countries in the region aimed at sharing pharmaceutical technology and strengthening healthcare resilience to combat endemic and emerging diseases.³⁵ However, the EU is dominated by large multinational pharmaceutical companies, whose primary objective is profit, and harmonizing their interests with those of LAC countries, where medical technology and production are carried out in public institutions through public investment, is difficult.³⁶ Disputes related to patents and intellectual property rights for medicines remain the most complex in EU-Latin American relations, largely due to the position of the pharmaceutical sector, which makes a significant contribution to the EU's own GDP.³⁷

As for China, in 2022, *Sinovac* began construction of vaccine production facilities in Chile and Colombia and signed a technical cooperation agreement with Ecuador.

In 2021, China began construction of three hospitals in Chile, in 2023 the construction of the Tambobamba Hospital in Peru began, and in 2024, the BGI Genomics laboratory in Uruguay. In 2023, a Memorandum of Understanding was signed between China and Brazil, specifically between the Chinese Academy of Sciences and *Fiocruz*, an agreement was reached to establish a China — Brazil Center for Infectious Disease Research and Prevention, with the development of technologies for disease testing and diagnosis and the joint production of vaccines (Zeng, Ding & Liu, 2023).

China's contribution to the LAC healthcare system is not only related to advanced technologies and their transferability, innovative medical equipment and medicines, but also to the supply of active pharmaceutical ingredients (APIs) which it produces for the world (834 active pharmaceutical ingredient producers in China versus 13 in Brazil in 2023) (Santiago & Rodrigues, 2023).

At the Global Pandemic Preparedness Summit (Rio de Janeiro, 29–30 July 2024), *Fiocruz* President M. Moreira noted that the challenges faced by countries in the Global South are increasingly exacerbated by the concentration of global healthcare supply chains in countries in the Global North, which hinders access to medical materials

³³ Global Innovation Index 2024: Unlocking the Promise of Social Entrepreneurship // World Intellectual Property Organization (WIPO). 2024. URL: https://www.wipo.int/web-publications/global-innovation-index-2024/assets/67729/2000%20Global%20Innovation%20Index%202024_WEB3lite.pdf (accessed: 25.03.2025).

³⁴ Ibid.

³⁵ EU — Latin America and Caribbean Partnership: Manufacturing Vaccines, Medicines and Health Technologies and Strengthening Health Systems in Latin America // European Commission. URL: https://international-partnerships.ec.europa.eu/policies/global-gateway/partnership-manufacturing-vaccines-medicines-and-health-technologies-and-strengthening-health_en (accessed: 25.03.2025).

³⁶ Cimini F., Bayerlein M., Villarreal P. A., Schwebel F. Exploring New Interregional Opportunities for Pharmaceutical Supply Chains: The Potential of Mercosur Countries to Advance the EU's Global Health Strategy // SWP Comment. 2024. No. 5. URL: <https://www.swp-berlin.org/10.18449/2024C05/> (accessed: 25.03.2025).

³⁷ EU4Health Programme 2021–2027 — A Vision for a Healthier European Union // European Commission. URL: https://health.ec.europa.eu/funding/eu4health-programme-2021-2027-vision-healthier-european-union_en (accessed: 25.03.2025).

and technologies such as vaccines, medicines, diagnostic reagents, medical equipment, and personal protective equipment.³⁸

In this regard, China demonstrates significant advantages over the EU. China expects the HSR to lay the groundwork for investment in “next-generation” medical infrastructure, including integration with the Digital Silk Road, telemedicine and other digital applications, the implementation of cutting-edge technologies such as the internet, big data, satellite navigation, and artificial intelligence, including in medicine, and interaction with the BRI project. Thus, as of 2023, China’s global commitment to the BRI exceeded USD 1 trillion, while the Global Gateway envisages only USD 300 billion for the 2021–2027 period. EU leaders recognize that China’s growing geopolitical influence (along with growing trade, investment, and infrastructure projects) poses a problem, as reflected in the European Parliament’s 2025 report.³⁹ This is why the EU is beginning to define China as a “systemic threat, more akin to the United States,”⁴⁰ which also poses a threat to EU countries’ interests in the region.

Conclusion

LAC countries have taken the implementation of the SDGs seriously by developing common regional indicators alongside global ones. SDG 3 has become the most prioritized goal for the region’s states, as building a healthy society is closely linked to other goals, such as combating hunger and

inequality, advancing education, creating a healthy environment, and combating climate change. The coronavirus pandemic has exposed the extreme vulnerability of the LACE healthcare system, its inability to contain the spread of the infection and provide the population with sufficient vaccines. As a result, PAHO, together with ECLAC, developed a regional strategy for improving the healthcare system, with specific recommendations for each country and the allocation of funds for programs to ensure regional self-sufficiency in this area, which is reflected in the SHAA2030 Plan for 2024–2025.

Along with the necessary increase in public spending to improve national healthcare systems and ensure access to basic services, the fight against the pandemic has revealed serious gaps in the development of high-tech pharmaceutical production in Latin American countries, the availability of medicines, and the availability of qualified personnel. A key component of addressing this issue has been expanding international cooperation, access to new technologies in drug production, personnel training, and the digitalization of healthcare services.

The EU is developing this cooperation through its *EUROSociAL* program. However, commercial interests in ‘vaccine diplomacy’ have damaged Europe’s image, unlike China, which organized an airlift to deliver essential medical supplies to LAC, significantly improving China’s perception despite the global campaign to discredit it over the origins of the virus. In this context, the HSR

³⁸ Global Pandemic Preparedness Summit 2024. URL: <https://cepi.net/gpps> (accessed: 25.03.2025).

³⁹ China’s Increasing Presence in Latin America: Implications for the European Union EPRS // European Parliament. February 2025. URL: [https://www.europarl.europa.eu/RegData/etudes/BRIE/2025/769504/EPRS_BRI\(2025\)769504_EN.pdf](https://www.europarl.europa.eu/RegData/etudes/BRIE/2025/769504/EPRS_BRI(2025)769504_EN.pdf) (accessed: 25.03.2025).

⁴⁰ Lewkowicz J. Beyond the Belt and Road? What’s Next for the EU in Latin America // Dialogue Earth. September 26, 2024. URL: <https://dialogue.earth/en/business/beyond-the-belt-and-road-whats-next-for-the-eu-in-latin-america/> (accessed: 25.03.2025).

project has received significant impetus, strengthening the BRI.

The EU has intensified its activities in LAC, adopting a number of new programs and projects. However, the EU faces certain limitations in its development assistance, particularly to the pharmaceutical industry in the LAC region, due to the interests and potential loss of revenue of large European drugmakers. China's position differs from Europe's, as it is willing to share vaccine production technologies, ensuring fair access to high-quality medical products, and is also building hospitals and training personnel, which in turn strengthens its dominance in LAC.

Healthcare is becoming one of the areas where competition is increasing, as China is allocating significantly more funds for its modernization in LAC. The Global Gateway program can be seen as Europe's response to the BRI initiative. However, the EU is experiencing economic stagnation, a loss of leadership in key technologies, declining financial support and a lack of clear project implementation procedures. Growing disagreements between the EU and the US and increased European defense spending in connection with the Ukrainian conflict will also negatively impact the EU's cooperation with the LAC, which will inevitably lead to a strengthening of China's position.

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