

# Three No-Regret Decisions for the Next Three Months

How Partners Can Assist  
Africa's Covid-19 Fight

Douglas Alexander



HARVARD Kennedy School  
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## Abstract

Covid-19 has been described by the Head of the Africa Centres for Disease Control and Prevention as “an existential threat to the Continent.” Updated forecasts by the World Health Organisation (WHO) warn that up to 190,000 people could die from Covid-19 in Africa, and notwithstanding continuing epidemiological uncertainty, it is already clear that Covid-19 threatens fragile health and economic systems across the continent. This paper considers the latest economic forecasts and assesses those now most at risk by highlighting potentially devastating “secondary effects” of the pandemic. Recognizing the leadership already shown by many African governments, and the steps already taken by the international community, the paper looks ahead and highlights three “no regret” decisions, which could and should be taken by the international community in the next three months to assist Africa’s Covid-19 fight.

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A young boy walks past a wall with graffiti urging people to wear face masks in Harare, Thursday, May, 28, 2020.

AP Photo/Tsvangirayi Mukwazhi





# Introduction

Dr John Nkengasong, Head of the African Centres for Disease Control and Prevention, has described the COVID-19 pandemic as “an existential threat to the continent.” Peter Piot, one of the scientists who discovered the Ebola virus and who has spent his professional life battling infectious diseases, observed recently that “without a Coronavirus vaccine, we will never be able to live normally again. The only real exit strategy from this crisis is a vaccine that can be rolled out worldwide.” The updated forecasts by the World Health Organization, released on May 7, 2020 warn that up to 190,000<sup>1</sup> people could die from COVID-19 in Africa, and many have forecast deeply worrying economic impacts for the continent.

Against the backdrop of recent epidemiological analyses and economic forecasts, this paper sets out the key threats that COVID-19 poses to Africa’s 54 nations in light of the continent’s health and economic preparedness. Recognizing the critical action taken so far by many of Africa’s national governments and others outside the continent, this paper looks ahead to the next phase of the crisis and highlights specific ways in which international partners can assist African countries in the immediate months ahead.

Drawing on recent analyses from a range of organizations and experts, the paper first outlines the spread of COVID-19 in Africa to date and lays out the factors which will influence its future trajectory. Uncertainty frustrates current attempts at epidemiological predictions, and key questions about how the virus will interact with Africa’s distinctive and varied characteristics remain unanswered. Not enough is yet known about the impact of Africa’s demography, climate, and existing-health burden to make reliable forecasts about transmission rates or Case Fatality Rates (CFRs). As of yet, the virus has not spread to the extent that many early commentators feared, leading some to suggest that many outside the continent are vulnerable to

1 World Health Organization: ‘Up to 190 000 People Could Die of COVID-19 in Africa If Not Controlled,’ WHO | Regional Office for Africa. Available at: <https://www.afro.who.int/news/new-who-estimates-190-000-people-could-die-covid-19-africa-if-not-controlled>. (Accessed May 16, 2020)

‘Afro-pessimism.’ The Senegalese academic Felwine Sarr has gone on to argue that “the Europeans are worried about us but over here we are worried about them.”

Legitimate concerns have been raised about those outside of the continent depicting African states ‘without agency,’ and as passive victims of this pandemic.<sup>2</sup> The paper recognizes the decisive action, multilateral cooperation, and global leadership, which has already been taken by African states, before noting the supporting role that parts of the international community have played. Countries across the globe can learn valuable lessons from the response of African states, just as African states are already learning from and working with those further ahead on the epidemic curve as they assess how best to re-open their economies.

Commentary is far easier than governing even in times far less challenging than these. At this time, policy makers around the world are being asked to reach profoundly difficult decisions, which will affect the lives and livelihoods of millions of their citizens, on the basis of still imperfect information. While the epidemiological picture remains unclear, and it is, as yet, too early to know the disease path of COVID-19 in Africa, this paper argues that the damaging economic and social consequences already resulting from the pandemic response within and beyond the continent make the case for further immediate action from the international community.

The paper argues that notwithstanding this present epidemiological uncertainty, it is already clear that COVID-19 will threaten fragile health systems and fragile economies across Africa. Even at the lower end of epidemiological estimates, COVID-19 and its effects will have potentially devastating ‘secondary effects’ and this paper assesses these vulnerabilities before outlining those at risk on the continent. Whilst the focus of this paper is the impact of the virus within Africa, given this is a crisis of ‘our connected

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2 Nielsen, Kelsey. ‘*The Problem with Predicting Coronavirus Apocalypse in Africa.*’ Available at: <https://www.aljazeera.com/indepth/opinion/problem-predicting-coronavirus-apocalypse-africa-200505103847843.html> (Accessed May 12, 2020)

world,<sup>3</sup> it also highlights the risk that a failure to assist Africa's Covid-19 fight at this time carries for the broader international community.

Throughout the long course of human history, outbreaks of infectious diseases have devastated populations, weakened empires, and swept across continents. Yet, Covid-19 is the first pandemic of our interconnected, global age. It has struck the world at a time when the architecture of global cooperation has been weakened by years of nationalism and populism. It is challenging not only our health systems but also our understanding that in these circumstances—and given our interconnectedness—to keep safe locally requires us to act both locally and globally. Whether our divided and weakened international community develops that understanding and finds the capacity to act together to assist Africa will be a true test of modern multilateralism. Whether together we rise to this challenge will be a test not only of our capacity to fight the virus but also of our understanding that in this struggle, against a virus with no respect for borders, we are all on the same side.

It is now three months since COVID-19 was first reported in Africa<sup>4</sup> and notwithstanding the continuing uncertainty, this paper concludes by recommending three 'no regret' decisions that can and should be taken by the international community in the next three months to assist Africa's COVID-19 fight.

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3 Miliband, David. 'We're on Our Way to Over One Billion Cases. We Won't Beat COVID-19 With 'My Country First,'" *Newsweek* (May 4, 2020). Available at: <https://www.newsweek.com/david-miliband-covid-one-billion-cases-my-country-first-1501876>

4 World Health Organisation. 'COVID-19 Cases Top 10 000 in Africa', WHO | Regional Office for Africa, <https://www.afro.who.int/news/covid-19-cases-top-10-000-africa>. (Accessed 18 May 2020).

# COVID-19's Arrival on the Continent

On March 11, 2020, the World Health Organization (WHO) declared Coronavirus disease 2019 (COVID-19) a pandemic. At this stage, there were comparatively few cases in Africa.<sup>5</sup> The first case on the continent had only been reported in Egypt on 14 February,<sup>6</sup> with the first recorded sub-Saharan occurrence twelve days later in Nigeria.<sup>7</sup>

Despite early analysis that the greatest risk of transmission was to imported cases from China,<sup>8</sup> most initial cases, in fact, came from affluent travelers from Europe.<sup>9</sup> COVID-19 has since spread and every country in Africa now has reported cases. This ubiquity however, disguises huge variation between the numbers of cases and the rate of increase. Figures released by the African CDC on April 28, 2020 showed that seven countries (South Africa, Algeria, Cameroon, Ghana, Nigeria, Guinea, and Côte d'Ivoire) accounted for over half (71%) of the cases reported in the continent, while just under half (47%) of countries have reported fewer than 100 cases.<sup>10</sup> While five countries observed an exponential increase in their weekly cases (April 20-26, 2020), between April 22 and 28, five countries had not reported any new confirmed COVID-19 cases.<sup>11</sup> Since then, reported positive cases have continued to grow with a further 42% weekly increase in

5 Mehtar, Shaheen. et al., 'Limiting the Spread of COVID-19 in Africa: One Size Mitigation Strategies Do Not Fit All Countries', *The Lancet Global Health* (April 2020) S2214109X20302126, Available at: [https://doi.org/10.1016/S2214-109X\(20\)30212-6](https://doi.org/10.1016/S2214-109X(20)30212-6). p1.

6 World Health Organisation. 'COVID-19 Cases Top 10 000 in Africa' loc.cit.

7 Makoni, Munyaradzi. 'Keeping COVID-19 at Bay in Africa', *The Lancet Respiratory Medicine* (April 2020)

8 Gilbert, Marius. et al., 'Preparedness and Vulnerability of African Countries against Importations of COVID-19: A Modelling Study', *The Lancet* 395, no. 10227 (March 2020): 871–77. Available at: [https://doi.org/10.1016/S0140-6736\(20\)30411-6](https://doi.org/10.1016/S0140-6736(20)30411-6). p.871.

9 Mehtar et al., 'Limiting the Spread of COVID-19 in Africa.' loc.cit.

10 Africa Centre for Disease Control. 'Outbreak Brief #15: Coronavirus Disease 2019 (COVID-19) Pandemic', (28 April 2020). Available at: <https://www.nepad.org/publication/outbreak-brief-15-coronavirus-disease-2019-covid-19-pandemic>.

11 WHO Health Emergencies Programme, 'COVID-19 Situation Update for the WHO African Region, External Situation Report 9' (29 April 2020). Available at: <https://reliefweb.int/report/south-africa/covid-19-situation-update-who-african-region-external-situation-report-9-29>. p.2.

reported cases by May 5, 2020,<sup>12</sup> followed by a 40% increase the following week.<sup>13</sup>

Due to the scale of this global crisis, Africa's 84,616 recorded cases and 2,754 deaths (as of May 17, 2020)<sup>14</sup> seem comparatively low, and so far the 'virus seems to be spreading relatively slowly'; although it is important to note that to date testing has been limited,<sup>15</sup> and the ascertainment of both COVID-19 cases and associated deaths rely 100% on testing. Similarly important to note: the majority of infected people will likely never be tested in Africa or elsewhere.

Despite the slow spread of the virus many have highlighted the potential destruction that COVID-19 could cause in Africa, given the risk of increased transmission and the potential for higher death rates resulting from existing living conditions. Nearly 600 million people (43.5 per cent of Africa's total population) live in urban areas, of which 56 per cent (excluding North Africa) live in 'slum' dwellings.<sup>16</sup> These conurbations are densely populated and have high rates of intergenerational housing. Moreover, one third of the population have either limited access or no access to household handwashing facilities, and social distancing is difficult when many people work to live day-to-day without sufficient refrigeration for food and medicine.<sup>17</sup> Additionally, the United Nations Economic Commission for Africa recently published a report, following a survey of informal settlements in Nairobi on April 22, 2020, which revealed that 75% of people had left their home on the previous day, 78% had seen an increase in food prices, and 87% had therefore been forced to forgo meals or eat less due

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12 Africa Centre for Disease Control, 'Outbreak Brief #16: Coronavirus Disease 2019 (COVID-19) Pandemic,' (5 June 2020). Available at: <https://africacdc.org/download/outbreak-brief-16-covid-19-pandemic-5-may-2020/>. p.1.

13 Africa Centre for Disease Control. 'Outbreak Brief #17: Coronavirus Disease 2019 (COVID-19) Pandemic,' (June 12, 2020). Available at: <https://africacdc.org/download/outbreak-brief-17-covid-19-pandemic-12-may-2020/>. p.1.

14 Moro, Cedric. 'COVID-19 Africa - Dashboard and Map #nCoVAfrica.' Available at: <http://covid-19-africa.sen.ovh/>. (Accessed May 17, 2020).

15 Dybul, Mark. 'COVID-19: A Global Pandemic Demands a Global Response,' Georgetown University White Paper. (April 23, 2020). Available at: <https://georgetown.app.box.com/s/5snwu87gg0sz-freu5oaqqdm21qwbs2ty>. p.9.

16 Economic Commission for Africa, 'COVID-19 in Africa: Protecting Lives and Economies.' (April 2020). Available at: [https://www.uneca.org/sites/default/files/PublicationFiles/eca\\_covid\\_report\\_en\\_24apr\\_web1.pdf](https://www.uneca.org/sites/default/files/PublicationFiles/eca_covid_report_en_24apr_web1.pdf). P.V.

17 Okonjo-Iweala, Ngozi. et al. 'Africa needs debt relief to fight COVID-19,' Brookings Institution (April 9, 2020). Available at: <https://www.brookings.edu/opinions/africa-needs-debt-relief-to-fight-covid-19/>.

to COVID-19.<sup>18</sup> All of these findings highlight the difficulties involved in achieving lockdown in informal settlements that are common across Africa and compound those factors which risk increasing the rate of transmission.

The continent also has a high rate of co-morbid factors. Africa is home to two-thirds of HIV infections<sup>19</sup> and has high rates of tuberculosis, malnutrition and sickle cell disease.<sup>20</sup> These pre-existing health risks are compounded by a limited health care capacity, as there are fewer than 2,000 ventilators on the continent for over a billion people.<sup>21</sup> The WHO estimates there will be 3.6 to 5.5 million COVID-19 hospitalizations which would “severely strain the health capacities of countries across the continent.”<sup>22</sup> This combination of increased risk of transmission and pre-existing fragility could be potentially devastating. It led to Bill Gates, Co-Chairman of the Bill and Melinda Gates Foundation, to initially issue a stark warning that up to ‘10 million’ deaths could occur on the continent.<sup>23</sup>

Some observers have pushed back against this view,<sup>24</sup> highlighting that ‘droplet-spread diseases, such as flu, have tended to spread more slowly in Africa.’<sup>25</sup> Moreover, the Non-Pharmaceutical Interventions (NPIs) already enacted by many African states appear to have been successful in reducing the reproduction number (R0) of the virus, and in turn the transmission rate. Indeed, Stephen Karingi, a director at the UN Economic Commission for Africa has remarked that “projections were that we would be in a war

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18 United Nations Economic Committee for Africa. ‘Covid-19 lockdown exit strategies for Africa’ (May 2020) [https://www.uneca.org/sites/default/files/PublicationFiles/ecarprt\\_covidexitstrategis\\_eng\\_9may.pdf](https://www.uneca.org/sites/default/files/PublicationFiles/ecarprt_covidexitstrategis_eng_9may.pdf). P.3.

19 Dybul. ‘COVID-19: A Global Pandemic Demands a Global Response,’ op. cit. p.9.

20 Dexter, Daniel. et al. ‘Mitigating the Effect of the COVID-19 Pandemic on Sickle Cell Disease Services in African Countries,’ *The Lancet Haematology*, S2352302620301228, (April 2020) Available at: [https://doi.org/10.1016/S2352-3026\(20\)30122-8](https://doi.org/10.1016/S2352-3026(20)30122-8).

21 Maclean, Ruth and Marks, Simon. ‘10 African Countries Have No Ventilators. That’s Only Part of the Problem.’ *New York Times* (April 18, 2020). Available at: <https://www.nytimes.com/2020/04/18/world/africa/africa-coronavirus-ventilators.html>.

22 World Health Organization: ‘Up to 190 000 People Could Die of COVID-19 in Africa If Not Controlled.’ loc. cit.

23 Knapton, Sarah. ‘Bill Gates warns of 10 million deaths as Coronavirus spreads to Africa’ *The Telegraph*. (15 February 2020). Available at: <https://www.telegraph.co.uk/news/2020/02/15/coronavirus-bill-gates-warns-10-million-deaths-virus-spreads/>.

24 Pilling, David. ‘Low Covid-19 Death Toll Raises Hopes Africa May Be Spared Worst,’ *The Financial Times*, (April 28, 2020). Available at: <https://www.ft.com/content/e9cf5ed0-a590-4bd6-8c00-b41d0c4ae6e0>.

25 Ibid.

situation by now, but because of the measures taken by governments and communities, transmission rates are lower than we've seen elsewhere.”<sup>26</sup>

The general consensus has therefore been adjusted since Bill Gates' initial prediction, with a new study by the WHO Regional Office for Africa instead predicting that 'eighty-three thousand to 190,000 could die of COVID-19 and 29 million to 44 million could get infected in the first year of the pandemic if containment measures fail.’<sup>27</sup>

The WHO regional director, Dr Matshidiso Moet commented that “while COVID-19 likely won't spread as exponentially in Africa as it has elsewhere in the world, it likely will smoulder in transmission hotspots,”<sup>28</sup> with estimates that it “will peak in four to six weeks if nothing is done.”<sup>29</sup> This idea of potential 'hotspots' on the continent has been recently highlighted in *The New York Times*, which reported on 17 May, 2020 that Kano, one of the largest cities in Nigeria, had recorded 753 positive cases and 33 COVID-19 deaths, and that Mogadishu, Somali's capital had experienced a tripling in burials.<sup>30</sup>

Despite their differences, nearly all analysts agree that the extent of unknowns regarding COVID-19 make it problematic to give firm predictions, and this uncertainty implies that months on from the arrival of the virus on the continent, forecasts of its impact still vary greatly.

Speaking to *The Lancet*, Glenda Davidson, the Head of Biomedical Sciences Department at Cape Peninsula University in South Africa acknowledged that “there are so many unknowns about this virus.”<sup>31</sup> These concerns are echoed in a recent Georgetown University White Paper: “We are flying blind into an uncertain future that could include multiple

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26 Burke, Jason and Akinwotu, Emmanuel. 'Coronavirus Could "smoulder" in Africa for Several Years, WHO Warns,' *The Guardian*. (May 8, 2020) Available at: <https://www.theguardian.com/world/2020/may/08/coronavirus-could-smoulder-in-africa-for-several-years-who-warns>.

27 World Health Organisation. 'COVID-19 Cases Top 10 000 in Africa' loc.cit.

28 Ibid.

29 Burke and Akinwotu, 'Coronavirus Could "smoulder" in Africa for Several Years, WHO Warns.' loc. cit.

30 MacLean, Ruth. 'Covid-19 Outbreak in Nigeria Is Just One of Africa's Alarming Hot Spots,' *The New York Times* (May 17, 2020). Available at: <https://www.nytimes.com/2020/05/17/world/africa/coronavirus-kano-nigeria-hotspot.html>

31 Makoni. 'Keeping COVID-19 at Bay in Africa.' op. cit. p.1.

additional waves of the pandemic.”<sup>32</sup> No-one can explain why, as of May 9, 2020 ‘the Dominican Republic had reported 9,376 cases, but neighbouring Haiti, the poorest country in the western hemisphere, only 146. Iran had 6,541 deaths; its neighbour Iraq 104.’<sup>33</sup>

Critical questions for which we do not yet have definitive answers include:

- Is COVID-19 seasonal, and what is its relationship to climate?
- How will the virus impact immuno-compromised populations: Will HIV and tuberculosis increase the Case Fatality Rate (CFR); have little impact; or counterintuitively even increase resistance?<sup>34</sup>
- To what extent could Africa’s demography (with a median age of 19.7 years)<sup>35</sup> mitigate the effects of malnutrition and other diseases?
- Given this is a developing and fluid crisis, in which behavioral and governmental actions can significantly impact rates of transmission, how will governments and populations continue to behave and what will be the impacts?

This uncertainty is compounded by questions surrounding current data and the adequacy of testing. David Miliband, President of the International Rescue Committee (IRC), argued in a recent interview that the lower numbers of cases reported did not reflect the reality that the IRC was witnessing on the ground.<sup>36</sup> Although the struggle to increase testing capacity is a global problem, and some African states like Senegal are rapidly ramping up their national capabilities, currently only 685 per tests per million people are being carried out across the continent.<sup>37</sup> However, a lack of testing cannot explain the lack of COVID-19 patients appearing in hospitals. Nkengasong noted if they were missing a substantial amount of people

32 Dybul, ‘COVID-19: A Global Pandemic Demands a Global Response.’ op. cit.

33 Campbell, Matthew. ‘Coronavirus: We’re Doing Fine, Resilient Africa Tells Ailing West. Worry about Yourself.’ The Times (May 10, 2020). Available at: <https://www.thetimes.co.uk/article/coronavirus-were-doing-fine-resilient-africa-tells-ailing-west-worry-about-yourself-ph7vtrw8k>.

34 Pilling, David. ‘Low Covid-19 Death Toll Raises Hopes Africa May Be Spared Worst.’ loc.cit.

35 Dybul, ‘COVID-19: A Global Pandemic Demands a Global Response,’ op. cit. p.9.

36 Runciman, David. ‘David Miliband on the Crisis,’ Talking Politics Podcast. (April 30, 2020). Available at: <https://www.talkingpoliticspodcast.com/blog/2020/242-david-miliband-on-the-crisis>.

37 Burke and Akinwotu, ‘Coronavirus Could “smoulder” in Africa for Several Years, WHO Warns,’ loc.cit.



infected with the virus “hospitals would be overwhelmed with sick people, which is not the case.”<sup>38</sup>

The Case Fatality Rate (CFR) is similarly unclear. While one report noted that the early estimates of the CFRs of Senegal and South Africa seemed lower than in most European countries (at 1.3% and 1.8% respectively), it also stressed that so far estimates vary substantially.<sup>39</sup> It urged caution as ‘it is too early to predict the death rate as Africa is at the ascending phase of the epidemic curve.’<sup>40</sup> The CFRs also differ markedly across the continent, with Bobo-Dioulasso, Burkina Faso’s second largest city, recording a CFR rate of 6%<sup>41</sup> and Egypt a CFR rate of 7.5%.<sup>42</sup>

Three months after the first case of COVID-19 was recorded on the continent, predictions remain uncertain. But even at the lower end of infection/morbidity estimates, the virus will directly place a strain on Africa’s fragile health systems, and indirectly threaten fragile economies.<sup>43</sup> To mitigate these direct and indirect threats there are vital ‘no regret’ decisions that the international community can and should take imminently to assist these African efforts. In turn, these actions will help to reduce uncertainty, as testing continues to increase, and gain a clearer picture of COVID-19: Helping Africa in the fight against the pandemic on the continent, will in turn help all others fight this virus across the globe.

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38 Campbell, Matthew. ‘Coronavirus: We’re Doing Fine, Resilient Africa Tells Ailing West. Worry about Yourselves’ loc. cit.

39 Mehtar et al., ‘Limiting the Spread of COVID-19 in Africa,’ op. cit. p.1.

40 Ibid.

41 Hall, Christo. ‘What the COVID-19 pandemic means for Africa, and for malaria,’ Imperial College London. (April 24, 2020). Available at: <https://www.imperial.ac.uk/news/197093/what-covid-19-pandemic-means-africa-malaria/>.

42 Mehtar. et al. loc. cit.

43 Jayaram, Kartik. et al., ‘Tackling Coronavirus in Africa’ McKinsey & Company Report (April 2020). Available at: <https://www.mckinsey.com/featured-insights/middle-east-and-africa/tackling-covid-19-in-africa>.

# Secondary Risks Facing the Continent

Individual countries across Africa are doing their best to shield their populations from the virus through national strategies including lockdowns: “For the virus, what matters is the fact of our common humanity.”<sup>44</sup> What we are learning in this pandemic is that we are only as strong as our weakest link in an extended health chain. So, if action is not taken to assist African states in suppressing the pandemic, then we are all at greater risk. Decisive action by African states has already won valuable time, and has saved lives, but in the face of this continuing global crisis, further action will be needed in order to avoid yet more human tragedy. The secondary impacts of COVID-19 may yet prove more damaging than the initial pandemic, but it is already clear that both the primary and secondary effects of the virus will be experienced in different ways by different population groups.

## Economic Risks

“At the end of 2019, the five fastest-growing economies globally were in Africa;”<sup>45</sup> however, Covid-19 threatens to undo many of the economic gains made on the continent over the last few decades. African countries are already experiencing the economic impact of the pandemic, through the domestic consequences of lockdowns and social-distancing, the international effects of supply chain disruption, and the shock of a global recession and a collapse in commodity prices. The United Nations Economic Commission for Africa (UNECA) has warned that “simultaneous economic shocks will exacerbate Africa’s compromised capacity for action.”<sup>46</sup> Meanwhile, the IMF has warned in its latest *World Economic*

44 Ahmed, Abiy. ‘If Covid-19 Is Not Beaten in Africa It Will Return to Haunt Us All,’ The Financial Times. (March 25, 2020). Available at: <https://www.ft.com/content/c12a09c8-6db6-11ea-89df-41be-a055720b>.

45 Holmes Charles, Schneidman, Witney, and Lake, Anthony. ‘It’s Time to Help Africa Fight the Virus.’ Foreign Policy. (April 29, 2020). Available at: <https://foreignpolicy.com/2020/04/29/africa-coronavirus-pandemic-united-states-europe/>.

46 United Nations Economic Commission for Africa (UNECA). ‘COVID-19 in Africa: Protecting Lives and Economies.’ (April 2020). Available at: <https://www.uneca.org/publications/covid-19-africa-protecting-lives-and-economies>. p.4.

*Outlook*, that “many countries now face multiple crises—a health crisis, a financial crisis and a collapse in commodity prices.”<sup>47</sup>

While national lockdowns have bought valuable time, and reduced transmission, they have also resulted in economic damage and cannot be maintained indefinitely. Countries including South Africa, Nigeria and Ghana are already easing restrictions. They recognize the same threat highlighted by Kevin Marsh, Senior Advisor for the African Academy of Sciences, who argued that “the risk of economic collapse, shortages of food, and social unrest carry greater risks to health in the long term than direct deaths from COVID-19.”<sup>48</sup> As a result of the virus and subsequent public health measures, many small businesses will struggle and economic activity in Africa’s cities, which generate “50% of Sub-Saharan Africa’s GDP,”<sup>49</sup> will slow. These factors contribute to the World Bank’s forecast of a decline in growth from 2.4% in 2019 to between -2.1 and -5.1% in 2020.<sup>50</sup>

At the same time as they face falling revenues, African governments are being forced to increase spending. A recent McKinsey report predicts that the increase in the costs of healthcare and medical supplies across the continent will range from \$44 billion to \$446<sup>51</sup> depending on the disease trajectory and government responses. A balance of payments crisis, and the increased risk of default, has already unsettled international investors who have economically fled to ‘safe havens.’ By April, foreign investors had withdrawn more than \$96 billion from across emerging markets globally.<sup>52</sup> Capital flight has hit South African, Kenyan and Nigerian currencies particularly hard “making it difficult, if not impossible, for them to service foreign loans.”<sup>53</sup> In turn, any default on sovereign debt in one

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47 The International Monetary Fund. ‘*Questions and Answers: The IMF’s Response to COVID-19*.’ Available at: <https://www.imf.org/en/About/FAQ/imf-response-to-covid-19>. (Accessed 18 May 2020).

48 Makoni, ‘*Keeping COVID-19 at Bay in Africa*.’ op. cit. p.2.

49 Holmes, Schneidman, and Lake. ‘*It’s Time to Help Africa Fight the Virus*.’ loc. cit.

50 Madden, Payce. ‘*Figures of the Week: The Macroeconomic Impact of COVID-19 in Africa*,’ Brookings Institute. (April 16, 2020). Available at: <https://www.brookings.edu/blog/africa-in-focus/2020/04/16/figures-of-the-week-the-macroeconomic-impact-of-covid-19-in-africa/>.

51 UNECA. ‘*COVID-19 in Africa: Protecting Lives and Economies*,’ op. cit. p.5.

52 Steil, Benn and Della Rocca, Benjamin. ‘*Chinese Debt Could Cause Emerging Markets to Implode*.’ Foreign Affairs. (April 27, 2020). Available at: <https://www.foreignaffairs.com/articles/east-asia/2020-04-27/chinese-debt-could-cause-emerging-markets-implode>.

53 Ibid.

country, poses the risk of ‘cascade defaults’ across the continent.<sup>54</sup> Health and economic fragility are inherently interrelated, as the inability to access international credit markets would make it impossible for states to continue to take the steps “needed to curb the pandemic.”<sup>55</sup>

African economies also face global challenges, as the IMF predicts that ‘the Great Lockdown’ may be the “worst recession since the Great Depression and far worse than the Global Financial Crisis.”<sup>56</sup> Net oil-exporting states, such as Nigeria and Angola, have already suffered from the 50% drop in oil prices during March, leading to “increased liquidity issues, lost tax revenues, and currency pressure.”<sup>57</sup> The fall in prices of coffee, cocoa and cut flowers will have similar effects<sup>58</sup> for countries who rely heavily on their export. Kenya, Seychelles and Mauritius will be disproportionately hit by the impact on tourism,<sup>59</sup> as the African Union predicts as many as 20 million jobs could be lost across the continent, while many others will suffer the decline in remittances.

The human cost of the economic challenges that the continent faces could be catastrophic, with estimates that up to 29 million people could be pushed into extreme poverty in Africa.<sup>60</sup> In a working paper recently produced by the United Nations University, Professor Andy Sumner, lays out a series of poverty projections and suggests that for Sub-Saharan Africa, the adverse impacts could result in poverty levels similar to those recorded 30 years ago, in 1990 (an increase of around 30%).<sup>61</sup>

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54 Pilling, David. ‘Africa Could Take “a Generation” to Recover from Coronavirus, Says Kagame’, The Financial Times. (April 20, 2020) Available at: <https://www.ft.com/content/93293b6a-f167-45b9-8ad2-594e4c26fd50>.

55 Steil and Rocca, ‘Chinese Debt Could Cause Emerging Markets to Implode.’ loc. cit.

56 The International Monetary Fund. ‘Questions and Answers: The IMF’s Response to COVID-19.’ loc. cit.

57 Jayaram et al., ‘Tackling Coronavirus in Africa.’ op. cit. p.6.

58 UNECA ‘COVID-19 in Africa: Protecting Lives and Economies.’ loc. cit.

59 Ghanem. Hafez. ‘Implications of the COVID-19 Pandemic for African Economies and Development.’ Chatham House Webinar. (April 23, 2020). Available at: <https://www.chathamhouse.org/file/webinar-implications-covid-19-pandemic-african-economies-and-development>

60 UNECA ‘COVID-19 in Africa: Protecting Lives and Economies’ op. cit. p.V.

61 Sumner, Andy, Hoy, Chris, and Ortiz-Juarez, Eduardo. ‘Estimates of the impact of COVID-19 on global poverty.’ United Nations University, WIDER Working Paper 2020/43. Available at: <https://www.wider.unu.edu/publication/estimates-impact-covid-19-global-poverty> (Accessed May 20, 2020).

A recent UN World Food Programme Report on the potential impact of the pandemic on the world's poor stated that: "COVID-19 could further unravel into a food security emergency if supply chain disruptions lead to panic buying and anxiety starts to rule global food trade."<sup>62</sup> The social effects are already becoming apparent, with looting in South Africa, and a spike in armed robberies in Lagos since lockdowns began.<sup>63</sup> Against this backdrop it is unsurprising that Rwandan President Paul Kagame was already warned that, without the support of the international community, it could take African countries "a generation or more" to recover from these economic impacts.<sup>64</sup>

## Political Risks

The health and economic impacts of COVID-19 are likely to have a profound effect on politics on every continent. In the years following the Global Financial Crisis (that had its origins in the financial system and was most impactful in its effects in the United States and Europe) politics in these regions were profoundly influenced and altered by that crisis. In contrast, COVID-19 is already genuinely global in its impact with lockdowns and their associated economic and social effects being experienced on every continent.

In the immediate term, many commentators, prior to the pandemic, were looking to key elections on the African continent in 2020 including those scheduled in Somalia and Ethiopia.<sup>65</sup> The experience of Eastern DRC during the 2018 Ebola outbreak, where many accused President Kabila of disenfranchising voters in affected areas,<sup>66</sup>

62 World Food Programme. 'COVID-19: Potential Impact on the World's Poorest People.' (April 2020). Available at: <https://www.wfp.org/publications/covid-19-potential-impact-worlds-poorest-people>. Available at: <https://docs.wfp.org/api/documents/WFP-0000114040/download/> p.11

63 Kalu, Bernard. 'COVID-19 in Nigeria: A Disease of Hunger.' *The Lancet Respiratory Medicine*, S2213260020302204. (April 2020). Available at: [https://doi.org/10.1016/S2213-2600\(20\)30220-4](https://doi.org/10.1016/S2213-2600(20)30220-4), p.1.

64 Pilling. 'Africa Could Take "a Generation" to Recover from Coronavirus, Says Kagame,' loc. cit.

65 Fomunyoh, Christopher. 'Implications of the COVID-19 Pandemic for African Elections and Democracy.' Chatham House Webinar. (May 6, 2020). Available at: <https://www.chathamhouse.org/file/webinar-implications-covid-19-pandemic-african-elections-and-democracy>

66 International Rescue Committee. 'Covid-19 in Humanitarian Crises: A Double Emergency,' (April 9, 2020). Available at: <https://www.rescue.org/sites/default/files/document/4693/covid-19-doubleemergency-april2020.pdf>. P.5

underlines risks that infectious disease can pose to political life. In a recent discussion hosted by Chatham House, Dr. Christopher Fomunyoh, Senior Associate for Africa and Regional Director at the National Democratic Institute for International Affairs, argued that “even countries that have made progress have a level of fragility’ which could be ‘exposed’ by the secondary effects of COVID-19, particularly in countries facing elections.<sup>67</sup> On 20 May, 2020 in Burundi, where President Pierre Nkurunziza has ruled for fifteen years, Facebook, Twitter, and WhatsApp, were all closed down as voters went to the polls despite previous expressions of concern from digital rights groups about the blocking of social media platforms before the election.<sup>68</sup> In broader criticism of how the election in Burundi has been run during the pandemic, *The New York Times* reported the “campaign has been marred by violence against the political opposition and a disregard of measures to protect the public from the coronavirus.”<sup>69</sup>

The virus may yet be used “as a pretext for the pursuit of repressive legislation and constitutional amendments to preclude elections or bolster authoritarianism, compounded by new constraints on accountability mechanisms such as election observation missions.”<sup>70</sup> Others have emphasized the threat to media freedoms,<sup>71</sup> with the Committee to Protect Journalists’ raising concerns about the precedent set by South Africa’s new law criminalizing disinformation. The ONE campaign’s African COVID-19 tracker has identified reports of media restrictions such as websites being blocked, and journalists being assaulted in a number of countries stretching from Egypt to South Africa.<sup>72</sup>

67 Fomunyoh. ‘Implications of the COVID-19 Pandemic for African Elections and Democracy,’ loc. cit.

68 #KeptOn Campaign. ‘#KeptOn: Joint letter on keeping the internet open and secure during the presidential elections in Burundi’ Access Now (May 19, 2020). Available at: <https://www.accessnow.org/keepiton-letter-elections-in-burundi/>.

69 Latif Dahir, Abdi. ‘Burundi Turns Out to Replace President of 15 Years, Pandemic or No.’ *The New York Times* (May 20, 2020). Available at: <https://www.nytimes.com/2020/05/20/world/africa/burundi-election.html>

70 Fomunyoh. ‘Implications of the COVID-19 Pandemic for African Elections and Democracy,’ loc. cit.

71 Zappulla, Antonio. ‘The Three Ways States Are Using COVID-19 to Curb Media Freedoms,’ *African Arguments*. (May 2, 2020). Available at: <https://africanarguments.org/2020/05/03/three-ways-states-using-covid-19-curb-media-freedoms/>

72 The ONE Campaign ‘COVID-19 Tracker: Media Restrictions.’ Available at: [https://public.tableau.com/views/ONEAfricaCOVID-19Tracker/2\\_Sector?%3Aembed=y&%3Atoolbar=no&%3ADisplay\\_count=no&%3AshowVizHome=no#4](https://public.tableau.com/views/ONEAfricaCOVID-19Tracker/2_Sector?%3Aembed=y&%3Atoolbar=no&%3ADisplay_count=no&%3AshowVizHome=no#4) (Accessed May 19, 2020).

Of course, as the actions of the Hungarian government confirm for Europe, these types of risk are not unique to Africa, but undoubtedly the virus and the response to it will put new strains on political systems across the continent. In the long-term the effects may be profound even if they are, as yet, unpredictable, as was seen in Europe and the United States in the years after 2008. This perhaps explains why former U.S. Treasury Secretary, Larry Summers, wrote recently: “The COVID-19 crisis is the third major shock to the global system in the 21st Century, following the 2001 terrorist attacks and the 2008 financial crisis. I suspect it is by far the most significant.”<sup>73</sup> It therefore seems reasonable to assume that African countries will not be spared its political effects in the month and years ahead.

## Health Risks

Together with secondary economic and political effects of the pandemic, it is also important to recognize the likely secondary effects in terms of health. As well as the direct health impact, COVID-19 will also “impose spill-over costs as resources are redirected and spread even thinner.”<sup>74</sup>

The risk that a novel infectious disease can exacerbate existing health needs is evident from the experience of the Ebola outbreak in West Africa between 2014-2016. As the *New Scientist* reported in February 2016: “The Ebola outbreak is estimated to have killed almost twice as many people as we thought, by diverting resources away from tackling illnesses such as Malaria, HIV, and Tuberculosis.”<sup>75</sup> This effect was also clear in the later outbreak in Eastern DRC, where excess deaths were recorded in nearly every area of health between 2018 and 2020.<sup>76</sup> Research from Imperial College London forecasts that in the next five years some regions globally (and, in particular, Sub-Saharan Africa) may see deaths related to HIV,

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73 Summers, Lawrence. ‘Covid-19 looks like a hinge in history.’ The Financial Times (May 14, 2020). Available at: <https://www.ft.com/content/de643ae8-9527-11ea-899a-f62a20d54625>

74 UNECA. ‘COVID-19 in Africa: Protecting Lives and Economies.’ op. cit. p.5.

75 Coghalan, Andy. ‘Ebola outbreak caused twice as many deaths as we thought.’ The New Scientist. (February 24, 2016) Available at: <https://www.newscientist.com/article/2078587-ebola-outbreak-caused-twice-as-many-deaths-as-we-thought/>

76 International Rescue Committee. ‘One Size Does Not Fit All: Mitigating COVID-19 in Humanitarian Settings.’ (April 28, 2020). Available at: <https://reliefweb.int/report/world/one-size-does-not-fit-all-mitigating-covid-19-humanitarian-settings>. p.4.

TB and malaria increase by up to 10, 20 and 36% respectively due to the COVID-19 pandemic.<sup>77</sup>

Given that Africa imports 94% of its pharmaceuticals, any disruption to global supply chains could also leave the continent in “a perilous position.”<sup>78</sup> According to recent analysis from the Guttmacher Institute, a decline in Chinese pharmaceutical production could have a knock-on impact on Indian production of generic medicines, threatening Africa’s supply of contraceptives, antiretrovirals for HIV/AIDS and antibiotics to treat STIs.<sup>79</sup> While many in Africa are finding innovative solutions, with Senegal developing a \$1 test kit,<sup>80</sup> there remain substantial underlying risks. These examples of secondary health impacts are by no means exhaustive, but their range speaks to the scale of the knock-on health risks to which the continent remains vulnerable as a result of the COVID-19 pandemic.

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77 Hogan Alexandra et al., ‘*Report 19: The Potential Impact of the COVID-19 Epidemic on HIV, TB and Malaria in Low-and Middle-Income Countries.*’ Imperial College London. (May 1, 2020). Available at: <https://doi.org/10.25561/78670> p.2.

78 UNECA ‘*COVID-19 in Africa: Protecting Lives and Economies.*’ p.4.

79 Chattu, Vijay and Yaya, Sanni ‘*Emerging Infectious Diseases and Outbreaks: Implications for Women’s Reproductive Health and Rights in Resource-Poor Settings.*’, *Reproductive Health Journal* 17, no. 43 (April 1, 2020) Available at: <https://doi.org/10.1186/s12978-020-0899-y>. p.3.

80 Nielsen, ‘*The Problem with Predicting Coronavirus Apocalypse in Africa.*’ loc. cit.



# The People Most at Risk

The secondary effects of COVID-19 pose a risk to populations across Africa, however there is emerging evidence that they will be particularly threatening to certain more vulnerable groups within the continent.

In a recent report, the International Rescue Committee (IRC) has warned that humanitarian settings “face a “double emergency” from COVID-19: the direct health impact and its secondary devastation to these states’ fragile humanitarian, economic, security and political environments.”<sup>81</sup> In Africa, the IRC highlight South Sudan, the Lake Chad Region, Northern Nigeria and the Great Lakes Region,<sup>82</sup> as areas where the threat of COVID-19 will intersect with existing conflict and food insecurity.

In South Sudan, 6.5 million people (more than half of the total population) already experience severe food insecurity which will be exacerbated by increasing grain prices and supply-chain disruption caused by COVID-19. Important steps have been taken by some African states to address these risks, with Somalia introducing tax-exemptions and reducing import fees on some food items and Zimbabwe easing restrictions on agricultural production.<sup>83</sup> Rapid action will be needed to support the work of African states and ensure vulnerable groups don’t fall through already stretched social safety-nets while humanitarian relief efforts are hindered by COVID-19.<sup>84</sup>

The Central Sahel region is also in danger of further food insecurity, with parts of the region ‘at high risk of sliding into famine within the next few months.’<sup>85</sup> The World Food Programme has forecast that “5.5 million

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81 International Rescue Committee. ‘One Size Does Not Fit All: Mitigating COVID-19 in Humanitarian-Settings,’ op. cit. p.2.

82 International Rescue Committee: ‘Covid-19 in Humanitarian Crises: A Double Emergency,’ op. cit. p.7.

83 International Rescue Committee: ‘One Size Does Not Fit All: Mitigating COVID-19 in Humanitarian Settings,’ loc. cit.

84 United Nations High Commissioner for Refugees (UNHCR) ‘Global COVID-19 Emergency Response, 01 May’, (May 1, 2020). Available at: <https://reliefweb.int/report/world/unhcr-global-covid-19-emergency-response-01-may-2020>

85 Ibid. p.5.

people will face food insecurity in the Sahel by June 2020, up from over 2.4 million at the same time last year representing a 128% increase.”<sup>86</sup>

On 23 March the United Nations Secretary General, Antonio Guterres, declared: “The fury of the virus illustrates the folly of war. That is why today I am calling for an immediate global ceasefire in all corners of the world. It is time to put armed conflict on lockdown and focus together on the true fight of our lives.”<sup>87</sup>

While COVID-19 could potentially bring incentives for opposing sides in African conflicts to work together, it could just as equally lead to the resumption or intensification of conflict. In South Sudan, its effects could undermine the unity government formed in February 2020, as “budget shortfalls exacerbated by the pandemic may further delay the integration of former fighting forces or disrupt payments for security forces, driving weak command and control and a fragile security situation.”<sup>88</sup>

The UNHCR is also seriously concerned that “the impact of the pandemic on the economy, livelihood, education and governance could fuel violence in the Central Sahel Region.” It is estimated that during the West Africa Ebola outbreak, each new Ebola infection confirmed per 100,000 people increased the risk of conflict over the following two weeks in a given area by 10%.<sup>89</sup> If a similar trend emerges in the wake of COVID-19 it will be particularly dangerous in regions where peace is already so fragile. Existing conflict has also left some African countries more vulnerable to COVID-19 with *The Intercept* reporting that in Burkina Faso 275 health centers have either closed or reduced services due to violence and nearly 2 million people are in need of water, sanitation, and hygiene support.<sup>90</sup>

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86 Ibid. p.6.

87 Guterres, António. ‘*The fury of the virus illustrates the folly of war.*’ United Nations Secretary-General Statement (March 23, 2020). Available at: <https://www.un.org/en/un-coronavirus-communications-team/fury-virus-illustrates-folly-war>

88 International Rescue Committee. ‘*Covid-19 in Humanitarian Crises: A Double Emergency.*’ op. cit. p.8.

89 International Rescue Committee. ‘*Covid-19 in Humanitarian Crises: A Double Emergency.*’ op. cit. p.4.

90 Turse, Nick. ‘*In West African Coronavirus Hot Spot, War Has Left 700,000 Homeless and Exposed.*’ *The Intercept*. (March 26, 2020). Available at: <https://theintercept.com/2020/03/26/burkina-faso-africa-coronavirus/>

## Women

Current evidence suggests that older men are the group most likely to die due to COVID-19;<sup>91</sup> however, women and children will likely bear the greatest cost of its indirect effects. Across the globe, lockdowns have led to a “shadow epidemic”—an increase in gender-based violence. A report by *UN Women*, showed increases in domestic violence in countries including France, Argentina, and Singapore. This worrying trend appears to also hold true in Africa. Analysis by the Brookings Institution has demonstrated a clear correlation between the introduction of lockdowns and a spike in Google searches for domestic violence across the continent.<sup>92</sup> This trend will be particularly dangerous in areas such as South Sudan, where 65% of women and girls have already experienced violence.<sup>93</sup> Indeed, a recent report in the *New Yorker* stated “five Rwandan soldiers are facing court-martial on charges of assault, robbery, and rape during night-time [lockdown] patrols.”<sup>94</sup>

The economic impact of COVID-19 will also likely disproportionately affect women. The Brookings Institution report found women were at higher risk of losing jobs and income, with 89% of women in Africa employed informally, and many working in sectors which are already being affected by falling international demand such as tourism and the textile industry.<sup>95</sup>

African women will also be impacted by disruption to Sexual and Reproductive Health (SRH) services.<sup>96</sup> During the Ebola crisis, there were “additional delays in the care for women experiencing pregnancy complications, leading to adverse outcomes, especially in relation to spontaneous

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91 Chuku Chuku, Mukasa Adamon, and Yenice, Yasin, ‘Putting Women and Girls’ Safety First in Africa’s Response to COVID-19,’ Brookings Institution. (May 8, 2020). Available at: <https://www.brookings.edu/blog/africa-in-focus/2020/05/08/putting-women-and-girls-safety-first-in-africas-response-to-covid-19/>

92 Ibid.

93 International Rescue Committee. ‘Covid-19 in Humanitarian Crises: A Double Emergency.’ op. cit. p.8.

94 Moore, Jina. ‘What African Nations Are Teaching the West About Fighting the Coronavirus.’ The New Yorker. (May 15, 2020). Available at: <https://www.newyorker.com/news/news-desk/what-african-nations-are-teaching-the-west-about-fighting-the-coronavirus>

95 Chuku, Mukasa, and Yenice. loc. cit.

96 Chattu and Yaya, ‘Emerging Infectious Diseases and Outbreaks,’ op. cit.

abortions and hemorrhage.”<sup>97</sup> In Sierra Leone, many women in labor feared that health providers lacked adequate protection from infection.<sup>98</sup> Citing researchers at John Hopkins Bloomberg School of Public Health, the Global Financing Facility Investors Group predicted that, if the disruption caused by COVID-19 is similar to the effects of the Ebola, “almost 1.2 million children and 57,000 mothers could die over just the next six months”—“a 45 percent increase over existing child mortality levels.”<sup>99</sup>

Finally, women are disproportionately “on the frontlines”<sup>100</sup> in the fight against COVID-19. They are both official healthcare workers and unofficial caregivers. Over 60% of Africa’s health workforce and essential social service providers are female, reaching as high as 91 percent in Egypt.<sup>101</sup> Women are also at a higher risk of contracting COVID-19, just as they were of Ebola, “since socio-cultural norms dictate that women tend to sick family members, nurse children, and work as traditional healers and healthcare assistants”<sup>102</sup> While groups like UN Women Kenya are “training and equipping frontline health providers with mental health and wellbeing programs for families,”<sup>103</sup> these actions cannot be expected to overcome widespread gender inequality.

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97 Ibid. p.2.

98 Ibid. p.3.

99 Global Financing Facility. ‘GFF Leaders Warn of Emerging Secondary Global Health Crisis from Disruptions in Primary Health Care Due to COVID-19,’ Press Release (April 23, 2020). Available at: <https://www.globalfinancingfacility.org/gff-leaders-warn-emerging-secondary-global-health-crisis-disruptions-primary-health-care-covid-19>

100 Chuku, Mukasa, and Yenice. loc. cit.

101 Ibid.

102 Chattu and Yaya, ‘Emerging Infectious Diseases and Outbreaks,’ op. cit. p.3.

103 United Nations Entity for Gender Equality and the Empowerment of Women (UN Women). ‘COVID-19 and Ending Violence against Women and Girls.’ Available at: <https://www.unwomen.org/en/digital-library/publications/2020/04/issue-brief-covid-19-and-ending-violence-against-women-and-girls> p.9. (Accessed May 20, 2020).

## Children

Finally, children will be acutely vulnerable to the secondary impacts of COVID-19. In areas of humanitarian crisis, the IRC has warned that financial difficulty could lead to spikes in child marriages and child labor,<sup>104</sup> and this is likely to be compounded by disruption to education.

The COVID-19 pandemic has led to school closures across Africa, with all the inevitable educational disruption that this brings in its wake. UNESCO has commended the use of distance learning to mitigate these effects. However, according to figures compiled by the Teachers Task Force, using data from UNESCO's Institute for Statistics and the International Telecommunications Union (ITU), nearly 90% of students in Sub-Saharan Africa do not have household computers and 82% are unable to get online.<sup>105</sup> Of the 56 million young learners living in areas without a mobile network service, nearly half are in Sub-Saharan Africa.<sup>106</sup> Moreover, UNICEF, reflecting decades of experience in over 190 countries and territories, have confirmed that without the safety of school there is an increased risk—particularly for girls—of exploitation and exclusion, including trafficking, sexual violence, early marriage, and forced labor. During the Ebola epidemic in West Africa between 2014 and 2016, a study by the United Nations Development Programme found that in Sierra Leone, teenage pregnancy increased by 65% resulting from the socioeconomic conditions imposed during the outbreak.<sup>107</sup>

The economic impact will also inevitably lead to increased levels of child-malnutrition without urgent action. The recently published 2020 Global Nutrition states that: “COVID-19 has tested our food systems, already stressed by increasing climate extremes. Containing the virus has caused food and nutrition shortages and driven governments to reduce social services, such as school nutrition programs, that the most marginalized

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104 International Rescue Committee. 'One Size Does Not Fit All: Mitigating COVID-19 in Humanitarian Settings,' op. cit. p.6.

105 United Nations News. 'Startling disparities in digital learning emerge as COVID-19 spreads: UN education agency,' (April 21, 2020). Available at: <https://news.un.org/en/story/2020/04/1062232>

106 Ibid.

107 Yasmin, Seema. 'The Ebola Rape Epidemic No One's Talking About,' Foreign Policy (February 2, 2016). Available at: <https://foreignpolicy.com/2016/02/02/the-ebola-rape-epidemic-west-africa-teenage-pregnancy/>

rely upon. In the context of food and nutrition shortages, accessibility and affordability of healthy, sustainably produced food becomes even more challenging. Access to staple food distribution and local food markets is at risk. Millions of households in formerly food-secure regions of the world have fallen into severe food insecurity. Levels of hunger and malnutrition could double within the space of just a few weeks.”<sup>108</sup>

Beyond the threat of increased malnutrition and poverty the pandemic will also likely lead to disruption of vaccine programs which will similarly have long-term consequences. This is already evident in Chad, Ethiopia, Nigeria, and South Sudan, where disruption to measles vaccinations has left approximately 21 million children unprotected,<sup>109</sup> -and, according to UNICEF, this number risks rising to 117 million worldwide.<sup>110</sup> This is particularly concerning given the experience of Ebola. During the outbreaks in eastern DRC from 2018 to 2020, more people died of measles (6,000) than Ebola (2,240).<sup>111</sup> Similarly, 400,000 children and young people rely on tuberculosis treatment each year in Africa, and they could be “drastically affected” if resources are diverted to fight COVID-19.<sup>112</sup> A recent modelling study in *The Lancet* offering early estimates of the indirect effects of the COVID-19 pandemic on maternal and child mortality in low income and middle-income countries suggested a less severe scenario over six months “would result in 253,500 additional child deaths and 122,000 additional maternal deaths.”<sup>113</sup>

In light of these worrying statistics, Grania Brigden, Director of The International Union Against Tuberculosis and Lung Disease has argued that: “We have to ensure that these children do not become [the] collateral

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108 The Global Nutrition Report (2020) Available at: <https://globalnutritionreport.org/reports/2020-global-nutrition-report/> p.10. (Accessed May 19, 2020).

109 Makoni. ‘Keeping COVID-19 at Bay in Africa,’ op. cit. p.2.

110 World Health Organisation. ‘More than 117 Million Children at Risk of Missing out on Measles Vaccines, as COVID-19 Surges.’ (April 14, 2020). Available at: [https://www.who.int/immunization/diseases/measles/statement\\_missing\\_measles\\_vaccines\\_covid-19/en/](https://www.who.int/immunization/diseases/measles/statement_missing_measles_vaccines_covid-19/en/)

111 International Rescue Committee. ‘Covid-19 in Humanitarian Crises: A Double Emergency,’ op. cit. p.6.

112 Makoni. ‘Keeping COVID-19 at Bay in Africa,’ op. cit. p.2.

113 Robertson, Timothy et al. ‘Early estimates of the indirect effects of the COVID-19 pandemic on maternal and child mortality in low-income and middle-income countries: a modelling study.’ *The Lancet* (May 12, 2020). Available at: [https://www.thelancet.com/pdfs/journals/langlo/PIIS2214-109X\(20\)30229-1.pdf](https://www.thelancet.com/pdfs/journals/langlo/PIIS2214-109X(20)30229-1.pdf) p.6.

damage of the COVID-19 response.”<sup>114</sup> Any policy response must remain aware of the immense importance of safeguarding children.

## Refugees & Internally Displaced Persons

Many of those at risk in humanitarian settings are refugees and internally displaced persons (IDPs). As of yet, there have fortunately been few reported cases in refugee camps in Africa, however the potential risks remain high as Sub-Saharan Africa hosts more than 26% of the world’s refugee population. Displaced peoples are already suffering due to the indirect effects of COVID-19, as border restrictions frustrate humanitarian efforts. For example, in the Sahel, the COVID-19 pandemic has added to the challenges that UNHCR faces to “access, assist and protect over three million refugees and internally displaced people, representing a 15% increase since January 2020.”<sup>115</sup>

It is right to recognize the action already taken by many African leaders to mitigate the impact of the pandemic on internally displaced and refugee populations. The Inter-Governmental Authority on Development (made up of eight states from the Horn of Africa, Nile Valley, and African Great Lakes) has committed to developing a regional response plan to COVID-19 that includes refugees, internally displaced persons (IDPs), and other vulnerable groups.<sup>116</sup> Kenya has also demonstrated real global leadership by including refugees and asylum seekers in its national plan to combat COVID-19 and has allocated facilities for treatment inside the Dadaad refugee camp.<sup>117</sup>

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114 Makoni. ‘Keeping COVID-19 at Bay in Africa,’ op. cit. p.2.

115 UNHCR. ‘Global COVID-19 Emergency Response, 01 May,’ op. cit. p.5.

116 International Rescue Committee. ‘One Size Does Not Fit All: Mitigating COVID-19 in Humanitarian Settings,’ op. cit. p.2.

117 International Rescue Committee. ‘Covid-19 in Humanitarian Crises: A Double Emergency,’ op. cit. p.15.

# The Response So Far

## African Leadership

In the last four months, many African states have taken decisive and innovative action. In taking these steps they have been able to apply the lessons from their previous experiences of infectious diseases and have also benefited from working together through shared institutions such as the African Union and African CDC.

As early as February, *The Lancet* noted that “African countries have recently strengthened their preparedness against COVID-19 importations “with ‘improved airport surveillance and implemented temperature screening at ports of entry.’<sup>118</sup> Prevention efforts were often supported by coherent public health messaging, with countries such as Nigeria establishing 24-hour dedicated hotlines.<sup>119</sup> Across the continent, most states responded swiftly: enacting lockdowns, forms of border restrictions and curfews to limit the spread of the virus. African governments drew on their ‘muscle memory’<sup>120</sup> of dealing with infectious diseases such as Ebola, Yellow Fever, and Cholera.

Learning from their experience of the Ebola outbreak in West Africa in 2014, Nigeria rapidly established separate isolation clinics to treat coronavirus patients to avoid the overburdening of healthcare systems and limit the spread of infection.<sup>121</sup> This same model has since been implemented in around 20 countries,<sup>122</sup> as other states have learned indirectly from these experiences through sharing best practice. Similarly, Uganda redeployed the tools used to tackle Ebola to increase screening for COVID-

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118 Gilbert et al., ‘Preparedness and Vulnerability of African Countries against Importations of COVID-19,’ op. cit. p.875.

119 The Africa Centre for Strategic Studies. ‘African Adaptations to the COVID-19 Response.’ (April 15, 2020). Available at: <https://africacenter.org/spotlight/african-adaptations-to-the-covid-19-response/>

120 Pilling, David. ‘Africa’s Covid-19 response is a glimpse of how things could be different,’ *The Financial Times*. (April 30, 2020). Available at: <https://www.ft.com/content/124dd4f4-8a0b-11ea-9dcb-fe-6871f4145a>

121 The Africa Centre for Strategic Studies. ‘African Adaptations to the COVID-19 Response,’ loc. cit.

122 Ibid.



19. Even before the country registered its first case, President Yoweri Museveni implemented travel restrictions and social distancing measures, which in turn progressed to a full lockdown. These approaches seem to have been highly successful, as since March 22 there have been only 100 cases, 55 recoveries and no deaths in Uganda.<sup>123</sup>

Other countries have similarly registered significant achievements in controlling the spread of COVID-19. As Jina Moore recently reported in *The New Yorker* “Ethiopia completed a door-to-door survey of its capital, Addis Ababa, in just three weeks, documenting symptoms and travel history for its five million residents, and testing anyone who was found to be at risk for the disease or symptomatic. South Africa, where health officials say early intervention staved off exponential transmission, sent thirty thousand community-health workers to survey roughly 15% of its population in less than a month; it uncovered only two positive cases for every thousand people.”<sup>124</sup> These results have led John Nkengasong to suggest that “one reason why we may be seeing what we are seeing is that the continent of Africa reacted aggressively.”<sup>125</sup>

Yet, it’s important to recognize that not all African states have acted as proactively and some have even gone as far as to encourage gatherings,<sup>126</sup> with Tanzanian President John Magufuli encouraging religious gatherings to ‘quell a “satanic” virus’<sup>127</sup> and Madagascar’s President suggesting a cure might be found in herbal tea.<sup>128</sup> Moreover, while decisive actions have delayed and suppressed the spread of the virus, they are not cost-free. Lockdowns have faced resistance, with clashes between government forces and populations witnessed in Nigeria, Rwanda, South Africa and Uganda. They also have economic consequences, encouraging many countries to shift to a curfew-based strategy with strict movement controls.<sup>129</sup>

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123 Nielsen. ‘*The Problem with Predicting Coronavirus Apocalypse in Africa.*’ loc. cit.

124 Moore, Jina. ‘*What African Nations Are Teaching the West About Fighting the Coronavirus.*’ loc. cit.

125 Ibid.

126 Campbell, Matthew. ‘*Coronavirus: We’re Doing Fine, Resilient Africa Tells Ailing West. Worry about Yourself.*’ loc. cit.

127 Bariyo, Nicholas and Parkinson, Joe. ‘*Tanzania’s Leader Urges People to Worship in Throngs Against Coronavirus.*’ *The Wall Street Journal*. (April 8, 2020). Available at: <https://www.wsj.com/articles/tanzanias-leader-urges-people-to-worship-in-throngs-against-coronavirus-11586347200>

128 Moore, Jina. ‘*What African Nations Are Teaching the West About Fighting the Coronavirus.*’ loc. cit.

129 Africa Center for Strategic Studies. ‘*African Adaptations to the COVID-19 Response.*’ loc. cit.

Africa's capacity to address the scale of this crisis is limited, given fiscal constraints in many countries. In the context of these pre-existing resource constraints, many governments on the continent have acted with imagination and innovation: In Ethiopia, the government moved to a system of traffic restrictions with number plates ending in odd and even numbers taking turns on alternating days.<sup>130</sup> In Ghana, a public health official invented a portable hand-washing receptacle that collects water waste, which has been replicated across West Africa;<sup>131</sup> and the new South African dance song '*No Pata Pata*' has been adapted and re-released to spread public health messages.<sup>132</sup>

Governments have been supported in many of these initiatives by parts of the private sector, with public-private partnerships raising donations, distributing food and switching production-lines to manufacture PPE or hand sanitizers.<sup>133</sup> Many larger companies have also made monetary contributions to solidarity funds for the most vulnerable.<sup>134</sup>

In striking contrast to the experience in other parts of the world, African states have also supported each other, acting together in regional co-operation through the African Union Commission, the Africa Centres for Disease Control and Prevention (Africa CDC), and the African Development Bank. Regional co-operation has accelerated the sharing of past lessons,<sup>135</sup> as well as the co-ordination of future responses.

The Africa CDC has initiated a continent-wide network of 300 clinicians, holding weekly webinars to share information and track the spread of the virus across the continent.<sup>136</sup> Since February, surveillance teams from 35 different African countries have been trained by Institute Pasteur of

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130 Editor. '*Ethiopia Puts New Driving Restrictions in Place.*' Ethiopian Monitor (April 17, 2020) Available at: <https://ethiopianmonitor.com/2020/04/17/covid-19-ethiopia-puts-new-driving-restrictions-in-place/>

131 Pilling. '*Africa's Covid-19 Response Is a Glimpse of How Things Could Be Different.*' loc. cit.

132 Reuters report. '*No Pata Pata*': 60s South Africa Dance Hit Revived to Spread Word on Coronavirus', Guardian. (April 23, 2020). Available at: <http://www.theguardian.com/world/2020/apr/23/no-pata-pata-60s-south-africa-dance-hit-revived-to-spread-word-on-coronavirus>

133 Africa Center for Strategic Studies. '*African Adaptations to the COVID-19 Response.*' loc. cit.

134 Jayaram et al., '*Tackling Coronavirus in Africa.*' op. cit. p.12.

135 Africa Center for Strategic Studies. '*African Adaptations to the COVID-19 Response.*' loc. cit.

136 Africa Centre for Disease Control (CDC). '*Novel Coronavirus (2019-nCoV) Global Epidemic*' (April 14, 2020). Available at: <https://africacdc.org/disease-outbreak/novel-coronavirus-2019-ncov-global-epidemic-14-april-2020/>

Dakar with support of the Africa CDC and the African Field Epidemiology Network on how to perform molecular diagnosis of COVID-19 infection using PCR analysis.<sup>137</sup> This means that most African countries now have the capacity to confirm COVID-19 diagnosis, rather than having to ship their samples elsewhere.

The ACDC has been supported by the African Union, and they have worked together to publish a Continental Strategy for the COVID outbreak. The African Union Chair, Cyril Ramaphosa, appointed four Special Envoys to mobilize international support for Africa's efforts to address the economic challenge facing the Continent.<sup>138</sup> Shared institutions have also acted to help support states alleviate the economic and social impact of the pandemic, with the African Development Bank creating a new \$3 billion 'Fight Covid-19 Social Bond.'<sup>139</sup>

In the face of this existential threat, co-operation has not been universal or easy. It has faced challenges, notably in Uganda and South Sudan, where governments have looked to deport COVID-positive Tanzanian and Kenyan nationals contrary to WHO guidelines.<sup>140</sup> However, overall, African action has looked beyond national borders, and at times it has even looked beyond the continent, as in the case of Somalia which announced in March that it would send 20 doctors to help Italy in its struggle against the virus.<sup>141</sup>

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137 Nkamgang Bemo, Valerie. 'The African Footprint: How the continent's preparedness impacts the rest of the world' The Optimist, Bill and Melinda Gates Foundation. Available at: <https://www.gatesfoundation.org/TheOptimist/Articles/coronavirus-interview-valerie-bemo> (Accessed May 5, 2020).

138 The African Union. 'African Union Chair President Cyril Ramaphosa Appoints Special Envoys to Mobilise International Economic Support for Continental Fight Against COVID-19.' Press Release (April 12, 2020). Available at: <https://au.int/en/pressreleases/20200412/african-union-chair-president-cyril-ramaphosa-appoints-special-envoys>

139 Jayaram et al., 'Tackling Coronavirus in Africa,' op. cit. p.13.

140 Golubski, Christina, and Madden, Payce 'Africa in the News: COVID-19, Côte d'Ivoire, and Safaricom Updates.' Brookings Institution (May 2, 2020). Available at: <https://www.brookings.edu/blog/africa-in-focus/2020/05/02/africa-in-the-news-covid-19-cote-divoire-and-safaricom-updates/>

141 Nielsen. 'The Problem with Predicting Coronavirus Apocalypse in Africa,' loc. cit.

## International Assistance

It is right to recognize that the actions of African governments to tackle the pandemic have already been supported by partners outside of the continent, although, in light of the continuing health risks and the growing economic hardship, these international efforts can and must go further.

Although a number of African states have been decisive and innovative in the face of this pandemic, they are generally operating within tight fiscal constraints. International partners have the capacity to loosen these constraints, providing what Donald Kaberuka, former President of the African Development Bank and Chair of the Global Fund has described as “breathing space.”<sup>142</sup> To this end, the G20 pledge to suspend debt payments from the poorest countries until the end of the year was a welcome first step.

On May 18, 2020, President Xi Jinping of China pledged \$2 billion towards the global effort to fight COVID-19. In his remarks at the opening of the 73<sup>rd</sup> World Health Assembly, he declared: “we must provide greater support for Africa. (...)The world needs to provide more material, technological, and personnel support for African countries.”<sup>143</sup> He went on to state that China had already sent medical supplies and assistance to over 50 African countries and the African Union, together with five Chinese medical teams having been dispatched to the continent.<sup>144</sup>

Ahead of the World Health Assembly, the European Union also proposed an arrangement for the collaboration and pooling of resources to “to ensure equitable access to vaccines, treatments, and other medical products for combating the pandemic.”<sup>145</sup> However, the United States disassociated

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142 Kaberuka, Donald. ‘*Coronavirus in Africa.*’ Interview with Gideon Rachman. The Financial Times (April 30, 2020). Available at: <https://www.ft.com/content/b346cbdc-f871-4b26-9b79-f264644fa104>

143 Jinping, Xi. ‘*Fighting COVID-19 Through Solidarity and Cooperation Building a Global Community of Health for All*’ Full text: Speech by President Xi Jinping at opening of 73<sup>rd</sup> World Health Assembly. Global Times. (May 18, 2020) Available at: <https://www.globaltimes.cn/content/1188716.shtml>

144 Ibid.

145 Silverman, Ed. ‘*European Union urges the World Health Assembly to pursue a voluntary pool for Covid-19 products.*’ STAT. (April 16, 2020). Available at: <https://www.statnews.com/pharmalot/2020/04/16/european-union-who-voluntary-pool-covid19-coronavirus/>

itself from key elements of the EU proposals.<sup>146</sup> Others have also taken steps which should be welcomed, such as French President Emmanuel Macron's efforts to offer French coordinated support to African leaders,<sup>147</sup> as well as the U.S. allocation of approximately \$3 billion for international efforts.<sup>148</sup>

While each of these positive actions is welcome, the responses of Africa's partners have not yet come close to matching the scale of the challenge facing the continent. All countries face challenges in this global crisis, and currently the numbers of identified cases in much of Western Europe and North America dwarf those in Africa, but as David Miliband argued recently 'we will not defeat the virus with my country first.'<sup>149</sup> Urgent action is needed to address Africa's pre-existing vulnerabilities and limit disastrous secondary effects.

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146 United States of America Written Statement to the World Health Assembly. '*United States of America Explanation of Position "COVID-19 Response" Resolution*,' WHO Statements (May 2020). Available at: [https://apps.who.int/gb/statements/WHA73/PDF/United\\_States\\_of\\_America2.pdf](https://apps.who.int/gb/statements/WHA73/PDF/United_States_of_America2.pdf)

147 Dybul. 'COVID-19: A Global Pandemic Demands a Global Response.' op. cit. p.32.

148 Ibid. p.11.

149 Miliband, 'We're on Our Way to Over One Billion Cases. We Won't Beat COVID-19 With "My Country First."' op. cit.

# Three Recommendations for the Next Three Months

## May: Double the Coronavirus Global Response Initiative

On May 4, 2020, the European Commission, France, the UK, Canada, Germany, Italy (incoming G20 Presidency) Saudi Arabia (currently holding the G20 Presidency), Japan, Norway, and Spain co-convened a virtual pledging conference—the Coronavirus Global Response Initiative—to research and develop new treatments, tests, and vaccines to tackle the spread of COVID-19. The Coronavirus Global Response Initiative comprises three partnerships aimed at testing, treating, and preventing the spread of COVID-19, and is underpinned by the goal of strengthening healthcare systems everywhere.

This virtual pledging conference followed an urgent call for action on April 24, 2020 from the WHO and a group of international organizations including, the Global Vaccine Alliance (GAVI), the Global Fund, UNITAID, the Wellcome Trust, the World Bank, the Bill and Melinda Gates Foundation, and the Coalition for Epidemic Preparedness Innovation (CEPI). Building on an earlier statement made by G20 leaders on March 26, 2020 these further calls urged collaboration to accelerate the development, production, and equitable distribution of new COVID-19 health technologies. These organizations petitioned “the global community and political leaders to support this landmark collaboration, and for donors to provide the necessary resources to accelerate achievement of the objectives of this global collaboration, capitalizing on the opportunity provided by the rolling pledging campaign that will start on May 4, 2020.”

A universal and affordable ‘Access to COVID-19 Tools’ (ACT-Accelerator)” was the main goal of the call to action of April 24, which obviously requires significant funding along with effective collaboration.

As Cyril Ramaphosa, the South African president who also chairs the African Union, has said: we need a “People’s vaccine”<sup>150</sup> to ensure those in the developing world are not left behind. In an open letter organized by UNAids and Oxfam, African leaders including Macky Sall, President of Senegal, and Nana Addo Dankwa Akufo-Addo, president of Ghana as well as over 140 other well respected public figures called for solidarity within the international community and a “guarantee which ensures that, when a safe and effective vaccine is developed, it is produced rapidly at scale and made available for all people, in all countries, free of charge.”<sup>151</sup>

At the initial May 4 meeting, leaders from around the world pledged almost EUR 7.4 billion (\$8.2 billion) to the Coronavirus Response Initiative, with the largest national pledges being made by Norway and Japan. Yet the United States, Russia, India, Brazil and Argentina did not participate, and China was only represented by its Ambassador to the European Union.<sup>152</sup>

The European Commission will register and track pledges made to the Coronavirus Global Response Initiative since January 30, 2020, when the WHO declared COVID-19 to be a global health emergency. A number of the national pledges made during the May meeting simply repeated the national contributions pledged to the GAVI replenishment due on June 4, 2020. Others simply repeated national contributions previously allocated to the WHO.<sup>153</sup> Following the May 4 meeting the EU Commission urged “an ongoing pledging marathon” and recognized that the “initial target of EUR 7.5 billion will not be enough to ensure the distribution of coronavirus health technologies worldwide, as this involves significant costs in terms of production and distribution.”<sup>154</sup>

150 Pilling, David and Jack, Andrew. ‘People’s vaccine’ for coronavirus must be free, leaders urge.’ The Financial Times. (May 14, 2020). Available at: <https://www.ft.com/content/af929941-7c02-415a-a692-bf8443ede58a>

151 UNAids and Oxfam, ‘Uniting Behind A People’s Vaccine Against COVID-19.’ The Financial Times Open Letter (May 14, 2020). Available at: <https://oi-files-d8-prod.s3.eu-west-2.amazonaws.com/s3fs-public/2020-05/ENGLISH—Uniting-Behind-a-Peoples-Vaccine-Against-COVID-19-1305201720.pdf>

152 Milne, Richard, and Crow, David. ‘Why vaccine ‘nationalism’ could slow coronavirus fight.’ The Financial Times (May 18, 2020). Available at: <https://www.ft.com/content/6d542894-6483-446c-87b0-96c65e89bb2c>

153 Wintour, Patrick. ‘World leaders pledge €74bn to research Covid-19 vaccine’ The Guardian. (May 4, 2020). Available at: <https://www.theguardian.com/world/2020/may/04/world-leaders-pledge-74bn-euros-to-research-covid-19-vaccine>

154 European Commission Statement. ‘Coronavirus Global Response: €7.4 billion raised for universal access to vaccines.’ (May 4, 2020). Available at: [https://ec.europa.eu/commission/presscorner/detail/en/ip\\_20\\_797](https://ec.europa.eu/commission/presscorner/detail/en/ip_20_797)

Quite how large is the challenge involved in successfully completing this marathon was made clear by Michael Kremer, a Nobel Prize-winning economics professor at Harvard University. As he told *The Times* newspaper: “The recent initiative for the international effort set out to raise \$8 billion, it was great that they succeeded, but there is a huge gap between \$8 billion and the sorts of numbers that we estimate.”<sup>155</sup> Professor Kramer, and the team of economists he’s worked with on this issue, estimate that the economically “optimum investment” would be \$150 billion given the costs involved in developing and manufacturing.<sup>156</sup>

This need for additional financing helps explain why the United Nations Secretary General, Antonio Guterres, in his remarks at the May 4 meeting stated that: “These funds are a kind of down payment for developing the new tools at the speed needed. But to reach everyone, everywhere, we will likely need five times that amount.”<sup>157</sup> Guterres called on “all partners to join in this effort as we look to gather again in late May to sustain our momentum.”<sup>158</sup>

It is essential, as the UN Secretary General makes clear, to now maintain momentum in the fight against COVID-19 that we also maintain the funding momentum for the Coronavirus Global Response Initiative. Accordingly, as the next stage of the “ongoing pledge marathon” it is essential that the international community (including those not present at the May 4, 2020 conference) now commit to a doubling of the initial funding and raise \$15 billion for the CGRI by May 31, 2020.

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155 Narwan, Gurpreet. ‘Nobel Prize winner calls for \$150bn investment in coronavirus vaccine.’ *The Times* (May 19, 2020).

156 Ibid.

157 Guterres, António. ‘Secretary-General’s remarks at On-Line Pledging Event for Coronavirus Global Response: Joining Forces to Accelerate the Development Production and Equitable Access to new COVID Vaccines, Diagnostics and Therapeutics.’ United Nations Secretary-General Statement (4 May 2020). Available at: <https://www.un.org/sg/en/content/sg/statement/2020-05-04/secretary-generals-remarks-line-pledging-event-for-coronavirus-global-response-joining-forces-accelerate-the-development-production-and-equitable-access-new-covid>

158 Ibid.



## **June: Establish a new AMC and fully fund GAVI 2021-2025.**

On June 4, 2020, the UK Government will host the Global Vaccine Summit. This virtual conference is GAVI, the Vaccine Alliance's third donor pledging conference. Founded in 2000, GAVI is a partnership that brings together the World Health Organization, the World Bank, UNICEF, and the Bill and Melinda Gates Foundation. These founding partners work with a broader alliance of donors (including national governments), corporate partners, civil society, and advocacy groups, academics, developing countries' governments, and vaccine manufacturers. GAVI today vaccinates almost half the world's children and uses this market strength to negotiate lower costs to ensure vaccines are affordable even for low income countries.

Since its founding "GAVI" has helped to immunize over 760 million children and has prevented more than 13 million deaths, helping to halve child mortality in 73 developing countries. GAVI also plays a key role in improving global health security by supporting health systems as well as funding global stockpiles of vaccines to fight Ebola, cholera, meningitis, and yellow fever. Yet, as a result of COVID-19, immunization services are now being disrupted in low income countries across the world.<sup>159</sup>

The Global Vaccine Summit on June 4, 2020 follows a previous successful pledging conference that took place in June 2015 and raised \$7.5 billion to support GAVI's work between 2016—2020. The aim of the June London Summit is to raise a total of \$7.4 billion to support GAVI's work over the period between 2021 and 2025.

These funds are vital to ensure that GAVI is able to continue its routine, life-saving program of vaccinations. The importance of maintaining these routine vaccines is made clear by the experience during the Ebola outbreak in the Democratic Republic of Congo. A report issued by UNICEF on November 27, 2019 highlighted that a measles outbreak in the country

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<sup>159</sup> Gavi, the Vaccine Alliance. 'Canada commits CAD 600 million to Gavi,' Press Release. (May 12, 2020). Available at: <https://www.gavi.org/news/media-room/canada-commits-cad-600-million-gavi>

had killed more than twice as many people as Ebola since the start of that year.<sup>160</sup>

On April 29, 2020, the UK Government, as the host of the London Summit (and historically the largest donor to GAVI), pledged the equivalent of \$407 million per year for the 2021–2025 five-year period. Prior to this announcement, both the United States, and Saudi Arabia had already pledged support, and since the British pledge, Norway, Italy, Spain, Ireland, Finland, and Canada have all made new funding commitments. Separately, Germany, which had in January pledged \$600 million to support GAVI's work over the upcoming five years, has now indicated that it will provide additional funding. The People's Republic of China, South Korea, the Netherlands, Australia, and Luxembourg have all intimated their willingness to continue to support GAVI and are expected to pledge funding amounts before or at the London Summit next month.

In 2007, a number of donor governments together with the World Bank and the Bill and Melinda Gates Foundation established a pilot Advanced Market Commitment (AMC) against pneumococcal diseases which facilitated the development, production and equitable distribution of vaccines across the developing world. This AMC involved donors pledging funds to guarantee the price of pneumococcal vaccines once developed, in return pharmaceutical companies entered binding agreements to provide the vaccines at affordable prices. In the last year alone, a total of 161 million doses of pneumococcal conjugate vaccine (PCV) has been procured through the AMC. GAVI projections indicated that the use of PCV will prevent over 700,000 future deaths from pneumococcal diseases among children in Gavi-supported countries over the next decade.

A new Advanced Market Commitment (AMC) could prove a powerful mechanism for accelerating the development and equitable distribution of a COVID-19 vaccine. It is essential that at the Global Vaccine Summit on June 4, 2020 a new AMC for COVID-19 is established, and that GAVI is fully funded for its ongoing life-saving immunizations programs.

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<sup>160</sup> UNICEF. '4,500 children under the age of five died from measles in the Democratic Republic of the Congo so far this year,' Press Release (November 27, 2019). Available at: <https://www.unicef.org/press-releases/4500-children-under-age-five-died-measles-democratic-republic-congo-so-far-year>

## July: Agree the emerging Africa 'Brady Plan' for Debt Relief

On April 15, 2020, G20 Finance Ministers agreed to suspend government loan repayments until the end of the year for low income countries as a response to the health and economic impacts of COVID-19 being felt across the developing world. At the same virtual meeting, the group urged private creditors to “participate in the initiative on comparable terms” and urged multilateral development banks to “further explore the options for the suspension of debt service payments over the suspension period.”<sup>161</sup> It is estimated that this G20 initiative will free up to \$12 billion in government debt payments for those poorest countries.

The IMF has also agreed to approve immediate debt service relief to 25 of its member countries (19 of which are in Africa) under the revamped Catastrophe Containment and Relief Trust (CCRT) for which the aim is to raise \$1.4 billion and have additionally raised \$11.7 billion in international pledges from Japan, France, Australia, UK, and Canada for the Poverty Reduction and Growth Trust, to provide concessional financial support to low income countries.

Although discussions are ongoing there are as yet no firm public proposals for multilateral debt relief by the World Bank, despite the IMF and the World Bank being owed about \$7 billion this year from the 73 poorest countries,<sup>162</sup> more than half of which are in Africa.<sup>163</sup>

The G20 Finance Ministers' statement recognized that their agreement was limited in its scope, as it does not address commercial debt. Of particular and continuing concern, from an African perspective, is the continent's debts to China from the Belt and Road initiative (BRI). South Africa, for example, owes “far more to China than the World Bank” and by 2017,

161 G20 Resource Group. 'Virtual meeting of the G20 finance ministers and central bank governors' official statement.' (April 15, 2020). Available at: <http://www.g20.utoronto.ca/2020/2020-g20-finance-0415.html>

162 Wheatley, Jonathan. 'Emerging economies hold back on asking creditors for debt relief.' The Financial Times (May 13, 2020). Available at: <https://www.ft.com/content/3b4a5684-81e5-4ed0-9a9a-660d85f024e9>

163 Martin, Eric. 'World Bank Urges Swifter Private Debt Relief for Poorest Nations' Bloomberg. (May 19, 2020). Available at: <https://www.bloomberg.com/news/articles/2020-05-19/world-bank-urges-swifter-private-debt-relief-for-poorest-nations>

Ethiopia and Djibouti owed debts to China amounting 20 percent and 80 percent of GDP respectively.<sup>164</sup> According to the Johns Hopkins School of Advanced International Studies the Chinese Government, banks and contractors have lent African countries \$133 billion between 2007-2017.<sup>165</sup> China continues to borrow cheaply from World Bank dollar loans and relend through the BRI “at a significant mark-up.”<sup>166</sup> Just a year after the BRI was launched, Chinese Premier Li Keqiang, spoke to the African Union offering “innovative and pragmatic cooperation.”<sup>167</sup> The Chinese Government’s interpretation of their obligations under the G20 Finance Ministers Agreement to suspend government loan requirements will be a clear test of whether these Li Keqiang’s fine words are being translated into practicable actions.

According to the most recent World Bank debt statistics, African countries owe a total of \$493.6 billion in long-term debt to their foreign official and commercial creditors, with about one third, \$117 billion, in the form of tradeable bonds.

There is, however, a workable solution being proposed by the African Union and the United Nations Economic Commission for Africa around which donor countries and African leaders can unite to deliver debt relief to the continent. Modelled on the 1989 Brady plan (which saw bank loans held by low income Latin America countries converted into new paper backed by U.S. Treasury bonds), under this new proposal, African countries would seek to exchange their sovereign debt for new concessional paper underwritten by a triple-A-rated multilateral lender or central bank. The United Nations Economic Commission for Africa (UNECA) is already working on a proposal which would pause \$16.25 billion in commercial debt payments this year. While the African Union together with UNECA and individual finance ministers across the continent are looking to design a ‘special-purpose vehicle’ to implement this plan the agreement

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164 Steil and Rocca, ‘Chinese Debt Could Cause Emerging Markets to Implode.’ loc. cit.

165 Kyngge, James. ‘China faces wave of calls for debt relief on ‘Belt and Road’ projects’ The Financial Times (April 30, 2020). Available at: <https://www.ft.com/content/5a3192be-27c6-4fe7-87e7-78d4158bd39b>

166 166 Steil and Rocca, ‘Chinese Debt Could Cause Emerging Markets to Implode.’ loc. cit.

167 167 Johnson, Lauren. ‘How COVID-19 will change China and Africa’s economic relationship.’ World Economic Forum. (May 12, 2020). Available at: <https://www.weforum.org/agenda/2020/05/china-pragmatic-cooperation-africa/>

of bondholders would be required to make further progress. Meetings however, are already underway between a network of private creditors and finance ministers.<sup>168</sup>

There are still elements of the proposal under development, not least of which is how to avoid so-called ‘Vulture Funds’ -that still operate in fifteen African nations -capturing the benefit of any debt forgiveness.<sup>169</sup> Yet, today, many poorer countries are weighed down by the burden of debt they carry, and as a consequence allocate more of their budgets to debt servicing than health services.<sup>170</sup> Given the economic consequences of COVID-19 for Africa and the world, is it in no one’s interest to continue along a path that would lead to disorderly debt defaults.

As African Union special envoy, Tidjane Thiam, former CEO of Credit Suisse Group AG, has said “It’s better to come into this scheme in an orderly manner” rather than to have African countries “six to nine months down the road having to go to Washington to negotiate this alone under duress.”<sup>171</sup>

Accordingly, building on the initiatives already taken by the G20 Finance Ministers to suspend loan repayments until the end of the year, and the immediate debt service relief provided by the IMF to nineteen African countries, the G20 Finance Ministers at their upcoming meeting on July 18-19, 2020 in Jeddah must aim to agree and implement the emerging Africa ‘Brady Plan’ for debt relief being developed by the African Union and the United Nations Economic Commission for Africa.

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168 Soto, Alonso. ‘*Private Creditors Form Group to Negotiate Africa Debt Relief*.’ Bloomberg (May 15, 2020). Available at: <https://www.bloomberg.com/news/articles/2020-05-15/private-creditors-form-group-to-negotiate-african-debt-relief>

169 Bradlow, Danny. ‘*Vultures, doves and African debt: here’s a way out.*’ The Conversation (May 5, 2020). Available at: <https://theconversation.com/vultures-doves-and-african-debt-heres-a-way-out-137643>

170 Narwan, Gurpreet. ‘*Nobel Prize winner calls for \$150bn investment in coronavirus vaccine.*’ The Times (May 19, 2020).

171 Soto, Alonso. ‘*Africa Eyes Own Brady Plan As Debt Relief Proposal Takes Shape*’ Bloomberg (April 28, 2020). Available at: <https://www.bloomberg.com/news/articles/2020-04-28/africa-eyes-own-brady-plan-as-debt-relief-proposal-takes-shape>

# Conclusion: Until Everywhere is Safe, Nowhere is Safe

The Ethiopian Prime Minister, Abiy Ahmed, has rightly highlighted that “if the virus is not defeated in Africa, it will only bounce back to the rest of the world.”<sup>172</sup> This epidemiological insight helps explain why the UN’s Emergency Relief Coordinator has commented that “until everywhere is safe, nowhere is safe.”

In the 14<sup>th</sup> Century, the ‘Plague’ (or ‘Black Death’) spread from Asia to Europe unaided by either modern shipping or aviation. Since the Municipal Health Commissioner for China reported a cluster of cases of pneumonia in Wuhan, Hubei Province, on December 31, 2019.<sup>173</sup> The virus that in time was identified as COVID-19 has done extraordinary damage to health, wealth and wellbeing around the world. Of course, the impact has varied from country to country and from continent to continent. Today, in 2020, with a far greater global population and vastly superior transport links, in just three months from its arrival on the continent, COVID-19 has reached every country in Africa.

Historian Yuval Harari has written recently that history can teach us two important lessons in the current struggle against the virus. First, it reveals that you cannot protect yourself by permanently closing your borders. Secondly, history indicates that real protection comes from the sharing of reliable scientific information, and from global solutions.<sup>174</sup>

Even with the new quarantine arrangements now in place and with global aviation massively constrained, epidemics have managed to spread across and between continents throughout history. Once again in 2020 we are being reminded that, in the face of a pandemic, our own safety is intrinsically bound together with the safety of people in distant countries: The

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172 Ahmed, *If Covid-19 Is Not Beaten in Africa It Will Return to Haunt Us All*. loc. cit.

173 World Health Organisation. ‘WHO Timeline -COVID-19’ WHO Statement (April 27, 2020). Available at: <https://www.who.int/news-room/detail/27-04-2020-who-timeline—covid-19>.

174 Harari, Yuval Noah. *In the Battle Against Coronavirus, Humanity Lacks Leadership* Time (March 15, 2020). Available at: <https://time.com/5803225/yuval-noah-harari-coronavirus-humanity-leadership/>

lack of appropriate response measures anywhere, ultimately endangers us everywhere.

In a prophetic warning back in 2015, Bill Gates stated: “The failure to prepare could alter the next epidemic to be dramatically more devastating than Ebola. In fact, if there is one positive thing that can come out of the Ebola epidemic it is that it can serve as an early warning, a wake-up call, to get ready. If we start now, we can be ready for the next epidemic.”<sup>175</sup>

Sadly, this warning was not heeded, beyond the continent of Africa, where today, insights and institutional coordination used for the previous Ebola outbreaks are once again being developed in the fight against COVID-19.

Africa today has the least developed resilient healthcare system of any continent. It has the highest level of poverty and economies deeply vulnerable to the global downturn now unfolding. Yet, it is still not too late for coordinated international action (or “global solidarity” as Harari calls it.) Notwithstanding the continued epidemiological uncertainty, there are ‘no regret’ decisions that can and should be taken by Africa’s partners to assist in its COVID-19 fight.

It is now three months since the virus arrived on the continent. Over the next three months there are three actions that can and should be taken by the international community:

- During May, ensure a doubling of the initial pledges of \$7.4 billion made to the Coronavirus Global Response Initiative to at least \$15 billion.
- During June, establish a new Advanced Market Commitment (AMC) for COVID-19 and ensure a fully funded GAVI 2021-2025 by pledging at least \$7.5 billion at the Global Vaccine Summit.
- During July, agree to the emerging Africa ‘Brady Plan’ for Debt Relief being proposed by the African Union and the United Nations Economic Commission for Africa (UNECA).

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<sup>175</sup> Gates, Bill. ‘*The next Outbreak?—We’re not ready.*’ TED Talk (March 2015). Available at: [https://www.ted.com/talks/bill\\_gates\\_the\\_next\\_outbreak\\_we\\_re\\_not\\_ready?language=en](https://www.ted.com/talks/bill_gates_the_next_outbreak_we_re_not_ready?language=en)

Given the evident limitations of the present global leadership, to secure these three policies in the next three months will be hard. Very hard. Yet, it is not impossible, and on the decisions of world leaders in the coming months rest the health, wellbeing, and hopes of millions. In words that have come to be associated with Africa's greatest son, Nelson Mandela: "It always seems impossible until it's done."



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## **Future of Diplomacy Project**

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