Challenges for the Armed Forces of Latin America in Responding to the COVID-19 Pandemic

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ollowing its origins in Wuhan, China, the COVID-19 virus initially spread far more rapidly across Europe and the US, than in Latin America and the Caribbean, creating the illusion that its impact in the latter might be less severe. When the World Health Organization declared on March 11 that COVID-19 had reached the level of a global pandemic, the number of cases in Latin America were still relatively limited. Latin American and Caribbean governments, viewing the lethal and explosive dynamics of the virus in Europe and the US had valuable time to prepare, yet also faced critical vulnerabilities vis-à-vis the higher-income Western countries. Large informal sectors, fragile small and medium enterprises, and governments with limited resources made social distancing difficult to effectively sustain over time. Economic structures such as public markets, social traditions emphasizing relatively greater interpersonal contact and interaction, and ingrained distrust of government made such measures difficult for authorities to enforce.² Weak public health systems,³ especially outside major cities, poor coordination with private sector health systems, and ingrained corruption and inefficiency in government bureaucracy all undermined the ability of healthcare systems in the region to respond effectively and adapt to the challenge.⁴

By May 2020, even as COVID-19 persisted with recurrent outbreaks in the US⁵ and China,⁶ the World Health Organization had declared Latin America a new epicenter for the virus,⁷ with the level of infections taking off across the region.⁸ The response of the region's political leaders was uneven, with leaders such as those in Peru, Colombia,⁹ and El Salvador moving quickly to take strong measures, while others, such as the Presidents of Mexico,¹⁰ Brazil¹¹ and Nicaragua,¹² responding less aggressively, and in some cases, initially discounting the danger or delaying economically consequential responses to contain it.

In virtually all the countries of the region, overwhelmed governments called on their armed forces to support their responses to COVID-19. The role played by

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those armed forces in each country varied according to their particular threat, the nature of the government, the capabilities of their armed forces, and the frameworks of law and tradition in which they operated. The similarities and differences between countries in the role of the armed forces, and the associated successes and challenges, provide important insights and lessons in the continued struggle against the pandemic. Such analysis similarly contributes to the preparation for future largescale medical and other challenges, as well as to understanding how the current pandemic is impacting Latin American and Caribbean Armed Forces, including their resources, thinking about national security challenges, and their relationship with the societies in which they operate.

This work analyzes, compares, and contrasts the role and challenges of armed forces across the region in responding to the COVID-19 pandemic, with a particular focus on Mexico, Guatemala, El Salvador, Honduras, Barbados, Colombia, Peru, Paraguay, Argentina and Chile. These cases provide a relatively representative sample across subregions in the content, including armed forces of different sizes and capabilities, and countries with different COVID-19 related challenges and policy responses. Given the absence of published multi-country analyses of COVID-19 responses by Latin American armed forces, this work focuses on a limited analysis of many cases, rather than conducting an in depth analysis of a smaller number, in order to identify possible patterns that can be investigated and confirmed by later works. This article begins by examining patterns of the activities for which Latin American and Caribbean Armed Forces have been used in combatting COVID-19, and then examines associated challenges. It concludes with an examination of the possible effects of COVID-19 on Latin American militaries as institutions.

Latin American Armed Forces Face COVID-19

Latin American governments generally brought their armed forces into the fight against COVID-19 under existing legal frameworks, supplemented by the activation of special legal authorities by political leaders in their countries, including states of emergency and similar mechanisms.¹³ Those actions in support of other agencies, typically implemented through a named military plan, were generally adaptations of plans already in place to support civil society in response to natural disasters.

Mexico was one of the few countries in the region to have a detailed preexisting plan specifically tailored to counter epidemics (which it had put in place in 2009 in response to the challenge of the H1N1 virus). Using this framework, Mexico activated its system for incident management for a public health emergency,¹⁴ and brought the military in to support the national response, in co-

ordination with government civil health organizations. 15 Within this framework, Mexico activated its disaster response plan DN-IIIe, 16 which included the activation of a National Coordination Center, ¹⁷ to support interaction between federal, state, and local entities for the logistical actions involving medical and other goods required for the response, the contracting of medical personnel, and the construction or adaptation of hospitals, amongst other items. ¹⁸ In Mexico, the Navy alone deployed over 12,000 personnel in COVID-19 related tasks.¹⁹

In El Salvador, the military was used to support one of the earliest and most restrictive responses to COVID-19 amongst countries in the region, including the closure of borders and the implementation of a nationwide curfew before the country had registered its first official case. 20 The legal authority of the military, which already played a substantial domestic role in the fight against gangs and organized crime, was based principally on Article 86 of the Constitution, giving it authority to support civil authorities in response to natural disasters.²¹ It was further expanded by the declaration of a state of emergency by the National Assembly on March 14, 2020.²² The expanded role centered on supporting an interagency effort that was built around support to civil protection organizations.

In Guatemala, the armed forces were similarly given additional authority for internal control within the framework of the March 5, 2020 declaration and subsequent extension of a "state of calamity" by the Guatemalan Congress, 23 and the establishment of the interagency plan to "prevent, contain, and respond to CO-VID-19" in the country.²⁴ Similar to the situation in El Salvador, the majority of the actions of the Guatemalan Armed Forces involved support to civil authorities, in the framework of the system for response to natural disasters (such as tropical storms and earthquakes) CONRED.²⁵

In Barbados, involvement of the military in support of the government's CO-VID-19 response followed a decision of the National Security Council on February 5th. The Barbados Defense Force (BDF) initially focused on securing the nation's principal port and airport, providing logistics support to civil authorities, a field hospital, and helping to move tests and COVID-19 patients. The military contribution, named Operation Trident Shield, also included setting up a National Health Emergency Operations Center (NHEOC) for interagency planning.

In Barbados and other Eastern Caribbean states, the military had the added resources of the Regional Security System (RSS) which provided aircraft to augment the movement of people and test samples.²⁶

In Colombia, military support to the government's interagency effort was formally initiated on March 13, 2020, including an integrated command under the President's designated civilian coordinator, Luis Guillermo Plata, in charge of the virus response.²⁷ The Colombian military response was defined by the three phase "San Roque" plan, which includes, among other elements, control

of land and maritime frontiers, augmentation of medical capacity, medical logistics missions, and the use of the military to manufacture and supply medical equipment, tests, and personal protective equipment, as well as force protection.²⁸ The Colombian military deployed 29,000 personnel for the operation, assisting the national police and other authorities in activities from checkpoints to frontier control.²⁹

In Ecuador, the military role was guided by Ministerial Agreement 179 of May 29, 2020, which governed the expanded use of force. Under this agreement, more than 33,500 personnel in six operational commands, plus one specialized task force in the particularly hard-hit Department of Guayas, were deployed in support of the national response; performing missions from border control, to convoy security, establishment of field hospitals, and providing care packages for the needy.³⁰

In Paraguay, the President convoked the National Defense Council and through the military, created an Interinstitutional Coordination Center to sup-port efforts of the Ministry of Public Health and Social Welfare to support the COVID-19 response.³¹

In Peru, following the government's declaration of a State of Emergency on March 15, 2020, the military, including the Navy,³² deployed 60,000 troops in a range of missions, which mainly focused on territorial control, to include 1,100 control points.³³

In Chile, use of the military was similarly enabled through the government's declaration of State of Emergency on March 18th. The government treated the pandemic as a public health crisis, naming 12 Army Generals, an Air Force Gen-eral, and two Navy Admirals as zone commanders to organize support for public order and other assigned activities.³⁴

In Argentina, under the framework of the 1988 National Defense Law and Plan General Manuel Belgrano, the Argentine government divided the country into 14 zones with joint military commands responsible for supporting government efforts against the pan-demic in each zone.³⁵ The armed forces provided support to the government under the civil defense provisions of the National Defense Law to protect and aid the civilian population. However, unlike many counterparts, it did not use military bases as quarantine facilities.³⁶

In general, the activities of the armed forces in the region facing COVID-19 may be loosely grouped into social distancing and curfew enforcement, restricting internal movement through cordons and checkpoints, helping to seal national borders, medical logistics, use of the military to augment hospital capabilities, taking food and supplies to vulnerable populations, and the production of COVID-19 related items.

Social Distancing and Curfew Enforcement

One of the most significant uses of military manpower across Latin America to help combat COVID-19 involved a variant of the traditional military mission of territory control. Military forces across the region were deployed through checkpoints and patrols, to ensure that citizens obeyed government-ordered curfews and other social distancing measures.

In most countries, it was the police which had the primary responsibility for enforcing government-ordered curfews, especially in urban areas, yet the military supported the police in enforcing them. This occurred, for example, in El Salvador and Guatemala,³⁷ as well as in Honduras, where the military police for public order (PMOP) played a curfew enforcement role.³⁸ In Colombia, over 29,700 military members were used for territorial control missions,³⁹ including supporting the police in curfew enforcement.⁴⁰ The military was similarly used to reinforce curfews in Ecuador and Peru. However,, as in other parts of this region, the unwillingness of the population to respect government-ordered curfews and other restrictions increased the difficulty of the mission.⁴¹

In Paraguay, the Army similarly enforced curfews through patrols.⁴² In addition, they enforced social distancing, the use of masks in public spaces, and took temperatures.⁴³ In Chile, likewise, the military was used to compliment the Carabineros in curfew enforcement with other law enforcement entities.⁴⁴

The military did not play this role in all countries, however. In Barbados, due in part to the small size of the country, such matters were left to civil authorities.⁴⁵

Restricting Internal Movement Through Cordons and Checkpoints

As with curfew enforcement, the use of the military to restrict the movement of populations in the country through cordons and checkpoints was a relatively familiar mission for most militaries in the region, particularly for those involved in combatting criminal, terrorist, and insurgent groups. The armed forces of El Salvador, Guatemala, Honduras, Paraguay, Colombia, Peru, among others, all conducted such operations. In El Salvador, for example, the military maintained checkpoints to restrict internal movement in the country⁴⁶ as part of the government's "Stay at Home" program.⁴⁷ Curfew violators were, with some public controversy,⁴⁸ taken to containment centers.⁴⁹

In Guatemala, similarly, towns were cordoned off,⁵⁰ only letting in food. This became a problem, however, in three remote municipalities in the Department of Solola which aggressively protested movement restrictions which prevented them from getting their agricultural products to market.⁵¹

In Colombia, a total of 800 checkpoints were established across the country through the combined efforts of the military and the police.⁵²

In Peru, 1,100 control points were established.⁵³ The Peruvian armed forces were also used to augment the police in protecting banks and other facilities when the government began lifting the curfew in select areas in July 2020.⁵⁴

In Argentina, although still exerting presence across the country, the military concentrated efforts on establishing checkpoints around the greater Buenos Aires metropolitan area.⁵⁵

As with curfew enforcement, not all countries used their military in this fashion. Among those examined for this study, Barbados did not.

Sealing Frontiers

In keeping with the traditional military mission of territorial defense, armed forces in the region played a key role in the sealing of land and maritime borders, including ports and airports, as a measure to limit contagion.⁵⁶

El Salvador employed the military at a relatively early stage to enforce the closing of its borders. Some 3,000 members of the armed forces were deployed to help control the border, including sealing off informal border crossings.⁵⁷ Guatemala similarly used the military to close its borders with Mexico, Honduras and El Salvador,⁵⁸ including the enhanced patrolling of terrain where nonofficial crossings could occur.⁵⁹ Colombia put particular emphasis on restricting movement across its frontiers with Venezuela and Brazil.⁶⁰ In a similar fashion, Ecuador and Peru⁶¹ used their militaries to close their borders, as did Paraguay.⁶²

Latin American Naval forces also participated in the mission, using their assets to control ports and enforce closures of maritime borders.⁶³

A part of the military support role in securing borders in many countries involved deployment to ports and airports. The BDF was used, for example, to secure the country's principle port, Bridgetown, and its international airport. Similarly, in Chile the military was deployed to support controls at airports.

Medical Logistics

Across the region, armed forces were used to distribute medical supplies, including ventilators, tests, personal protective equipment, and other items.

By the end of May, the Mexican Navy had delivered 3.8 million protective masks, 158,780 latex gloves, and 58,512 surgical robes to hospitals in Baja California, Baja California Sur, Sonora, Sinaloa, Jalisco, Michoacán, Nayarit and Colima on the Pacific ocean, as well as Veracruz, Tabasco, Campeche, Yucatán and

Quintana Roo, in the Gulf of Mexico.⁶⁴ The Mexican military was also the agent for purchasing ventilators from abroad.⁶⁵

As with many other militaries in the region, the Mexican Army and Navy further supported the logistics effort by providing protection to distribution points and hospitals.⁶⁶ The Mexican Army, for example, provided 1,000 personnel to secure 38 government storage facilities for medical supplies.⁶⁷

In Guatemala, in addition to distributing medical goods,⁶⁸ Army engineering units worked to improve roads in remote areas to maintain logistics lines of communication open for populations in need.⁶⁹ The military also provided some transportation services, including picking up Guatemalan nationals from infected cruise ships.⁷⁰

In Barbados, the BDF received, stored, and delivered goods for the public health system, including picking up personal protective equipment and other items manufactured by local industry, and transporting them to government facilities for distribution. The BDF also transported both tests and personnel suspected or confirmed to have COVID-19.⁷¹

In Colombia, the armed forces provided ambulance services in remote areas, and transported COVID-19 patients to hospitals in major cities, from locations along the Brazil, Ecuador, and Venezuela border regions where medical facilities were inadequate.⁷² They also used its vehicles and aircraft to transport COVID-19 test results from remote areas to hospitals for analysis.⁷³

In Peru, the military similarly helped to evacuate sick persons, as well as transported COVID-19 test results from the field back to laboratories.⁷⁴

The Chilean army transported infected persons, from areas where medical capabilities were overwhelmed, to other facilities, as well as transported medical equipment including ventilators and other items to the facilities where they were needed.⁷⁵ When the People's Republic of China (PRC) donated medical equipment to Chile in June, the Chilean Air Force used its aircraft to pick up the goods in the PRC.⁷⁶

Augmentation of Hospital Capacity

Across the region, Latin American militaries augmented national hospital capabilities by making military hospitals available for public use, using their Navy ships to provide hospital capabilities and constructing field hospitals.

In Mexico, from the beginning of the pandemic, the armed forces⁷⁷ made their military hospitals available for COVID-19 patients. As of late June 2020, the Mexican Army opened 13 of its hospitals for COVID-19 patients, in addition to providing 48 other smaller or temporary medical facilities. The smaller Mexican Navy made eight hospitals available for COVID-19 patients, providing 4,000

beds, and used two of its logistics ships to provide hospital services (in Acapulco on the Pacific coast, and in Veracruz, in the Gulf of Mexico).⁷⁸ It also administered public hospitals and contracted for medical personnel.⁷⁹ The Army similarly supervised 32 public hospitals, and constructed at least four field hospitals.⁸⁰

In Guatemala, Army engineers were used to construct four field hospitals, including one in an Air Force facility in the northern part of the country.⁸¹ They also provided security to existing hospitals where COVID-19 patients were being treated.⁸²

In Barbados, the BDF dedicated part of its Paragon training base in Christ Church, including the barracks, to quarantine patients, and set up field medical facilities. ⁸³ It also supported the transformation of a former US military base to receive critical care level patients, including the storage of donated equipment until the facility could be made ready through work by a private contractor.

In Colombia, the military used its hospitals, including its main facilities in Bogota⁸⁴ and in Cartagena, ⁸⁵ to augment medical capacity to treat Covid. As with other militaries in the region, it also constructed field hospitals. ⁸⁶ The Colombian Navy made three hospital ships available: in Cartagena, Malaga, and Leguizamo. ⁸⁷ It also conducted special training for doctors in the Nueva Granada Military University. ⁸⁸

In Peru, the Army constructed a field hospital with 3,000 beds in Villa Panamericana, in the greater Lima area.⁸⁹

In Chile, the Army made the Military Hospital in Santiago available to COVID-19 patients, 90 as well as used Navy ships to provide hospital beds. 91 Naval ships were also used to provide medical services for non-COVID-19 patients, freeing up hospital beds for those stricken by the pandemic 92. Chile also sent medical teams to support remote populations, such as in Bio Bio. 93

Taking Aid to Vulnerable Populations

In the realm of significant economic needs created by social isolation, it is interesting to note that Latin American militaries played a significant role in taking food and other needed items to vulnerable populations. Such activities, arguably, had a beneficial effect on relations between the military and those receiving the aid.

In Mexico, the military distributed over 477,000 food packets.⁹⁴ The Honduran military conducted similar activities.⁹⁵ The Guatemalan military did so as well, in poor areas such as Alta Verapaz.⁹⁶ In El Salvador, similarly, the military delivered food aid to communities in need such as Ahuachapan,⁹⁷ among others. In Barbados, the BDF participated in the assembly of "family care packages" for vulnerable populations, although it did not directly participate in their distribution,⁹⁸ as did the Paraguayan military.⁹⁹

In Colombia, the military used its logistics system to fly food and other goods to remote areas, registering some 582 caravans carrying 46 tons of food. The Colom-

bian Navy delivered potable water, including over 235,000 liters of water to residents of Vichada and the island of San Andres.¹⁰⁰

In Ecuador, the Army delivered more than 238,000 care packages by mid-May 2020. ¹⁰¹ Its operations in June 2020 included the delivery of 3,500 care packages in the particularly hard-hit Department of Guayas. ¹⁰²

In Peru, the military distributed food, including loaves of "bicentennial bread" for the poor. ¹⁰³ In support of the National Civil Defense Institute (INDECI), the Peruvian Army assembled and delivered 43,000 care packages to local governments for the needy, among other civic actions. ¹⁰⁴

In Chile, in addition to distributing goods to needy populations, the military transported water to remote areas. 105

In the case of Argentina, the Army actually cooked hot meals for marginalized residents in the greater Buenos Aires area using its "camp kitchens." ¹⁰⁶ As of May 14, 2020, it had reportedly prepared 2.2 million hot rations and delivered 437,000 bags of food. ¹⁰⁷

Production of COVID-19 Related Goods

Some armed forces went beyond just the preparation and delivering of care packages, to include producing and/or assembling medical supplies and other essentials.

The Mexican military produced medical uniforms, boots, and protective masks. ¹⁰⁸ In Colombia, the military production industry, Indumil, and the military shipbuilder, Coctecmar, helped to manufacture hospital beds. Various Colombian military units were also involved in small-scale production of other COVID-19 related goods. ¹⁰⁹ In Peru, the military, in conjunction with universities, helped the government to build and repair ventilators. ¹¹⁰ Smaller units built decontamination cabins, and mixed sanitizer products. ¹¹¹ In Chile, the military industry organization FA-MAE was involved in the fabrication of sanitizer and the construction of disinfectant booths, among other activities. ¹¹²

Other Activities

Beyond the activities discussed in the preceding paragraphs, Latin American and Caribbean Armed Forces in the region also supported the responses of their governments to COVID-19 in a variety of other ways.

In Mexico, the Navy and Army Air Force helped to return almost 10,000 Mexican citizens trapped abroad to the country.¹¹³

In Guatemala, as in several other countries in the region, military units were used to disinfect public spaces.¹¹⁴ In addition, the public affairs resources of the

Guatemalan Army were used, for example, to help disseminate the government's public health message regarding COVID-19.

In Paraguay, the military created and administered temporary shelters (quarantine centers) to accommodate its citizens returning from abroad in isolation from the rest of the population, dedicating military barracks for this purpose.¹¹⁵

In Chile and other countries, the armed forces were used to protect critical health infrastructure, such as hospitals and supply depots, against a range of threats such as potential contamination, protests, and theft of goods.¹¹⁶

Challenges

Reflecting the unprecedented scale and nature of the COVID-19 challenge, Latin American militaries faced a range of challenges in their response to the virus.

Implementation Challenges

While many military actions were similar to plans for other types of disasters and were executed relatively smoothly, there were naturally some issues to work through. In Guatemala, strong seasonal rains particularly complicated operations in mountainous conditions. On the other hand, slums and other dense urban terrain put a high demand on the possession of geolocation devices, night vision devices and other equipment in limited supply within the Guatemalan Armed Forces. In a similar fashion, in Chile, a security expert noted that the delivery of aid and other operations in marginal neighborhoods emphasized the importance of good geolocation capabilities there as well.

In Chile, and elsewhere, the adaptation of aircraft and other vehicles to transport COVID-19 patients also presented challenges. In Peru, when the armed forces mobilized 10,500 reservists to the greater Lima area for 60 days, it was hard-pressed to find appropriate, sanitary places there to house them.

Health Risks

In many parts of Latin America, in the initial phase of the response, military entities engaged in support activities involving contact with potentially infected populations with limited protective gear. The military in Ecuador and Paraguay¹²¹, were among militaries in which, according to experts, adequate personal protective equipment wasn't available in the initial phase of the response. In Paraguay, according to one expert, the military had to rely on sanitizers and homemade masks. While one knowledgeable security expert in Barbados said the BDF was adequately protected, BDF members had to improvise to obtain masks.

In general, security experts consulted for this work emphasized that armed forces relied on discipline among troops, including regular handwashing and similar measures, ¹²⁴ to manage the risk of contagion. ¹²⁵ In Guatemala, for example, the military relied principally on masks and measures such as frequent handwashing, although there were still many infections.

Despite protective equipment and military equipment, the contact with local populations required by many of the missions to which Latin American militaries were assigned¹²⁶ led significant numbers of military personnel to become infected. In Ecuador, 152 members of the military had been infected by mid-April.¹²⁷ In Chile, by early July, 3,300 members of the armed forces had tested positive for COVID-19.¹²⁸

Inadequate Resources

In various countries, security sector experts consulted for this work concurred that personnel and other resources available were inadequate for the tasks that military personnel were asked to do. In Ecuador and Peru, for example, the number of personnel to enforce curfews was inadequate in light of widespread incidences of citizens not respecting those restrictions and associated social distancing measures. In Argentina, as in other parts of the region, years of underfunding the military significantly limited the vehicles and assets it had available to support logistics and other missions beyond the greater Buenos Aires area.¹²⁹

Doctrine and Training

Because many of the COVID-19-related missions were variants of tasks done for disaster response and internal security, military doctrine and training for those missions provided a general framework for the COVID-19 response. In Chile, the use of the military as a compliment to the *Carabineros* to interact with the population was similar to the role that it had played in responding to the Fall 2019 riots. Specifically with respect to health-related operations, Guatemala's military had prior experience in actions to combat dengue and chikungunya, while the Brazilian military had been used against dengue. ¹³¹

Although prior experience provided some help to Latin American militaries as they coped with the pandemic, most lacked experience interacting with the public in the context of a highly contagious and lethal pathogen. To varying degrees, security experts consulted for this work in El Salvador, Barbados, Ecuador, Paraguay, and Peru all noted that doctrine and training to support the response was insufficient, requiring considerable learning and adaptation.¹³²

The COVID-19 response also created unique challenges, such has having to operate for extended periods of time as dispersed forces, placing importance on having working communications, and how to exert command influence and maintain morale when units were not congregated for an extended period of time. It also highlighted the value of strategic communications, to give the right message to the forces to convey both commander's intent for their continuing operation in a dispersed deployment, as well as maintaining morale when faced with loneliness and stress.

In general, the execution of standard activities, based roughly on analogous prior disaster and health responses, did not guarantee that the response taken by militaries in the context of the COVID-19 pandemic was the most effective use of the force in combatting the pandemic.

Legal Framework

Security officials in multiple Latin American and Caribbean countries consulted for this work expressed concern over inadequacies of the legal framework in which militaries were called upon to support the COVID-19 response.

In most countries, the declarations of national health or security emergencies, and existing frameworks for military support to civilian authorities provided a satisfactory basic framework. In Guatemala this included the "state of calamity." In Barbados, it included authorities under the National Defense Act, complimented by authorization by the BDF to support the police in January 2020 (for different reasons), and the government's subsequent declaration of a State of Public Health Emergency. ¹³³ In Ecuador, it included the declaration of a "state of exception" and Ministerial agreement 179 for the progressive use of force. In Chile, it involved the declaration of a "Constitutional State of Exception for the Disaster," followed by Supreme Decree No. 8 to establish rules for the use of force in this context. ¹³⁴

Such enabling legal frameworks notwithstanding, officials interviewed for this article expressed concern regarding legal protections for military members, particularly when they were called upon to interact with civilian populations in ways that could lead to conflict, including the enforcement of curfews and the crowd response, particularly as frustration and social unrest increased with the deterioration of economic conditions, and the easing of some social distancing measures.

Competing Responsibilities

As the COVID-19 crisis extends in time with no immediate end in sight, Latin American militaries are increasingly strained to comply with their new COVID-19

responsibilities, while also performing their other missions, particularly in a budgetary environment where adequate additional compensation is unlikely.

In most countries of the region, the COVID-19 response has become the number one priority for the armed forces and for the rest of the government. ¹³⁵In Mexico, Central America, and the Caribbean, the COVID-19 response coincided with the onset of a hurricane season expected to be more active than normal, ¹³⁶ beginning with hurricane Amanda and later Cristobal striking El Salvador and Guatemala. ¹³⁷ Indeed, in Guatemala, the military was required to perform civil support operations for both hurricanes, as well as its traditional rescue work and other activities in response to flooding that accompany the onset of the rainy season, even as it continued its support to the government's COVID-19 response. ¹³⁸

In Mexico, competing responsibilities included both helping to restrict the flows of Central American immigrants through the country, plus record levels of violence by organized criminal groups in an increasingly fragmented and unpredictable environment, ¹³⁹ including major players such as the *Cártel de Jalisco Nueva Generación* (CJNG) taking unprecedented bold actions against Mexican political leaders. ¹⁴⁰

In Colombia, competing responsibilities included dealing with more than 1.8 million Venezuelans while fighting an expanding set of armed organized groups including an expanded National Liberation Army (ELN), and Revolutionary Armed Forces of Colombia (FARC) dissidents which doubled in size in less than a year to 4,600,¹⁴¹ fueled in part by relative sanctuary to operate from within Venezuela.¹⁴²

Further adding to the challenge for the armed forces in the region, despite an initial drop in crime with the curtailing of public life to implement social distancing measures, ¹⁴³ the economic collapse of the region tied to the virus and attempts to control its spread, is expanding the population of desperate persons, likely fueling criminal violence. ¹⁴⁴ The same economic malaise, and disruption of criminal supply chains ¹⁴⁵ is also likely to fuel violent competition between criminal groups. ¹⁴⁶ Latin American militaries will likely be called upon to respond to such expanding criminal violence, even as they are required to continue to support their government's COVID-19 response.

As those militaries respond, COVID-19, in some ways, has made the challenge more difficult. As options for moving drugs in commercial cargos and the movement of people across borders have evaporated, criminal groups have changed their routes. ¹⁴⁷ In Argentina and elsewhere, traffickers are moving away from formal border crossings to the use of more clandestine routes. ¹⁴⁸ Economic desperation arguably will make it easier for criminals to corrupt and buy into weakened economies. ¹⁴⁹ Criminal groups have also taken advantage of the crisis to consoli-

date their control in geographic areas in which they operate. This includes militias passing out masks and other needed goods and enforcing curfews in marginal neighborhoods, such as the favelas of Rio de Janeiro. Such trends will make it harder for militaries to perform their domestic security roles, even as their resources and time to perform that role increasingly competes with other activities.

As restrictions on social interaction are eased in the region, significant social unrest, such as that seen in Ecuador, ¹⁵¹ Chile¹⁵² and Colombia¹⁵³ in the fall of 2019, are likely to reemerge on an even greater scale. ¹⁵⁴ To the degree that the 2019 unrest was motivated in large part by frustration with the government's performance, ¹⁵⁵ the COVID-19 response has given citizens a broad range of issues to be frustrated about, including the stealing or mismanagement of COVID-19 related funds, deaths due to the inadequacies of public health systems, perceived government errors in shutting down economies for too long, or not long enough, government cuts in social programs and other activities to support the COVID-19 response, and perceived government inadequacy in responding to rising crime and insecurity, among others.

Already, protests have begun to emerge across the region, including demands to ease curfew restrictions in Guatemala¹⁵⁶ and to strengthen them in Brazil.¹⁵⁷ As of June 2020, COVID-19 related protests had also begun to reoccur in Colombia, ¹⁵⁸ Ecuador, ¹⁵⁹ and Chile. ¹⁶⁰ In early July, Peru's interior minister expressed concern over the likely escalation of protests there due to elevated levels of social hardship and other frustrations, as social distancing measures were eased. ¹⁶¹ In Paraguay, protests began in July in border cities affected by commercial restrictions to control COVID-19. ¹⁶² As in 2019, Latin American militaries will likely be called upon to respond, if the situation escalates.

As militaries face such competing demands on their time, the resources they have available to do so will likely contract, or at least, will not grow, even though in Argentina and elsewhere, militaries have requested supplemental appropriations to cover emergency COVID-19 related spending. ¹⁶³ In both Guatemala and Barbados, COVID-19 operations were done out of existing budgets, with the reprogramming of some funds. ¹⁶⁴ In numerous countries of the region, including Ecuador, ¹⁶⁵ Colombia, ¹⁶⁶ and elsewhere, ¹⁶⁷ governments have already announced steep budget cuts to combat COVID-19.

On the positive side, COVID-19 may help to improve the relationships between Latin American militaries and the societies in which they operate. Some consulted for this work rightfully expressed concern about the potential for conflict with society, as militaries enforced curfews and social distancing measures. Yet COVID-19 has also emphasized, in a way unlike few other threats, the role of the armed forces in the region as the protectors of their societies against complex

multidimensional threats. Indeed, in Argentina, despite deep distrust among some toward the military as a legacy of the "dirty war" against leftist insurgents in the 1970s, the COVID-19 response has helped lift the approval rating of the armed forces to an unprecedented level of popularity of more than 66%. The handing out of aid in conjunction with the pandemic has similarly been beneficial to the image of the Colombian armed forces. ¹⁶⁹

Long-Term Impacts on Latin American Militaries

The impact of COVID-19 on the Armed Forces of Latin America and the Caribbean will be transformational. In the short term, the challenge of supporting their government's COVID-19 response for an extended amount of time, concurrently with other missions from natural disaster response to the fight against organized crime and response to social unrest may divert resources from modernization and training.¹⁷⁰ It will similarly continue to exert a toll on the life of equipment.¹⁷¹ As occurred with the US in prolonged conflicts in Afghanistan and Iraq, sustained military deployments in internal COVID-19 related missions may also have long-term impacts on the retention of personnel.¹⁷²

Over the long-term, the COVID-19 pandemic will profoundly impact doctrine, procedures, and strategic thinking within the organizations. As with other strategic surprises, from the attack at Pearl Harbor to the September 11, 2001 attack against the World Trade Center, for Latin American militaries, bacteriological threats have long been part of natural disaster planning. Yet, prior to COVID-19, the possible magnitude and global effect of such a pandemic were inconceivable to most military leaders before the present crisis. The COVID-19 challenge is thus likely to reshape thinking within Latin American militaries regarding what types of threats are possible and need to be planned for.

In general terms, experts consulted for this article note that the COVID-19 response highlighted the importance of flexibility and agility within military organizations. This experience may thus support arguments for a more multifunctional force, particularly in smaller militaries such as those of the Caribbean. Such multifunctionality, although difficult and costly to achieve, allows personnel can be "repurposed" to surge skillsets, such as medical, when the need for certain unique skillsets surpasses the number of specialists ordinarily maintained for that function in the force.

The challenges of extended operations in the pandemic has also highlighted the increasing importance of decentralized command and operations, including the exercise of leadership and the maintenance of morale in circumstances where military traditions such as the concentration of personnel, and associated interactions among unit members, is not possible.

The uniqueness of the COVID-19 pandemic highlights the likelihood that future threats from the interconnected global world order may similarly be simultaneously global in scope, and depart from existing planning models, doctrine, and training. This reality emphasizes the importance of not only agility, but greater awareness of global dynamics and interconnectedness among military leadership, intelligence, and planning organizations, even in the smallest militaries of the region.

The COVID-19 pandemic has immutably changed the political, economic, and social dynamics of Latin America, including how its people view each other, the world, and their long-term security. Latin America's security forces played a key role in the COVID-19 pandemic in defending those populations against the threat, but as an integral part of those societies, they are also being transformed by the pandemic, in ways which requires, and merits continued and detailed study.

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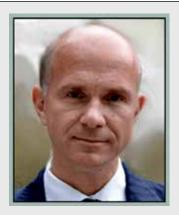
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