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Jean Monnet Network

*The European Union, Africa and China in the
Global Age*

Bradford (UK), Bujumbura (Burundi), Corinith (Greece), Dar es Salaam
(Tanzania), Gulu (Uganda), Kigali (Rwanda), Lancaster/Shandong
(UK/China), Nairobi (Kenya)

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***Africa, the European Union and China Towards a New Global
Order –
From Pandemic to Renewed Integration and Global
Cooperation?***

Part 2:

Dealing with COVID-19 in Africa –

**Culture and homegrown approach, social enterprises, human rights, and
country-related issues**

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Africa: Most Vulnerable Continent to COVID-19 Pandemic

Marshal Olal Johnson LIMONG

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Abstract: *African governments have responded swiftly and courageously to the Coronavirus pandemic. However, the African continent remained extremely vulnerable to COVID-19 due to the social nature, attitudes and behaviours that constitute the mindsets of the people. Africa also has weak health systems with limited testing capacity, doctors, few ventilators and Intensive Care Units (ICU). The continent faces stagnant economic growth due to conflict, loss of revenue due to lockdown and lack of transparency and accountability. Although the African continent is spared and not hit hardest by COVID-19 as had been predicted earlier, the continent will find it very hard to re-emerge from this crisis. International cooperation and solidarity are central to recovery to address the long-term impact of COVID-19.*

Key words: *African vulnerability, COVID-19 Pandemic, African social nature, poverty, lockdown, policy makers' response, health and economic security and international cooperation.*

Introduction

This paper aims to contribute actively to the ongoing debate about the vulnerability of African continent to COVID-19. It seeks to provide a broad view of the vulnerability of the African continent to the COVID-19 pandemic and explore the issues related to Africa, globalisation and perspectives of International cooperation with the European Union and China in a post COVID-19 world to enable Africa to resurface out of the crisis. Without renewed integration and global cooperation, Africa will be more vulnerable to Coronavirus and its aftermath.

The method used by the researcher to accomplish the goal of the study is to review works and articles published by experts and international institutions such as the World Health Organisation (WHO), the Health Organization

Africa (HOA), Centres for disease control and prevention (CDCP), Africa Centres for Disease Control and prevention (ACDCP), OECD countries, IMF, World Bank and other authentic sources including research conducted in Juba, South Sudan on COVID-19 focusing on the vulnerability of the African continent to the pandemic. The articles were chosen based on how they contribute to the understanding of the vulnerability of the African continent to COVID-19 and how Africa can rebound back out of the crises.

COVID-19 has affected all the seven continents and the world recorded cases of Coronavirus stand at 13,464,486, with 581,392 deaths and 7,84,908 recoveries as by the date of 15 July 2020.¹ Africa's recorded cases of Coronavirus stands at 594,955 cases, 13,246 deaths and 295,242 recoveries as by the date 13 July 2020.²

The social distancing method, identified by the scientific world as the best means of preventing the spread of Covid-19, goes against the very social nature of the African way of life. Self-isolation becomes extremely difficult due to house density. Coupled with the high rate of illiteracy in some parts of Africa, the majority of Africans do not reason in a scientific way but the mindsets are magical, mythical and people live in the condition of fatalism. The state of their mindsets conditions their attitudes and behaviors that could make Africa more vulnerable to COVID-19.

Africa is the poorest continent with weak health systems and low number of doctors, nurses, intensive care units, testing kits and ventilators.

Social and Cultural Challenges

Africans are very social by nature and that could make the populations extremely vulnerable to COVID-19. For them, spending time together with

¹ Worldometer, "COVID-19 Pandemic," 2020, <https://www.worldometers.info/coronavirus/?utm_campaign=homeAdvegas1?> (accessed 15 July 2020).

² Africa News, "Africa COVID-19 Stats," 2020, <<https://www.africanews.com/2020/07/13/coronavirus-africa-breakdown-of-infected-virus-free-countries>> (accessed 13 July 2020).

others is the normal order of the day. Gilles Yabi, founder of the West African Think Tank Wathi, said that in African cultures, family gatherings and big crowds go hand in hand, and that the sick are treated and revered not in isolation, which could make self-isolation difficult, if not impossible.³ The precautionary measures designed by the WHO, to slow the spread of COVID-19 and guarantee that health systems are not overwhelmed at any one point in time do not reflect the reality of African society and of context specific challenges. They make “socio-cultural norms and values at the centre of African society now face severe risk of disappearing into oblivion.”⁴ It could have long term implications in terms of pulling together and social harmony. In South Sudan, people continue to ignore government restrictions on public gatherings for social purposes such as funerals, marriages, bars, and open markets, where huge gathering of people continue to take place.

The measures designed to avoid handshake is very challenging to maintain in the African context. Restraining people from hands shaking is very tough because it is imperative and deeply rooted in the cultural life and behaviour of people. A strong handshake, while looking in the eye of each other, is the daily practice that people never get tired doing it. It is a culturally enshrined practice in African traditional setting that is difficult to temper with. Declining to shake hands presented can be negatively interpreted by the other person as a sign of cultural disrespect.

Lockdown is challenging because many heads of households are street vendors or workers who rely on a daily wages to earn their living. Complete lockdown could make them lose their income from one day to the next. About 86% of the population works in the informal sector without contract

³ Christine Okello, “Social Distancing Putts Africa’s Norms to the Test,” *RFI*, 25 March 2020, <www.rfi/en/africa/20200325-africa-coronavirus-social-distancing> (accessed 25 March 2020).

⁴ Faruk Zorlu, “No Clear View for COVID-19 On Return to Normal in 2021,” *Anadolu Agency*, 30 June 2020, <<https://www.aa.com.tr/en/latest-on-ccoronaviruuus-outbreak/no-clear-view-for-covid-19-on-return-to-normal-in-2021>> (accessed 30 June 2020).

of any kind, lacking unemployment insurance or the possibility of continued salary payments if work suddenly stops. Lockdown is very devastating on poor people's ability to put food on the table and stay healthy.⁵ African people continue to defy government orders to stay at home and observe total lockdown because greater parts of the populations are economically poor, lack basic necessities of life and are obliged to move out of the house each morning to earn their living to avoid starvation. The order to stay at home is likened to a death verdict. It is equated to asking people to willingly starve as a majority of governments in Africa are unable to provide food and clean water to every single household each day. The research conducted by the University of Juba in partnership with United Nations Development Programme (UNDP) found that the majority of households could not afford buying basic food necessity in bulk and storing them at home. 82% of households do not have food to sustain them for a week in case of lockdown and 93% of households purchase foods from the market on a daily basis.⁶

The closing of national borders face difficulty because these borders were arbitrarily drawn during the colonial era, and they exist only in theory for many communities living along these boundaries. They are simply equated to Google maps. Trade and family ties had been established before colonialism and they persist. People circumvent official border posts and choose so-called irregular crossing points, spotted across hundreds of kilometers, which abound even over rivers and lakes.⁷

The presence of people living in unfavourable conditions in major cities also makes Africa extremely vulnerable to COVID-19. The physical infrastructures

⁵ Isabel Gunther, "Why Social Distancing is a Big Challenge in Many African Countries," 20 April 2020, <<https://phys.org/news/2020-04-social-distancing-big-african-countries.html/>> (accessed 20 April 2020).

⁶ University of Juba, *Gender and Socio-Economic Impact Assessments of COVID-19 Pandemic*, Juba, 30 April 2020.

⁷ Karsten Noko, "In Africa, Social Distancing is a Privilege few can Afford," *Al Jazeera*, 22 March 2020, <<https://www.ajazeera.com/indepth/opinion/africa-social-distancing-privilege-afford-200318151958670>> (accessed 22 March 2020).

of many African cities are made of slum, informal settlements and are extraordinarily overcrowded. Such congestion of human settlements in capital cities create conditions where the virus can spread rapidly, undetected, and with a high level of vulnerability. The influenza transmission rate in India had been found to increase above a population density of 282 people per square kilometers but the density of many built-up areas in Africa is over five times this verge. In the case of South Sudan, inhabited areas average 8,730 people per square kilometer.⁸ The research conducted by the University of Juba in partnership with UNDP in Juba Municipality showed that people live in a very close proximity with each other. It estimated that 8 persons per household, and per compound 12 persons, the area with the highest density is Juba Nabari East with 27 persons per compound.⁹ Logically and ethically, it is unthinkable that self-quarantine could take place in such confinement. In “Places like Alexandra in Johannesburg, over 700,000 people are estimated to live in less than 5 square kilometer (1.9 square miles), Mbare in Harare 800,000 people, Kibera in Nairobi at least 250,000 and Makoko in Lagos over 300,000 people.”¹⁰

Conflicts, climate change and natural disasters have pushed millions of Africans all over the continent living as refugees and Internally Displaced Persons in overcrowded camps, in unfavourable conditions with poor sanitation that could make those sites breeding places for Coronavirus. In such camps social distancing remains a myth. Indeed, conflicts make the African continent very vulnerable to COVID-19 as conflict disrupts public health systems. 85% of Africa’s 25million forcefully displaced persons are concentrated in eight countries: The Democratic Republic of Congo (DRC),

⁸ Africa Center for Strategic Studies, “Mapping Risk Factors for the Spread of COVID-19 in Africa,” 3 April 2020, <<https://africacenter.org/spotlight/mapping-risk-factors-spread-covid-19-africa/>> (accessed 13 May 2020).

⁹ University of Juba, *Gender and Socio-Economic Impact Assessments of COVID-19 Pandemic*.

¹⁰ Noko, “In Africa, Social Distancing is a Privilege few can Afford.”

South Sudan, Somalia, Ethiopia, Sudan, Nigeria, the Central African Republic and Cameroon.¹¹

The Centre for Disease Control and Prevention stated that limiting face to face contact with others or keeping space between you and others is one of the best tools to avoid being exposed to the COVID-19 and slowing its spread locally and across the country and the World.¹² Self-quarantine recommended by the WHO included advice for people not to share bathrooms, living space and even bedrooms. However, self-isolation or quarantine is impracticable as people live in shared bedrooms with communal toilets shared with a dozen other families. There is no space to rest and relax for an individual. "If you live in township, making a living in the informal sector or travel on a crowded bus, how can you self-quarantine? It is difficult to avoid being infected on cramped public transport on their way to a meager-paying job that often help them to live hand to mouth."¹³

Poor communication systems make many citizens unable to acquire the right information about COVID-19. There is limited sharing of transparent information. In Africa, generally, people have higher trust in religious leaders than in their governments. This leads certain pastors to initiate disinformation campaigns that challenge not only the existence of Coronavirus itself but also the measures designed by WHO. They easily instill wrong ideas in the minds of their faithful to believe that Coronavirus is a myth, and if it exists, it is only God who choose who will be infected by and die from the disease.

¹¹ Shabir Ahmad Lone and Ahmad Aijaz, "COVID-19 Pandemic – An African Perspective," *Emerging Microbes and Infection Journal* 9, 1 (2020): 1300-1308, <<https://www.tandfonline.com/doi/full/10.1080/22221751.2020.1775132>> (accessed 15 June 2020).

¹² Centres for Disease Control and Prevention, "Coronavirus Disease 2019 (COVID-19)," 2020.

¹³ Noko, "In Africa, Social Distancing is a Privilege few can Afford."

Many African people believe that Coronavirus can only be eradicated by faith, witchcraft or other traditional means.¹⁴ Some people even believe in conducting traditional rituals for cursing the COVID-19 evil spirit. Based on such mindset, people continue to disregard health guidelines provided by their government. Despite the knowledge of the ways Coronavirus spreads and the protection measures, people continue with the same lifestyles, practices, attitudes and behaviours. This type of reasoning makes it extremely difficult to convince people to accept that God has endowed human beings with the intelligence and capacity to make decisions for themselves and manage their lives.

Weak Health Systems

The continent's health system capacity has a big role in COVID-19 management and control. Weak healthcare systems are a huge constraint to African governments in fighting the pandemic. Limited resources coupled with corruption diverts resources that could be invested in health care systems. "COVID-19 possesses a great danger to African countries that do not have proper and robust health infrastructures."¹⁵ Africa, as the poorest continent in the world with a population of 1.2 billion, has no or inadequate intensive care units, few ventilators, hospital staff lacking protective equipment for personal protection. "While western nations are in panic reporting that thousands of ventilators will not be enough, countries in Africa report of few number: Zimbabwe, less than 20, Khartoum not more than 80, Nigeria with a population of 300 million, fewer than 500, the Central African Republic 3, Liberia does not have any ventilator."¹⁶

¹⁴ UNESCO, "Socio-Economic and Cultural Impact of COVID-19 on Africa: UNESCO Response," 2020, <https://en.unesco.org/sites/default/files/stand_alone_executive_summary_fin.pdf> (no access date).

¹⁵ Kaan Devecioglu, "Analysiss-COVID-19 Pandemics: Great Danger Awaits Africa," *Anadolu Agency*, 2 April 2020, <<https://www.aa.com.tr/en/africa/analysis-covid-19-pandemic-great-danger-awaits-africa/1789840>> (accessed 2 April 2020).

¹⁶ Ibid.

South Sudan, with a population of 12 million people, has only 4 ventilators and 24 ICU beds. This could mean South Sudan has just one ventilator for every three million people. It could also mean one ICU bed for 500,000 people that could be seriously overwhelmed if all the cases were to be treated there. The Central African Republic has 3 ventilators for its five million people. Burkina Faso has 11 ventilators, Sierra Leone 13. There are fewer than 2,000 functional ventilators in 41 African countries and the total number of available intensive care unit beds in 43 countries is less than 5,000. Ten countries in Africa are without ventilators.¹⁷ In practice, many of those founded infected by COVID-19 are sent back home for self-quarantine. The coming home of those infected to the overcrowded family and community could facilitate the spread of the pandemic to each person confine with the infected person.

The Africa Centre for Strategic Studies pointed out that the capacity of public health systems to test for COVID-19, especially in the densely populated areas, was essential for identifying, isolating and treating those infected.¹⁸ However, collecting cases rapidly, separating them to curtail transmission, treating them and tracing their contacts were not efficient as most governments and politicians in Africa were not really concerned about their citizens but rather on their own interests.¹⁹

Many African countries face serious challenge of availability of medical doctors. "Overall Sub-Saharan Africa has the lowest number of doctors. In

¹⁷ Bhavya Sukheja, "South Sudan has 4 Ventilators, 24 Beds for Population of 12 million People: Report," *Republic*, 19 April 2020, <<https://www.republicworld.com/world-news/rest-of-the-world-new/covid-19-crisis-south-sudan-has-4-ventilators-24-icu-beds-for-a-population-of-12-m-people>> (accessed 19 April 2020).

¹⁸ Africa Center for Strategic Studies, "Mapping Risk Factors for the Spread of COVID-19 in Africa."

¹⁹ Anne Soy, "Africa v Coronavirus: A Challenge for the Continent," *BBC*, 14 March 2020, <<https://www.bbc.com/news/world-africa-51873514>> (accessed 14 March 2020).

Zambia, the ratio is one doctor per every 10,000 people.”²⁰ It is not just the question of insufficient numbers of doctors, but it is also about their protection. Many health care workers are not protected as they lack personal protection equipment. They risk their lives in the service of their society. However, “protecting health workers is an essential critical priority for countries with relatively weaker health systems as those practitioners are integral to maintaining the capacity for these health services.”²¹

A huge number of people on the African continent have high prevalence of malnutrition, anemia, malaria, HIV/AIDS, Tuberculosis, hepatitis B or C, high blood pressure, diabetes that could compromise the immune system of the people and create high risk. The World Health Organisation estimated that there are 26 million people infected with HIV, 205 million with tuberculosis, 79 million with hepatitis B or C and 213 million with malaria in the African Region. The non-communicable diseases that include cardiovascular diseases, cancer, chronic respiratory diseases are also high in Africa.²²

The policymakers’ responses to the Covid-19 pandemic crises and its management remained a real challenge to African leaders. Some remarked that when the outbreak of Coronavirus was reported in December 2019 in Wuhan, China, African governments did not take the threat seriously as they thought that the virus would be confined to China. In spite of the fact that the majority of Western Countries banned planes from specific cities in Asia from landing at their airports, some African countries continued allowing flight from China landing at their airports due to unavoidable circumstances

²⁰ Anne Soy, “Lack of COVID-19 Testing Undermines Africa’s Success,” *BBC*, 27 May 2020, <<https://www.bbc.com/news/world-africa-52801190>> (accessed 27 May 2020).

²¹ Africa Center for Strategic Studies, “Mapping Risk Factors for the Spread of COVID-19 in Africa.”

²² World Health Organisation Africa, “COVID-19 Cases Coronavirus Disease Top 10,000 in Africa,” 7 April 2020, <<https://www.africa.who.int/news/covid-19-cases-top-10,000-in-africa>> (accessed 7 April 2020).

of big numbers of Chinese citizens working on infrastructure development in many African countries.²³

Economic Impacts of COVID-19

The COVID-19 pandemic will cause severe long-term damage to African economies. African countries effectively face economic crises that risk destroying economic, livelihoods, slowing the region's growth prospects for many years to come. According to Organisation for Economic Cooperation and Development (OECD), "prior to COVID-19, in 2019, the continent had already experienced a slowdown in growth and poverty reduction overall, although with large differences between countries. The current crisis could erase years of development gain."²⁴ Economists had estimated Africa's growth in 2020 at 3.9% which now drop to 0.4% in the best case to - 3.9% in the most severely hit cases. Experts also believe that growth in Sub-Saharan Africa might fall to between - 2% and - 5% in comparison to 2.4% in 2019.²⁵

Covid-19 has deprived oil exporting African countries of their main sources of income. Oil prices had a historical fall down, from USD 61.5 in December to USD 23.2 in March 2020, which is a major blow to a continent whose oil rent represent 4.5% of GDP. "Oil price fell by about 50% in the first quarter of 2020. In 2014 oil prices fell by 56 percent over seven months and the decline contributed to bringing GDP growth for Sub-Saharan Africa from 5.0 in 2014 down to 1.4% in 2016."²⁶ Other economists forecasted "the African countries whose share of oil in total exports is over 80% on average can be

²³ Chris Macoloo, "The Cultural and Social Challenges of Slowing the Pandemic in Africa," *Stanford Social Innovation Review*, 8 May 2020, <https://ssir.org/articles/entry/the_culture_and_social_challenges_to_slowing_the_pandemic_in_africa> (accessed 8 May 2020).

²⁴ OECD, "Policy Responses to Coronavirus (COVID-19). Covid-19 and Africa: Socio-Economic Implication and Policy Responses," 7 May 2020, <<https://www.oecd.org/coronavirus/policy-response/covid-19-and-africa-socio-economic-implications-and-policy-response>> (accessed 7 May 2020).

²⁵ Lone and Aijaz, "COVID-19 Pandemic – An African Perspective."

²⁶ OECD, "Policy Responses to Coronavirus (COVID-19). Covid-19 and Africa: Socio-Economic Implication and Policy Responses."

predicted to face difficult and uncertain economic periods.”²⁷ The economy of some African oil producing countries dependent upon crude oil would be seriously impacted by the COVID-19 pandemic due to lockdown that has resulted into lowering down of consumption and prices.²⁸

The African mining industry could also be seriously affected by COVID-19 because of decreasing demand for steel, iron ore, lithium and cobalt due to travel bans and lockdowns, and also because of a huge number of people employed in the mining industry working underground that create a working environment more exposed to COVID-19 and can become a catalyst for spread of the pandemic.²⁹

The travel restrictions and lockdown due to COVID-19 has not only resulted into a withdrawal of international investors, but also tourists. This is having a serious impact on tourism of some African countries such as South Africa, Kenya and Tanzania, which in turn affects prospects of economic recovery in those countries. It threatens direct and indirect employment. According to the OECD, “in a moderate COVID-19 scenario, the tourism and travel sector in Africa would lose at least USD 50 billion in revenues and 2 million in direct and indirect jobs.”³⁰ It is predicted the overall impact of COVID-19 on economies of the top tourist countries would be much more than for average African economies. “The tourist industry contributed to more than 10 of GDP of the following countries: Seychelles, Capo Verde, Mauritius, Gambia, Tunisia, Madagascar Lesotho, Rwanda, Botswana, Egypt, Tanzania, Namibia, Comoros and Senegal in 2019. In these countries, economic growth is expected to drop on average to a value of - 3.3% in 2020 whereas

²⁷ Devecioglu, “Analysiss-COVID-19 Pandemics: Great Danger Awaits Africa.”

²⁸ Lone and Aijaz, “COVID-19 Pandemic – An African Perspective.”

²⁹ Ibid.

³⁰ OECD, “Policy Responses to Coronavirus (COVID-19). Covid-19 and Africa: Socio-Economic Implication and Policy Responses.”

the impact will be much higher in countries like Seychelles, Cabo Verde, Mauritius and Gambia with an expected - 7% drops at least in 2020.”³¹

It has been underlined that almost two thirds of African countries are net importers of basic food and other crisis induced shortages that could gravely affect its availability. African industries import equipment from outside the continent. The most imported suppliers are Europe (35%), China, (16%) and the rest of Asia including India (14%). With COVID-19 disruptions of global supply chains, Africa will experience a decrease in the availability of final and intermediate imported goods.³² Many African countries could see rocketing food price inflation as supply chains are affected. 17 million people are projected to be in critical food security situation or worse, including 1.2 million in an emergency situation. “Overall, the combination of both health and security crises could tip more than 50 million people over the edge currently under pressure in food crisis situation.”³³ Experts also estimated millions more people could tumble into poverty, and the number of severely food insecure people could considerably augment. The developing world, low and middle-income countries will suffer the greatest consequences in term of extreme poverty. Though Sub-Saharan Africa so far has been relatively less impacted by the Coronavirus from a health perspective, it is likely to become the region hit hardest in term of extreme poverty. It could push 49 million people globally into extreme poverty in 2020, of which almost 23 million in Sub-Saharan Africa and 16 million in South Asia.³⁴

South Sudan imports 95.5% basic food commodities from Uganda. According to the report of the University of Juba established in collaboration

³¹ Ibid.

³² Ibid.

³³ Ibid.

³⁴ Daniel Gerszon Mahler, Christoph Lakner, Christoph Lakner & Haoyu Wu, “The Impact of COVID-19 Coronavirus on Global Poverty: Why Sub-Saharan Africa Might be the Region Hardest Hit,” *World Bank Blogs*, 20 April 2020, <<https://blogs.worldbank.org/opendata/impact-covid-19-coronavirus-global-poverty-why-sub-saharran-africa-might-be-region-hard-est-hit>> (accessed 20 April 2020).

with UNDP, the outbreak of COVID-19 and the government's measures have impacted negatively on market prices of basic food commodities in Juba Municipality. From the month of February to April 2020, prices of basic food items have seen sharp increase that made the majority of households not able to afford the purchase of basic food commodities: e.g. rice (40%) increase, sorghum (27%), and cooking oil (23%), with the least increase on beans (10%). This had also impacted on the number of meals per day. The research revealed that the number of meals per household was decreasing from February to April 2020 from two meals to one meal as households that were taking one meal increased from 33.4% to 62% and 58% of households had slept without a meal at least one day in a week. Since better nutrition contributes a lot to improved immune systems, such poor culture of feeding could put the poor population at high risk to succumb to the pandemic.³⁵

While many African countries might be able to respond immediately to some of these challenges, the health and economic shocks will quickly put Africa countries on an unsustainable debt path.³⁶ Based on the nine demographic dimensions of vulnerability, the Africa Centre for Strategic Studies reported that South Sudan, the Democratic Republic of Congo, Sudan and Nigeria are among the most exposed, mainly due to combination of factors such as existing armed conflicts, large displacement of populations in refugee camps, total population living in urban areas and low government transparency and trust in public institutions.³⁷

All these factors place African governments under substantial pressure. UN Chief, Guterres Antonio, stated that the Coronavirus pandemic has threatened the "hard-earned gain Africans have made throughout the

³⁵ University of Juba, *Gender and Socio-Economic Impact Assessments of COVID-19 Pandemic*.

³⁶ IMF, "Data Mapper: General Government Debt," 13 May 2020, <https://www.imf.org/external/datamapper/GGXWDG_NGDP@WEO/OECD/ADVEC/WEOWORD> (accessed 13 May 2020).

³⁷ Africa Center for Strategic Studies, "Mapping Risk Factors for the Spread of COVID-19 in Africa."

continent” and the world need to stand in solidarity with the people “now and for recovering better.” The global solidarity with Africa is an obligation and calls for international action to help strengthen Africa’s resilience against the pandemic and beyond.³⁸

Why are there less recorded cases of infection and deaths than initially thought

Many experts had predicted that the African continent could be hit hardest by the pandemic as being the poorest continent with the most vulnerable population. The African Centre for Strategic Studies stated “the most vulnerable countries may not be those with the earliest onset.”³⁹ Others said, “Even if the United States of America, Spain, Italy, Germany, France, The United Kingdom, China, Iran, Turkey, Belgium, The Russian Federation, Canada and Brazil are the most affected countries, Africa is expected to be the most vulnerable continent.”⁴⁰ Africa was cautioned to be the next epicenter of the Coronavirus and that “in the WHO best-case state of affairs, where governments introduced intense social distancing, once a threshold of 0.2 deaths per 100,000 people per week is reached, Africa would see 122 million infections, 2.3 million hospitalisations and 300,000 deaths. On 7 May a new study by the WHO Regional office for Africa estimated that up to 190,000 could die in the first year of the pandemic if containment measures fail.”⁴¹ Bill Gates had alerted, “if left unchecked in the region of crowded

³⁸ UN, “Stand in Solidarity to Preserve Africa’s Hard-Won Progress, Urges UN Chief,” *UN News*, 20 May 2020, <<https://news.un.org/en/story/2020/5/1064472>> (accessed 20 May 2020).

³⁹ Ibid.

⁴⁰ Lone and Aijaz, “COVID-19 Pandemic – An African Perspective.”

⁴¹ OECD, “Policy Responses to Coronavirus (COVID-19). Covid-19 and Africa: Socio-Economic Implication and Policy Responses.”

slums and flimsy health systems, the disease could claim a horrifying 10 million African lives.”⁴²

Despite the predictions and vulnerability of the African continent to COVID 19, the cases of infections and deaths appeared less than in other parts of globe. It has been recognized that despite crossing the threshold of more than 100,000 confirmed cases, the pandemic which has struck hard other parts of the world has appeared to take a different course in Africa. The cases have not grown at the same rate as in other regions. Africa has not experienced the high mortality seen in some parts of the world. On 22 May, there were only 3,100 confirmed deaths. By comparison, when cases reached 100,000 in the WHO European Region, deaths stood at 4,900.⁴³

Even if the official recorded number of COVID-19 infections and deaths cases appeared to be very low in comparison to the rest of the world, common citizens are aware that their societies have experienced a higher incidence of cases of infection and deaths than those officially announced by their governments because they witnessed not only many people had symptoms undeniable to be Coronavirus, but also witnessed extraordinarily high death levels which could be ascribed to Coronavirus. Numbers of death cases were exceptionally higher than the usual. Many people died at homes of very sudden illnesses but due to lack of testing kits, these cases disappeared unrecorded. “Due to inadequate testing, weak diagnostic capacity of COVID-19,”⁴⁴ the true number of cases of infection and mortality rate remain undetected which would make it difficult to predict the true epidemiology of COVID-19 on the African continent. The full scope of the

⁴² David Pilling, “Low COVID-19 Death Toll Raises Hopes Africa May be Spared Worst,” *Financial Times*, 28 April 2020, <<https://www.ft.com/content/e9cf5ed0-a590-4bd6-8c00-641d0c49e6e0>> (accessed 27 May 2020).

⁴³ World Health Organization Africa, “Africa COVID-19 Cases Top 100,000,” 22 May 2020, <<https://www.afro.who.int/news/africa-covid-19-cases-top-100-000>> (accessed 22 May 2020).

⁴⁴ Lone and Aijaz, “COVID-19 Pandemic – An African Perspective.”

pandemic remained inexact as cases are “underreported and accuracy of data collection varies considerably.”⁴⁵

The fact that the African continent witnessed the spread of Coronavirus much later than other continents was of their benefit. It prepared Africa to recognize the danger of COVID-19 and face the pandemic. The strong leadership of various governments in the continent deserves recognition as they took quick decisions to put in place certain measures such as the closing of international airports, complete lockdowns, travel bans, the closing of schools and universities, companies and offices, a ban on large gathering including religious, sports, social and other events, curfews and systematic quarantine to control the spread of the pandemic.

The experiences of useful lessons learned in 2014-2016 from the Ebola epidemic might have prepared Western and Central African countries in facing COVID-19 pandemic. The struggle to contain the Ebola virus has contributed extensively to the development of infrastructures and skills for laboratory testing, exchange of capacities across countries, partnerships among the technological agencies, international organisations and the private sector and public health awareness among the population.⁴⁶

The demography of the African continent seems to play significant role in reducing the number of infections cases and deaths in Africa compared to other continents affected by COVID-19. According to Lone et al (2020), only 4% of the African population is older than 65 which are as low compared to 37% in Eastern and South – Eastern Asia, and 29% in Europe and Northern America. COVID-19 affects older people rigorously with higher mortality rates than the younger population.⁴⁷ The Africa Centre for Strategic Studies

⁴⁵ OECD, “Policy Responses to Coronavirus (COVID-19). Covid-19 and Africa: Socio-Economic Implication and Policy Responses.”

⁴⁶ African Renewal, “WHO: How the lessons learned from Ebola are helping Africa’s COVID-19 Response,” 3 April 2020, <https://www.un.org/africanrenewal/magazine/who-how-lessons-ebola-are-helping-africa-covid-19-response> (accessed 3 April 2020).

⁴⁷ Lone and Aijaz, “COVID-19 Pandemic – An African Perspective.”

(2020) confirmed that approximately 80 percent of COVID-19 fatality had been among people over the age of 60. With 70% of African population under the age of 30, Africa's youth benefit might be a safeguard against the most devastating human costs of the disease on the continent.⁴⁸

Results

There is consensus among various experts that COVID-19 has changed completely the social cohesion of African societies. Many believe that things will never be the same again in the post COVID-19. However, African social nature of life and their mindsets continue to make Africans extremely vulnerable to COVID-19. The weak health system with low testing capacity, few doctors, ventilators and intensive care units will continue to make Africa vulnerable to future crises of this kind. The lockdown measures have led African countries to lose sources of their revenues, ranging from oil, minerals, trade, tourism, resulting in the stagnation of economic growth, with very serious consequences on the lives of their populations.

There is also a general consensus among the different experts that, although the African continent is not hit hardest by the COVID-19 as speculated, the continent has been hit hardest in term of health and economic viability, and Africa will struggle to recover from the crisis without international cooperation.

Conclusion

The findings of this research revealed that, although not hit hardest by COVID-19 as predicted by experts, the African continent remained very vulnerable to the pandemic. Africa may find it hard to re-emerge from crises without international support and cooperation. Just as Africa would have not done without global response, it remained a challenge to the continent

⁴⁸ Africa Center for Strategic Studies, "Mapping Risk Factors for the Spread of COVID-19 in Africa."

to seek the collaboration and cooperation of the international community to face and survive the health and economic shocks. Coordination of action that calls for international cooperation to ensure that Africa controls the pandemic and put more reliable health systems in place is indispensable. While addressing the immediate impacts of the COVID-19 pandemic, the focus on recovery remains central to the response and that development policy operation focusing on supporting governments to mitigate the effects of the COVID-19 crisis and promoting reforms will create the conditions for economic recovery.

Recommendations

- 1) Promoting international cooperation with Africa to increase investment in science, technology and innovation to move Africa into the future, and training teachers in skills and capacity in information and communication technology to provide education to learners online, is fundamental.
- 2) Strengthening health systems in Africa is urgent.
- 3) Effective implementation of the African Continental Free Trade Area (ACFTA) and the African Union's productive transformation agenda is fundamental to strengthening regional value chains, reduce vulnerability to external shocks, advance the digital transition and build economic resilience against future crises.
- 4) Accelerating the implementation of a pharmaceutical manufacturing plan of Africa and the establishment of an African medicine agency by prioritising investments for regulatory capacity development.
- 5) Strengthening media ability to communicate information, disseminating messages around COVID-19 and accelerating the fight against misinformation is fundamental.
- 6) Commitment of African governments to meet the goal of at least 1% of GDP in Research and Development as only three countries in the continent spending at around 0.8%.
- 7) Strengthening the capacity of the vulnerable groups through expanding cash transfer programmes to provide an effective way to improve poor

people's lives, ensure decent living for all is indispensable on the African continent.

8) Training and developing targeted young people to prepare them for future challenges of a similar nature.

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L'Afrique face à la pandémie du Coronavirus: Subir ou agir. De la contribution des savoirs endogènes

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Résumé: *La pandémie coronavirus constitue une menace sans précédent dans l'histoire de l'humanité. Dès l'apparition du virus, les experts prédisaient le chaos pour les pays les moins avancés en matière sanitaire. Pourtant, contre toute attente, l'Afrique reste le continent le moins touché. Mais pour combien de temps? L'idée soutenue dans cette communication est que, d'une part, sans perspective médicale urgente, le vieux continent reste plus que vulnérable sur deux axes majeurs: la culture et l'économie. D'autre part, il sera question de montrer qu'avec l'appui technique des institutions internationales comme l'OMS, l'ONU et l'UA, l'Afrique peut apporter sa contribution à la lutte contre le Coronavirus, à base des savoirs endogènes.*

Mots clés: *Coronavirus, Afrique, vulnérabilité, savoirs endogènes, traditions, recherches, Union africaine.*

Introduction

Depuis novembre 2019, le Coronavirus menace l'humanité en général et l'Afrique en particulier. Curieusement et contre toute attente, l'Afrique reste le continent le moins touché par le Covid-19 du point de vue du nombre de décès et de cas de contaminés¹ ou testés positifs: «On fait le point ce lundi 20 juillet 2020: Le coronavirus touche 14.665.793 personnes dans le monde et est responsable de la mort d'au moins 610.781 individus»². A la même date, l'Afrique compte «542.563 de cas avec 12.466

¹ Jeune Afrique – santé, «Coronavirus en Afrique: une carte pour suivre au jour le jour l'avancée de l'épidémie», <https://www.jeuneafrique.com/910230/societe/> (consulté le 10 juillet 2020).

² Julie Minetti, «Coronavirus: la situation dans le monde. Les pays les plus touchés», <https://www.sortiraparis.com/actualites/coronavirus/articles/224514> (consulté le 20 juillet 2020).

de décès»³. Pourtant, les pays considérés comme les plus avancés en matière sanitaire sont plus gravement touchés «États-Unis: 3.898.501 cas recensés, Brésil: 2.098.389, Inde: 1.119.307, Russie: 771.546, Espagne: 307.335, Royaume-Uni: 294.792»⁴. Il en est de même pour les cas de décès: «États-Unis: 143.289 morts, Brésil: 79.488, Royaume-Uni: 45.300, Mexique: 41.658, Italie: 35.045, France: 30.155, Espagne: 28.420 morts, Inde: 27.514»⁵. Les chiffres sont donc sans équivoque. L'Afrique est encore très loin d'entrer dans le chaos tant prédit même des experts. Néanmoins, même s'il n'y a pas de particularité alarmante par rapport aux morts, sans une perspective médicale urgente, le vieux continent reste plus que vulnérable sur deux axes majeurs: la culture et l'économie.

Du point de vue culturel, l'Afrique risque d'être victime de ses traditions. Ainsi, profitant de l'ignorance de la grande majorité des villageois, marabouts, guérisseurs et devins s'adonnent à la vente des remèdes et décoctions de toute sorte, soi-disant qu'il s'agit d'un médicament miracle contre le coronavirus. Lors des fêtes ou rites traditionnels, les villageois utilisent en commun des instruments comme les chalumeaux pour la boisson. La distanciation et le confinement sont quasi-impossibles. Plus grave, le manque d'eau dans les villages freine les efforts pour la prévention contre la pandémie. Sur le plan économique, l'Afrique vit de l'importation (produits manufacturés) et l'exportation (matières premières) de la Chine et l'Union Européenne. La fermeture des frontières pèse donc lourdement sur l'économie de l'Afrique. L'économie, l'éducation, la santé, le tourisme, etc., tous ces secteurs sont touchés par le Covid-19, d'où une vulnérabilité sans précédent pour le continent.

³ Alain Jocard, «Coronavirus dans le monde: l'Afrique inquiète l'OMS, situation critique à Hongkong», https://www.lemonde.fr/international/article/2020/07/20/coronavirus-dans-le-monde-l-acceleration-de-l-epidemie-en-afrique-inquiete-l-oms_6046778_3210.html (consulté le 10 juillet 2020).

⁴ Julie Minetti, «Coronavirus: la situation dans le monde. Les pays les plus touchés», <https://www.sortiraparis.com/actualites/coronavirus/articles/224514> (consulté le 20 juillet 2020).

⁵ Ibid.

Dès lors, que peut faire l'Afrique contre le Coronavirus pour éviter le chaos et des ravages de plus, après le paludisme et le VIH-SIDA, Ebola? Quelles sont les contributions que peuvent apporter les savoirs endogènes africains pour éviter la catastrophe? Telle est la problématique à aborder à travers ce projet de communication qui se situe dans l'axe de l'éthique et philosophie politique. M'appuyant sur des résultats des recherches de terrain dans les cours de «savoirs traditionnels africains et cultures et civilisations africaines», la thèse défendue est qu'avec l'appui technique des institutions internationales comme l'OMS, l'ONU et l'UA, l'Afrique peut apporter sa contribution à la lutte contre le Coronavirus, à base des savoirs endogènes. Cette contribution à la réflexion entre dans l'axe de recherche d'éthique et de philosophie politique, suit une méthode analytique et critique.

1. L'Afrique face au Covid-19: une exception ou une réalité comme ailleurs

Le contexte africain est à la fois une exception et une réalité. Comme exception: avec l'apparition du Covid-19, en analysant les ravages que ladite pandémie causait dans les pays les plus avancés en matière de santé, de l'ignorant jusqu'aux érudits, tout le monde pariait et prédisait une situation chaotique en Afrique. Même le directeur de l'Organisation Mondiale de la Santé s'en inquiétait publiquement, en mettant en garde l'Afrique pour laquelle il craignait une catastrophe humanitaire sans précédent. C'était sans compter sur les mystères de la nature comme y croient beaucoup d'Africains. En effet, l'Afrique compte exceptionnellement moins de morts et de contaminés du Covid-19, très loin derrière les continents les plus riches et les plus avancés en matière de santé.

Les chiffres sont sans équivoques. Il y a une exception en ce qui concerne l'Afrique. La question qui reste est de savoir à quoi est due cette exception. Plusieurs thèses s'affrontent, allant des explications farfelues aux arguments et hypothèses plus rationnels. Ainsi, à l'exception africaine face au coronavirus, les fanatiques des mouvements de réveil donnent des arguments qui frôlent la superstition, défendant l'idée d'une protection

divine ou surnaturelle. Une telle idée est moins convaincante et plus critiquable car un dieu qui laisserait certains mourir en masse et d'autres protégés par sa main serait un dieu injuste. Pour d'autres, moins superstitieux mais peu empiristes, le miracle africain face à la sévérité du Covid-19 serait dû à un facteur naturel. Ils avancent l'idée d'un climat très chaud et incompatible à la survie du virus. Pour eux, dans des situations pareilles, la nature joue un rôle important quant aux facteurs favorisant ou aux barrières. Ainsi, le facteur «climat froid» favoriserait la survie et l'expansion du coronavirus, tandis que le facteur «climat chaud» serait défavorable au virus. L'exemple évoqué par analogie est celui du paludisme. Cette maladie décime chaque année des populations en Afrique alors que l'Europe en est épargnée. La différence étant due au fait que le vecteur de la maladie, le moustique, ne survie pas au froid et trouve le terrain propice pour sa reproduction et son expansion en Afrique. Pour les scientifiques enfin, surtout ceux qui ne résident pas sur le continent africain, ils sont convaincus qu'il n'y a rien d'exception. Pour certains d'entre eux, le nombre moins élevé de morts et de contaminés ne relève que d'une manipulation des chiffres par les Etats. Pour d'autres, il s'agit d'un manque de matériel adéquat pour tester le virus ou au manque de compétences nécessaires dans le dépistage du virus.

Quoi qu'il en soit, la réalité est là et indiscutable. A neuf mois de l'apparition du virus, l'Afrique fait exception quant au nombre de contaminés et de morts suite au Covid-19. Seulement, cette réalité miraculeuse cache une autre qui lui est opposée: celle d'une bombe à retardement. Au début de la pandémie, les Etats unis se targuent d'être un pays béni de Dieu, à cause d'un nombre réduit de cas de coronavirus. Cela n'a pas duré longtemps, et plus grave encore, à la période du 20 juillet, le continent américain en général, et les Etats unis en particulier, sont les régions les plus gravement touchées par le virus. Une interrogation alors: que se passera-t-il un jour, si le virus prenait un tournant en passant à une vitesse supérieure en Afrique?

Sans être capable de faire des prédictions, tout laisse croire que la situation serait catastrophique sinon chaotique, et cela pour plusieurs raisons.

2. Prévention et soins: un contexte paradoxal face à une pandémie

En attendant un médicament et probablement un vaccin, plusieurs mesures, émises par les scientifiques et validées par l'Organisation Mondiale de la Santé, permettent d'éviter les dégâts. Certaines concernent la prévention et d'autres les secours de base pour celui qui est déjà atteint par le virus.

2.1. L'eau et le lavage des mains comme premier précepte: une pénurie dans l'abondance

Que ça soit le miracle ayant épargné et épargnant encore l'Afrique face à la virulence du Coronavirus, certaines traditions africaines constituent l'un des facteurs favorisant la propagation du virus, et l'on peut craindre le pire avec un retournement de la situation. Quelques exemples suffisent pour comprendre la réalité. En effet, si la prévention constitue la première étape pour vaincre le virus, l'Afrique se trouve dans une très mauvaise situation. En effet, selon l'Organisation Mondiale de la Santé et les spécialistes sanitaires, le lavage des mains constitue la première étape de la prévention contre le Coronavirus. Or, ce précepte n'existe pas dans les traditions africaines. La mentalité fortement répandue est qu'on ne se lave les mains pour rien (ntawukarabira ubusa). Il est surprenant de constater que même dans les milieux considérés comme hautement cultivés (écoles, bureaux), ce précepte n'est pas respecté. Parfois parce que les gens l'ignorent, parfois par manque d'eau. En plus, dans les villages africains, la célébration traditionnelle de certaines fêtes ou rites se fait en groupe. Les repas et les boissons sont partagés dans les mêmes ustensiles, avec les mêmes chalumeaux, ce qui renvoie à une proximité très rapprochée, facteur de contamination du virus.

Au-delà des traditions, même si le lavage des mains venait d'être instauré comme une obligation pour le besoin de la cause, l'eau est un produit rare

dans plusieurs coins du continent. Ainsi, le rapport du département des affaires économiques et sociales des Nations Unies montre que «seulement un Africain sur quatre a un accès à une source sûre d'eau potable»⁶. Et de préciser encore que: «En Afrique subsaharienne, seulement 24% de la population a accès à une source sûre d'eau potable et les installations sanitaires de base – non partagées avec d'autres foyers – sont réservées à 28% de la population»⁷. Cela ne pose pas seulement des problèmes au niveau des familles. Il s'agit d'un problème public de grande envergure car, le manque d'infrastructures de distribution et d'assainissement d'eau qui permettent aux populations d'avoir accès à l'eau potable touche également les écoles, les hôpitaux, les marchés, voir les lieux de culte. Cela montre que dans le cas où la pandémie s'avérerait dangereuse, il y aurait trop de contaminations en un laps de temps. La situation s'avérerait chaotique suite à l'insuffisance des mesures adéquates de lutte contre la pandémie.

Pourtant, «avec 17 grands fleuves et 160 grands lacs qui l'irriguent»⁸, comme le relève Jean Bosco Bazié, «le continent africain dispose pourtant de ressources abondantes estimées à plus de 5.400 milliards de m^3 par an.»⁹ Cela montre encore que si jamais la pandémie devrait faire plus de ravages, la responsabilité incombe plus aux pouvoirs publics qui ne prennent pas des mesures appropriées pour prévenir le danger. Il est bien vrai que certains gouvernements ont déjà pris des mesures allant dans le même sens comme le Burundi qui envisage la réduction du prix du savon et de l'eau, mais cela ne suffit pas pour que le combat contre le virus soit mené efficacement. Ces mesures vont profiter à l'élite minoritaire et les citoyens. Pour plus

⁶ Nations Unies, «Programme mondial de l'UNESCO pour l'évaluation des ressources en eau 2019», *Le Rapport mondial des Nations Unies sur la mise en valeur des ressources en eau 2019: Ne laisser personne pour compte*, Paris, UNESCO, 2019, <https://fr.unesco.org/water-security/wwap/wwdr> (consulté le 10 juillet 2020).

⁷ Ibid.

⁸ Jean Bosco Bazié, «Accès à l'eau: l'Afrique entre abondance et pénurie», Dans *Après-Demain*, 2014/3-4 (N° 31-32, NF): 28-29, *Cairn info*, <https://doi.org/10.3917/apdem.031.0028> (consulté le 17 juillet 2020).

⁹ Ibid.

d'efficacité, les Etats africains devraient fournir plus d'efforts pour que même les populations rurales puissent accéder à l'eau potable, et surtout les écoles, les hôpitaux, les centres de santé, les marchés et les lieux de culte qui accueillent régulièrement un grand nombre de gens plusieurs fois dans la semaine.

2.2. L'impossibilité du confinement

L'autre méthode de prévention contre le Coronavirus est le confinement. En Afrique, un dilemme apparaît avec cette pratique: «faut-il mourir de faim ou de coronavirus?»¹⁰. En effet, le grand problème auquel sont confrontées la majorité des populations africaines, surtout celles qui vivent dans les villages et ghettos, c'est qu'ils vivent au jour le jour. L'individu mange parce qu'il est sorti de chez lui le matin, le villageois pour aller dans le champ ou au chantier, le citadin du ghettos pour avoir sorti son vélo ou sa moto taxi ou son touk-touk, de même que le convoyeur de bus, le garçon de course, ... Il en est de même pour le fonctionnaire de l'Etat qui, même avec des moyens financiers à sa disposition car touchant un salaire mensuel, est obligé de sortir de chez lui pour aller acheter des vivres au marché. Les villes africaines ne disposant pas de services de livreurs à domicile, même ceux qui ont des moyens risquent d'être débordés, ce qui conduirait à outrepasser la mesure. Pour qu'un confinement soit efficace donc, l'Etat africain doit subvenir aux besoins de la population, en donnant des vivres aux personnes confinées. Or, aucun Etat ou presque ne dispose de potentialités pour réaliser cet exploit.

Sur le plan pratique, deux facteurs rendent le confinement impossible en Afrique, à l'exception de quelques quartiers ou villes chics. L'un des deux facteurs est l'habitat. Celui-ci est très dispersé, disséminé sur des collines et montagnes, contrairement aux quartiers européens regroupés ensemble sur

¹⁰ Bruno Parmentier, «La faim plus dangereuse que le Coronavirus», *France Culture*, <https://www.franceculture.fr/emissions/radiographies-du-coronavirus> (consulté le 19 juillet 2020).

des avenues, faciles à contrôler. L'autre facteur est que beaucoup d'Africains mangent parce qu'ils sont allés travailler ou récolter dans leurs champs. Même si cela était possible donc, confiner signifie alors donner à manger aux gens, or très peu des Etats sont capables de réaliser cette exigence. Quant au port du masque, à moins que cela soit pris en charge par l'Etat, sinon beaucoup d'Africains sont incapables de s'en procurer, du moment que beaucoup d'entre eux peinent même à trouver de quoi mettre sous la dent.

3. Des conséquences néfastes et un avenir incertain

Jusque pour le moment, très peu d'Africains se soucient du danger que représente le coronavirus. L'opinion répandue est que le paludisme, le Sida, l'Ebola, C'est plus grave que le Covid-19, mais on vit encore.

3.1. Entre superstition et prise de Conscience

L'un des grands problèmes auxquels l'Afrique risque de faire face à tout moment est celui lié à la sous-estimation des conséquences de la pandémie. C'est sans doute cette situation qui fait que le nombre réduit des contaminés ne convainc pas les scientifiques, tant Africains qu'internationaux, voir ceux de l'Organisation Mondiale de la Santé. Il y a lieu de suspecter que soit on ne fait pas suffisamment de dépistages, soit on masque les résultats de ces derniers. Dans les deux cas, les risques sont redoutables. La pandémie va s'aggraver à tel point qu'on risque de se retrouver devant une catastrophe humanitaire de grande envergure. L'on se demande ce que peut l'Afrique au cas d'un tel scénario, avec ses infrastructures sanitaires quasi-inexistantes, ou mal équipées et sans personnel suffisamment qualifié, quand on sait que même les pays les plus avancés en la matière comme ceux de l'Union européenne ou les Etats Unis d'Amérique ont été dépassés. Et cela n'est qu'une simple hypothèse. Plusieurs cas sont de plus en plus reportés où le nombre de contaminations passant du double, triple, ... en moins d'une semaine. Cela montre bien à

quel point le risque d'une catastrophe humanitaire liée au Covid-19 reste très élevé.

L'autre grand problème qui risque d'aggraver la situation en Afrique est le risque de tomber dans la superstition et dans le charlatanisme. D'une part, en référence aux croyances traditionnelles, des pratiques magiques et de la sorcellerie prétendent avoir des remèdes miracles, soit pour la protection contre le virus, soit pour sa guérison. C'est ainsi que des décoctions de tous genres sont proposées aux gens qui consultent les guérisseurs. D'autres apprentis scientifiques prétendent avoir trouvé des herbes miracles. C'est dans ce sens que, depuis l'apparition de la pandémie, on a observé la flambée des prix de certaines herbes et plantes (gingembre, fungus, ...), de même que l'inondation du marché par certaines herbes inhabituelles dans le commerce, comme certaines variétés d'eucalyptus, des tisanes, etc.

D'autre part, suite à la forte prépondérance des mouvements messianiques et des églises de réveil fortement répandues et tirant l'origine dans le monde anglo-saxon et aux Etats Unis en particulier, il y a des discours, et parfois émanant des hommes politiques de haut niveau, qui tendent à affirmer que l'Afrique est épargnée du coronavirus par une main divine. Ils vont jusqu'à justifier cela en affirmant que le virus est un châtement divin contre l'occident en raison de la légalisation des pratiques comme l'homosexualité et l'avortement, ce qui n'a aucun fondement rationnel. Tout cela renforce l'ignorance de la population africaine à grande majorité analphabète, quant à la prévention contre le virus. Il en est de même que l'ignorance qui entoure ceux qui ont déjà attrapé le virus. Au lieu d'aller consulter le médecin, la majorité se contente des prières des pasteurs et d'autres des guérisseurs. Cela a pour conséquence d'accroître le taux de contamination de la pandémie.

Par ailleurs, la pauvreté qui sévit en Afrique, amplifiée par la corruption et l'incompétence dans le domaine de la santé, ont renforcé la médecine traditionnelle. Ainsi, la pandémie fait des affaires des guérisseurs

traditionnels, de vrais comme des charlatans. C'est ainsi que dans chaque pays, plusieurs individus ou groupuscules d'individus font chaque jour la promotion de ce qu'ils appellent remèdes miracles, qui ne sont que des décoctions de tout genre. Et les gens s'y adonnent à cœur joie, sans penser aux conséquences. Et, plus grave encore, cela semble être encouragé par des pouvoirs publics qui ne prennent aucune mesure pour décourager et stopper la pratique.

Cela prouve donc qu'en cas d'une forte contagion, l'Afrique fera face à une situation incontrôlable, ou même à une mutation du virus, ce qui aurait une conséquence dramatique pour l'humanité toute entière, car, sans vaccin ni médicament, il y a probablement risque d'un cycle vicieux même chez ceux qui pensaient avoir circonscrit et maîtrisé la pandémie. Reste alors la question de savoir comment l'humanité peut éviter ce risque de catastrophe présumée?

3.2. D'une économie moribonde au chaos

Aucun pays africain n'est stable pour résister économiquement au confinement prolongé. Ceci car la quasi-totalité des pays du continent vivent de l'exportation des matières premières et de l'importation des produits manufacturés. Du point de vue interne, un confinement prolongé priverait les Etats d'une main d'œuvre pour l'extraction des matières premières, cela se faisant d'une manière traditionnelle ou semi-moderne dans la plupart des cas. Sur le plan externe, la fermeture des frontières entre les Etats prive les pays africains l'accès aux marchés mondiaux pour vendre leurs matières premières qui est la principale source de revenus.

Par ailleurs, le confinement a arrêté ou réduit l'aide internationale aux pays africains. Plusieurs projets ont été arrêtés ou suspendus. Plusieurs organisations non gouvernementales internationales ne peuvent plus venir directement en aide aux populations vulnérables. Pourtant, c'était là l'un des soutiens les plus importants pour les populations africaines, surtout

rurales, vivant de l'agriculture, de l'élevage et des petits métiers. Il y aura donc inévitablement une grande rechute de niveau de vie en Afrique.

L'autre secteur qui est dramatiquement affecté par le coronavirus est celui de l'éducation. Avec le confinement, plusieurs programmes d'échange qui étaient très profitables aux Africains, tant étudiants que chercheurs, ont été suspendus. Impossible donc de bénéficier des bourses comme Erasmus mundus, Angle, Ares, Vlir-Uos, etc. il en est de même pour l'échange d'expertise ou l'accompagnement des recherches. Il devient impossible de continuer la coopération en matière d'enseignement et de recherche suite à l'impossibilité des mobilités. Et c'est l'Afrique qui en paie le lourd tribut car c'est elle qui a tant besoin de cette assistance. Et l'économie et le développement du continent en sera affectés dans les années à venir. Ainsi, le coronavirus va donc laisser une plaie béante dans l'économie africaine, ce qui aura des conséquences à long terme sur les populations africaines dans tous les domaines de la vie tant publics que privés.

4. L'Afrique dans le combat contre le Covid-19: l'apport des savoirs endogènes

Dire que l'Afrique représente une menace de l'humanité face à la pandémie du coronavirus n'est qu'une présomption. Il s'agit d'une hypothèse qui peut s'appliquer à tout continent comme à un certain moment la Chine a été accusée d'avoir cachée la vérité sur le virus, et qu'elle aurait de ce fait contribué à son expansion. Ce qui est important pour le moment, c'est de se demander si l'Afrique peut apporter une contribution dans la lutte contre la pandémie, et si oui laquelle. En effet, l'Afrique a été depuis longtemps considérée comme un continent inapte en ce qui concerne la recherche scientifique. Cela se justifiant par le manque d'infrastructures adaptées à la recherche (centres de recherches, bibliothèques et laboratoires équipés), chercheurs qualifiés (exiles, fuite de cerveaux), manque de la volonté des dirigeants, etc.

Néanmoins, avec la mondialisation, on observe une certaine dynamique quant à l'évolution de la recherche scientifique. Beaucoup d'étudiants Africains vont aujourd'hui faire des études dans tous les coins du monde. Des professionnels vont également se spécialiser partout, et dans les grands centres et laboratoires de recherches. Avec la libéralisation de plusieurs secteurs, des hôpitaux privés et de renom commencent à émerger, ce qui va avec l'émergence des grands centres et laboratoires de recherches. Le seul problème auquel ils sont confrontés est le manque de moyens. C'est ici en effet que se situe la véritable problématique en ce qui concerne l'apport de l'Afrique dans la lutte contre le Covid-19.

Du point de vue technique, l'Afrique peut, comme tous les autres continents, apporter sa contribution dans la lutte contre le Covid-19, à travers les recherches scientifiques, et les atouts sont nombreux. D'abord, il s'agit d'un continent dont la faune et la flore sont très florissantes et revêtent une particularité qu'on retrouve nulle part ailleurs, à cause de son climat et son sol encore naturel (non encore contaminé par les engrais chimiques et les pesticides), ses forêts tropicales regorgent une grande variété de plantes médicinales avec plusieurs vertus non encore explorées. D'ailleurs un grand engouement vers un retour à la médecine traditionnelle s'observe partout en Afrique. Cela pourrait favoriser les recherches autour du Coronavirus si jamais il y avait suffisamment de moyens. C'est le cas de la polémique qui a été déclenchée par le Covid-Organics, remède malgache à base des plantes.

Logiquement, la polémique n'avait aucune raison d'être. L'Organisation Mondiale de la Santé (OMS) devrait plutôt prendre la situation en main, en octroyant des moyens et en fournissant des experts en la matière au Madagascar, afin de faire toutes les études nécessaires pour vérifier l'efficacité du remède et améliorer si c'est nécessaire. Quoi qu'il en soit, cela aurait été une action plus humanitaire, car, même sans en faire un objet de médias, le remède est consommé en Afrique, et, les guérisons sont

observées, dans l'ignorance des conséquences bien sûr¹¹. Il faut noter que l'OMS s'est prononcée contre le Covid-Organics et contre tous les autres remèdes à base des plantes contre la prévention et la guérison du virus, assurant que des médicaments sont encore à l'essai et qu'il n'existe ni vaccin ni médicament pour l'instant. En référence aux rapports historiques entre l'Afrique et le reste du monde, des réactions n'ont pas tardé, accusant l'OMS de jouer la carte du dénigrement envers l'Afrique. Un bon nombre d'Africains pensent que si le remède avait été découvert dans un pays autre que celui d'Afrique, il aurait été homologué. C'est pour cela que beaucoup de pays Africains l'ont commandé¹².

Sans entrer dans la polémique, il est important de savoir qu'un axe important des savoirs traditionnels africains a développé un grand chantier de médecine traditionnelle. Plusieurs maladies sont soignées traditionnellement en Afrique.

Conclusion

Il s'observe en Afrique, un grand engouement pour la revitalisation des savoirs endogènes en général, et la médecine traditionnelle en particulier. Et cela ne concerne pas seulement les populations paysannes. Même des centres de recherche et des laboratoires des universités commencent à manifester de l'intérêt envers cet axe de recherche. Des groupements et des associations des tradipraticiens, des centres de santé de médecine traditionnelle prospèrent partout en Afrique. Ce qui se faisait en cachette commence à se pratiquer publiquement. La médecine traditionnelle, par le rejet de l'image caricaturale de sorcellerie et magie, s'impose aujourd'hui

¹¹ José Belalahy, «Covid organics: des effets indésirables rapportés par les internautes», <http://www.midi-madagasikara.mg/societe/2020/04/28/covid-organics-des-effets-indesirables-rapportes-par-des-internautes/> (consulté le 15 juillet 2020).

¹² R. Davis, «Covid-Organics: Andry Rajoelina approvisionne les 15 pays de la CEDEAO», <http://www.midi-madagasikara.mg/politique/2020/05/02/covid-organics-andry-rajoelina-approvisionne-les-15-pays-de-la-cedeao/> (consulté le 15 juillet 2020).

comme une médecine à part entière. D'ailleurs, elle change de visage, en faisant une synthèse entre tradition et modernité.

Depuis longtemps, les Africains savaient soigner certaines maladies qui ne demandent pas une expertise pour être détectées (examens de laboratoires) comme le SIDA, le Cancer, et autres. Un bon nombre d'Africains savent soigner parfaitement la plaie, les fractures, les morsures de serpents, la toux, les diarrhées, l'abcès, ... Certains initiés sont spécialisés dans les domaines des poisons. Il suffit d'ingurgiter certaines décoctions préparées à cet effet pour qu'à partir des crachats ou vomissures, l'initié détecte quel genre de poison avalé, quel est l'état d'avancement et quel remède faut-il pour soigner. Et tout cela à partir des ingrédients récoltés dans la nature, à partir de la flore et la faune des forêts. Là ce ne sont que quelques exemples.

L'une des grandes barrières de cette médecine est en effet la mesure. Il y a des maladies dont la consultation exige des instruments ultra-modernes comme les cancers, les hépatites, les virus comme le Sida, le Covid-19, etc. Là, les savoirs endogènes n'en peuvent pas grand-chose. Il en est de même en ce qui concerne la quantité de médicaments à prendre et la période de médication. De nos jours, la médecine traditionnelle africaine, en se ralliant à la modernité, a franchi un pas en avant et tend à apporter une solution à ce problème. Les guérisseurs traditionnels ou tradipraticiens sont aujourd'hui des gens qui ont fait des études universitaires, surtout les filières médicales. Ils demandent donc aux malades d'aller d'abord faire des examens dans des centres spécialisés, et ils vont leur donner des médicaments conformes à leurs maladies. A partir des laboratoires modernes, ils établissent des quantités de médicaments équivalentes aux doses de la médecine moderne. Cela a un atout bénéfique car, soigner au naturel, le patient évite l'intoxication des produits chimiques des laboratoires pharmaceutiques. Par ailleurs, l'on remarque de plus en plus des guérisons des maladies dont la médecine moderne ne parvient pas à guérir comme les hépatites, les poisons, etc.

Plus intéressant encore, les chercheurs Africains, en joignant le traditionnel au moderne, viennent de faire un exploit en ce qui concerne une pandémie récurrente, plus meurtrière que le Sida et le coronavirus, il s'agit du paludisme (malaria). En effet, il s'agit de la maladie qui tue beaucoup d'Africains par an, toutes générations confondues. Jusqu'à ce jour, si plusieurs thérapies existent contre la maladie, elle reste plus que mortelle, du fait du vecteur qui en est la cause, le moustique (anophèle femelle). Du fait du climat favorable à sa rapide reproduction, le moustique reste invincible sur le continent, et un individu peut être contaminé plusieurs fois en une année. Ainsi, le remède efficace aurait pu être le vaccin, ce qui, en ce jour, n'a pas encore été réalisé. Même l'Organisation Mondiale de la Santé, sans s'avouer vaincue, a investi dans une voie de privilégier plutôt la prévention, en subventionnant la moustiquaire. Un tel instrument n'est efficace que passagèrement. Il ne protège que l'homme quand il va dormir, soit un quart de jour. Or, la majorité des populations africaines passent les trois-quarts de temps du jour soit dans les champs, dans la nature ou sous l'arbre, endroits où sévissent les moustiques. Ainsi, la portée de la moustiquaire reste limitée, même si son importance reste non négligeable.

En faisant la synthèse entre tradition et modernité, les chercheurs Africains sont prêts à vaincre la pandémie. De nos jours, il existe des plantes, sélectionnées par des chercheurs, dont l'odeur éloigne le moustique des habitations. Il suffit de les planter près de la maison et le moustique ne peut pas s'en approcher. D'autres, par des méthodes modernes, ont fabriqué, à partir des herbes de la forêt, des huiles et crèmes qui, quand l'individu les oint, le moustique ne peut pas le piquer. Cette méthode s'avère très efficace car pouvant protéger l'individu à tout moment et en tout lieu. Il y a donc espoir que dans quelques années, le paludisme ne sera plus une pandémie pour l'Afrique.

C'est dans cette perspective que la lutte contre le coronavirus doit s'inscrire. En Afrique, il existe des remèdes pour soigner la grippe normale. Et chaque région, par rapport à ses traditions, sa faune et sa flore, a développé ses

propres méthodes contre ce virus périodique. C'est pour cela que les Africains ne trouvent pas une urgence à la recherche du vaccin ou du médicament contre ce virus qui ne s'est jamais avéré être une pandémie sur le continent. Comme il en a été le cas pour le Madagascar avec le Covid-Organics, les Africains peuvent bien s'adonner à la recherche, avec leurs savoirs endogènes, afin de chercher un remède efficace contre le coronavirus.

Pour que cela soit possible, il y a des préalables, à la fois pour les chercheurs, les pouvoirs publics et les organismes des Nations Unies en général, et l'Organisation Mondiale de la Santé en particulier. Concernant les chercheurs Africains, ils doivent d'abord prendre conscience du danger que représente la pandémie pour leur continent. Ensuite, ils doivent unir leurs efforts et savoirs pour travailler en équipe, en échangeant souvent les résultats de leurs recherches. Enfin, ils doivent éviter d'être complexé en face de leurs collègues des autres continents et défendre avec perspicacité leurs travaux.

Concernant les pouvoirs publics, ils doivent cesser d'être indifférent et laxistes pour ne pas se réveiller dans le chaos. Les mesures concernant l'accessibilité des populations à l'eau, la subvention et le port des masques dans les lieux publics, l'équipement des centres sanitaires et le renforcement des capacités des agents de santé en matière de prévention et de soins contre le coronavirus devraient être prises et assorties de sanctions en cas de refus. Ils doivent également sensibiliser les populations pour un changement de mentalité et la prise de conscience du danger qu'ils courent.

Quant aux organismes internationaux en général et l'OMS en particulier, ils doivent éviter les spéculations de leurs bailleurs ainsi que celle des scientifiques qui travaillent au profit des firmes pharmaceutiques. L'OMS doit encadrer au même titre les recherches qui se montrent plus prometteuses, sans privilégier un continent au détriment d'un autre. Le cas

du Covid-Organics méritait par exemple une attention plus soutenue que celle que l'on observe jusqu'aujourd'hui.

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Global COVID-19 Pandemic Management Regimen in Africa: Same problem, different consequences

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Abstract: *In response to the outbreak of the coronavirus disease in late 2019 (COVID-19), infected and affected countries of the world, especially in Europe, the Americas and Asia began scouting for mechanisms for its containment and curtailment. The World Health Organisation (WHO) also reeled out a catalogue of protocols to be adopted while coordinating some solidarity trial measures. Prominent among the policies and mechanisms adopted by countries and governments was the lockdown policy with varying implications. We deployed simple developmental economic analysis differences between “the north” and “the south” implementation of lockdown policy on one hand, and the implication of the lockdown policy on following the WHO protocols on the other hand. We argued that the present situation of using foreign derived lockdowns to control the spread of the virus in highly dependent economies is neither very realistic nor capable of achieving the desired target. We demonstrated that the predominantly informal economy posed defeating challenges to the enforcement of the lockdown policy in African communities where daily life takes place in the streets. The implication of our study is that a home-grown approach that is amenable to the local economic realities will be more effective for the prevention and management of the COVID-19 pandemic and other viral diseases, than the lockdown.*

Key words: *COVID-19, lockdown policy, pandemic, informal economy, solidarity trial, social distancing, contact tracing, pariah policy, autochthonous policy, African society.*

Introduction

After many years, decades and centuries of threats of human-life termination from epidemics like the Black Death, the Spanish flu, Swine flu, Influenza, SARS, Bird flu, Ebola among others, another great “tsunami [is]

sweeping the world”¹ again with astonishingly unprecedented rapidity. It is, of course, the tsunami of COVID-19 pandemic. All forces—corporate and governmental—have since entered into a synergistic alliance towards quenching this tempestuous tsunami. Although it began in Wuhan in the Hubei province of China in December 2019 as an epidemic, the novel coronavirus disease has become a global pandemic, affecting millions and killing hundreds of thousand across the globe. As of 12 July 2020, it had not only been reported in over 216 countries and areas of the world; it had also affected a total of 12,849,435 and had led to the death of 567,783 persons around the world (*Worldometer* 12 July 2020).

Upon confirmation that the virus originated from China, coupled with allegations of Beijing’s effort at concealing it, international blame games and backlashes ensued. President Donald Trump of the United States (US) together with American right-wing media baptized the virus “Chinese / Wuhan virus” (Tharoor 2020, para.7). The US and Australia, in particular, have persistently insisted that China be independently investigated. The Italian leader, Matteo Salvini specifically accused the Chinese authorities of “engineering a new virus in their laboratories to spring on the world” (Tharoor 2020, para.8). Several other Western countries like Germany, Britain, Japan, Taiwan, Vietnam, India, Italy, Brazil, et cetera openly expressed their displeasure with China’s role in the spreading of the virus. To most of these countries, there is arguably nothing accidental or even natural about the outbreak of coronavirus. In their reasoning, COVID-19 is a deliberately contrived biological weapon (bio-war) launched against the international community by China in furtherance of its economic ambitions and gains. Angered therefore by this concerted apportionment of blame and backlashes, especially from the US, China took to conspiracy theory and counter-accused the US. Zhao Rujian, the Minister of Foreign Affairs

¹ The expression was made by Professor Johan Giesecke, a Swedish World Health Organizations’ veteran virologist, to describe the COVID-19 pandemic (see: “Was Sweden’s Covid-19 lockdown a gamble?” *Shorttermrental.com*, 1 June 2020).

spokesperson argued that the coronavirus did not originate from China, insisting instead that it was American soldiers that brought it to Wuhan (Westcott and Jiang 2020). Iran and Russia propaganda media outlets joined China in blaming and attacking the US for the pandemic (Tucker 2020).

Meanwhile, the unprecedented nature of the pandemic, its speed of spread and absence of known cure / vaccine in the early days of its outbreak, compelled the World Health Organisation (WHO) to declare the virus a ‘public health emergency of international concern’ and a ‘pandemic’ on 30 January and 11 of March 2020, respectively. This is in line with the 2005 revision of the 1969 International Health Regulations (IHR), which imbued WHO with the powers to act in the case of an emergency, including the right to declare a “public health emergency of international concern” as well as issue non-binding recommendations to member states on how they should respond (Timsit 2020). With such declaration, WHO reeled out a catalogue of protocols to be adopted by member states of the United Nations (UN) in preparing for and responding to Covid-19. Among the earliest moves by the WHO is the articulation of the COVID-19 “Strategic Preparedness and Response plan” (SPRP). This was immediately followed by the release of the “Operational Planning Guidelines to Support Country Preparedness and Response” (OPGSCPR) in February 2020. There was also the ‘solidarity trials’, which are efforts by WHO to jumpstart the search for vaccine / treatment of COVID-19. It was a systematic trial of untested treatments or vaccines in order to determine their potential efficacy for eventual recommendation for the treatment of COVID-19 pandemic.

In spite of what appears to be a work well done *prima facie*, some countries and governments are neither impressed nor satisfied with WHO’s management of the COVID-19 pandemic. The US and Australia in particular have insisted that WHO is under Beijing’s influence, with the US openly threatening to defund the organization (Wood 2020). This accusation and ill-feeling are not unconnected with the way and manner in which WHO praised China for allegedly rolling “out the most ambitious, agile and

aggressive disease containment effort in history” through “uncompromising and rigorous use of non-pharmaceutical measures [which] demonstrated that containment can be adapted and successfully operationalised in a wide range of settings” (Feldwisch-Drentrup 2020, para.4-5). WHO subsequently moved to prescribe and recommend China’s ‘messianic’ non-pharmaceutical epidemic control policy and containment strategy – “the big lockdown; centralised quarantine, and contact tracing” (Feldwisch-Drentrup 2020, para.6) for member nations of the organisation.

Lockdown entails tying down the country from cities down to towns, villages, neighborhoods, and homes. It involves closing of public places, prohibition of social festivals and restriction of movements / forcing people to stay at home. Lockdown can be categorized according to degree and according to kind. By degree, lockdown can be partial or total. In terms of kind, however, lockdown can be preventive or emergency. Whereas a preventive lockdown is a preemptive action plan undertaken to avoid dangers or risks of insecurity, emergency lockdown is an on-the-spot action taken in the face of imminent threat to life or outbreak of insecurity/disease so as to reduce the chances of large-scale damages / infections. The COVID-19 lockdown protocol is arguably a prototype characterization of both preventive and emergency lockdown, because it is targeted at preventing the spread of the coronavirus to unaffected areas and uninfected persons on the one hand, and to mitigate or reduce large scale infection in places already affected on the other hand. The coincidence of its recommendation by WHO with China’s claim of successful containment of the virus was however viewed by some concerned countries as a strategic connivance to weaken China’s rivals, edge them out and launch China to a strategic international prominence (Ghitis 2020).

However, the US and other nations critique of China and WHO’s lockdown policy did not deter national and sub-national governments from religiously adopting and doggedly implementing the ‘almighty’ lockdown policy. With exception to about few countries—Sweden, South Korea, Turkmenistan and

Tajikistan (*The Indian Express* 12 May 2020)—virtually all countries of the world keyed into the lockdown policy for the mitigation of the COVID-19 pandemic. Haunted by the experience of Ebola and currently beleaguered by the threat of imminent extermination by coronavirus, the African continent, aware of its weak health institutions, had to join the lockdown procession. Partly because of the wide publicity given to the much-taunted Chinese ‘successful containment’ of the virus through lockdown and partly because African leaders saw the adoption of the lockdown policy as a possible preliminary condition under which WHO may offer any assistance to badly hit countries or region, national governments of African extraction decided to experiment with the lockdown policy like others. While some African countries adopted partial lockdown, others opted for a total/comprehensive version of it. Unlike the former, a comprehensive or complete or total lockdown is one during which there is an overarching confinement of people to their homes, with no form of movement, except for certain individuals believed to be deliverers of essential services / commodities. Measures associated with a comprehensive lockdown are usually stricter. South Africa, for instance, imposed one of the strictest lockdowns in the world, with cigarette and alcohol banned throughout (Flanagan 2020).

In view of the foregoing, this article assesses the appropriateness of the global lockdown policy in typical African communities which are predominantly informal economies and where livelihood is dependent on day-to-day income earned daily in the streets. The aim is to unravel the inherent variables that systematically posed a defeating challenge to the effective implementation of the ‘messianic’ lockdown policy in most African economies. Following the introduction is a brief assessment of the lockdown policy in the originating country of China as well as in the advanced countries of the global north. The next section critically examines Africa’s socio-economic realities vi-a-vis the implementation of the lockdown policy. The last section concludes the study with a preferred policy position.

Lockdown policy in China and the global ‘North’: A brief overview

From China in Asia, through Italy in Europe to the US in the Americas—the earliest worst hits of their respective continents—the lockdown policy and its implementations have much in common, although with little variations. The common denominators, as elsewhere noted, range from closure of public places and prohibition of social festivals, restriction of movements / forcing people to stay at home and fining / punishing of defaulters. In France and few other countries, people could go for exercises, medications and essential groceries.

In the originating continent of Asia, China became the first country to impose travel restrictions, starting with a citywide (Wuhan) lockdown on 23 January 2020. Although other cities across the country soon followed suit, Wuhan’s lockdown lasted only for about seventy six days, as it ended on 8 April 2020 (Wang 2020). Although a node lockdown, involving locking down the country from cities down to towns, villages, neighborhoods, and homes, Ren (2020) holds that China’s lockdown was not a nation-wide one given that big cities like Guangzhou, Shanghai, Beijing, Shenzhen and Hangzhou did not embrace Wuhan-style lockdown. At the peak of the lockdown, people, at a stage, could go out of their homes to procure certain home fundamentals. Be that as it may, only one family member was allowed to do so every two days. In some cities / neighborhoods, however, such freedom was entirely denied as residents were barred from going out, leaving them to the services of couriers who supplied food and other essentials to them. What could be termed an advanced phase of the lockdown came with the tightening of the already limited freedom. Officials were mandated to go door to door for health checkups. Anyone found ill was forced into isolation / quarantine. Just as nose masks became the order of the day, security personnel whose duty was to check people’s temperature before entering became ubiquitous in public buildings. It was serious that drones had to be deployed in chasing people without masks back into their buildings (Graham-Harrison and Kuo 2020). Even after Wuhan suspended its

lockdown, technology-assisted surveillance continued across the neighborhood, including Beijing and by extension, China. At the airport, arrivals were compelled to self-quarantine for 14 days, at the expiration of which those without COVID-19 symptoms might move around with app-assisted health status identification (Ren 2020).

In Europe, however, Italy was the first country to declare a nationwide lockdown in March 2020, placing its sixty million residents under lockdown as cases of COVID-19 surged throughout the twenty regions of the country (Godin 2020). Accordingly, Italy also became the first European Union country to ban flights to and from China. In strict implementation of the Italian government's new lockdown legislation, schools and public spaces like gyms, theatres and cinemas all over the country were closed just as public events were out-rightly banned by the government. Movements were restricted, while those who must move were issued with permit. People who flout this order by travelling within or outside the country without permits could face about three months jail or a fine of \$234 (Godin 2020). He also noted that the lockdown legislation also forbids relatives/friends from visiting inmates, and that this led to protests in 27 prisons in the country. Cognizant of the impending consequences of a total lockdown of such magnitude to individuals, households and businesses, the government deployed a "massive shock therapy", which took the form of suspension of mortgages, taxes and other public bills. It (the government) went further to create a support package of \$8.5 billion for families and business affected by the virus (Godin 2020). With these, the biting impacts of the lockdown were not severely felt by ordinary Italians.

In the Americas, the US's national government initially dilly-dallied in giving the lockdown orders like other countries. Up until 20 March, the Trump's administration still insisted only on "testing and isolating" people with symptoms. By 19 March 2020, therefore, the state of California, as an alternative last resort in the face of a surging virus, declared a state-wide "shelter-in-place" lockdown. Having become a situation of 'to your tent, O

Israel', 41 other states, in two weeks, toed the line of California and declared a "stay-at-home" order. In comparison with China and Italy, the US imposed the lightest and least strict lockdown measures. In fact, the US's version of lockdown is better contextualized as social distancing, because "in most U.S. states and localities, people can go for a walk, public transit still runs, private cars can be driven anywhere, and people can travel freely between cities, counties and states" (Ren 2020: 8).

Africa's socio-economic realities and the lockdown policy: When what is good for the geese isn't good for the gander

Having become the global trend and given Africa's history of copying the West / global North, lockdown also became the 'preferred' policy option for combating the novel coronavirus in Africa. Rwanda was the first African country to impose a total nation-wide lockdown on 21 March 2020 following the confirmation of 17 cases of COVID-19. Since then, over 42 African countries have imposed partial or full lockdown, restricting movements on streets and to work/business places. Emulating the West, African authorities mandated people to stay indoors while also encouraging them to work from their homes.

Unlike in China, Europe and North America (the global North) where the implementation of the lockdown policy recorded some substantial success, the policy seemed to have been dead on arrival to the African continent given the structural features of its predominantly informal economies. The ubiquity of Africa's informal economy and its increasing preeminence in international development discourses in the 21st Century has been variously noted by Ezeibe et al (2017); Goodfellow (2016); Mbah and Nzeadibe (2016); Meagher and Lindell (2013) among others. An informal economy reflects and represents a nomenclatural taxonomy for referring to all economic activities which take place outside the framework of corporate public and organised private sectors, collectively called the formal sector / economy (Udeogu 2016). For this reason, activities in informal economies encompass

a wide range of small-scale, largely self-employment activities. Okoosi-Simbine (2015) adds that the informal economy is amorphous, cutting across many and most all career; including the battery charger, the tailor/fashion designer, the hairdresser, the retail shop owner, the leather work and footwear person, manufacturing (carpentry, furniture-making, metal work, block making / laying, printing, photograph and so on), services (auto repairs and maintenance, transporters, including lately motorcycle 'Okada' riders, etc). Included on this list are keke drivers, barrow pushers, food vendors, kiosk keepers, and indeed any form of day-to-day businesses that fall outside the known boundaries of formal / corporate businesses and jobs. One fundamental point about informal economies is that the economic activities that constitute its life-blood are such that can hardly be rendered or operated from home as the lockdown policy encourages. Very importantly, they are economic activities—business and services—that thrive on person-to-person contact and whose operators or those engaged in it depend on daily income accruable from them for their families' survival.

Africa's economies have been noted to be dominated by their informal sectors which account for between 30% and 90% of all non-agricultural job and more than 40% of many African countries' gross domestic product (*Quartzs Africa*, 4 April 2020). Needless therefore to state that African economies do not only reflect, but also typify economic informality as they bristle with all the known indices of economic informalism highlighted above. From South Africa through the Central African Republic to Tunisia, and from Senegal to Somalia over 75% of lives are sustained in the streets. An empirical study of street vending in African cities by Mitullah (2003) reveals that street trading is not only rampantly ubiquitous, but also a major source of employment and income for many urban dwellers. In Kenya, one of the six African countries sampled for the study, informal economic activities (excluding nonagricultural workers) employs over 70 percent of the urban population.

There are two categories of informal economy workers that *people* on the streets of African cities and suburbs. There are the itinerant ones who are always on the move, walking the streets and roads of African cities either vending wares of assorted forms and sizes or rendering services of diverse shades and colorations. There are, on the other hand, the stationary ones who unlike their itinerant counterpart attach themselves daily around the roads and vicinities of major markets, parks, and other public places. Although there is no hard and fast rule as to the nature of informal business that should fall under any of these two dichotomies, food vendors, informal transporters, day laborers et cetera, tend to be easily classified under the former, while craftspeople, kiosk keepers, battery chargers, hairdressers / barbers, et cetera are often brought under the latter. Be that as it may, what stands out most markedly is that most informal economic activities are founded on day-to-day earnings made possible by direct face-to-face interpersonal interactions / contacts. Put simply, outgoingness is the oxygen that sustains the life of informal businesses. Therefore, any policy that prohibits going out to the streets daily and direct physical social interaction is bound to be viewed as a pariah policy by informal micro-entrepreneurs. This point, when stretched a little further, reveals that the lives of people in the informal sector daily depend on the streets, and to force 'people to keep off the streets' as lockdown dictates, is to kick them out of life.

With the above structural challenges on ground, a critical observer could tell that the *nunc domittis* of the Chinese / European model of lockdown as a panacea for combating the COVID-19 pandemic in Africa had been sung right from its conception. That notwithstanding, African states, being post-colonial states with established history of coercive tendencies and over-militarization of civil matters, were prepared to gamble the freedom, liberty and lives of their citizenry for the inglorious lockdown. Therefore, in strict enforcement of the lockdown and its occasional dusk-to-down curfews imposed on many African states like Kenya, Nigeria, et cetera, security

personnel, especially the police were deployed to streets, markets and other public places.

It should be borne in mind that fear of contracting the deadly virus, especially due to the hyper-publicity given to it by mostly Chinese and Western media outlets made some African informal economy operators to initially succumb to the lockdown order by shutting themselves inside their houses. However, it soon became obvious that the recommendation to stay-at-home and stock up one's kitchen is only possible for those who had enough money at their disposal before the lockdown orders. This is however not the case with day-to-day informal businesses and traders with no money at home or banks. The already precarious plight of the people became further exacerbated by the apparent unavailability or inadequacy of social safety measures / packages promised / doled out by some African governments like South Africa, Kenya, Nigeria, Uganda, Rwanda, etc. So, when the barber in Nairobi; the commercial taxi operator in Lagos; the daily petty trader in Lusaka; the food vendor in Kampala; the roadside mechanic in Kigali, and their contemporaries in other African cities were faced with imminent starvation because of the impossibilities of operating / working from home to make their daily living, they decided to choose "the lottery of infection over the certainty of starvation" (*BBC Africa* 2020, par. 24).

It became in effect a two-dimensional protest and pushback from the most vulnerable segment of the society. One was rather spontaneously organized to call to question both the rationale for the lockdown and the politics of palliative allocation. The other sought to demonstrate that locking oneself and family inside indefinitely without food was suicidal, and thus the audacious resolve to fling doors open in pursuit of sustenance / survival. Against all odds, African operators in the informal businesses decided to hit the streets and markets. They knew they had two forces to contend with—the 'less obvious' coronavirus disease on the one hand, and the ubiquitous brutality of the security operatives on the other hand. In defiance to several appeals by the African Commission on Human and Peoples' Rights (ACHPR)

to African countries to uphold human rights in their responses to COVID-19 pandemic, however, state security agents of African state and governments went ahead and literally declared ‘war’ on her citizens in the name of enforcing lockdowns and curfews. Various armed with guns, whips and tear gas canisters, security officers in many African countries began beating, harassing and, in some cases, killing people as they enforced measures aimed at preventing the spread of Covid-19 (Olewe 2020, para.1).

Moore (2020) observes that, in Kenya, the death toll from lockdown enforcement exceeded official COVID-19 death toll, with police killing at least 6 persons within the first 10 days of the lockdown. It was too gruesome that President Uhuru Kenyatta had to apologize for the violent enforcement of the curfew / lockdown that resulted in the killings of a commercial bike man and a 13-year old boy in Nairobi by the police. Similarly, just two weeks into the lockdown in Nigeria, the security forces had reportedly killed 18 persons while enforcing the lockdown order (NHRC Report, cited in *BBC News on Africa*, 16 April, 2020). This is against only 12 deaths from COVID-19 as at the time. The implication is that lockdown enforcement was killing more people than the virus itself. On 9 of July again, the Nigerian Police justified people’s belief that it has a bad reputation for brutality (*BBC News*, 16 April, 2020), when a trigger-happy police officer shot dead a motorcycle taxi operator (Okada) in Imo state for not wearing face mask and refusing to give fifty-naira settlement for the ‘offense’. This lends credence to Okoosi-Simbine’s (2015) observation that the informal sector has had to contend with state violence commonly seen in the form of extortion by government officials who claim multiple taxes for operators’ ‘inappropriate’ location and operation. As it is in Kenya and Nigeria, so also it is in most African countries, including Guinea where the country’s interior minister acknowledged a “high” death toll after motorcycle taxi drivers seeking to make ends meet clashed with security forces (Ramdeen, 2020, para.3).

Across Africa, the rampant high-handedness, brutality and human rights abuses by the security operatives, especially the police, in the name of lockdown enforcement are the same. So far in Nigeria, at least 105 human rights violations have been reported (Mugabi, 2020). In Kenya and Uganda, police officers reportedly beat up defenseless people found gathering in bars. Traders selling ware in the market without permission were assaulted and manhandled by police officers in Zambia and South Africa. While anti-COVID-19 curfew protest had led to the arrest and detention of 74 persons in Senegal (Ramdeen, 2020), the same had resulted in the abduction and sexual harassment of three young female opposition activists by suspected state security agents in Zimbabwe (*ABC News*, May 15, 2020).

Table 1: Anti-lockdown protests in selected African countries

Country	Nature of protest/demonstration	Sources
Guinea Conakry	Anti-lockdown protesters forcefully reopened mosques, saying “we would rather die praying” after about 7 were killed in a clash with security operatives.	<i>CGTN Africa</i> of May 14, 2020
Ivory Coast	Protester destroy a coronavirus testing centre at Abidjan	<i>BBC News</i> of April 6, 2020
Kenya	People protested against police brutality and killing of at least 6 persons in the first 10 days of the lockdown; forced quarantining of persons and payment before releasing; destruction of 7000 homes and markets in Kariobangi in the name of lockdown enforcement.	<i>BBC News</i> of April 6, 2020; <i>Baltimoresun.com</i> of May 9, 2020
Malawi	Protesters say “it’s better to contract the virus than die of hunger due to lack of	www.aljazeera.com

	work”.	of April 17, 2020
Nigeria	Over 20 coronavirus patients forced their way out of the isolation centre to protest improper and worsening conditions; construction workers also protested against the lockdown measures debarring them from constructing Dangote’s oil refinery.	<i>NTS online</i> of April 27, 2020
Rwanda	Refugees brought to Kigali camp for want of space from Libya camp protested against the lock down.	<i>VOA news.com</i> of May 9, 2020
Senegal	Protesters burn tyres and throw stones at security forces, demanding for an end to the COVID-19 restrictions. They were subsequently fired tear gas and rubber bullets by the security operatives.	Hague, Nicholas (2020, June 5) <i>Aljazeera.com</i>
Sierra Leone	Fishermen protested and clashed with the police over lockdown related restriction to number of vessels authorized to go to the sea	<i>www.garda.com</i> of May 8, 2020
South Africa	Resident protested the lopsided manner in which the palliative food parcels were being distributed to households; others protested their being disallowed to go surfing in the water while people were allowed to go for other exercises.	Anciona, Fiona (2020, April 24)

Zimbabwe	An anti-lockdown protest in Harare resulted in the abduction and sexual harassment of 3 young female opposition activists by suspected security agents.	<i>ABC News</i> of May 15, 2020
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Source: Compiled by the authors

The imposition of lockdown (stay-at-home and dusk-to-dawn curfew) in African cities and the high-handedness of the security agents in its enforcement were, as expected, greeted with violent protests/demonstrations by the people. Table 1 shows that Kenya, South Africa, Nigeria, Serr Leone, Malawi, Guinea, Ivory Coast, Rwanda, Zimbabwe are among the countries that recorded hot anti-lockdown protests in Africa. Others include Algeria, Egypt, Sudan, Somalia, Madagascar, Ethiopia (Ramdeen, 2020).

Conclusion

Evident from the foregoing discourse is that the novel coronavirus of 2019 (COVID-19) has occasioned a double tragedy for the African continent. The first tragedy is that it met Africa at its weakest moment, when its health system / infrastructure is arguably at its all-time sorry state of operation. Whereas Africa's health / medical facilities' history has never been so overwhelmingly outstanding, its capacity and preparedness to tackle the COVID-19 pandemic was further precariously incapacitated by the fact the even the WHO and the advanced countries that would always come to Africa's aid are also scampering for safety and aid. The non-availability of testing kits and inadequacy of medical-based isolation centers seem to have entered into an unholy alliance with the global unavailability of vaccine to barter tens of thousands of African lives to the murderous coronavirus. The second and avoidable COVID-19-induced tragedy on Africa is the imposition of lockdown and its subsequent enforcement in Africa. The policy made it possible for those whose immune system resisted the disease to either

eventually fall for hunger or be fallen by security operatives who enforced the lockdown orders without recourse to people's plights and rights. The true position is that the lockdown policy is not homegrown and as such fails to capture and reflect the economic vulnerability of informal businesses and micro-entrepreneurs that dominate the African economy. Therefore, the pushback and protests from this affected segment of the society, including court rulings obtained by human rights groups go to demonstrate the unpopularity of the policy in Africa.

Specifically, in Malawi, President Peter Mutharika's state of national disaster declaration which sought to impose a 21-day nationwide lockdown was challenged by a human rights group and was subsequently voided by a high court. The court insisted that the President failed to outline the measures for providing for the most vulnerable of the population (PSC Report, 2020). Implicit in the foregoing is that health security does not necessarily supersede food security, neither are they mutually exclusive. It became a pointer to the fact that any strategy of saving lives without protecting livelihoods is counterproductive. Such is the case of the lockdown policy/order which arguably seeks to preserve the health of people, but fails to ensure that it does not concurrently constitute a threat/danger to the food security of the people.

Professor Alex Broadbent's² conclusive remarks after observing the shocking modalities by which the South African Police were enforcing the lockdown becomes very insightful at this juncture. In his exact words, "lockdowns do not make sense in Africa if it means destroying the economic livelihood of citizens". This is a fact, because a comparative analysis of countries that stringently locked down such as Italy, UK and Spain and few others that did not lockdown like Sweden shows that "there is no correlation between

² Alex Broadbent is a Professor of Philosophy at University of Johannesburg, who in addition to the above statement described the actions of the South African Police as "senseless and unnecessarily violent". See: <<https://www.dw.com/en/do-coronavirus-lockdowns-in-africa-make-sense/a-53228689>>.

fatalities and lockdown stringency”, for neither Sweden’s “economy nor its healthcare system has collapsed” (Jekins 2020, para.1). Like the Swedish government, Africa, cognizant of its developmental trajectory, should look inwards and come up with autochthonous pandemic control measures amenable to its local economic realities. Such measures, unlike the copy-and-paste lockdown measures, should be able to concurrently save lives while also preserving livelihoods.

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The Role of Social Enterprises in Post Covid Recovery in Africa

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Abstract: *The spread of COVID-19 will have lasting social and economic impact on the world; however, the economic impact will be felt far longer in Africa, than in many other parts of the world. Taking a backward view, we analyse the impact on the flow of aid and FDI, as well as bond market issuance in Africa, following significant economic events in the past. Using this, we predict that Africa will not be receiving a ‘helping hand’ from large economies as they start to rebuild their economies. As such they will need to find a solution to restarting their economies and reengaging their workforces, elsewhere. This paper proposes that the countless Social Enterprises that are already established and functioning in high-impact areas of African society are best suited to deliver immediate, effective and lasting economic improvements to their resident economies. However, to achieve this, the authors outline key areas which Social Enterprises and Governments would need to consider to successfully leverage this often unsung, yet highly effective, solution to poverty.*

Key words: *Social Enterprise, Africa, COVID, Economic Recovery.*

Introduction

The social and economic impact of COVID-19 will long be felt by the poorest nations of the world, a disproportionate amount of whom are found in Africa. These nations are facing unprecedented demands on their social welfare systems while at the same time seeing a decline in some of the ‘usual’ tools at their disposal, such as aid, FDI, bond issuances, loans etc. The

result, if not addressed, is that of fraying social welfare systems, an explosion in the number of people living in poverty, and the inevitable political destabilisation that the continents' history has shown accompanies that.

It is time for an old, often silent player to step up and take a far more significant role in addressing this issue. Social Enterprises (SEs) have been present in Africa for decades, quietly working away to solve pressing social, environmental and economic issues in their corners of the continent. These SEs have been created by inspirational people who recognise that the only sustainable solution to these problems, is to mobilise the resources at their disposal in a 'business-like' way, thereby producing solutions that are not only innovative and available immediately where they are most needed, but are also far more efficient and effective in doing so. This is not to suggest that SEs have taken the place of government sponsored social programmes.

However, truly successful SEs operating widely will mean that when there is a sudden onset of a significant event, such as was the case with COVID-19, they can step in and quickly address the most immediate issues, thereby taking pressure off of government social welfare systems in the short term, allowing them the time to mobilise. Furthermore, the success of SEs can over time enhance nations through their skills transfer activities, reshaping economies towards robust entrepreneurial behaviour and reduce dependency on foreign aid.

But not all SEs have been successful in achieving the honourable objectives they set out to. It has been found that successful SEs take the behaviours that have been perfected by the private sector, and leverage those to secure ongoing success for their organisations. These behaviours go beyond formal structures and processes. They focus on behaving in a more professional, managerial and 'marketing' orientated way in their business.

Impact of Covid-19

On 31 December 2019, a cluster of pneumonia cases in Wuhan City, China was reported by the World Health Organisation. The causative agent was identified as 'Severe Acute Respiratory Syndrome Coronavirus 2' (SARS-CoV-2) and was given the term 'Coronavirus Disease 2019', or COVID-19¹. By mid-February 2020, all continents across the globe had reported confirmed cases of COVID-19, with the first case in Africa confirmed in Egypt. As Africa is China's leading commercial partner, the virus inevitably spread to the continent through large travel volumes, with the highest importation risk countries Egypt, Algeria, and South Africa demonstrating moderate to high capacity to respond, while moderate risk countries such as Nigeria, Ethiopia, Sudan, Angola, Tanzania, Ghana, and Kenya showing variable capacity and high vulnerability. The reaction to this spread has included reprioritisation of resources, short notice country-wide shutdowns and self-isolation orders.²

As the pandemic spread, and we started to assess its toll on society and its well-being, the impact on the global economy has already become evident and is clearly the largest global economic shock in decades. According to the World Bank³, a 5.2 percent contraction in global GDP, and the largest per capita income contraction worldwide since 1870 is envisaged for 2020, with most countries forecast to slip into recession. The recession caused by the Covid-19 pandemic differs from recent economic downturns such as the mortgage-backed securities and collateralised debt obligation driven 2008 economic downturn. The current economic crisis emerging is related to a supply shock, where the required lockdowns have resulted in between 25

¹ World Health Organisation (WHO), 2020, Novel Coronavirus (2019-nCoV) Situation Report – 1, 21 January 2020.

² Gilbert, M., Pullano, G., Pinotti, F., Valdano, E., Poletto, C., Boëlle, P. Y., ... & Gutierrez, B., 2020, Preparedness and vulnerability of African countries against importations of COVID-19: a modelling study, *The Lancet*, 395 (10227): 871-877.

³ World Bank, 2020, The Global Economic Outlook During the COVID-19 Pandemic: A Changed World, June 2020.

percent and 30 percent decreases in economic activity⁴. Media reports predict a more severe economic impact than the Great Depression of the 1930's with direct hits to global supply chains as well as deflated demand across the globe as movement and purchasing became restricted⁵. Emerging economies are expected to be among the hardest hit, with forecasted growth downgrades of 2.8 percent in Sub-Saharan Africa and 4.2 percent in Middle East and North Africa⁶.

Taking learnings from the 2008 Global Financial crises, central banks were early to step in and ease the credit crunch by purchasing both corporate and government debt. Africa in particular, has used the issuance of bonds as a means to raise cash aimed at reigniting their economies through infrastructure developments etc. In fact, in the decade following the 2008 financial crisis, Sub-Saharan countries, excluding South Africa, saw a 23 percent increase in their debt levels, representing around 50 percent of their GDP.⁷ Unlike previous economic disasters, central banks acted in a coordinated fashion to widen the network of liquidity swap lines, and thus played a significant role in stabilizing the global economy. In addition, fiscal responses across affected countries have seen unprecedented levels, with the US government alone doubling the stimulus action taken in 2009. The actions have been both faster and more effective than during previous shocks, which raises hope for a faster global economic recovery. This,

⁴ Holden, R., 2020, *Vital Signs: COVID-19 Recession Is Different – And We Need More Stimulus To Deal With It*, [online] The Conversation, Available at: <<https://theconversation.com/vital-signs-covid-19-recession-is-different-and-we-need-more-stimulus-to-deal-with-it-141037>> [Accessed 7 September 2020].

⁵ Sogani, A., 2020, *The Great Lockdown Vs. The Great Depression And The 2008 Global Financial Crisis*, [online] E-International Relations, Available at: <<https://www.e-ir.info/2020/07/02/the-great-lockdown-vs-the-great-depression-and-the-2008-global-financial-crisis/>> [Accessed 7 September 2020].

⁶ World Bank, 2020, *The Global Economic Outlook During the COVID-19 Pandemic: A Changed World*, June 2020.

⁷ Isaac, A., 2020, *Africa Debt Boom May Store Up Trouble For The Future*, [online] WSJ, Available at: <<https://www.wsj.com/articles/africa-debt-boom-may-store-up-trouble-for-the-future-11580216277>> [Accessed 20 August 2020].

however, is reliant on multilateral collaboration taking place across the globe to lessen the long-term impact of pandemic.⁸

The path to economic recovery therefore lies in policy reform to promote growth while strengthening healthcare service delivery and targeted stimulus and interventions for supporting social welfare tied in with global cooperation to alleviate economic damage.⁹ However, due to the restrictions on physical interactions, these interventions need to transcend into an increasingly digitally connected world.

African and European Government Responses

As Covid-19 has threatened both the health and wealth of African nations with the imposition of lockdowns and a multitude of business restrictions. Based on current trajectories, the previous business environment for many African countries has been thrown into upheaval¹⁰ and according to United Nations Economist Elliott Harris, this could result in an additional 160 million people falling into poverty, of which 34 million would live in what is considered 'extreme poverty'.¹¹

African countries were losing the battle against poverty before COVID-19 became a current news issue. In an Institute for Securities Studies report, it was reported that 150 million people living in extreme poverty are found in 2 African countries, Nigeria and the D.R.C. Sub-Saharan Africa is considered

⁸ Sogani, A., 2020, *The Great Lockdown Vs. The Great Depression And The 2008 Global Financial Crisis*, [online] E-International Relations, Available at: <<https://www.e-ir.info/2020/07/02/the-great-lockdown-vs-the-great-depression-and-the-2008-global-financial-crisis/>> [Accessed 7 September 2020].

⁹ World Bank, 2020, *The Global Economic Outlook During the COVID-19 Pandemic: A Changed World*, June 2020.

¹⁰ McKibbin, W. J., & Fernando, R., 2020, *The global macroeconomic impacts of COVID-19: Seven scenarios*.

¹¹ UN DESA | United Nations Department of Economic and Social Affairs, 2020, *COVID-19 To Slash Global Economic Output By \$8.5 Trillion Over Next Two Years*, [online] Available at: <<https://www.un.org/development/desa/en/news/policy/wesp-mid-2020-report.html>> [Accessed 7 September 2020].

the poorest region in the world, with roughly 40 percent of people living on less than US\$1.90 a day. This was projected to increase to 60 percent by 2020.¹² That was before COVID-19.

With economies that have been struggling for some time, many African countries have for decades relied heavily on aid to provide citizens many of the basic services and duties which the governments themselves cannot fulfil, including provision of food, clean water, medical provisions and services etc. In 2017 the Organisation for Economic Co-operation and Development¹³ reported that Africa was the number one recipient of aid in the world, receiving over 32 percent of all aid. Aid levels to Africa have, over the decades, steadily increased. See Fig 1. The U.S. is the largest contributor of aid to Africa and directs over 20 percent of their foreign aid to the continent.¹⁴

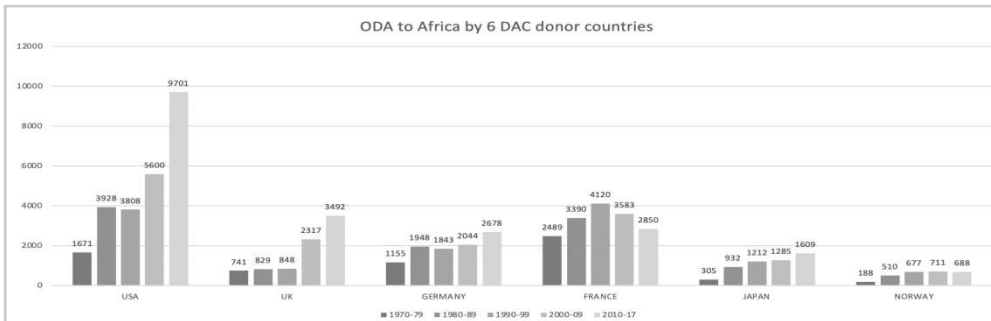


Figure 1. ODA to Africa, 1970-2017. Adapted from Organization for Economic Cooperation and Development

¹² Donnenfeld, Z., 2020, *What Is The Future Of Poverty In Africa?* - ISS Africa, [online] Intitute for Security Studies Africa, Available at: <<https://issafrica.org/iss-today/what-is-the-future-of-poverty-in-africa>> [Accessed 20 August 2020].

¹³ Organisation for Economic Co-operation and Development, 2017, *Development Aid At A Glance*, Africa, [online] Organisation for Economic Co-operation and Development, Available at: <<https://www.oecd.org/dac/stats/documentupload/Africa-Development-Aid-at-a-Glance.pdf>> [Accessed 21 July 2020].

¹⁴ Kwemo, A., 2020, *Making Africa Great Again: Reducing Aid Dependency*, [online] Brookings, Available at: <<https://www.brookings.edu/blog/africa-in-focus/2017/04/20/making-africa-great-again-reducing-aid-dependency/>> [Accessed 21 July 2020].

The provision of aid has helped governments hold onto fraying social welfare systems and stagnant economies, avoiding unstable political conditions. However, has aid had the desired effect? Although significant goals have been achieved through the effective use of aid, such as the eradication of Polio recently announced by the World Health Organisation¹⁵, it has been argued that aid has harmed Africa. In a 2019 report, the UN reported an increase in malnourished people in almost all regions in Africa, which has the highest percentage of malnourished people around the world¹⁶.

In a study conducted by James Cobbe¹⁷ it was found that aid negatively impacted the development of local skilled labour in southern Africa. The particular area aid is known as ‘technical assistance’ or TA, and relates to all funded programs that address availability of human resources and skills development in host countries by aid donor countries.

It was found that although TA paid for training programs for locals, it relied heavily on the employment of foreign expats to fulfil that training. Examples of the side effect of TA programs, Cobbe reported, is that both Lesotho and Botswana had more expatriates working there, than 20 years previously. These expats are paid substantially higher than locals are, and as a result of the continuous flow of these expatriates into host countries, influence and even a level of control is retained by the Western donors.

¹⁵ Who.int, 2020, *Global Polio Eradication Initiative Applauds WHO African Region For Wild Polio-Free Certification*, [online] Available at: <<https://www.who.int/news-room/detail/25-08-2020-global-polio-eradication-initiative-applauds-who-african-region-for-wild-polio-free-certification>> [Accessed 2 September 2020].

¹⁶ United Nations, 2020, *The State Of Food Security And Nutrition In The World*, State of the World, [online] Rome: Food and Agriculture Organisation of the United Nations, Available at: <<https://www.who.int/publications/m/item/state-of-food-security-and-nutrition-in-the-world-2020>> [Accessed 9 September 2020].

¹⁷ Cobbe, J., 1990, Possible Negative Side Effects of Aid to South Africa’s Neighbours, *African Affairs* 89 (354): 85-96.

Aid in itself is also not sustainable. During times of political or financial crisis, rich donor countries are forced to reassess budgets, which often lead to a review of the level of foreign aid that they provide. In fact, economic crises in donor countries have been found to be a powerful predictor of foreign aid.¹⁸

Frot¹⁹ found that since 1970, foreign aid budgets fell in six donor countries immediately following a financial crisis. Of even more concern is the suggestion that aid flows decrease for at least ten years after a crisis has started.²⁰ Furthermore, Heinrich et al.²¹ stated that as ‘major donors are democracies, we expect politicians that make decisions of foreign aid in such countries to be responsive to their citizens’ wishes in general.’ Using the Eurobarometer, Heinrich et al. showed that the public’s support for foreign aid strongly decreases when their personal financial situation worsens.

Examples of these reactions can clearly be seen in Fig. 1, which graphically illustrates aid levels before and after the 2008 Subprime lending crisis. We see aid levels to Africa dip from 4 of the 5 Official Development Assistance (ODA) donors, with the US being the only exception.

It is worth noting that the US aid data in this figure reflects the decisions of the Obama administration. The Trump administration won the U.S election by focusing on a ‘Make America Great Again’ campaign, which has resulted in a proposed reduction in aid to Africa of 28 percent in 2020, compared to

¹⁸ Alesina, A., & Dollar, D., 2000, Who gives foreign aid to whom and why? *Journal of Economic Growth* 5 (1): 33-63.

¹⁹ Frot, E., 2009, Aid and the financial crisis: Shall we expect development aid to fall? Working Paper.

²⁰ Mendoza, R., Jones, R., & Vergara, G., 2009, Will the global financial crisis lead to lower foreign aid? A first look at United States ODA, Fordham University, Department of Economics, Fordham Economics Discussion Paper Series.

²¹ Heinrich, T., Kobayashi, Y., and Bryant, K., 2016, Public Opinion and Foreign Aid Cuts in Economic Crises, *World Development* 77, 66-79.

2019.²² The Trump administration has also shown that the aid they provide to Africa, comes with political implications. In a recent decision, the US announced the withdrawal of significant amounts of aid to Ethiopia because they felt there was a ‘lack of progress’ on talks on a disputed Nile dam project, between Ethiopia, Sudan and Egypt.²³

Of significant concern, is the time it takes for aid levels to return to pre-crisis levels. This is illustrated in the graph lines for the UK, Germany, France and Japan in Figure 2. This means that aid, at the time when it’s needed most, is likely to reduce, and not return to previous levels for some time.

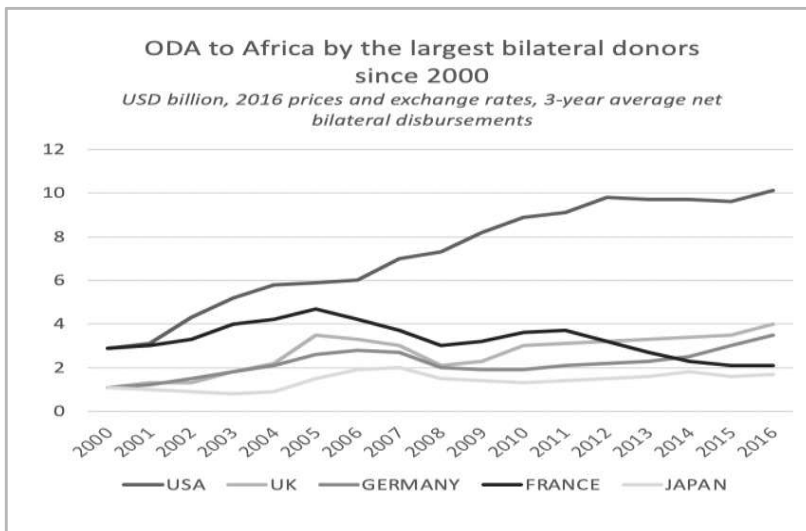


Figure 2. ODA to Africa by Largest Bilateral Donors since 2000. Adapted from Organisation for Economic Co-operation and Development²⁴

²² Everycrsreport.com, 2020, *U.S. Assistance To Sub-Saharan Africa: An Overview*, [online] Available at: <<https://www.everycrsreport.com/reports/R46368.html>> [Accessed 20 August 2020].

²³ Nytimes.com, 2020, *U.S. Cuts Aid To Ethiopia Amid Nile Dam Dispute*, [online] Available at: <<https://www.nytimes.com/2020/09/02/world/us-aid-ethiopia-dam.html>> [Accessed 7 September 2020].

²⁴ Organisation for Economic Co-operation and Development, 2017, *Development Aid At A Glance, Africa*, [online] Organisation for Economic Co-operation and Development,

The economic and social impact that COVID-19 is having on Africa means that much more help is needed than ever before to stabilise economies, let alone to create the economic growth that is required to sustain change. A study conducted in Sub-Saharan Africa by Gillanders²⁵ showed that aid was capable of generating low levels of economic growth but not to an extent that could be called transformative. This conclusion is similar to findings by Dovern and Nunnenkamp²⁶ who stated that higher levels of aid are associated with a small, though statistically significant, increase in the probability of a growth acceleration event.

Therefore, if Africa is to deal with the shock of COVID-19, short term aid, that can be described, at best as unpredictable, aid alone will not achieve this.

The economic impact of COVID-19 has resulted in significant contractions in national GDP levels of major donor countries. Figure 3 illustrates just how significant these contractions are in comparison to what was experienced in 2009 following the subprime financial crisis. This means that unlike in 2009, donor countries may not be in a financial position to provide this immediate and significant aid to African countries. This makes the COVID-19 scenario particularly unique from any other crises this generation has faced.

Available at: <<https://www.oecd.org/dac/stats/documentupload/Africa-Development-Aid-at-a-Glance.pdf>> [Accessed 21 July 2020].

²⁵ Gillanders, R., 2016, The Effects of Foreign Aid in Sub-Saharan Africa, *The Economic and Social Review* 47 (3): 339-360.

²⁶ Dovern, J., and P. Nunnenkamp, 2007, "Aid and Growth Accelerations: An Alternative Approach to Assessing the Effectiveness of Aid", *Kyklos*, Vol. 60, No. 3, 359-383.

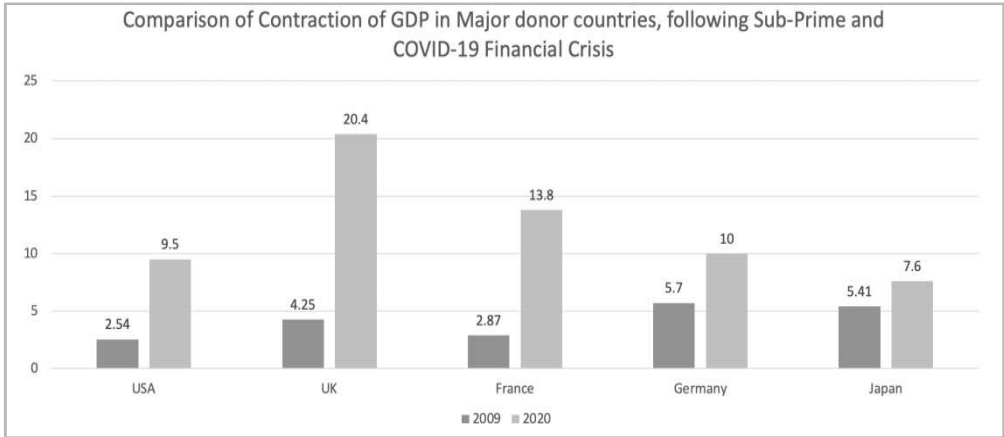


Figure 3. Comparison of Contraction of GDP in Major Donor countries, Following Subprime and COVID-19 Financial Crisis. Adapted from World Bank GDP growth (annual %) and WRAP and Politics²⁷

Businesses and markets across Africa have been significantly affected by macro economic issues such as currency shocks and commodity pricing declines – the price of oil, which alone accounts for 40 percent of Africa’s exports, has halved. A report by the United Nations Economic Commission for Africa²⁸ found that growth on the continent is expected to slow from around 3.2 percent to -2.6 percent. Overall the report estimates a 50 per cent drop in demand for business across Africa. A key output of the African Union negotiations has been the establishment of the African Continental Free Trade Area (AfCFTA), with a drive to remove ninety percent of trade

²⁷ Data.worldbank.org, 2020, *GDP Growth (Annual %) | Data*, [online] Available at: <<https://data.worldbank.org/indicator/NY.GDP.MKTP.KD.ZG>> [Accessed 9 September 2020] and WRAP, B. and Politics, E., 2020, *Which Top Economies Have Suffered Worst GDP Fall Due To COVID-19?* [online] *Businesstoday.in*, Available at: <<https://www.businesstoday.in/current/economy-politics/which-top-economies-have-suffered-worst-gdp-fall-due-to-covid-19/story/414683.html>> [Accessed 2 September 2020].

²⁸ Uneca.org, 2020, *Without Adequate Protection, Estimates Show That Over 300,000 Africans Could Lose Their Lives Due To COVID-19 - ECA Report | United Nations Economic Commission For Africa*, [online] Available at: <<https://www.uneca.org/stories/without-adequate-protection-estimates-show-over-300000-africans-could-lose-their-lives-due>> [Accessed 20 August 2020].

restrictions between participating countries and achieve sustainable and inclusive socio-economic growth.²⁹ While a significant percentage of African countries are now on board, the COVID-19 has negatively impacted the progress of the agreement as governments refocused energies on protecting lives and lessening the impact of the pandemic. It does, however, also provide a long-term opportunity for African countries to further establish intra-Africa trade and bolster sustainable growth in Africa³⁰.

African countries may rely on Foreign Direct Investment (FDI) to grow their economies. Yet amid the global uncertainty and economic insecurity, international investors are retreating from Africa, at a time when capital is needed to support the economic activity which underpins jobs and livelihoods. This is clearly illustrated in a United Nations World Trade report³¹ which projects that FDI into Africa will contract by 25 percent in 2020.

Furthermore, it reports that the 5 main FDI host countries (Egypt, South Africa, Congo, Nigeria and Ethiopia) all experienced double-digit reduction in FDI in 2019. This trend is set to continue under current conditions.

Unsurprisingly, FDI is correlated to global financial crises. Figure 4 shows FDI from 6 of the major global investor nations declining following the Subprime crisis. The impact of these declines are visible in FDI Inflows into Africa. See Figure 5 A.

²⁹ Odijie, M. E., 2019, The need for industrial policy coordination in the African Continental Free Trade Area, *African Affairs*, Volume 118, Issue 470, January 2019, 182-193, <https://doi.org/10.1093/afraf/ady054>.

³⁰ Tralac, 2020, COVID-19: Trade expert says AfCFTA could help Africa bounce back, Available at <https://www.tralac.org/news/article/14590-covid-19-trade-expert-says-afcfta-could-help-africa-bounce-back.html>.

³¹ Unctad.org, 2020, *Unctad.Org | Investment Flows In Africa Set To Drop 25% To 40% In 2020*, [online] Available at: <https://unctad.org/en/pages/newsdetails.aspx?OriginalVersionID=2400> [Accessed 19 July 2020].

Figure 5 B provides more recent FDI Inflows into Africa, and goes further by providing forecasted scenarios for 2020, following COVID-19 economic impact. According to the United Nations, the best case scenario will be a reduction of FDI Inflows into Africa of 22 percent year on year, with the worst case scenario being a reduction of over 44 percent year on year. The economic impact of COVID will be felt on the continent for the foreseeable future.

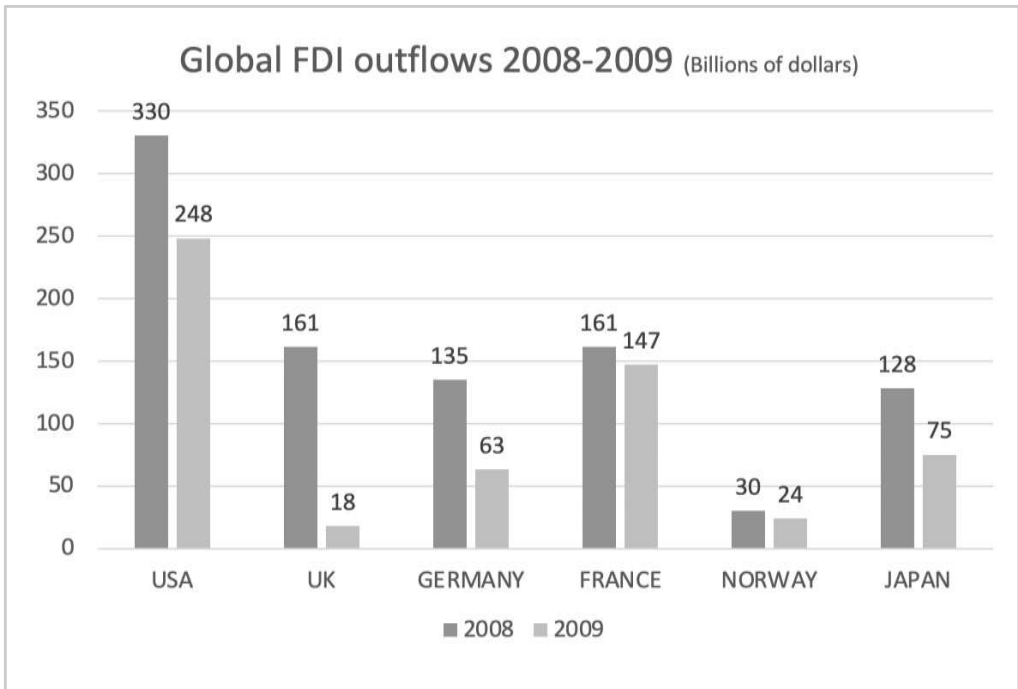


Figure 4. Global FDI Outflows from Major Global Investors. Adapted from United Nations Conference on Trade and Development³²

³² United Nations Conference on Trade and Development, 2020, *World Investment Report*, [online] New York: United Nations, Available at: <https://unctad.org/en/PublicationsLibrary/wir2020_en.pdf> [Accessed 19 July 2020].

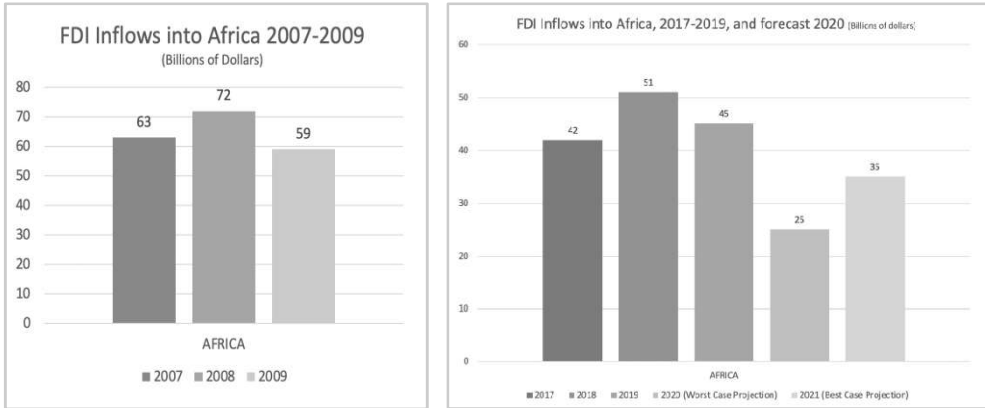


Figure 5. A) FDI Inflows into Africa 2007-2009. Figure 5. B) FDI Inflows into Africa 2017-2019, 2020 Forecast. Adapted from United Nations Conference on Trade and Development, 2020³³

The African Research Group (ARG), hosted by Nottingham University Business School, is a meeting place of minds across academia and professionals, all of whom focus on Africa through their work. In a recent ARG webinar, several key insights into decisions African Governments would be forced to make as a result of the economic impact COVID-19 was having, were discussed.

The ARG propose that:

1. African Governments are more likely to buy shares in ailing companies than to make social investments (e.g. SA's repeated bailout of SA Airline due to cash flow difficulties);
2. That companies will no-longer be able to invest in social issues because of immediate cash preservation tactics and future cash flow concerns;

³³ Ibid.

3. That non-listed companies (such as SEs) will consequently need to look to Banks for unsecured loans at, typically, include high interest rates;
4. That SEs will need to secure funding and resources, locally and overseas as aid or at very low interest rates that are sustainable over short timescales.

The Role that Social Enterprises (SEs) play in relief and recovery plans

SEs use business methods to respond to social problems. A key factor that sets SEs apart from normal businesses is that benefits or profits generated by SEs are focused on social enhancement or alleviation of a social problem and are often reinvested into the business rather than distributed as profits to stake or shareholders. One definition of SEs is that they use “entrepreneurial behaviour for social ends rather than for profit objectives, or alternatively, that the profits generated from market activities are used for the benefit of a specific disadvantaged group.”³⁴

The very definition of ‘performance’ within an SE is expanded from purely economic metrics (profit) to include social metrics, known as the double bottom line³⁵ or more recently the triple bottom line, where environmental metrics were added to the measurement.³⁶

SEs have stepped up to “find innovative new solutions to intractable social problems” then “often deliver services far more efficiently than the public sector” thanks to being “driven, ambitious leaders, with great skills in

³⁴ Leadbeater, C., 1997, *The Rise Of The Social Entrepreneur*, [online] London: DEMOS, 1, Available at: <<https://www.demos.co.uk/files/theriseofthesocialentrepreneur.pdf>> [Accessed 19 January 2020].

³⁵ Boschee, J., and McClurg, J., 2003, *Towards A Better Understanding Of Social Entrepreneurship - Some Important Distinctions*, [online] Caledonia, Available at: <<http://http://www.caledonia.org.uk>> [Accessed 24 February 2020].

³⁶ Cornelius, N., Todres, M., Janjuha-Jivraj, S., Woods, A., and Wallace, J., 2008, Corporate Social Responsibility and Social Enterprise, *Journal of Business Ethics* 81 (2): 355-370.

communicating a mission and inspiring staff, users and partners.”³⁷ Bennett³⁸ reports that SEs have become major providers of social welfare services, previously provided by the state.

SEs can be categorised as either for-profit, not-for-profit, or a combination of the two, known as a hybrid. Doherty, Haugh and Lyon³⁹ define hybrid SEs as organisations that uniquely combine “structures and practices that allow the coexistence of values and artefacts from two or more categories.” These ‘categories’ refer to traditional economic sectors being: private sector organisations, driven by market forces to maximise financial returns; public sector organisations, guided by public benefit and collective choice; and finally not-for-profit organisations, focus on social and environmental goals. The authors state that by pursuing financial, social and sometimes environmental aims, SEs are classified as hybrid organizations as they combine properties associated with private, public and non-profit organisations.

The important role that SEs play through the creation of employment and solving pressing social issues, means it is increasingly at the forefront of social agendas and has resulted in the establishment of numerous public and privately owned philanthropic organisations that promote social entrepreneurship (see Table 1).

Economies with advanced reporting modes are able to illustrate the economic contribution which SEs make, for example reports that suggest that SEs employ 13 percent of the EU workforce, and roughly 1.44 M people

³⁷ Leadbeater, C., 1997, *The Rise Of The Social Entrepreneur*, [online] London: DEMOS, 1, Available at: <<https://www.demos.co.uk/files/theriseofthesocialentrepreneur.pdf>> [Accessed 19 January 2020].

³⁸ Bennett, R., 2008, Marketing of Voluntary Organizations as Contract Providers of National and Local Government Welfare Services in the UK, *VOLUNTAS: International Journal of Voluntary and Nonprofit Organizations* 19 (3): 268-295.

³⁹ Doherty, B., Haugh, H. and Lyon, F., 2014, Social Enterprises as Hybrid Organizations: A Review and Research Agenda, *International Journal of Management Reviews* 16 (4): 417-436.

in the U.K. In 2019, SEs in Australia made up roughly 2-3 percent of its GDP⁴⁰, we also know that this so-called ‘third sector’ creates work for women, who are considered more economically vulnerable.⁴¹

Sadly, this level of clarity on the significant contributions SEs make in Africa is completely missing from the record, both at an individual state level, as well as a continental view point. Some may argue this could be due to the sheer number of states present in Africa, yet it can also be argued that it is as a result of SEs in Africa largely operating as informal businesses outside of formal structures and thereby not creating the required reporting that accompanies such organisations, such as annual reports, tax returns etc.

Government & Semi Government	Mission	Reference
The World Bank	The program identifies innovative business models aimed at the base of the pyramid then aims to realize the potential of these enterprises to be scaled, replicated or mainstreamed through public or private channels of service delivery, including Bank operations.	oic.worldbank.org, 2020
United Nations	They recognize that ending poverty must go hand-in-hand with strategies that build economic growth and address a range of social needs including education, health, equality and job opportunities, while tackling climate change and working to preserve our ocean and forests.	Sustainabledevelopment.un.org, 2020
European Union	aims to introduce a short-term action plan to support the development of social enterprises, key stakeholders in the social economy and social innovation.	Internal Market, Industry, Entrepreneurship and SMEs - European Commission, 2020
Foundations	Mission	Reference
Ashoka Foundation	Providing financial, knowledge, and logistical support, Ashoka works to share the wisdom of leading social entrepreneurs with a global audience.	Ashoka Everyone a Changemaker, 2020
Schwab Foundation for Social Entrepreneurs	Supporting the world's leading social entrepreneurs in their efforts to create a more just, equitable, and sustainable world	(Schwab Foundation for Social Entrepreneurship, 2020)
Ford Foundation	Reduce poverty through the provision of grants to support economic activity.	(Ford Foundation, 2020)
W.K. Kellogg Foundation	Safe and healthy children through employment for their parents.	(W.K. Kellogg Foundation, 2020)
Branson Center for Entrepreneurship	Social Entrepreneurship Incubator in Southern Africa	(Branson Centre of Entrepreneurship South Africa, 2020)
Bill and Melinda Gates Foundation	Financial Services, Sanitation, Health etc.	(Bill & Melinda Gates Foundation, 2020)

Table 1. Sample of Government and Private Sector organisations that focus on Social Entrepreneurship

⁴⁰ Social Change Central, 2020, *Social Enterprise: Statistics From Around The World - Social Change Central*, [online] Available at: <<https://www.socialchangecentral.com/social-enterprise-statistics-from-around-the-world/>> [Accessed 9 March 2020].

⁴¹ Guerrero, D., 2020, *Women In Nonprofit Leadership: Is There A Gender Gap? – Missionbox*, [online] MissionBox, Available at: <<https://www.missionbox.com/article/127/women-in-nonprofit-leadership-is-there-a-gender-gap>> [Accessed 8 March 2020].

Social Enterprises stand as a potential saving grace for African economies. As small entrepreneurial ventures, SEs are by nature, more agile and responsive than large organisations and are therefore better equipped to respond very quickly to immediate needs that would undoubtedly arise in communities following a shock such as Covid-19.

SEs are also uniquely positioned to help shape the long-term outcome of economies through the use of lobbying and collaboration with governments, as well as large public and private institutions to bring about proactive, more sustainable change. In a 2006 paper on the role of social networks in informal manufacturing in Nigeria, Kate Meagher⁴² says that where states and markets are considered weak, social networks can effectively fill in the gaps present in formal institutional provision and regulatory capacity. She goes on to say that successful social networks not only create trust and enhances flexibility, but can also help ‘facilitate the integration into the global economy.’

The RFIG Global Social Franchise Index⁴³ ranks 131 countries according to the impacts social entrepreneurship and social franchising can have on the well-being of their citizens and the top 10 countries are all in Africa.

SEs have proven to be an effective vehicle to encourage community building between diverse groups and facilitate development in Africa. This is done by cultivating the creative involvement of community groups with priority placed on communal needs and ideas to drive development of community skills⁴⁴.

⁴² Meagher, K., 2006, Social capital, social liabilities, and political capital: Social networks and informal manufacturing in Nigeria, *African Affairs* 105 (421): 553-582.

⁴³ Rosenberg International Franchise Center, 2020, *RFIG Global Social Franchise Index™*, [online] Available at: <<https://www.unh.edu/rosenbergcenter/rifc-global-social-franchise-index™>> [Accessed 20 August 2020].

⁴⁴ Nega, B., & Schneider, G., 2014, Social entrepreneurship, microfinance, and economic development in Africa, *Journal of Economic Issues* 48 (2): 367-376.

Social Entrepreneurs often operate without access to the resources necessary to be truly successful. In a study by Heike Schirmer⁴⁵, it is suggested that a way to overcome this is to build 'efficient and effective' partnerships. This requires a shift from a 'means-driven' approach to partnership building (what do we have, what do we need) towards a 'goal-driven' approach to partnership building (what do we want to achieve, who do we need to work with to achieve this). It is this approach that SEs in Africa will need to master to build the partnerships they need to be effective.

In another example of the required change in behaviour of SEs, a study of SEs done by Desa and Basu⁴⁶ reviews how SEs mobilise resources to achieve their goals. He suggests they take one of two routes: bricolage or optimisation. A 'Bricolage' approach is when SEs take the approach of 'making do with what you have' and seek to address 'opportunities and problems with existing undervalued, slack or discarded resources that are often available for free or cheaply'. Whereas an 'Optimisation' approach is when the SE accesses 'standard, high quality resources' that have proven capabilities in their area to provide the organisation the means to enhance or maximise efficiencies and achieve goals. In both cases, it is clear that SEs who set their own goals and access better partnerships, will be more successful and sustainable in the long run. Tello-Rozas, Pozzebon and Mailhot⁴⁷ suggested that large-scale socially driven partnerships (they call these collaborations) can both scale-up social value creation and lead to more purposive collective action.

⁴⁵ Schirmer, H., 2013, Partnership Steering Wheels: How the Formation Process of a Cross-sector Partnership can Influence its Governance Mechanisms, *The Journal of corporate Citizenship* 50 (Business-NGO Partnerships): 23-45.

⁴⁶ Desa, G., and Basu, S., 2013, Optimization or Bricolage? Overcoming Resource Constraints in Global Social Entrepreneurship, *Strategic Entrepreneurship Journal* 7 (1): 26-49.

⁴⁷ Tello-Rozas, S., Pozzebon, M., and Mailhot, C., 2015, Uncovering Micro-Practices and Pathways of Engagement That Scale Up Social-Driven Collaborations: A Practice View of Power, *Journal of Management Studies* 52 (8): 1064-1096.

Why are these points so important to African SEs? With aid and FDI reducing across Africa, SEs will be required to proactively recruit supporters and build partnerships directly, both within their local contexts, but also in foreign territories. This will result in them, possibly for the first time, competing directly with the market for customers, donors and advocates. They will need to enhance and organise their performance. They will need to 'professionalise'. This will require SEs to look for and adopt principles and practices from the private sector⁴⁸.

Key Findings

Based on the literature reviewed, it is clear that SEs may be used to operating as 'bricolage' organisations, however, to be effective in this new and daunting post-COVID world, they will need to behave as 'optimised' organisations to continue making the impact they wish to make.

Davies, Haugh and Chambers⁴⁹ conducted an in-depth study of SEs and identified 3 barriers to growth and suggested a response to overcome each barrier. These are detailed in table 2.

Barrier to SE Growth	Description	Response to Barrier	Description
Value Based Barriers	Stakeholder differences in values as relates to ethics, growth strategies and	Values based decision making	Adopt value-based partnerships between SEs, suppliers etc, in

⁴⁸ Miles, M., Verreynne, M., and Luke, B., 2013, Social Enterprises and the Performance Advantages of a Vincentian Marketing Orientation, *Journal of Business Ethics* 123 (4): 549-556.

⁴⁹ Davies, I., Haugh, H., and Chambers, L., 2019, Barriers to Social Enterprise Growth, *Journal of Small Business Management* 57 (4): 1616-1636.

	attitudes for the SE.		which commercial and social missions are aligned before you proceed.
Business Model Barriers	Business models used by SEs may limit their ability to access finance and to secure human capital etc	Leveraging Social Mission	Leverage the social mission of the SE to access finance as well as recruit and motivate human resources.
Institutional Barriers	SEs not adopting commercial strategies or having customer focused strategies	Anchoring	The practice of creating and strengthening connections within the local community, thereby raising consumer awareness of the SE.

Table 2: Davies, Haugh and Chambers Barriers to growth and Strategies to overcome

It is clear from their analysis that the barriers to growth need to be addressed through professional interventions, though it is particularly

noteworthy that both ‘leveraging social mission’ and ‘anchoring’ would require communications and tactical marketing know-how on behalf of the SE.

An example of the results of taking a professional marketing approach by SEs can be illustrated using the research conducted by Akhtar⁵⁰ in which he shows that communications was a key aspect to increased levels of social value creation, which in-turn could be translated into social gain for SEs. One of the channels being identified as a tool to achieve this form of enhanced communication is social media. Significantly, the research suggested that the use of social platforms could provide SE’s a way to overcome the limited resources they have.

This leads us to consider what is commonly known as the ‘4th Industrial Revolution’, which relates specifically to digital commerce and communications technologies. SEs progression to digital has been slow due to lack of resources and know-how, however, COVID-19 has sped this process up and has created an opportunity for greater innovation, removing geographical restrictions and reducing costs while improving efficiencies. SE’s are grappling with this new way of working and require these skills to address the threat of widening the digital divide.⁵¹

Gupta, Beinger and Ganesh⁵² developed a five-part model following an in depth study of 2 SEs based in Africa, that they believe will help other SEs develop sustainable and innovative solutions. In the table 3, it is illustrated how marketing, especially digital marketing tools, can efficiently and successfully achieve these outcomes.

⁵⁰ Akhtar, G., 2019, *Social Media And Knowledge Sharing*, Ph.D. University of Bradford.

⁵¹ Amadi-Echendu, J., & Thopil, G., 2020, Resilience is paramount for managing socio-technological systems during and post Covid-19, *IEEE Engineering Management Review*.

⁵² Gupta, S., Beninger, S., and Ganesh, J., 2015, A hybrid approach to innovation by social enterprises: lessons from Africa, *Social Enterprise Journal* 11 (1): 89-112.

Element of Model developed by Gupta, Beninger and Ganesh (2015)	Description of Element	Digital Application of / or solution to Element
Comprehension	"Successful innovation begins with comprehensive understanding of both the macro- and the micro-environment" of the SE.	<ul style="list-style-type: none"> SEs can use data and insights derived from Social Media platforms Review of Search Terms used on search engines such as Google and YouTube Measure consumer sentiment using social listening tools Use communications technologies such as What's App or Facebook Messenger, to reach and engage with consumers in remote areas
Creation	"Creation is the core of innovation. [...]analysis shows [...] that creation occurs across three areas: products and services, markets and distribution channels and supporting infrastructure."	<ul style="list-style-type: none"> Customer feedback and ratings received on digital platforms can aid in product improvements and new product development Digital advertising can help create new markets but targeting customers in new areas Digital communications platforms can help with after sales service communication and problem solving.
Connection	"Social enterprises need to cultivate and manage formal and informal partnerships with a variety of stakeholders that span the for-profit, non-profit and public sectors."	<ul style="list-style-type: none"> Digital networking sites such as LinkedIn can aid in creating connections around the world Communicating with stakeholders is substantially improved with digital messaging tools, that allow for text and video messaging capabilities. This further allows for communication in different languages depending on literacy capabilities and language preference.
Capabilities Building and Education	[...] "the need to engage in educational activities targeted at consumers, beneficiaries and communities, as well as to build local capabilities."	<ul style="list-style-type: none"> Websites can house resources such as manuals, guidelines, videos etc. which can be used to enhance capabilities. Webinars are online broadcasts of videos, which allow for participation and collaboration in real time, across the globe. These functions can also be delivered the preferred language of the audience.
Trust	[...] "trust is both an outcome of successfully implementing the four capabilities [...] and a necessary condition for achieving success in implementing those capabilities."	<ul style="list-style-type: none"> An online presence such as a website profile, aids in creating a level of trust and legitimacy of the organisation. Transparency of communication across platforms increases effectiveness and trust.

Table 3: Gupta, Beinger and Ganesh Five Part Model Of SE Sustainability and Success with Digital Application illustrated by Authors

Conclusion

Based on the analysis conducted, it can be surmised that, like the majority of the world, governments in Africa have entered the COVID-induced economic and social crisis ill-prepared for the full impact it may have on their societies. They are facing decreasing levels of aid and FDI inflows into their markets, which severely limits their ability to provide the services required to maintain social welfare during these difficult times.

SEs in Africa have a unique and important role to play in providing social support during, and following, COVID-19. They are positioned to work quickly, measurably and sustainably, often being more efficient and innovative than governments or aid organisations can be.

Research has demonstrated that SEs who have largely operated as ‘informal’ or ‘bricolage’ organisations will be required to take a more managerial approach to their business operations, which will be vital in securing support from foreign investors and volunteers, and ensuring their success in the long run.

In addition, areas which SEs must improve on include reporting, networking, communications and marketing and in doing so, they will benefit from forging relationships with stakeholders, both within their own countries, including their immediate community, government agencies and other SEs; but also, with international stakeholders such as aid organisations, philanthropic organisations and consumers.

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The Securitisation of COVID-19: Governing the Animus of Publics in Uganda

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Abstract: *The securitisation theory has been used variably to explain global affairs. However, in securitisation literature, the ‘audience’ remains under-researched, often treated as passive and without agency. The Coronavirus, which hit the entire globe in unprecedented ways, has put different types of governments and leaders to the test. Countries around the world are experiencing or experienced either partial or total lockdown to curb the spread of the virus which saw infections in the millions and deaths in the hundreds of thousands. The government of Uganda, in particular, opted for a total lockdown, with only essential services allowed to operate. Between mid-March and July 2020, President Yoweri Museveni had addressed the nation 16 times, including a state of nation address where he reiterated the lockdown restrictions and guidelines for citizens. At the beginning of the lockdown, Museveni instituted state security machinery to make sure the guidelines were strictly followed. In this paper, I will argue that in Uganda, COVID-19, a public health issue, was co-constructed as an existential security threat that inspired motivation and drew animosity from different publics (audiences), with public trust gaining and waning. Governing this animus became the preoccupation of Museveni’s government during the lockdown, putting him at the centre stage.*

Key words: *Securitisation, trust, COVID-19, publics, Uganda.*

“There is no Coronavirus in Uganda. It is just politics”.¹

“A five-time elected dictator? That must be a wonderful dictator”.²

¹ Author’s informal discussion held on 26.06.2020 with a young business-owner discussing the shutdown of small businesses in Gulu district.

² President Yoweri Museveni in a TV interview on *Talk to Al Jazeera* in April 2017 when asked if he thought Ugandans were tired of him because of his long stay in power and his dictatorship-tendencies.

Introduction

The year 2020 witnessed an unprecedented global pandemic. At the time of writing this article in September 2020, over 25 million people were infected and over 700,000 deaths from the Coronavirus had occurred, globally. COVID-19, as it came to be called, originated in the city of Wuhan, China in December 2019, and later spread across the globe, forcing countries to begin looking in-ward by locking down their borders, restricting international travel and following strict health guidelines on preventing the spread of the pandemic.

On 5th July 2020, renowned journalist, Fareed Zakaria of the *CNN's GPS show*, hosted Francis Fukuyama, Professor of political science. Zakaria paused a question as to whether it was democracies or dictatorships that fared better in the fight against COVID-19. Professor Fukuyama's analysis of the issue is very telling. He summed it up as an issue of governance (or government) and state capacity, of which there have been examples of both democracies and dictatorships that have fared better or worse. Experience has shown that the US, a democracy, has not managed the pandemic as well as was expected and instead witnessed increased numbers of infections while it was going down in the rest of the world. On the other hand, New Zealand and South Korea, also democracies, managed to get the numbers of infections in check in the shortest time possible. The president of New Zealand a woman, and the health minister of South Korea, also a woman, received global praise for their efforts in fighting the pandemic, which in fact brought about debates as to whether it was a gender issue in leadership that could have been responsible for the lowered numbers of infections around the world.

In some countries, the crisis of COVID-19 witnessed a further decline of democracy, e.g. in Ethiopia and Hungary where leaders and ruling parties used the pandemic as an excuse to hold on to power. In many countries across the African continent, the months of March to August 2020 were

marred by political arrests, imprisonment for failure to adhere to the rules of the lockdowns, crackdowns on free press, freedom of expression and the right to peaceful protest. However, what is also revealed is people's increased desire for democratic governments and governance. In Mali, people took to the streets demanding the resignation of President Ibrahim Boubacar Keita for his poor handling of the country's economic crises, armed rebel groups, inter-ethnic violence and corruption.³ By August 2020, Keita had been undemocratically ousted from power through a military coup.

Since the World Health Organisation (WHO) declared COVID-19 a global pandemic in March 2020, it became evident that it was more than a public health crisis, but had indeed revealed fault lines in other aspects of society including government and governance. Leadership in many countries – developed and developing alike – faced both praise and criticism for the way they handled the pandemic. Countries like Algeria, Egypt, Sudan and South Africa, which already had existing underlying structural problems, witnessed public protests against the lockdown measures because it infringed on livelihoods and civil liberties.

Even though some curbs on freedom are necessary during emergency periods, Covid-19 has created opportunities for autocratic governments to tighten their grip on power, arguing that strong measures are needed to keep the public safe.⁴ According to Hautz, the danger to hang on to this power is greatest in democracies that have weak institutional safeguards, whose mischief may not be 'seen' because the world's attention is on the pandemic which is raging everywhere at once. Tightening grip on power has been witnessed in for example Algeria, India, Russia, Fiji, Kenya, El

³ M. Ramdeen, "Social and political protests, exacerbated by the COVID-19 pandemic, on the increase in Africa," *ACCORD Conflict and Resilience Monitor*, July 2020.

⁴ M. Hautz, "Would-be autocrats are using covid-19 as an excuse to grab more power," *The Economist*, 23 April 2020, Available at: <<https://www.economist.com/international/2020/04/23/would-be-autocrats-are-using-covid-19-as-an-excuse-to-grab-more-power>>.

Salvador, where governments have quashed demonstrations and protests, arbitrarily arresting and detaining people and thus precipitating constitutional crises in those countries.

China, an authoritarian country and where the virus originated, managed the pandemic swiftly and efficiently. Fukuyama raised an important element, i.e. citizens' trust in institutions (and the expertise of individuals running those institutions) which seemed to have been more effective in bringing the numbers of infections down, as there is no proven correlation between the type of government (dictatorship or democracy) and low / high prevalence of COVID-19. Trust in institutions is the basis for citizens to adhere to lockdowns, wear face masks, wash hands regularly, etc. Trust is also extended to those individuals in positions of power because of their education, expertise and leadership skills, acting in the best interests of their countries.

By August 2020, Africa had recorded one million infections and thus far, was least hit by the virus even though experts warned of a new epicentre on the Continent, moving away from the United States (US) and Latin America, particularly Brazil. The East African Community (EAC) governments looked towards the West – IMF, the World Bank and the European Union (EU) for support to combat possible effects of the pandemic. Collectively in the EAC, by July 2020, there were just over 10,000 infections. The approach to combating the pandemic took different forms. Kenya, Uganda and Rwanda opted for partial lockdowns while Tanzania and Burundi did not lockdown any sectors.

This paper highlights the efforts made by Uganda's President Yoweri Museveni in dealing with the Coronavirus and how governing the animus – both motivation and animosity – of the publics, has become the preoccupation of his government. It is anchored in securitisation theory to understand how the Coronavirus, a public health issue, becomes a political and security issue and thus, threat. To understand the animus of publics

(audience), the concept of trust is used to argue how motivation and/or animosity is engendered and governed in the period of distress and public suspicion.

I use the term public / citizens and audience interchangeably, while remaining critically aware that the 'audience' in securitisation studies does not always mean 'population' or 'citizenry'.⁵ The Ugandan public / citizens have taken part in the discursive politics of the securitization of COVID-19 in practice, and thus are the focus of this paper. I argue that COVID-19 was co-constructed as a security threat by the government in relation with different audiences, in a mutual relationship that bred both motivation and animosity.

Theoretical and conceptual underpinnings

Securitisation theory which gained impetus after the 9/11 terror attacks on the US, has been used to explain much of global politics⁶ including global public health. The concept 'securitisation' was first articulated in the working paper in 1989 by the Danish scholar, Ole Wæver. Wæver later developed the concept to understand security and in 1998, together with colleagues, led to a co-authored book as a framework for analysing security. In their book, they defined securitisation as when an issue is "presented as an existential threat, requiring emergency measures and justifying actions outside the normal bounds of political procedure".⁷ Succinctly, securitisation

⁵ S. Leonard and C. Kaunert, "Reconceptualizing the audience in securitization theory," in *Securitization Theory: How security problems emerge and dissolve*, ed. T. Balzacq, 59 (London and New York: Routledge, 2011).

⁶ S. Jenkins, "The politics of fear and the securitization of African elections," *Journal of Democratization* 27, 5 (2020): 836-853.

⁷ B. Buzan, O. Wæver and J. de Wilde, *Security: A New Framework for Analysis* (Boulder, CO; London: Ly, 1998), 23-24.

is “the public framing of an issue as a national threat accompanied by a strategy to act”.⁸

‘It is by labelling something a security issue that it becomes one’.⁹ By stating that a particular referent object is threatened in its existence, a securitizing actor claims a right to extraordinary measures to ensure the referent object’s survival. Security is a social and intersubjective construction. According to Taureck, a successful securitisation consists of identification of existential threats, emergency action and effects on inter-unit relations by breaking free of rules,¹⁰ and its successful use involves the ability to socially and politically construct a threat.

The referent actor, such as the leader of a country chooses a referent object such as a pandemic, and makes that referent object a security issue. The referent actor requires an audience e.g. citizens or voters (to gain support), opposition (to intimidate or control behaviour) and international actors like the EU (to gain support and tolerance) to believe in the cause. The legitimacy of the extraordinary measures solely depends on the audience who must be convinced by the securitizing actor of the need to take such actions.¹¹

COVID-19 has witnessed the securitisation of global health.¹² It has been framed as a threat to humanity and the proper functioning of societies, to the overwhelming collapse of health systems. The language of ‘security’ has

⁸ R. Sjostedt, “Health issues and securitization: The construction of HIV/AIDS as a US national security threat,” in *Securitization Theory: How security problems emerge and dissolve*, ed. T. Balzacq, 151 (London & New York: Routledge, 2011).

⁹ O. Wæver, “Aberystwyth, Paris, Copenhagen: New Schools in Security Theory and the Origins between Core and Periphery,” Montreal: ISA Conference, March, 2004, 13.

¹⁰ R. Taureck, “Securitization theory and securitization studies,” *Journal of International Relations Development* 9, 1 (2006): 54.

¹¹ A. O. Ogunnoiki, “The Securitisation of COVID-19 in a globalised world,” Unpublished academic paper, University of Lagos, 2000.

¹² J. Nunes, “The COVID-19 pandemic: neoliberal crisis, and global vulnerabilization,” *Cad. Saúde Pública* 36, 5 (2020), Available at: <<https://doi.org/10.1590/0102-311X00063120>>.

been used by states and the international health system before, claiming that pandemics constitute imminent security threats.¹³ In 2000, the Clinton administration formally declared AIDS a major threat to US national security, the first time a disease was viewed in terms of security implications with the ability to topple governments, spark ethnic wars and destroy free-market democracies.¹⁴ In Africa, the language of instability of international peace and security has been applied to outbreaks such as HIV/AIDS and Ebola.

These speech acts have been given around the world, declaring ‘a war’ against an invisible enemy, e.g. US, France, UK, etc. It can safely be said that COVID-19 was successfully securitised by WHO and various states, which led to the adoption and execution of extraordinary measures to contain and possibly eradicate the deadly virus.¹⁵ Confinement and social distancing can be seen as acts of securitisation that have given additional powers to governments leading to militarisation of response measures against the pandemic¹⁶ and societies have accepted this state as unprecedented as it is.

Trust is a concept that has concerned social scientists for decades. Trust – beliefs about how others are behaving in a specific society or in politics, plays an important role in the understanding of governance in the times of COVID-19. According to Khemani the segment most relevant for understanding governance in the times of COVID-19 concerns corruption, viewed as the lack of trust in public institutions.¹⁷ Where corruption is perceived to be high, public mistrust in institutions follows when people believe that resources are being stolen for private gain. Trust in the role of

¹³ A. O. Ogunnoiki, “The Securitisation of COVID-19 in a globalised world.”

¹⁴ Sjostedt, “Health issues and securitization: The construction of HIV/AIDS as a US national security threat,” 150.

¹⁵ A. O. Ogunnoiki, “The Securitisation of COVID-19 in a globalised world.”

¹⁶ Nunes, “The COVID-19 pandemic: neoliberal crisis, and global vulnerabilization.”

¹⁷ S. Khemani, “An Opportunity to Build Legitimacy and Trust in Public Institutions in the Time of COVID-19,” *World Bank Group Research & Policy Briefs* (World Bank: Malaysia Hub, 2020).

governments and public institutions to improve lives and economies, is high in developing countries.

Citizens' trust in government is necessary for the attainment of societal goals, as well as securing compliance without coercion.¹⁸ Early debates on trust focused on whether declining trust reflected citizens' disaffection with the political system / regimes or the dissatisfaction with incumbent political leaders. More and more, however, attributes have been made to a variety of causal social, economic or political factors, going up or down depending on citizens' perceptions of their governments' performance in different sectors of society.¹⁹

Most fundamentally, institutional trust has commonly been conceived of as a democratic good in and of itself as well as an important gauge of a democracy's political health.²⁰ A number of studies have also argued that a public's trust in the actors and institutions of political authority facilitates democratic consolidation, in that institutionally trusting individuals have been found to be more supportive of democratic principles. In addition, existing research underscores the importance of institutional distrust as a determinant of political participation, especially nonelectoral participation such as protest activity and political consumerism. This idea that institutional trust is fundamentally the product of a performance-based evaluation finds a great deal of support in many studies that have examined the effects of public-sector corruption on attitudes related to political support.²¹

¹⁸ V. A. Chanley, T. J. Rudolph and W. M. Rahn, "The origins and consequences of public trust in government a time series analysis," *The Public Opinion Quarterly* 64, 3 (2000): 239-256.

¹⁹ A. Hakhverdian and Q. Mayne, *The Journal of Politics* 74, 3 (2012): 739-750.

²⁰ Ibid.

²¹ Hakhverdian and Mayne, *The Journal of Politics*; Q. Yang and W. Tang, "Exploring the Sources of Institutional Trust in China: Culture, Mobilization, or Performance?" *Asian Politics & Policy* 2, 3 (2010): 415-436.

As a result of mistrust and suspicion, in many countries, the state came to be seen as predatory and protests against lockdowns erupted in several hotspots.²² Khemani²³ has asked some important questions relating to governance under COVID-19: Will people comply with public health regulations? Will there be protests and social chaos? And will the global nature of the pandemic further authoritarian politics and human rights violations? I argue that these questions can be linked to the notion of public trust in government and its institutions. In Uganda, the citizens (public / audience) have reacted to the COVID-19 restriction measures and lockdown in varied ways, accepting and being part of the securitisation narrative as well as rejecting it totally.

Presidential addresses to the Nation: Securitisation of COVID-19

After independence in 1962, Uganda grappled with civil wars and political unrest until Yoweri Museveni seized power through a *coup d'état*, and has ruled, under his National Resistance Movement (NRM) party, since 1986. Since then, Uganda has carried out democratic elections, Museveni having emerged winner in all five of them. Museveni came to be known and praised as a “new breed” leader, a Statesman in Africa whose ideas were aligned to and fashioned after Western ideas of democracy.²⁴ The NRM government has made huge strides to promote law and order, equal rights for women, access to education and healthcare, and the fight against HIV/Aids. Museveni was courted by Western governments and money poured into Uganda pegged on conditionalities of these efforts being made.²⁵ After

²² Hautz, “Would-be autocrats are using covid-19 as an excuse to grab more power.”

²³ Khemani, “An Opportunity to Build Legitimacy and Trust in Public Institutions in the Time of COVID-19.”

²⁴ J. Oloka-Onyango, “‘New-breed’ leadership, conflict, and reconstruction in the Great Lakes Region of Africa: A sociopolitical biography of Uganda’s Yoweri Kaguta Museveni,” *Africa Today* 50, 3 (2004): 29-52.

²⁵ J. Oloka-Onyango, “Beyond the Rhetoric: Reinvigorating the Struggle for Economic and Social Rights in Africa,” *California Western International Law Journal* 26, 1 (1995): article 3; Oloka-Onyango, “‘New-breed’ leadership, conflict, and reconstruction in the Great Lakes

decades of bad rule and violent dictatorships, Museveni laid out plans and strategies with a vision for a new Africa; his vision for leadership and responsibility for change and democratic transition in Uganda brought hope.²⁶ The NRM government has made many strides in infrastructural development, gender equality, education, healthcare and the fight against HIV/Aids. Freedom of expression, peaceful protest and human rights, all enshrined in the 1995 Constitution of Uganda, were all expressions of the importation of the normative power of the West that promoted rule of law and human rights, in short, democracy.

Thirty-four years and five (re-)elections later, Museveni's rule has taken on what has come to be described as a dictatorship.²⁷ Museveni's government has been accused of being hostile towards opposition parties, vote rigging, as well as controlling independent branches of government including the judiciary and legislature. In the last 34 years of his rule, Museveni has changed the constitution of Uganda – lifting the age limit of presidential candidates, extending ruling terms from 5-7 years and abolishing presidential term limits – effectively making him a ruler for life. In his addresses to the nation, Museveni is well known for his anecdotes about the “bush war” that he fought in order to bring peace and stability to Uganda as well as save the country from past brutal dictatorships. He often refers to how far Uganda has come since before 1986, citing infrastructural development, good road networks, electricity and scientific innovations.

Without discounting these achievements, it is also notable that there are high illiteracy levels, high unemployment rates, poverty in a population with 70 percent young people, and a healthcare system in shambles. The gap between the rich and the poor continues to grow unabated, and high levels

Region of Africa: A sociopolitical biography of Uganda's Yoweri Kaguta Museveni.”

²⁶ K. M. Yoweri, *Sowing the mustard seed: The struggle for freedom* (London: Macmillan, 1997).

²⁷ G. Maltz, “The case for presidential term limits,” *Journal of Democracy* 18, 1 (2007), 128-142; Oloka-Onyango, “‘New-breed’ leadership, conflict, and reconstruction in the Great Lakes Region of Africa: A sociopolitical biography of Uganda's Yoweri Kaguta Museveni.”

of corruption within government continues with impunity. Government critics are treated as criminals, facing arrest and assault by police officers. The elections are often treated as security threats that must be dealt with swiftly so as not to “destabilise” the country. With the growing numbers of dissention and citizen disgruntlement, often expressed through social media, in 2018, the government instigated the over-the-top tax (OTT) also known as the “gossip tax”, a tax levied on social media apps including messenger, WhatsApp, Facebook and others. This was done in a bid to deter the digital sharing of critical material including material from opposition parties who seemed to be gaining support from the masses.

In March 2020, the Government of Uganda initiated a partial lockdown, only permitting the “essential” workers and services including medical, supermarkets, food markets, banks, etc., to operate. Public transportation, schools, universities and tertiary institutions, shopping malls and non-food markets were immediately closed for 14 days. People were encouraged to “work from home” and only walk to purchase food, medicine or other essential services. The work from home regime consisted of among others, people in formal employment who could afford or were able to establish an on-line presence that was required by their jobs. Vast sections of formal and informal markets were shut down. Usually jammed streets were suddenly emptied of cars and pedestrians. Bars, hotels and popular ‘hangouts’ lost their patrons as people listened to the news updates on the numbers of COVID-19 cases in the country. Information continued pouring from the Ministry of Health that the growing numbers – still in double digits between March and April – were people who had been abroad and returned home with the virus. On this realisation, the international airport at Entebbe was closed in order to guard against ‘imported’ infections. Ministry of Health followed guidelines of testing, contact tracing and isolation for people who tested positive for the virus. This first lockdown was met with approval from majority of Ugandans some believing in the leadership of President Museveni and most because they had no choice but to accept the new

reality. The government also instituted state security machinery to make sure the guidelines were strictly followed. It was commonplace to see soldiers, military police and other paramilitary units patrolling the streets at all times of the day, sometimes using violence and brutal force to enforce the lockdown restriction measures. In March and April of 2020, security personnel would be seen beating up people, men and women alike, until the President addressed the nation, stopping these violent acts. Security personnel followed the presidential guidelines to the letter, indeed acting like machinery without human faculties to 'interpret' vulnerability.

In early April, as eager Ugandans gathered around their radios and television sets in hopes of the easement of restrictions due to low numbers of infections and no reported deaths from the pandemic, Museveni announced an extension of the lockdown for another 21 days as the "government assessed the situation". Between March and June 2020, Museveni, addressed the nation approximately sixteen times, some of these addresses being clarifications of previous ones, in an effort to govern the COVID-19 situation and keep relating with his audience.

President Museveni reached out to Ugandans to give donations towards the efforts to fight the pandemic, a drive that was met with a positive response. The president read out long lists of donations that had been given in cash and in-kind to support the COVID-19 Taskforce. Donations in cash, food items, medical personal protective equipment, vehicles, hand sanitizers and soap, worth billions of shillings were donated to be distributed to the most vulnerable sections of society, hardest hit by the lockdown. It began to be clear, judging from comments on social media, that citizens had gained a new form of respect and confidence in Museveni's leadership in trying to combat the virus before it hit the country on a massive scale. All the while, Museveni and different government officials unleashed emergency plans to create quarantine units in hospitals, increase the number of patient beds, provide ambulances and generally improve the response time and responsiveness. Indeed, COVID-19 was a public health issue that was dealt

with in a crisis mode right from the beginning and transformed into a national security issue.

The President announced government's plan to distribute food to poor and vulnerable households. In one of his nation-wide addresses, he justified this move, explaining that many households within and around the capital city lived day to day from hand to mouth and did not have any savings in the bank or any cultivation fields to fall back on in lean times. He therefore promised that the government would procure maize flour or *posho*, and beans which would be distributed at the village level where it would be easy for the village leaders to identify those vulnerable people. This move was met with applause and true to its promise, the government delivered. But this was not without contention and elaborate drama. Scandals of corruption were reported and videos made rounds on social media of some female-headed households who 'missed' the food distributions and were feeding their children on scraps and dumpsters. Some politicians, including the Speaker of Parliament, went on record stating that the food procurement process had been marred by corruption and that the beans that had been distributed were rotten, not fit for human consumption.

Despite the uproar, however, President Museveni cautioned "opportunistic politicians" who tried to distribute food aid to their needy constituents that they would be charged with "attempted murder" because only the State had the mandate to procure food aid and therefore, take care of Ugandan citizens during a crisis such as this. Food distributions done in a haphazard manner would draw large crowds and therefore put people's lives at risk. As it were, this declaration drew outrage from different publics. One member of the opposition, Hon. Francis Zaake was assaulted and brutally handled by the police for distributing food in his constituency. Zaake was hospitalised and pictures of him lying in a hospital bed also made rounds around the country.

Besides the ‘no food distribution except by authorised persons’ rule, no gatherings of any kind were accepted. Museveni also reiterated how people in developed countries were dying in large numbers because of “their lifestyle” which was very different from that of Africans, and possibly why Africa was not reporting as many deaths as a direct result of the Coronavirus. He pushed for what he called ‘scientific’ weddings, funerals, burials and other necessary gatherings. For him science is the road to development and these scientific gatherings were to be the new reality – people gathering in small numbers (usually no more than 10-15), wearing masks, sanitizing and maintaining social distance. In his addresses he sometimes comically explained what social distance meant, usually in different locally spoken languages to make certain that all Ugandans understood the concept and adhered to it as part of the prevention measures.

Presidential and parliamentary elections are due to take place in February 2021, meaning that 2020 was to be a year of intense campaigns. As of July 2020, there were several presidential candidates vying to unseat president Museveni after his 34 years in power. A number of countries are holding elections on schedule, but some with a hidden agenda, knowing that the opposition will not be able to campaign effectively due to stringent lockdown measures, while the incumbents ‘campaign’ on television²⁸ using the pandemic as a platform. Most campaigns in Uganda have taken on a ‘scientific’ nature with severe restrictions on large gatherings and the promotion of use of other means including social media, and internet platforms even though a new public notice was sent in early September by the Uganda Communications Commission, requiring anyone seeking to post on-line information to get authorisation.

The lockdown period was a difficult one on the average Ugandan where COVID-19 overshadowed everything else. Livelihoods and incomes were

²⁸ Cf. Hautz, “Would-be autocrats are using covid-19 as an excuse to grab more power.”

disrupted and some stopped all together. Access to hospitals and healthcare seeking became difficult for ailments other than COVID-19, schools shut down leaving students and their guardians uncertain about the future. The lockdown also made openly glaring the divide in society based on gender, age, income strata or refugee status. Inequalities and vulnerabilities were exposed and exacerbated. For a country with a fast-growing population with over 70% young people, mostly unemployed, this made the situation even more dire. Vulnerabilities, both real and perceived fed into previous grievances against different public institutions.

For a time, it seemed that Ugandans had accepted the security narrative; the president lending legitimacy to it through his hands-on approach and regular televised updates on the COVID-19 situation in Uganda. But as Jenkins²⁹ reminds us, audiences are not passive recipients of speech acts and can indeed be active agents in the construction of threats, engaging with moves in different ways, (re-)shaping security narratives.³⁰ Like the quote that opened this article, a growing narrative among the populace was that there was no Coronavirus in Uganda, and that it was all ‘politics’, revealing sentiments of mistrust in public institutions.

A focus on audiences in the securitisation of COVID-19 in Uganda

Several papers written on COVID-19 note that the conditions of inequality and vulnerability already existed and created avenues through which the pandemic pushed its way into society, creating even deeper social, economic and political cleavages.³¹ Health systems in the global South are riddled with precarious healthcare capacities, staff, resilience and access and other diseases such as tuberculosis, malaria and HIV/Aids continue to plague the African continent. According to Saad-Filho and Ayers, the

²⁹ Jenkins, “The politics of fear and the securitization of African elections.”

³⁰ See also Leonard and Kaunert, “Reconceptualizing the audience in securitization theory.”

³¹ A. Saad-Filho and A. J. Ayers, “‘A Ticking Time-Bomb’: The Global South in the Time of Coronavirus,” *Journal of Australian Political Economy*, no. 85 (2020): 84-93.

problems of the global South are a direct consequence of neoliberal structural adjustment which dismantled state capacities, institutional resilience, job stability, manufacturing capacity and incomes leaving them exposed to disruptions in global trade, finance and production. Turse,³² suggests that under pressure from COVID-19, deaths from secondary impacts – poverty, hunger, diseases, and violence exacerbated by the pandemic – may dwarf the number of those who die of the novel Coronavirus itself. A more desirable response and outcome based on public trust would require the expansion of democracy, transparency, and accountability of the state, which unfortunately, does not seem to be the case in much of the Global South.³³

Hautz³⁴ has argued that where governments are seen as legitimate (or trustworthy), and where they try to ease the economic pain, people are more likely to comply with lockdowns. Using game theory, Khemani³⁵ shows how the Coronavirus pandemic can be understood to have conferred a legitimacy (the ability of leaders to win compliance with new laws and public orders because people share a widespread belief that everyone is complying) windfall on governments in many developing countries, a legitimacy which carries a risk of being abused by politicians who could try to use it to expand or entrench their power. Indeed COVID-19 has been perceived as a security threat around the world, with both governments and their citizens participating in the construction of the security narrative.

The Copenhagen School theorised that “an issue is transformed into a security issue after a securitizing actor presents it as an existential threat

³² Cited in Saad-Filho and Ayers, “‘A Ticking Time-Bomb’: The Global South in the Time of Coronavirus.”

³³ Saad-Filho and Ayers, “‘A Ticking Time-Bomb’: The Global South in the Time of Coronavirus.”

³⁴ Hautz, “Would-be autocrats are using covid-19 as an excuse to grab more power.”

³⁵ Khemani, “An Opportunity to Build Legitimacy and Trust in Public Institutions in the Time of COVID-19.”

and this 'securitizing move' is accepted by the audience.³⁶ A securitizing actor will be successful if he/she correctly perceives the feelings and needs of the audience, cultivating a relationship that allows for a mutual discursive co-construction of the securitizing act and the threat itself. "Something becomes a security issue through discursive politics",³⁷ where legitimacy is given to the securitizing actor.

Motivation or animosity towards a 'security threat' can be a result of strengths and/ or structural weaknesses displayed or revealed by an entire governance system, and in this case, the governance of the Coronavirus. Environmental, social, economic and political aspects of countries have been tested to the core. Murray³⁸ argues that when forecasting the pandemic's trajectory and socio-economic impact, the reinforcing feedback loops at play must be considered, that is, the spread of the virus and the preventive measures to contain it, exacerbate individual and community vulnerabilities and in turn, increasing vulnerabilities and distress create more conditions for the disease to spread. Murray continues to argue that it is 'public trust' in governance and institutions that emerges as an important element that helps societies cope with the effects of the pandemic; and perhaps explains why some governments have been able to maintain onerous lockdowns effectively while others with strong economic and health systems such as the US, are struggling to contain its spread.

In Uganda, as the pressures grow and people begin to get more and more distressed with food insecurity, lost jobs and incomes, public trust continues to wane. By early September 2020, Uganda had reported over 5,000 infections and more than 50 COVID-19 related deaths. However, not many people believed these statistics and it was clear that many were no longer

³⁶ Leonard and Kaunert, "Reconceptualizing the audience in securitization theory," 51.

³⁷ T. Balzacq, ed., *Securitization Theory: How security problems emerge and dissolve* (London & New York: Routledge, 2011), 1.

³⁸ J. H. Murray, "Coping with COVID-19: the role of public trust and cohesion in societal resilience," *ACCORD Conflict and Resilience Monitor*, July 2020.

willing to comply with the preventive measures that had been closely followed in March and April. What was more plausible was that the reported deaths were due to other diseases that government had ignored during the lockdown.

There are different audiences in Uganda, including rural poor, youth, educated elite and opposition politicians, who exhibited both motivation and animosity towards the government's decisions. Khemani³⁹ suggests that despite the low levels of trust, people in developing countries complied with lockdown measures. In the beginning of the lockdown, and with the extensive news of the deadly effects of the pandemic around the world, Ugandans easily followed the measures to prevent the spread of the disease and readily listened to the President as he gave updates, almost every week, on the status of the disease in the country. Social media was awash with stories and photographic images of mass graves in South America due to the pandemic, therefore confirming Museveni's advice on treating the disease as a security threat to Uganda. For a time, Museveni took centre-stage and gained popularity even among his critics, for steering the country right in the face of a deadly pandemic.

Institutional trust or public trust in institutions becomes an important factor for understanding the animus of the public under any circumstances, more so, one as unprecedented as the Coronavirus pandemic. Public trust, however, began to breakdown when social media became awash with stories as well as pictorial evidence of human rights violations and widespread corruption, all happening during the lockdown. Donations made towards the fight against the pandemic that individuals, businesses and organisations had been motivated to give in the beginning, were no longer a subject of presidential addresses by August. Perhaps there was a sense of exasperation and lack of confidence due to the stories in the media. When

³⁹ Khemani, "An Opportunity to Build Legitimacy and Trust in Public Institutions in the Time of COVID-19."

some restrictions were lifted in July, it was not uncommon to see people moving around in crowded spaces without masks, even though the government had made efforts to provide them for free. Taxis were allowed to operate at half capacity, but some drivers together with their passengers were often arrested for not following these rules.

One theory that was boosted to life was that President Museveni was planning to continue the lockdown until presidential elections due to take place in February 2021, thus giving little chance to the opposition parties to campaign. Uganda is governed under multi-party politics, although opposition politicians often face harassment, arrests and detention in various public and private spaces. This has not been different during the COVID-19 lockdown period. It was not uncommon to hear people saying “Covid-19 is not in Uganda, it is just politics”. Mistrust in the government was precisely because for a moment it seemed like a few people were benefitting immensely from the lockdown situation while majority of the population who live hand to mouth were forced – often threatened – to adhere to the lockdown restrictions.

A public health issue soon became a security one, with some audiences actively shaping the security narrative. When evidence revealed that increasing cases of COVID-19 infections were coming from truck drivers moving along the East African regional corridors, mandatory testing was instituted and drivers had to wait for their results at the borders before crossing into Uganda. Some individuals who were ‘suspected’ of, or had tested positive for COVID-19 were hurriedly put into ambulances and escorted with security personnel to designated centres of quarantine. Contact tracing was done by medical officials, often with security officers in tow. Some reportedly went into hiding to avoid being treated like criminals rather than patients in need of healthcare.

In Gulu district, northern Uganda, opposition MPs organised a peaceful protest to block the transportation and admission in a Gulu hospital, of a

truck driver who tested positive for the coronavirus. Their argument was that northern Uganda had suffered enough with first, the twenty-year long armed conflict that had devastated the region and second, with the Ebola virus that struck in early 2000s. They wanted the government to admit those patients in other regions of the country – these sentiments ringing true of ethnocentric intonations and conspiracy theories about how the government wants to ‘finish’ people of northern Uganda. These sentiments drew familiar support from certain sections of the population and yet for others, it was a cruel reminder of how the past feeds into the present and future events. The securitisation of COVID-19 in Uganda can be said to have drawn both motivation and animosity from various publics.

Conclusion

COVID-19 was co-constructed as a security threat in Uganda in a mutual relationship between the securitising actor – the government and the audience – various Ugandan publics. Uganda’s response to COVID-19 contains all the vital ingredients of securitisation: securitising actor(s), speech act, existential threat, referent object(s), audience(s), and emergency measures. Ugandans accepted the news from WHO that the pandemic was a deadly disease, however, the Ugandan government – a securitizing actor – framed it as a security threat, taking measures to control its spread. At first, Ugandans accepted this, trusting in government institutions to fight this disease, even if they had to make severe sacrifices that impacted on their very existence e.g. food and livelihood security.

Uganda, and the global South in general is no stranger to deadly pandemics. Ebola, SARS, Zika, etc. have had devastating effects on different countries, although it can be said that a wealth of knowledge, technical know-how and physical infrastructure has resulted from these experiences.⁴⁰

⁴⁰ Saad-Filho and Ayers, “‘A Ticking Time-Bomb’: The Global South in the Time of Coronavirus.”

President Museveni did well by shutting down everything immediately which could have first been motivated by health reasons due to inadequate institutional capacity to manage the pandemic but was later peppered by political motives that were difficult to miss by his audiences. The brazen corruption by state officials and politicians during a time when humanity should have come first was not seen in a good light. How this plays out in the next presidential elections in 2021, for which Museveni will be contesting, remains to be seen.

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Globalisation and International Cooperation in a post-COVID-19 World. The Case of South Sudan

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Abstract: *South Sudan is a land-locked, large country, sparsely populated, but with high population growth. It only became independent in 2011. While its remoteness shields it from the Covid-19 pandemic, weak governance, high poverty, underdeveloped health services, and unbalanced economy make it vulnerable. The incipient pandemic worsens the severe civil conflict. In a fast-changing international environment, needed change will have to come largely from within.*

Key words: *Pandemic, governance, post-conflict countries, international cooperation, South Sudan, EAC, EU, China.*

1 Introduction

The Covid-19 pandemic hit a highly integrated world. In difference to previous epidemics that had most victims in developing countries, this time Europe and the US were strongest affected at least in the first phase after the spread from China. While the pattern of the evolving pandemic is quickly changing, it is not yet possible to predict its scope and scale. However, it is clear that the economic fallout and the massive fiscal responses in Europe and the US will lead to substantial changes in their longer-term policies. One implication will be that the relationship and cooperation between the world centres of power will change.

While Africa has not yet been directly hit very strongly by infections and deaths, infections are rising, and the health systems of its countries are much less able to meet such crises. Moreover, the continent is already

suffering from the economic impacts, as supply interruptions, falling demand for its exports and declining remittances of its workers abroad.

This article considers South Sudan. After introducing characteristics of the country and its health sector, we look at the direct health impact of the pandemic and government's response in the second section. We also look at that of its international partners, giving particular emphasis to the role of the region, the EU and of China. The responses we discuss in the context of the evolving economic, political and social crisis of the country. The third section provides the – as yet very incomplete - information on the economic and social impact on the country. In the final section we discuss the economic and political perspectives of South Sudan and its relationships with its neighbours, the EU and China.

1.1 Overview of South Sudan

South Sudan is a young (independence in 2011) and landlocked country. The country borders Sudan, Ethiopia, Kenya, Uganda, the Democratic Republic of Congo, and Central Africa. Infrastructure is underdeveloped and to cross borders is time consuming and costly.

The country has a young, mainly rural population of 13.3 million with a low population density of 20.6/km² on a large land area (644.000km²). However, the population is rising rapidly, at 3.1% annually (2010-19)¹. The population is expected to be double its present number within 30 years. An estimated 80% of the population lives in rural areas (as compared to 60% in overall sub-Saharan Africa in 2018)². Half of the population was estimated to be living under the national poverty line in 2009.

South Sudan is endowed with rich natural and mineral resources. In addition to oil, the backbone of its income and exports, these include agriculture,

¹ United Nations Economic Commission for Africa (UNECA), *Country Profile South Sudan 2017* (2018), 168.

² *Ibid.*, 14.

forestry and fishery. However, these are so far mainly used for subsistence and only marginally marketed and hardly exported. The agricultural sector is the largest source of income and employment (85-95% of the workforce). More than 70% of total land is estimated to be suitable for agriculture. With the abundance of water, rich and diversified soil, and adequate temperature, agriculture has the potential to be a key driver to take the country out of poverty and food insecurity. Currently, the sector is still largely subsistence-oriented and contributes less than 15% to GDP. Extensive land is virgin. Notwithstanding the abundant supply of land, the agricultural area currently under farming is estimated at only 3.8%. Livestock is another major potential that is only marketed to a small degree. Since South Sudan is located within the Nile River basin, including one of the largest wetlands in the world, the country has also abundant fishery resources.

Notwithstanding the abundant supply of land, the agricultural area currently under farming is estimated at only 3.8%. With mostly simple technology, agricultural productivity is very low, a key reason for chronic food deficits and shortages that are increasing in frequency and aggravate poverty, hunger and malnutrition. Moreover, government only gives low priority to agriculture: Only 2% of the budget is allocated to agriculture.

The country had been part of Sudan, but had been locked in civil conflict for most of the common time of joint independence (1956) and had remained utterly poor, remote, and undeveloped. After a Common Peace Agreement in 2005 South Sudan benefited from an interim period of six years with massive aid inflows, capacity building and investments in health and education, followed by a vote deciding on a common future in a unified Sudan or as an independent country. The interim period was meant to make unity attractive. However, the vote was overwhelmingly for independence.

Simmering conflict among political leaders erupted into violence and led to ethnically tinged civil war in 2013. Although a peace agreement was signed in 2019, its stipulations are not yet fully implemented.

Despite substantial improvements in social sectors and substantial growth of Juba, development remained lopsided. The agricultural sector, home of the population majority, is hardly developed like road infrastructure. Poverty remains endemic.

A key underlying factor is the reliance of South Sudan's exports and revenue on its oil resources. Oil has turned out to be a 'resource curse' leading to weak governance and weak institutions. Arguably, the massive foreign aid has also turned out as a resource curse as donors have largely turned a blind eye on weak accountability and high levels of corruption.

Stagnating or declining governance show the precarious status of the country. Voice and accountability, political stability, government effectiveness, regulatory quality, rule of law and control of corruption are all lower than at independence and among the world's lowest³.

In 2016 South Sudan became the sixth member of the East African Community (EAC), including its most important trade partners Uganda and Kenya, an important market and source of qualified labour. Once the country has fully adopted the EAC laws, regulations and policies, it will be part of a growing and deepening common market. The obligations to the EAC will also be an important instrument to deepen the rule of law, be a driver of reform, improve the business climate, and enhance investment confidence. Once South Sudan develops its largely still dormant agriculture, East Africa that often faces crop failures induced by drought or pests with malnutrition, will be a key market.

³ World Bank, "The Worldwide Governance Indicators (WGI) project," <<https://info.worldbank.org/governance/wgi/#home>> (accessed 2 July 2020).

However, climate change is also increasingly visible in South Sudan. Climate change contributes to the causes of floods and droughts and thus food insecurity and conflict⁴. It will also reduce resilience to pandemics that must be expected in future. South Sudan needs to adopt 'climate-smart agriculture' in order to mitigate climate-induced food shortage and improve food production.⁵

1.2 South Sudan's health sector⁶

South Sudan started with very limited health services at the end of its long civil conflict in 2006. But health was one of the major funding areas of foreign donors since then. Between 2011 and 2015, ODA funding for health (and population) was the category of highest priority, second only to humanitarian aid. However, the returning civil conflict in 2013 interrupted many of the efforts. Domestic public spending has remained very low (e.g. 1.9% of the public budget in 2018).

As a result of the massive funding by the international cooperation partners (ICP), health indicators improved markedly: Life expectancy rose to 58 years as compared to 46 in 1994. But the indicators are still lower than the sub-Saharan Africa average. For instance, life expectancy is 57.6 years (sub-Saharan Africa: 61.3) – the gap had been narrower in 2011.

Despite the progress made, the country's health indicators are still worse than the African averages and of most of its neighbours. For instance, South Sudan's neonatal mortality rate of 39.6 (2014) improved by 40% compared to 1993, but still compares to an African value of 29.0. The infant mortality

⁴ Jean-Francois Maystadt, Margherita Calderone and Liangzhi You, "Local warming and violent conflict in North and South Sudan," *Journal of Economic Geography* 15, 3 (2015): 649-671.

⁵ Augustino T. Mayai, "Improving Gender Equality Quota Implementation in Post-conflict South Sudan," *Weekly Review*, Sudd Institute, 6 November 2018.

⁶ United Nations Economic Commission for Africa (UNECA), *Country Profile South Sudan 2017* (2018).

rate fell by more than half in the 21 years (1993-2014). It is now only 11% higher than that of the African average. South Sudan's HIV prevalence is considerably lower (37.2%) than the African average in 2014, due to the country's relative isolation.

2 The COVID-19 pandemic and the responses

Although South Sudan is shielded to a degree by its remote location and weak connections to the world, a number of factors make it vulnerable to pandemics⁷. As discussed above, its healthcare system is underdeveloped and much weaker than that of neighbouring countries. Furthermore, health services are highly concentrated on Juba, the only major urban area. Although they were able to detect, isolate and provide some care for Covid-19 patients, the health system would be clearly overwhelmed by any substantial number of cases. Not only will the system's ability to cope with the Covid-19 infected be challenged, many Covid-19 cases would also endanger the treatment of other serious diseases as malaria.

In fact, the head of the UN Mission on South Sudan (UNMISS) raised deep concerns about additional pressure of responding to COVID-19 on the already weak health system will disrupt vaccinations, maternal health services and treatment for curable diseases like malaria, and pneumonia, resulting in a devastating increase in preventable deaths.⁸

The poor governance and high fragility imply weak law enforcement institutions to penetrate the wider country to enforce the standard measures to combat the spread of the virus as travel bans, social distancing protocols, and hygienic practices. The high population density in settlements

⁷ See Nhial Tiitmaner and Abraham Awolich, "The COVID-19 Pandemic vulnerability factors in South Sudan," *Policy Brief*, The Sudd Institute, 15 May 2020.

⁸ Radio Tamazuj, "COVID-19 and conflict threaten health system and ceasefire in South Sudan: Shearer," <<https://radiotamazuj.org/en/news/article/covid-19-and-conflict-threaten-health-system-and-ceasefire-in-south-sudan-shearer>> (accessed 2 July 2020).

and high household sizes (often beyond 30) provide an ideal environment for the spread of the virus.

The actual state of part of the country under civil conflict and/or criminal activity this part of the country is inaccessible to testing the population and providing health care.

Previous natural disasters to which South Sudan is susceptible as floods and droughts overstretch state capacity and make the population more vulnerable. Many are displaced and lost their livelihoods.

The concentration of the country's income on a single source – oil export – make its economy in general and its health services in particular vulnerable. The country is not able to generate resources sufficiently and to cushion its people and business against economic shocks.

The high degrees of poverty and illiteracy make people's access both to information and to economic resources to combat infections as Covid-19 limited.

The high reliance of the country on humanitarian assistance and on imports of basic commodities make the country very vulnerable. While official trade comes almost exclusively through one customs entry point (Nimule bordering Uganda on the country's only tarmac overland road), there is also smuggling, mainly from Kenya and Sudan.

The lack of transparency on part of government and severe restrictions on press freedom impair citizens' ability to inform themselves form well informed opinions, voice their concerns and hold government accountable. As a result, there is a high level of mistrust in government institutions. This was only heightened in the course of the pandemic. In fact, numerous misperceptions and conspiracy theories emerged concerning the existence

of Covid-19, being a ploy to earn money or being directed at specific groups of people.⁹

South Sudan reported its first case of Covid-19 on 5 April 2020, when a patient arriving from Netherlands via Ethiopia was tested and quarantined. The second and third patients confirmed and quarantined were also United Nation female staff arriving from Nairobi in South Sudan on 7 and 9 of April respectively. The first death was reported on 15 May.¹⁰

The pandemic is progressing and the first Vice President tested positive for coronavirus along with some other high-ranked government officials.¹¹

National data are published by the Public Health Emergency Operations Centre at the Ministry of Health.¹² The latest available weekly report (dated 7 July) reports a cumulative total of 2106 infected and 40 deaths. 11477 tests were performed. The Juba Infections Disease Unit had still 90% of its capacity available at that time.

Most respected international figures by Johns-Hopkins University reported 2153 infections and 41 deaths in South Sudan on 16 July.¹³

The following figure shows the evolution of the pandemic in South Sudan so far in terms of numbers of infections and deaths. After having risen sharply over May and June, the infection rate seems to have been halted in July.

⁹ "Citizen's Taskforce on Covid-19, South Sudan," *Policy Brief*, No 2, June 2020.

¹⁰ Waakhe Simon Wudu, "First COVID-19 Death Reported in South Sudan," *Voice of America*, <<https://www.voanews.com/africa/south-sudan-focus/first-covid-19-death-reported-south-sudan>> (accessed 2 July 2020).

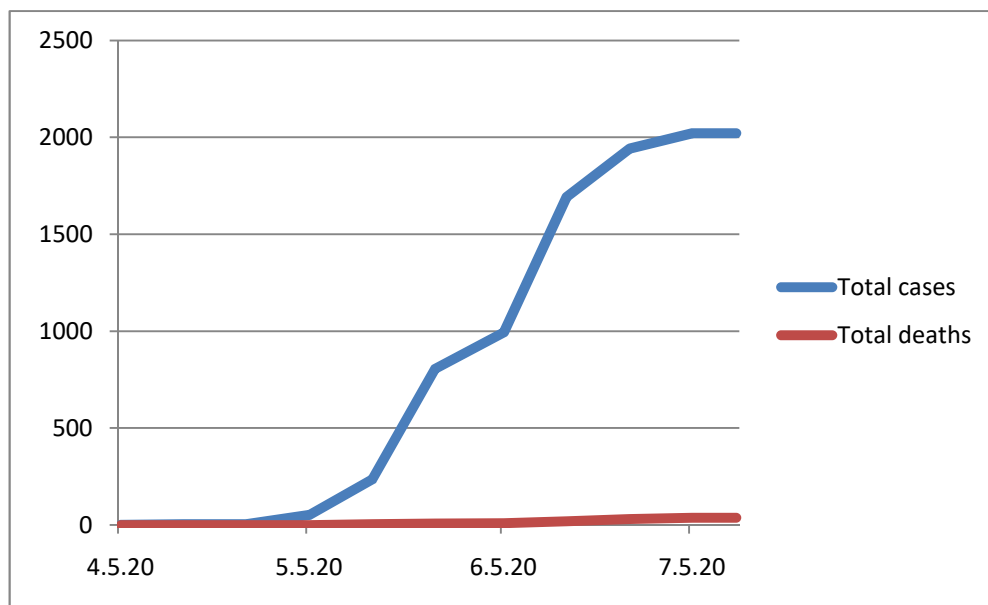
¹¹ International Monetary Fund, "Policy responses to Covid-19," <<https://www.imf.org/en/Topics/imf-and-covid19/Policy-Responses-to-COVID-19#S>> (accessed 2 July 2020).

¹² OCHA Services, "South Sudan Public Health Emergency Operations Centre (PHEOC). COVID-19 Weekly Situation Update Report Reporting Period: June 8-14, 2020," *Relief Web*, June 2020, <<https://reliefweb.int/report/south-sudan/south-sudan-public-health-emergency-operations-centre-pheoc-covid-19-weekly-0>> (accessed 16 July 2020).

¹³ Johns Hopkins University, "Covid-19 dashboard," <<https://coronavirus.jhu.edu/map.html>> (accessed 16 July 2020).

Epicentre has been Juba, the capital and only urban centre, where 97.4 of cases were reported. 17 of the 80 counties have reported Covid-19 cases.

Chart 1: Total coronavirus Infected-deaths cases in South Sudan



Sources: (<https://www.worldometers>)

The reliability of data is limited by the low level of testing. Data published on numbers of infected people by South Sudanese authorities, WHO and national media are varied.

Clearly the reported numbers of infections and deaths are much below actual figures – but it is unclear by how much. While it is credible that infections are concentrated on Juba that is most connected to the outside world, there will be a considerable degree of underreporting elsewhere because of the concentration of health services on the capital. A Ministry of

Health speaker estimates that the real number may be 2.5 times as high as official figures.¹⁴

Early, in mid March, the government announced various precautionary measures to curb the spread of the virus. These included (i) International flight suspension¹⁵ (with few exceptions for planes bringing in health-related cargo, such as medicine and medical equipment, and essential/critical food items); (ii) land border restrictions; (iii) passenger bus prohibitions; (iv) evening curfews; (v) social distancing¹⁶; and (vi) a mandatory 14-day quarantine period for any traveller arriving from a virus-affected country.

South Sudan suspended all flights and passengers to or from countries affected by the Covid-19 pandemic. The Issuing of visa for passengers from countries affected by the Covid-19 pandemic such Egypt, United Arab Emirates, Europe were halted until further notice.

The government also encouraged businesses to allow their employees to telework, the business community against increasing prices and hoarding essential goods and commodities¹⁷.

However, lockdown measures were partially lifted on May 7, even though the number of Covid-19 cases continued to increase. Regional flights were to resume, and markets, shops and bars were allowed to reopen. However,

¹⁴ Waakhe Simon Wudu, "First COVID-19 Death Reported in South Sudan," *Voice of America*, <<https://www.voanews.com/africa/south-sudan-focus/first-covid-19-death-reported-south-sudan>> (accessed 16 July 2020).

¹⁵ Eye Radio, "South Sudan bans international flights," <<https://eyeradio.org/s-sudan-bans-international-flights/>> (accessed 16 July 2020).

¹⁶ Benjamin Takpiny, "Coronavirus: South Sudan bans social gatherings," *Anadolu Agency*, <<https://www.aa.com.tr/en/africa/coronavirus-south-sudan-bans-social-gatherings/1768378>> (accessed 16 July 2020).

¹⁷ Eye Radio, "Kiir imposes night curfew, asks employers to have some staff stay home," <<https://eyeradio.org/kiir-imposes-night-curfew-asks-employers-to-have-some-staff-stay-home/>> (accessed 16 July 2020).

schools, churches, mosques, and nightclubs remain closed. Sports, funerals, and other public gatherings remain suspended.¹⁸

The South Sudan Doctors Union called the decision rushed, premature, and risky. A public health expert at the University of Juba assumes that government prioritized the economic impact of the pandemic over lives.¹⁹

Reports on the effectiveness of the lockdown indicated the difficulties of enforcement. In particular, rules of social distancing were difficult to follow in a culture of intensive social interaction and in large households. Reports confirmed that traders at different markets are still behaving the same way, by not following the government directive of keeping social distance and washing hands with soap and running water. In some parts of South Sudan, handshakes are part of the culture. Not to follow this practice is sanctioned.

Generally, reports say that the policy to clamp down on social gathering has not been effective. Although streets have been empty, the crowds have only shifted elsewhere: to residences, neighbourhoods, clubs, and commercial facilities.²⁰

The lockdown has also proven to be ineffective in other respects. For instance, the restrictions of operational banking hours to only four lead to higher crowds than before implying higher risks of infection. Furthermore, the practice hampered economic interactions threatening livelihoods. Nevertheless, the lockdown and social distancing is believed to have had some positive impact on the spread of infections.

¹⁸ Waake Simon Wudu and Dimo Silva Aurelio, "South Sudan Lifts Covid-19 Restrictions despite rise in cases," *Voice of America*, <<https://www.voanews.com/covid-19-pandemic/south-sudan-lifts-covid-19-restrictions-despite-rise-cases>> (accessed 16 July 2020).

¹⁹ Ibid.

²⁰ Augustino T. Mayai, Abraham A. Awolich and Nhial Tiitmamer, "The economic effects of the COVID-19 pandemic in South Sudan," *Policy Brief*, The Sudd Institute, 10 May 2020.

In addition to the lockdown, government allocated a Covid-19 fund of \$8.0 million to alleviate the impact of the infections. Of these, \$5.0 million was allocated to the Ministry of Health to combat the pandemic. The government has also redirected \$7.6 million from the World Bank's grant of \$105 million for the UNICEF and ICRC, a third party implementing agency of the grant, to purchase items for pandemic prevention and treatment. On 24 April 2020, the Bank of South Sudan cut the Central Bank Rate by 2 percentage points, from 15% to 13%, and reduced the Reserve Requirement Ratio from 20% to 18%.²¹

As elsewhere, the EAC members have dealt with the rising Covid-19 pandemic mainly on the national level. However, the EAC is also taking a regional initiative. This is formulated in the Regional Health Sector Coronavirus Plan. The regional response includes: establishing a well-coordinated mechanism to overcome the pandemic; enable the movement of goods and services in the region; minimize number of infected people with Covid-19; reduce disease and mortality from the pandemic in the region; coordinate between urgent needs of coronavirus patients and the need of the regular health care system; make sure that the EAC region health system is well equipped with necessary capacity for surveillance, case detection management; special support should be given to protect staff family members and the communities against spread of the infection; and others.

The EAC Adhoc Regional Coordination Committee (EACRCC) is coordinated by the EAC and linked to the National Task Force of each Partner State. It works closely with GIZ, Trademark, JICA and USAID.

The EU has been one of the key donors since 2006. With the US, it is also main donor for humanitarian assistance. In fact, since the outbreak of the armed civil conflict in 2013, most development aid has been replaced by humanitarian assistance.

²¹ International Monetary Fund, "Policy Responses to Covid-19," <<https://www.imf.org/en/Topics/imf-and-covid19/Policy-Responses-to-COVID-19#S>> (accessed 16 July 2020).

South Sudan received € 4 million to train healthcare staff as part of the Emergency Trust Fund for (EUTF) for the Horn of Africa. The EU also supplied sanitation and nutrition services to more than 4.4 million people in needs in areas affected by the Coronavirus pandemic. On top of that, the EU also provided one million \$ to WHO to increase lab capacities in South Sudan.

China has been a main partner to Sudan and South Sudan since the exploration of oil in the first decade of this century. It has been the key customer of its oil.

During 1990, the government of Sudan involved Chinese and Mali petroleum companies to invest massively in South Sudan. Records showed political conflicts, humanitarians catastrophic, and environmental damages were witnessed in the areas surrounded by oil fields in Upper Nile. Population in the areas complained about health problems include deformed and early born babies, lost of livestock contaminated drinking water, bad quality of soils. Indigenous people in concerned areas were forced to vacate ancestor lands with no compensation in kind or in cash. Political conflicts amongst clans were witnessed. The only support to the region was given by humanitarian organisations, while oil companies did little so far.²²

China is appreciated by government because of its policy of non-interference in domestic affairs. However, its image has been damaged by its involvement in corrupt deals at the 400 km road building from Juba to Aweil, centre of the North-West. Only two weeks after completion, the road has been destroyed through heavy rains. Investigations have started against the company for failing to deliver quality services. The company had been contracted in 2019 in return for 30,000 barrels of oil per day. Investigation took place, one of the senior staff from the Office of the President was removed and is currently investigated.

²² Unpublished report, Polouge "Dar Petroleum Operating Company," February 2015.

In line with support to fight Covid-19, the Chinese embassy donated medical items in kind to the government of South Sudan including protected suits, facemasks, surgical masks, protective goggles, and gloves, packets of diagnostic kits. This reflects new trends in terms of the South Sudan China relationship.

3 Economic and wider impacts of the pandemic

As reported, the direct effects by Covid-19 seem to be rather limited as yet, although it is clear that the reported figure are only a fraction of actual figures. More important for economic development were and are the results from other countries and from the lock-down measure in South Sudan. Lock-downs and economic depressions in other countries trading with South Sudan impacted imports and the demand for exports. In sum, the Covid-19 impacts have exacerbated the political-economic crisis of the country.

The virus started when farmers entered into post-harvest lean season and when access to food is limited. The enforcement of lockdown may cause delaying of livelihoods activities of small farmers, placing additional strain on poor households' abilities to buy food, seeds and other essentials. The risk may spill over to poor urban households and those living in displacement sites.²³

According to national experts, agriculture exhibits severe loss of production throughout the country because of labour scarcity due to the movement restrictions and possibly Covid-19 infections. As a result, export earnings will decline, driving further currency depreciation. Since most of the restrictions are lifted, a slow improvement is expected.

Prices for transports, and food items dramatically increased in some cases by more than 50%. These are major consumption items for the majority of poor people. Majority of citizens are relatively poor relying on daily

²³ Ibid.

subsistence economy, as street vendors, selling foods or tea, other goods in the street.

Consumers complained increasing prices of foods such as cooking oils, beans, rice, sugar, and flours. Cost of public transport including buses and motor cycles was dramatically increased, in order to compensate for the reduction of the number of passengers per trip directed by the Coronavirus Taskforce.²⁴

Firms and individuals are going through severe economic stress because of restricted ability to undertake economic activities. Many firms and individuals have hardly any savings to bridge times without earnings.

The pandemic and resulting lockdown further reduce the demand for labour of the urban poor, resulting in fewer jobs and lower payment rates. This is in the face of rising inflation (due to stockpiling and the supply shocks), resulting in declining purchasing power.

The low level of economic activities also leaves many youths unemployed. This is a recipe for disaster in a country without safety nets, while small arms are readily available. This only further worsens a situation where there is already high unemployment and vagrancy, gang-related violence and crime.

In fact, the evolution of the crisis so far has shown that both the public and private sectors have been unprepared to respond. Government has only been able to devote a minimum of resources to the pandemic. This results in fewer equipped health facilities, fewer trained health professional, and strained health education. On top of this, the cost of medical and public health services increases, neglecting access to the poor. Thus, the demand for other health services has plummeted. The resulting slash of incomes has added to the inability to respond to the pandemic. The escalating transport

²⁴ Radio Tamazuj, "Explainer: The Covid-19 situation in South Sudan," <radiotamazuj.org/en/news/article/explainer-the-covid-19-situation-in-south-sudan> (accessed 22 July 2020).

prices further restricted the operations of health services. Further, personal protection equipment and hygiene items are increasingly scarce. – The closure also of small businesses like food and hardware stores, network kiosks and charging stations, hardly attract crowds.²⁵

The peace agreement is in jeopardy again. Two factors can be held accountable: the usual brinkmanship of both parties over a number of minor issues in the agreement. But more importantly, the implementation process has skipped over fundamental steps in order to rush to form a unity government – in the hope that such an undertaking would create the trust, between the partners and with the wider public that is needed for reform and development. However, experts observe that a unity government lacking both political will and capacity would be ‘unable to address the fundamentals of peace, namely, security, basic services, and justice and accountability’²⁶.

The emerging pandemic also added to the delaying factors for the peace agreement. Implementation of the peace agreement requires finance. While government had committed itself to this, the stark decrease of the oil price (it has reduced by half since the beginning of the crisis) reduces the funds availed for the implementation. Moreover, these funds now compete with the fight against Covid-19. The reduced level of economic activities, due to the pandemic, also reduce the public revenues, in particular in the hotels, restaurants, transport, and other small businesses. On top of this, in light of the weak public accountancy system, much of the funds left is likely to be siphoned off through corruption.

In particular, the sums for transitional security related activities as cantonment and training for military forces and the disarmament,

²⁵ Mayai, Awolich and Tiitmamer, “The economic effects of the COVID-19 pandemic in South Sudan.”

²⁶ Abraham A. Awolich, “The boiling frustrations in South Sudan,” *Weekly Review*, The Sudd Institute, 7 June 2020.

demobilization, and reintegration process are threatened to be reduced or halted. This will contribute to making the fate of the peace agreement highly uncertain.

The political stalemate, on top of the COVID -19 lockdown, has caused conflict to intensify particular in the Greater Jonglei region. Conflicts, previously inter-communal, became militarized, and mainly between fractions of the army. Organized forces in uniform have been spotted among fighters risking the uncertain ceasefire. Frequent inter-communal tensions are observed between the Dinka, Nuer and Murle communities. The cycles of violence is often accompanied by cattle raids, child abductions and other revenge inducing crimes²⁷.

The country is now at more risk of becoming undone at its seams than any other time since the liberation war ended in 2005. While the unity government had first moved well, it had already been unable to deal successfully with previous crises as the locust infection, floods, and communal violence. The Covid-19 crises has been used as a cover for political failures. The optimistic mood of mid-February and March has virtually dissipated. Citizens on the streets are reported to fast losing hope. Monitoring social media outlets noticed an upsurge in negative campaigns and hate messages. Moreover, the political parties have reactivated propaganda websites spreading false information in order to fuel discontent and trigger violence. Overall, indicators are said to suggest that the country 'faces a major risk of a large-scale, spontaneous violence, unless the parties to the Agreement act fast'²⁸.

²⁷ Radio Tamazuj, "COVID-19 and conflict threaten health system and ceasefire in South Sudan: Shearer."

²⁸ Awolich, "The boiling frustrations in South Sudan."

4 Outlook: Post-Covid-19 South Sudan and its relations

The effects of the Covid-19 pandemics has further destabilized the deep political and economic crisis in South Sudan. It appears that this will be so in the future. The main power holders in the country are locked in a stalemate in a climate of low trust. The fall in international oil prices has made it more impossible to raise the funds that government committed to in order to implement the peace agreement. At the same time, the continued flow of oil is providing a minimum of finance for government to continue operating. The political class is largely self-interested and propagates a tribal orientation.

The experiences of government handling the pandemic and further delaying the implementation of peace have further eroded public trust. In a climate of complete disillusion, failed experiences of armed rebellion, and distrust on part of the wider population, various groups of youth and intellectuals have formed, also including members of the diaspora. These groups aim at a peaceful change, led by a process of awareness building and discussion of the way forward via the internet (for instance in facebook groups).

Some authors also argue that the Covid-19 crisis may present an opportunity to challenge the status quo, by calling for strengthening the health, economic, governance and food production systems across the nation.²⁹

However, it is likely that this process will take time. Rather, a process will build up a momentum for change over time. Meanwhile, the country will be affected by what happens elsewhere.

South Sudan's neighbours have no interest to support change in South Sudan at this time. There is a fear of the unknown, of further destabilisation

²⁹ Mayai, Awolich and Tiitmamer, "The economic effects of the COVID-19 pandemic in South Sudan."

in the country that may spill over to the region. Furthermore, there are a number of competing interests among the neighbours: a traditional rivalry for leadership concerning South Sudan between Uganda and Sudan, a similar rivalry between Ethiopia and Kenya within the EAC, and a water conflict between Ethiopia and Sudan also concerning South Sudan.

The process of regional integration of the EAC will slowly continue. The Covid-19 crisis has not helped to accelerate the process, but rather relegated it on the priority list. South Sudan's integration into the bloc is also delayed. While the transition period is officially over and the country is a full member, the implementation of EAC rules and regulations moves below targets.

South Sudan's leaders are hesitant to cede sovereignty. Much of the population does also not seem to be ready. In particular many intellectuals believe regional integration undermines building of a sovereign state and fear other EAC members will exploit the weak South Sudan.

The failure of government to pay membership fees is threatening its status. So far, other EAC members are fearing destabilisation and setting an example by calling South Sudan to order. Despite the current problems and slow speed, the integration process is an important process of stabilisation in the region and particularly for South Sudan.

The same is true for South Sudan's accession to the World Trade Organisation. Besides WTO membership, the accession process is an ideal process to accompany the economic reform process that is needed to reach sustainable and broadly-based growth, peace and resilience. South Sudan has started the accession process in 2018. While encouraging process was made until 2019, the process has not progressed since then – as the overall economic reform process.

Beyond the region, the post-Covid-19 world is characterized by a high degree of uncertainty. Multiple crises of a global nature are threatening: this

and other pandemics expected in the future for which the world is not prepared. Likewise, the climate change calls for global responses. Meanwhile, flight and economic migration and trade conflicts are apparent. These conflicts need strengthened and additional global cooperation mechanisms. Instead, we see a threatening of the organisations by the US, who has been their main guarantor. Meanwhile, there is a degree of de-globalisation.

Globalisation has helped many countries to converge to a high degree to the first world: notably Asian countries, most importantly China. The period of high-speed globalisation may have ended: since 2011 we see a degree of de-globalisation. We may not see the end of an epoch, but witness major changes in world powers and blocs. This will also affect their relations.

With a major crisis between the US and China, international cooperation is threatened. But the EU and China as well as the small countries have a common interest to uphold multilateralism.

One lesson of the Covid-19 crisis is the importance of good governance and strong institutions. Better governed countries have been able to cope with the Covid-19 pandemic.

The EU has a cooling relationship with the US. Formerly strong relations of allies are replaced by a more distanced one, where each sees immediate own interests. While the EU with its dependence of the US for defence, the crisis gives a push for deeper integration. There are signs for a transformation to a more social, less unequal, more ecological and climate-conscious societies, more European with strengthened democracy.

The autocratic systems in the EU are on the defence. The EU is becoming more self-assertive in foreign relations towards the US and China. While the relations to the US are more distant, the common values for open societies with freedom remain. The relations with China will also be more distant. Rather than a strategic partner, China is seen as a competitor. However, the

common interests for multilateralism and the search for areas of common interest remain.

In the process, there is less energy to drive the process of cooperation with and assistance to Africa. However, there may be momentum for a trilateral cooperation. Germany that leads the EU during the second half of 2020 plans an EU-China summit in September to be attended by all 27 European heads of government. Climate change and Africa are among Germany's priorities.³⁰

China is seemingly emerging stronger from the Covid-19 crisis. At least, it is getting more assertive in international relations. However, it faces underlying weaknesses in its growth model in a climate of a degree of de-globalisation, hostility by the US, more sceptical distance from the EU. Like other countries in the growth process, it will not be able to keep on with the same growth rates. It will be a challenge to meet domestic expectations.

Internationally and with respect to South Sudan, China keeps its traditional policy of supporting developing countries irrespective of their domestic policy and state of governance. China will continue its support to South Sudan as a dependent client state, in return for its support in the UN and internationally. China is also starting to contribute to humanitarian support.

However, China's image in South Sudan is not as rosy as it has been. It is overshadowed by corrupt undertakings as the building of the road Juba-Aweil that turned out as of low quality. Principally, the emergence of China as major actor has given South Sudan – as other African countries) more autonomy from the West, as it has more choice among partners.

Concerning South Sudan, the international community takes a pessimistic outlook. While there is hesitance to interact with government because of its

³⁰ The Economist, "Angela Merkel's soft China stance is challenged at home," 16 July 2020, <<https://www.economist.com/europe/2020/07/16/angela-merkels-soft-china-stance-is-challenged-at-home>> (accessed 22 July 2020).

track record of reform and its legitimacy, actors are aware of the danger of state collapse. The US, EU, UK and Norway regard themselves as midwives of South Sudan's independence as a state, they see themselves as responsible for its success. While the development process has taken a back seat, humanitarian assistance continues.

On this background, implication for South Sudan is that change has to come from within. And it has to come peacefully. The ruling system is seemingly strong, but brittle. Actors for change are the young generation, combined with intellectuals and professionals, progressive CSO, parts of the business community, technocratic public service staff, disgruntled SPLM members and the diaspora.

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Impact of the Global Health Emergency caused by the Coronavirus on the African Continent: The Case of Somalia – A triple Tragedy

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Abstract: *This paper analyses the key issues and challenges which make Africa more vulnerable to the COVID-19 pandemic than other parts of the world. COVID-19 is a global public health pandemic that has wrecked economies. The paper specifically focuses on the pandemic's consequences on youth, and education in Somalia. It points out that for the East African country of Somalia, which has been in political turmoil for decades, COVID-19 is a "triple tragedy" exacerbating the already existing conflict and drought. It also handles the pandemic's influence on Africa's relationship with major European countries (France, Germany, UK). The pandemic may positively influence Africa's relationship with major Europeans countries. Due to the pandemic, poverty levels in Africa are forecasted to rise, increasing the need to seek for economic support for recovery from European countries and multilateral institutions such as World Bank and IMF. Africa will have to abide by the regulations provided by these countries and the multi-lateral institutions.*

Key words: COVID-19, Pandemic, Africa, impact, Economy, Triple tragedy.

Africa's vulnerability to the pandemic: The specific case of Somalia

COVID-19 is a global public health pandemic, which has wrecked economies. Many countries are on lockdown forcing people to stay at home, and businesses have been shut down in an attempt to stop the spread of the Coronavirus. This has resulted in the loss of jobs globally, poverty as well as loss of lives. Thus, the global pandemic has without exception, negatively impacted on economic activity and lives across the world. The COVID-19 pandemic threatens African progress. It will aggravate long-standing inequalities and heighten hunger, malnutrition and vulnerability to disease. Already, demand for Africa's commodities, tourism

and remittances are declining. The opening of the trade zone has been pushed back and millions could be pushed into extreme poverty.¹

In the East African region, the Coronavirus pandemic has worsened the effects of climate change and the locust invasion that the Horn of Africa had already been grappling with. FAO reports that the Horn of Africa is facing the worst desert locust crisis in over 25 years, and the most serious in 70 years for Kenya.² The current potential regional plague upsurge represents an unprecedented threat to food security and livelihoods in the region leading to further suffering, displacement and conflict. The situation is alarming, particularly in Ethiopia, Kenya and Somalia where widespread breeding is in progress and new swarms are beginning to form.³

For the East African country of Somalia, which has been in political turmoil for decades, COVID-19 is a “triple tragedy” exacerbating the already existing conflict and drought. Drought exacerbates conflict by increasing competition for resources. Al-Shabaab feeds off these tensions and exploits vulnerabilities. Conflict thus worsens the impact of the drought by depleting family assets, disrupting traditional coping mechanisms, including migration and impeding humanitarian access. Conflict and drought force

¹ “Coronavirus – Africa: Statement on the Launch of United Nations Policy Brief on the Impact of COVID-19 on Africa,” *African Press Organisation - Database of Press Releases Related to Africa*, 20 May 2020, <<http://200.91.89.195:2048/docview/2404659528?accountid=28984>> (accessed 23 June 2020).

² “Coronavirus - Africa: Food and agriculture organization (FAO) needs \$350 million to avert rising hunger as countries reel from COVID-19 pandemic’s impact: Somalia is currently experiencing multiple shocks, including desert locust, flooding and COVID-19. 2020,” *African Press Organisation - Database of Press Releases Related to Africa*, 18 May 2020, <<http://200.91.89.195:2048/docview/2404046676?accountid=28984>> (accessed 25 June 2020); David Chancellor, “Albert Lemasulani, a Kenyan pastoralist, tracks locust swarms,” *National Geographic*, <<https://www.nationalgeographic.com/animals/2020/05/gigantic-locust-swarms-hit-east-africa/#/locust-swarm-kenya-21.jpg>>.

³ Food and Agriculture Organisation of the United Nations, “Desert locust crisis,” <<http://www.fao.org/emergencies/crisis/desertlocust/intro/en/>>.

internal displacement.⁴ While COVID-19 poses an invisible threat to Somalia, the conflict has not stopped, and still drives displacement and suffering. The COVID-19 pandemic has increased vulnerability due to ongoing conflicts by Al-Shabaab and drought. Recent clashes in Janaale, Lower Shabelle region, affected over 20,000 people, with an estimated 8,000 people displaced from their homes to Marka, Afgooye, Shalanbood and Mogadishu.⁵ Similarly, the COVID-19 locked down of huge populations has resulted in increased reports of domestic and gender-based violence. Consequently Somalia, which has one of Africa's most fragile health care systems, millions of internally displaced people, and recovering from state collapse and civil war is potentially less prepared for the COVID-19 pandemic than any other country in the world.⁶

Globally, China reported tripled domestic violence cases during their shelter in-place mandate, France saw a 30% increase in domestic violence, while in Brazil domestic violence stood at 40–50%, as Italy also reported rise in domestic violence.⁷ In Somalia, the pandemic is occurring amidst already alarming levels of hunger due to climate shocks, conflict and economic instability as well as the locust invasion in the country. Internally displaced children and women are the most vulnerable. The social and economic effects of COVID-19 are far reaching, and further compound the debilitating consequences of conflict; desert locust infestation, droughts and perennial flooding that impact the most vulnerable populations. There are reports that seven health workers and a civilian were killed in a village

⁴ International Organisation for Migration (IOM), "Somalia Crisis Response Plan," 31 January 2020, <<https://crisisresponse.iom.int/response/somalia-crisis-response-plan-2020>>.

⁵ Joseph Maseland, ed., "COVID-19 in African Cities: Impacts, Responses and Policies," UN-HABITAT, UNCDF, UCLG-Africa, UNECA, 2020, <<https://www.uneca.org/archive/publications/covid-19-african-cities-impacts-responses-and-policies>>.

⁶ Dalsan Radio, "Farmaajo Govt Asked Not to Politicize COVID 19 Ahead of Elections," *AllAfrica.Com*, 9 May 2020, <<http://200.91.89.195:2048/docview/2400291449?accountid=28984>> (accessed June 26, 2020).

⁷ Andrew M. Campbell, "An increasing risk of family violence during the Covid-19 pandemic: Strengthening community collaborations to save lives," *Forensic Science International. Reports* (2 December 2020): 100089.

north of the Somali capital after being abducted by masked men in military uniforms.⁸ Meanwhile evictions of displaced persons by landowners have complicated the situation during the duration of the COVID-19. The Somali authorities and private landowners have been urged to stop evictions of displaced persons for the entire duration of the COVID-19 response.⁹

The exponential rise in the number of confirmed COVID-19 cases in Somalia continues. As of 26 April to 3 May 2020, confirmed cases rose from 390 to 722, with 32 deaths and 44 recoveries. The measures taken by individual agencies working in Somalia have also impacted negatively on humanitarian activities and development programmes. An OCHA survey of NGO partners in South West State found that 40 per cent had reduced field presence to focus on immediate lifesaving activities.¹⁰

The consequences on youth and education of the pandemic

The African continent, which has the youngest populations in the world, is exposed to many of the collateral impacts of the COVID-19. Youth are directly affected through the closure of schools, businesses and streets, jobs losses, stoppage of games such as football matches, closure of markets, construction works, entertainment centres, hotels and restaurants. COVID-19 has enormous consequences on education in Africa and Somalia in particular.

In the educational sector, the pandemic could compromise outcomes for a generation. "It is estimated that, with the sudden interruption in education,

⁸ Thompson Reuters, "Seven Health Workers, Civilian Killed in Somali Village: Aid Group," *U.S. News*, 28 May 2020, <<https://www.usnews.com/news/world/articles/2020-05-28/seven-health-workers-civilian-killed-in-somali-village-aid-group>>.

⁹ African Union Mission in Somalia (AMISOM), "Coronavirus – Somalia: Joint Statement on COVID-19," *Africanews*, 13 April 2020, <<https://www.africanews.com/2020/04/13/coronavirus-somalia-joint-statement-on-covid-19/>>.

¹⁰ UN Office for the Coordination of Humanitarian Affairs, "*Somalia: COVID-19 Impact Update*, no. 4," *ReliefWeb*, 4 May 2020, <<https://reliefweb.int/report/somalia/somalia-covid-19-impact-update-no-4-4-may-2020>> (accessed June 25, 2020).

262.5 million children are out of school and millions among them are at risk of not returning to school, especially girls,” said Doris Mpoumou, Director of Africa Union Liaison Office for Save the Children.¹¹ For some, it means missing class altogether, or struggling with online learning, facing difficulties with online connections, as well as motivational and psychosocial well-being challenges.¹² In addition youths will be affected by the impending school closures and jobs losses.

Aggressive restrictions on daily life in sub-Saharan African paint a pretty grim picture of the lockdown’s failures in other sectors that also affect the youth indirectly. For example, shopping for food and essential supplies or attending medical appointments including compassionate visits is a challenge as only 18% of the population have convenient access to public transport.¹³ These strict measures have led to more disastrous health effects, heightened poverty, high levels of malnutrition, and increased domestic violence among the youth as well as the general population use of public and private cars as means of transportation have been banned. Walking and cycling remain among the main means available for the majority of urban commuters to go shopping or to work. In countries such as Uganda, bans have been excessive and lockdown restrictions are complemented by a 7 pm to 6:30 am curfew. Additional measures included

¹¹ Save the Children, “COVID-19 could Reverse Gains made for African Children, warns Save the Children,” 8 June 2020, <<https://www.savethechildren.net/news/covid-19-could-reverse-gains-made-african-children-warns-save-children>> (accessed June 25, 2020).

¹² Allison Anderson, “COVID-19 Outbreak Highlights Critical Gaps in School Emergency Preparedness,” The Brookings Institution, 11 March 2020, <<https://www.brookings.edu/blog/education-plus-development/2020/03/11/covid-19-outbreak-highlights-critical-gaps-in-school-emergency-preparedness/>> (accessed 25 June 2020).

¹³ Pius Acolatse, “Ideas First, Africa! a Perspective from the West on the Impact of COVID-19 on Africa,” [Interview], *AllAfrica*, 5 June 2020, <<https://allafrica.com/stories/202006080432.html>> (accessed 23 June 2020).

restricting markets to selling only foodstuffs, shutting down shopping malls and arcades, prohibiting of people movement.¹⁴

For Somalia, young people are in addition at high risk of facing abuse such as sexual exploitation in exchange for good food or water due to being in a conflict torn country. They are at risk of getting sick and dying from COVID-19 since they are the most active age group in the society although mortality due to pandemic is low among youths. Thus, while African governments have responded quickly to the pandemic, they now need to ensure that this leadership is aligned to their continental commitment and the African Charter on the Rights and Welfare of the child.¹⁵

The Africa-European countries (France, Germany, UK) relationship in the pandemic

The pandemic will influence Africa's relationship with major European countries positively. Due to the pandemic, poverty levels in Africa are expected to rise, and thus increasing the need for economic support from European countries and multilateral institutions such as World Bank and IMF. Africa will have to abide by the regulations provided by these Countries and the multi-lateral institutions.¹⁶

Furthermore, the coronavirus pandemic, which is crippling economies the world over, is set to trigger into motion Africa's first recession in 25 years. Africa may lose half of its GDP with growth falling from 3.2% to about 2%

¹⁴ Andre M. N. Renzaho, "The Need for the Right Socio-Economic and Cultural Fit in the COVID-19 Response in Sub-Saharan Africa: Examining Demographic, Economic Political, Health, and Socio-Cultural Differentials in COVID-19 Morbidity and Mortality," *International Journal of Environmental Research and Public Health* 17, 10 (2020): 34-45.

¹⁵ U. N. Economic Commission for Africa. "ECA Estimates Billions Worth of Losses in Africa due to COVID-19 Impact," 13 March 2020, <<https://www.uneca.org/archive/stories/eca-estimates-billions-worth-losses-africa-due-covid-19-impact>> (accessed 23 June 2020).

¹⁶ Yasin Kakande, "Has president Museveni turned \$491.5m IMF loan into pandemic heist?" *The Voice*, 30 May 2020, <<https://www.voice-online.co.uk/opinion/comment/2020/05/30/has-president-museveni-turned-491-5m-imf-loan-into-pandemic-heist/>>.

for a number of reasons, which include the disruption of global supply chains. Thus, the Economic Commission for Africa and its partners have proposed several interventions to promptly and effectively address COVID-19 challenges on the continent at the urban level.¹⁷

Also because of the continent's interconnectedness to the other affected economies of the European Union, China and the United States, it is facing ripple effects.¹⁸ Many African economies are still in a state of dependency: exporting primary raw materials that are highly sensitive to exogenous shocks such falling prices of minerals and crude oil. Thus, African countries, having failed to diversify and build their own industrial base find themselves in the deplorable situation of being extremely vulnerable to a change in their economic situation due to COVID-19.¹⁹

In the circumstances, global solidarity with Africa is an imperative as COVID-19 spreads across the continent, although the continent has responded swiftly to the pandemic. The pandemic threatens African progress, and it will aggravate long-standing inequalities and heighten hunger, malnutrition and vulnerability to disease. Already, demand for Africa's commodities, tourism and remittances are declining. The opening of the trade zone has been pushed back and millions could be pushed into extreme poverty. Vigilance and preparedness are critical. African countries should also have quick, equal and affordable access to any eventual vaccine and treatment, which must be considered global public goods.

¹⁷ The World Bank, "Coronavirus - Somalia: World Bank Approves \$55 Million to Sustain Somalia's Reforms and Fiscal Response to Multiple Crises," Press Release, 23 June 2020, <<https://www.worldbank.org/en/news/press-release/2020/06/23/world-bank-approves-55-million-to-sustain-somalias-reforms-and-fiscal-response-to-multiple-crises>> (accessed 25 June 2020).

¹⁸ Felix Tih, "Red cross concerned about impact of COVID-19 in Somalia," *Anadolu Agency*, 4 April 2020, <<https://www.aa.com.tr/en/health/red-cross-concerned-about-impact-of-covid-19-in-somalia/1792176>> (accessed 25 June 2020).

¹⁹ António Guterres, "UN launches policy brief on impact of COVID-19 in Africa, calls for global solidarity," *Africa Renewal*, 20 May 2020, <<https://www.un.org/africarenewal/news/coronavirus/covid-19-threatens-important-progress-africa>> (accessed 25 June 2020).

Somalia, like many other countries, is grappling with the deadly COVID-19 pandemic, with over a thousand laboratory-confirmed cases and dozens of associated deaths registered so far. With the support of international partners, the government is implementing various medical, public health, and social interventions to curb the spread of the contagion and mitigate its impact on the country.²⁰ COVID-19 is likely to have even worse and longer lasting economic impact on Somalia, since it is still recovering from decades of civil war. Not only is the country's own economy affected by travel bans and lock downs, but it is estimated that Somalia receives approximately USD\$1.6 billion per year in remittances from countries around the world that are also facing lock downs that affect those working in informal labour disproportionately.²¹

Conclusion

The COVID-19 pandemic seriously threatens progress in Africa. It will result in the loss of jobs, poverty as well as loss of lives. It will aggravate long-standing inequalities and heighten hunger, malnutrition and vulnerability to disease. Crippling healthcare expenditure, limited fiscal capacity, and stringent lockdown measures might make it difficult for African countries especially Sub Saharan African to save lives. Governments will be unable to inject much needed cash into the financial system to boost economies and increase the demand for goods and services. Thus, the global pandemic will without exception, negatively impact on economic activity and lives across Africa.

²⁰ *Abdisalam Bahwal*, "The Somali Health and Demographic Survey Report - A Tool to Fight COVID-19 in Somalia," *Reliefweb*, 2 June 2020, <<https://reliefweb.int/report/somalia/somali-health-and-demographic-survey-report-tool-fight-covid-19-somalia>>.

²¹ *Walter Mawere*, "Somalia: One of Countries Least Prepared to Cope with Covid-19 Virus," *CARE*, 17 April 2020, <<https://www.care-international.org/news/press-releases/somalia-one-of-the-countries-least-prepared-to-cope-with-the-covid-19-virus#:~:text=Last%20Week-,Somalia%3A%20One%20of%20the%20countries%20least%20prepared%20to,with%20the%20Covid%2D19%20virus&text=2.6%20million%20IDPs%5B1%5D%20amongst,its%20first%20case%20of%20coronavirus>>.

In Somalia COVID-19 is likely to have an even worse and longer lasting economic impact, since it is still recovering from decades of civil war and drought. The travel bans, lockdown and the drastic falling of the yearly remittances it receives from countries around the world that are also facing lock downs will worsen the economic outlook of the economy.

The pandemic will cause Africa to have an increasing need for economic support from European countries and multilateral institutions.

Recommendations

To mitigate the effects of the pandemic:

There is need for a consolidated effort from all authorities – humanitarian and development actors – to help mitigate the direct and collateral impacts of the virus. This requires clear, two-way communication and partnerships.

African countries require support in designing and implementing coordinated policy responses from global financial institutions. Cooperation with regional partners in Africa such as the African Union and the United Nations Economic Commission for Africa, as well as international partners is very important for the economic recovery.

Africa remains an absolute priority to the international community in regard to substantial investment to combat the effects of COVID-19 and to support the economies of developing countries. Advocacy is needed for a comprehensive debt framework starting with an across-the-board debt standstill for countries unable to service their debt, followed by targeted debt relief and a comprehensive approach to structural issues in the international debt architecture to prevent defaults.²²

²² Chioma Obinna, "COVID-19: Nigeria, 38 Other African Countries to Benefit from GPE US\$250 Fund," *Vanguard. All Africa*, 6 April 2020, <<https://allafrica.com/stories/202004060863.html>> (accessed 25 June 2020); Department of Global Communications, "UN

The pandemic requires unity within countries, between neighbours and the region. Efforts to encourage Somalia and the countries of the region to reduce infection, reinforce health systems, and strengthen community resilience, as well as to keep key trade routes open, and facilitate vital private financial flows should be enhanced.

Lastly political differences among the Somali people will require dialogue and willingness to forge consensus. States should resume constructive collaboration to advance national priorities and to collaborate to mitigate the threat of COVID-19.

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Public Health or Security Issue: An Analysis of Kenya's Response to the COVID-19 Pandemic

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Abstract: *Total or partial lockdown and curfew coupled with the World Health Organisation's (WHO) hygiene precautionary measures have emerged as the preferred responses by governments all over the world to curb the spread of COVID-19. Within the East African region, and more specifically Kenya, states have employed partial and total lockdowns with the police and security personnel being at the forefront in enforcing these measures meant at handling the health crisis. The state has turned to legitimate use of force and security apparatus to tackle health matters. The paper shall begin with a brief overview of state response to COVID-19 within the East African Community. It will then focus on the response within the Kenyan context.*

The writers theorize that Kenya has been witnessing rise in securitization of issues and COVID-19 has accelerated this trend. Extrajudicial measures are invoked by the state in the guise of fighting the health pandemic. Media reports at one time suggested that there were more deaths from police brutality than from COVID-19. The paper details the measures put forward in Kenya to combat COVID-19, which include dusk-to-dawn curfew, restriction of inter-county movement involving hotspot counties, closure of schools and universities and criminalisation of failure to take precautionary measures such as wearing of face masks in public areas, social distancing and provision of hand washing facilities of some counties, restricting movement to and from certain counties, and closure of inter-county travel. The article then will analyse the approach taken by the Kenyan government to respond to the COVID-19 pandemic from a human rights perspective. Further, the paper will critique the legality of government responses and their efficacy in combating the COVID-19 pandemic. Finally, the article recommends effective non-police and people-centred ways to handle the pandemic.

Key words: *Human rights, Kenya, lockdown, public health, security.*

INTRODUCTION

Background: Setting the stage

When COVID-19 was initially reported in Wuhan, the concept of ‘lock-downs’ was as alien as the disease itself. China quickly instituted this measure to curb the community spread of the virus, through total lockdown of neighborhoods, road, rail and air transport from the city of Wuhan, and later the whole of China. This affected millions of people in the country. As the virus spread across the globe, countries employed an array of measures to try to mitigate its spread. International air transport was the first to stop. Later regions in Italy, the United States of America, and borders in the highly interconnected European Union were locked down.

In Africa, and specifically within the East African region, countries followed suit. Perhaps having learnt from previous battles with the Ebola virus disease, Uganda and Rwanda were first to institute lockdowns even before the first case of COVID-19 was reported within their territories (Margini, Pattnaik and Nakyanzi 2020). This was quickly followed by Tanzania and Kenya, while Burundi was the outlier in the response, with former late President Nkuruzinza opting for less strict measures, opting to let life continue as normal. Dusk to dawn curfews and cessation of movement into provinces, districts and counties (depending of which country) followed suit to limit movement of people, and by extension the spread of COVID-19. The lockdowns were seen as a logical way of preventing entry of the disease in light of weak healthcare systems found in the region. Prevention was seen to better than offering curative medicine. Security apparatus within these countries was tasked with enforcing these measures.

However, as soon as these measures were instituted, and security apparatus tasked with enforcement, accusations of police brutality were rife across the EAC countries collectively, with the pandemic ceasing to be a health issue, and quickly metamorphosing into a security issue. However, as Amartya Sen

is quoted while writing about India's response to COVID-19, *'tackling a social calamity is not like fighting a war, which works best when a leader can use top-down power to order everyone to do what the leader wants — with no need for consultation'* (Aikande 2020). It is imperative that states get a balance between COVID-19 as a health and security issue.

The article begins by describing the methodology that was employed by the writers. Thereafter, the paper comparatively analyses the state responses to the COVID-19 pandemic by members of the East African Community more specifically, Tanzania, Uganda, Rwanda and Burundi. The article then focuses on the Kenyan experience of COVID-19. It analyses the legal and policy framework that supports securitization of the pandemic. Further, the article proceeds to examine the judicial and non-state response to the securitization approach. Finally, concluding thoughts and recommendations are highlighted.

Research Methodology

The article herein involved a desk review. A conventional legal and policy analysis approach was employed the involved the review of statute books and policy manuals that address the response to COVID-19. The article employed secondary data collection by use of official documents, newspaper reports, and survey results by state and non-state actors. The writers participated in webinars involving human rights defenders and practitioners within the justice sector where expert opinion was shared, focusing on the role of police and human rights-based approach during the pandemic. The secondary data was analysed qualitatively by using the thematic areas.

Comparative Analysis of COVID-19 Pandemic Prevention and Protection in the East African Region

Within the East African region, different countries initially responded in a similar way to the coronavirus. Gradually, the states changed tact in battling

the pandemic. This revealed the different political systems and leadership styles found across the region. Having tasked the enforcement measures to curb spread of COVID-19 to the security apparatus across the region, several human rights issues have arose in all member states of the East African Community.

Rwanda

The World Health Organization (WHO) reports that Rwanda has been on a high-level alert since the 2018 Ebola fight, which enabled the country to quickly adopt and respond to COVID-19 pandemic. The country reported its first case in 14th March but even before that, it had instituted mandatory quarantine for all international travelers, hand washing, temperature checks at ports of entry, physical distancing as well as mandatory use of face masks (World Health Organization Rwanda 2020). This was complimented by community awareness campaigns across the country including #GumaMuRugo (stay home, save lives) and #NtabeAriNjye (let it not be me), to drum up support for these measures among the community members.

Later on, contact tracing, surveillance and case management were instituted. Security apparatus were key in surveillance, contact tracing and enforcement of physical distance measures instituted by government. (Bower, et al. 2020). Bracelets that contained tracking devices were used to enforce travel restriction and quarantine for inbound travelers. In Rwanda, soldiers enforcing COVID-19 measures have been accused of raping women, arresting and detaining people arbitrarily without cause (Human Rights Watch, 2020). This happens while bloggers and journalists who criticize the government have also been arrested for ‘flouting COVID-19 guidelines’.

Uganda

The country closed borders before the first case was reported. Schools were closed, public transport banned or operated at half capacity, religious and other social gatherings banned, and a dusk to dawn curfew was instituted

(UNHCR 2020). The response was partly influenced by the fight against Ebola that Uganda went through earlier on. In Uganda, police have been accused of extortion, harassment, beatings, detention and in some cases deaths (Biryabarema, 2020). Twelve deaths during the pandemic are directly attributed to police excesses in enforcing curfews and other public health measures in Uganda (BBC, 2020).

Tanzania

President Magufuli has treated COVID-19 as a war and not a health calamity. While initially the country went on lockdown and instituted measures to curb the spread, he gradually questioned the entire COVID-19 narrative. The country lifted COVID-19 restrictions in May, after positive tests for COVID-19 were returned on non-human samples including a *papaya* (Ohikere 2020). Since then, the President terminated the services of the head of the National Laboratory, and the Deputy Minister of Health and appointed replacements, and declared Tanzania COVID-19 free after God ‘removed it from Tanzania (Odula 2020). Since then, life in Tanzania has gone back to normal, with no mask wearing, social gatherings allowed and international travel lifted. In Tanzania, police have confirmed arrests of at least three people for ‘spreading misinformation’ about COVID-19 (Xinhua, 2020). Online TV stations and journalists have been suspended for criticizing government response to COVID-19, after the government passed the ‘Access to Information Act’ aimed at controlling improper release of state data.¹ President Magufuli has continued to hold political gatherings ahead of the 2021 presidential elections while prohibiting opposition rallies under the guise of COVID-19 (United Nations News, 2020).

Burundi

When COVID-19 came around, Burundi was in the middle of Presidential elections and campaigns. Outgoing President Nkuruzinza (who has since

¹ Center for Strategic and International Studies 2020.

passed on) encouraged people to pray for it, while going about normal business. There was no fact-based information coming from government, with healthcare workers living in fear of government reprisal should they raise alarm over COVID-19. Campaigns went on normally, and election of the new president was done (Human Rights Watch 2020). The head of World Health Organization in Burundi was expelled by government, accusing the organization with interfering with COVID-19 response (Reiter and Creedon 2020). It was noted that, testing of suspected cases was difficult. However, with the new president formally taking over, Burundi has changed tact, opting for mass testing of COVID-19 beginning with the capital Bujumbura (Tih 2020). The president has declared COVID-19 ‘worst enemy of Burundi’ and introduced compulsory mask wearing (Al Jazeera 2020).

The Kenyan Experience: Legitimisation of Use of Security Apparatus in COVID-19 Response

Like other East African states, Kenya closed the borders with neighboring countries in light of COVID-19, instituted dusk to dawn curfew, cessation of movement in and out of some key hotspot counties, closure of schools, banning of big social gatherings, mask wearing in public and quarantine for inbound travelers.² The government has continuously given updates on the status of COVID-19 in the country. The Kenyan government progressively put in place a legal and policy framework founded on the Constitution of Kenya 2010, the Public Health Act Cap 242 of the Laws of Kenya (hereinafter “the PHA”), the Health Act No. 21 of 2017 (hereinafter “the HA”), the Public Order Act Cap 50 of the Laws of Kenya (hereinafter “the POA”) and the National Police Service Act No. 11 of 2011. In this section, the legal and policy framework is discussed and analyzed. The application of these laws and policies requires a paradigm shift in the mode of human interactions, re-interpretation and limitation of rights. To achieve this, the police have become “frontline workers” in enforcing directives such as curfew, contract

² Maleche and Were 2020.

tracing and targeted testing. This has led to some unintended consequences, as the focus of the pandemic transcended from being a public health issue to a law and order issue (Gathara, 2020). The Independent Police Oversight Authority has confirmed over 30 deaths directly related to police enforcement of the curfew.³ This is aside from allegations of bribery, extortion, brutality and arbitrary arrests of citizens by the police. The use of disproportionate force and corruption are in total disregard to the Constitution and other laws and policy discussed hereunder.⁴ Under this part, the article examines the Kenyan case, its legal and policy framework that legitimizes the securitization of the response to the COVID-19 pandemic.

2.1 Legal Framework

The Constitution of Kenya provides comprehensive rights for every human being including first, second and third generation rights.⁵ It is the

³ Zhu 2020; Amnesty International and media reports on police brutality.

⁴ A case in point involves the Likoni Ferry incident, which took place on 27th March 2020, the first day of the 7pm to 5am curfew. At the Mombasa County, commuters crossing the Likoni channel rushed to beat curfew hours only to find themselves queuing for hours to board the ferry. At 5pm- one hour to ferry closure and two hours to the National curfew, a few rowdy and frustrated youths began throwing stones at police officers. In retaliation, the officers threw teargas canisters and started shooting in the air. This caused the large crowd of commuters to start running. They were all ordered to lie down while being physically abused by the officers. The citizens, many of whom were women and children were coughing, sneezing and crying. Media personnel were not spared for filming the chaos. A police officer was caught on camera assaulting a journalist who was covering the story. This was despite that licensed Broadcasters and Media Houses provide essential and critical services and are exempt from the curfew. Many lost their property and got injured while running. The Government apologized for the incident. This was an infringement of the citizens' right to freedom and security of the person provided under article 29 of the Constitution of Kenya. Every person has the right not to be subjected to corporal punishment or treated or punished in a cruel, inhumane or degrading manner. Their right to human dignity was also violated.

⁵ Civil and political rights under the Constitution include right to vote, freedom of movement and residence, freedom of assembly, demonstration, picketing and petition, freedom of expression, right to privacy, freedom from slavery, servitude and forced labour, freedom and security of the person, right to human dignity, freedom of conscience,

fundamental duty of the State and every State organ to observe, respect, protect, promote and fulfil these rights and fundamental freedoms.⁶ That notwithstanding, the Kenyan Constitution allows for “the limitation of rights by law and only to the extent that the limitation is reasonable and justifiable in an open democratic society and in line with human dignity, equality and freedom”.⁷ De Schutter expounds on the conditions for limitation of rights. He argues that the State must meet six conditions to invoke its power to limit rights (De Schutter 2014). Firstly, it must be established that a public emergency that threatens the life of the nation exists. Secondly, there is a need to limit the rights. Thirdly, the limitation is non-discriminatory. Fourthly, there must be compliance with international standards and obligations. Fifthly, the non-derogable rights are not in any way affected by the limitation. Finally, there is international notification of the emergency. In other words, the limitation of rights cannot be done in a legal vacuum. Within the Kenyan Constitution, not all rights and freedoms can be limited. Article 25 enlists rights and freedoms that can never be limited by legislation or otherwise.⁸

The Government has imposed criminal sanctions against individuals or organisations that fail to comply with restrictions to contain the spread of

religion, belief and opinion, freedom of the media, freedom of association, access to information, access to justice, right to fair labour practices and right to property. The socio-economic and cultural rights include right to highest standard of health, accessible and adequate housing, right to be free from hunger and to have adequate food, clean and safe water, right to social security and right to education.

⁶ Article 21(1) of the Constitution of Kenya 2010.

⁷ Article 24 (1) and (2) of the Constitution. The limitation of rights and freedoms must be within the following purview:

- (a) the legislation must specifically express the intention to limit the right or fundamental freedom; and
- (b) the provision is clear and specific and the nature and extent of the limitation; and
- (c) the legislation shall not limit the right or fundamental freedom so far as to derogate from its core or essential content.

⁸ The following rights are non-derogable: freedom from torture and cruel, inhuman or degrading treatment or punishment; freedom from slavery or servitude; the right to a fair trial; and the right to an order of *habeas corpus*.

COVID-19. Section 2 of the Public Health Act Cap 242 Laws of Kenya (hereinafter “the PHA”) begins by defining an infectious disease as ‘any disease, which can be communicated directly or indirectly by any person suffering therefrom to any other person.’ The PHA then provides guidelines for the prevention and suppression of any infectious diseases.⁹ The SARS COVID-19 has been classified by the MOH as a highly infectious respiratory disease that falls under the ambit of the PHA. The Cabinet Secretary of Health gazetted regulations under the PHA, which criminalise conduct that jeopardises containment measures.

Under section 28, the PHA provides that any person infected with COVID-19 who exposes himself or herself to the public without taking proper precaution is guilty of an offence that leads to a fine of up to Kshs 30,000, imprisonment of up to three years or both. This section was applied in two prominent cases involving the Kilifi County Deputy Governor Gideon Saburi and a Catholic priest Richard Oduor.¹⁰

The Public Order (State Curfew) Order, 2020 (Legal Notice No. 36 of 2020) was issued under section 8 of the Public Order Act, which provides for curfew orders in the interest of public order. The order exempts essential services including medical professionals and health workers, supermarkets

⁹ Kiragu Kimani, “COVID-19 – “New” criminal offences in Kenya,” *JD Supra*, 17 April 2020, <<https://www.jdsupra.com/legalnews/covid-19-new-criminal-offences-in-kenya-76521/>> (accessed 16 July 2020).

¹⁰ In the case of the former, the Director of Public Prosecutions sought to detain and isolate the accused at a maximum security prison as investigations were ongoing on his failure to self-quarantine upon arrival in the country from Germany. The Court in its ruling dismissed the application noting that a certificate of a medical officer confirming COVID-19 positive status of the Deputy Governor had not been provided. Further, the Honourable Court held that under the Public Health Act, prisons facilities are not envisaged as places of isolation as such it would pose a risk to the prison population. On the other hand, Fr. Richard Oduor was arrested at the Kenyatta National Hospital in Nairobi County on 9 April 2020, after he was discharged following recovery from COVID-19. Fr. Richard Oduor is alleged to have failed to self quarantine upon arrival from Italy and hence accused of knowingly spreading the virus by travelling to his rural home and conducting a mass and attending a funeral. The hearings of these two cases are yet to begin.

among others. The Public Order (State Curfew) Variation Order, 2020 (Legal Notice 43 of 2020) requires all employers shall ensure that their staff who are not designated as critical or essential services providers leave the workplace no later than 4.00 o'clock in the afternoon to facilitate compliance with the Order. On 6th July 2020, the curfew hours were moved to 9pm to 4am from 7pm to 5am throughout the territory of Kenya. The penalty for failure to observe the curfew includes fine of up to KShs 10,000, imprisonment of up to three months, or both.

In a decided case, the court found that “any declaration of a curfew is not a small matter”. The Judge stated: “...a curfew is heavy artillery that should be deployed with circumspection. Since it affects constitutional rights and fundamental freedoms, it ought to be premised on substantive law.”¹¹ A total lockdown was not preferred by the Government of Kenya so as to keep as much of the economy going as possible, for recovery to be rapid and avoid prolonged recession.¹² The legislation exempted thirteen (13) groups of workers offering essential services.¹³

Legal, judicial and paralegal services, which are crucial during a pandemic that impacts the social, economic and cultural fabric of the society, were omitted from the list of exempted services. However, the recognition of national security, administration and co-ordination services as essential services placed pre-eminence on their role in management of the COVID-19

¹¹ Nrb HCCC Petition No. 120 of 2020.

¹² Mathew Kirk, “How do I Know if What I do is an Essential Service?” *The National Law Review* (March 19, 2020), <<https://www.natlawreview.com/article/how-do-i-know-if-what-i-do-essential-service>> (accessed 1 April 2020).

¹³ Medical professionals and health workers; National security, administration and co-ordination officers; Public Health and sanitation officers in the county governments; Licensed pharmacies and drug stores; Licensed broadcasters and media houses; Kenya Power; Food dealers, distributors, wholesalers and transporters of farm produce; Licensed supermarkets, mini-markets and hypermarkets; Licensed distributors and retailers of petroleum and oil products and lubricants; Licensed telecommunication operators and service providers; Licensed banks, financial institutions and payment financial services; Fire brigade and other emergency response services; and licensed security firms.

pandemic. The national security, administration and coordination department guarded all county border points and carried out patrols to ensure compliance with the curfew hours.

Under section 36 of the Public Health Support, the Public Health (COVID-19 Restriction of Movement of Persons and Related Measures) Rules 2020 (Legal Notice No. 50 of 2020) provides the following rules for prevention of disease:

1. Restrictions on Movement: Rules 3 and 4 empower the CS Health to declare an area as infected and restrict movement into and out of the restricted areas.¹⁴

2. Use of face masks in public and private transport: Rule 5 criminalizes public and private transport vehicles that carry more than 50% of their licensed capacity and motorcycles and bicycles that carry more than one passenger. In addition, it is now mandatory for all public and private transport operators to wear proper masks that must cover the person's mouth and nose.

3. Restrictions in public places: Rule 6 provides for the maintenance of physical distancing of no less than one meter from the next person, and the use of a proper face mask that must cover the person's mouth and nose. In addition, organizations and business entities have to provide a hand-washing station with soap and water or an approved alcohol-based sanitizer, enforce physical distancing within their premises or business location, and regularly sanitize their premises or business location.

4. Prohibition of Public Gatherings: Rule 2 defines public gatherings as, 'any private gathering or meeting for a social, cultural, economic or other purpose or public gathering, meeting, grouping, assembly, crowd, or

¹⁴ In exercise of such powers, the CS Health published the Public Health (COVID-19 Restriction of Movement of Persons and Related Measures) for Nairobi Metropolitan Area, Kilifi County, Mombasa County and Kwale County on 6 April 2020. The infected areas were later reduced to Nairobi Metropolitan Area, Mandera and Mombasa Counties. Since 6th July 2020, the cessation of movement was lifted.

procession, in or on any public road or space, any building, place or premises including wholly or partly in the open air, and including any premises or place used for sporting, entertainment, religious, cultural, political, academic, and fundraising purposes, for any barber shop, massage parlour and beauty salon activities or as bars or similar establishments, theatres and cinema, gymnasium, spa, dine-in restaurants and food courts, but does not include a market. The Public Health (Covid-19 Restriction of Movement of Persons and Related Measures) Variation Rules, 2020 (Legal Notice 58 of 2020) excluded an ordinary family gathering within a single household or living unit from the definition of a public gathering.

Rule 7 prohibits gatherings during the restriction period. A funeral is not regarded as a public gathering provided that:

- (a) attendance at the funeral shall be limited to fifteen people;
- (b) night vigils shall not be held in relation to a funeral;
- (c) hygiene conditions under rule 6 are adhered to; and
- (d) all the conditions under rule 8 (1) of the Public Health (Prevention, Control and Suppression of COVID-19) Rules, 2020 are adhered to.

5. Disposal of bodies

Rule 8 provides that where a person infected with COVID-19 dies, the body shall be interred or cremated within forty-eight hours from the time of death.

6. Penalty

Rule 11 imposes a penalty of either a fine of up to KSh20,000, imprisonment for a period of up to six months, or both, for contravention the measures set out in the above Rules.

The Public Health (Covid-19 Restriction of Movement of Persons and Related Measures) Variation Rules, No. 2 of 2020 (Legal Notice 58 of 2020) was issued under section 36 of the PHA. It provides that transportation of passengers by ferries shall only take place between 5:30 o'clock in the morning and 6:30 o'clock in the evening and Ferry operators shall not engage in cargo transportation during the period. Additionally, the hygiene conditions under Rule 6 shall be adhered to, with the necessary modifications, to users of ferry services and ferry operators.

In the same vein, rule 10 of the Public Health (Prevention, Control and Suppression of Covid-19) Rules, 2020 (Legal Notice No.49 of 2020) defines the offence of escaping from isolation and quarantine. A person who commits the offence is liable on conviction to imprisonment for a term not exceeding two months or a fine not exceeding twenty thousand (KShs 20,000) shillings.

Still under the PHA, the Cabinet Secretary of Health recently gazetted The Public Health (COVID-19 General Public Safety) Rules, 2020 on hygienic conditions for every organization, business entity or trader.¹⁵ Any person who commits an offence under these rules is liable on conviction to a fine not exceeding KShs 20,000 or to imprisonment for a period not exceeding six months or both.

¹⁵ Legal Notice No. 129 (14th July 2020). Rule 3(2) states: "every organisation, business entity or trader, whether in an enclosed premises or open space, shall:

- (a) provide a hand-washing station with soap and water or an alcohol-based sanitizer approved by the Kenya Bureau of Standards for use at the entrance of its premises;
 - (b) put in place measures to ensure that a physical distance of at least one (1) metre is maintained between persons accessing or within its premises;
 - (c) disinfect its premises using a disinfectant approved by the Kenya Bureau of Standards at least three times a day;
 - (d) for premises where employees operate in shifts, disinfect its premises using a disinfectant approved by the Kenya Bureau of Standards at the end of each shift;
 - (e) screen every person entering its premises using a thermometer gun and a person whose body temperature exceeding 37.3°C shall not be allowed into the premises.
-

The Public Health (COVID-19 General Public Safety) Rules, 2020 generally prohibits public gatherings. Rule 4 of the Public Health (COVID-19 General Public Safety) (2020) reiterates the same position under rule 7 of the Public Health (Restriction of Movement of Persons and Related Measures) Rules by excluding funerals as prohibited public gatherings and setting the same conditions for conducting them. A person who contravenes rule 4 in relation of public gatherings commits an offence that is liable to a fine not exceeding KShs 20,000 or to imprisonment for a period not exceeding six months or both.

Finally, the National Police Service Act stipulates the functions of the police service. None of the functions relate to public health or using excessive force in their exercise; there is focus on maintenance of peace, law and order including providing assistance to the public.¹⁶ In addition, section 87 establishes the Internal Affairs Unit that receives and investigates complaints against the police all with the aim of promoting uniform standards of discipline and good order. Police officers that have committed illegal acts will be subjected to criminal proceedings.

2.2 Policy Framework

Various government agencies developed guidelines in response to the pandemic. For purposes of this article, the writers focus on the guidelines

¹⁶ Section 24 provides the following roles:

- (a) provision of assistance to the public when in need;
- (b) maintenance of law and order
- (c) preservation of peace
- (d) protection of life and property
- (e) investigation of crimes
- (f) collection of criminal intelligence
- (g) prevention and detection of crime
- (h) apprehension of offenders.
- (i) Enforcement of all laws and regulations with which it is charged; and
- (j) Performance of any other duties that may be prescribed by the Inspector-General under this Act or any other written law.

from the National Police Service (NPS). There are eleven (11) guidelines to commanding officers for enforcement of the nationwide curfew or other COVID-19 restrictions. The guidelines are hinged on article 244(c) of the Constitution of Kenya, which places an obligation on the NPS to comply with standards of human rights and fundamental freedoms in pursuit of its objectives. However, the NPS guidelines are silent on the use of non-violent means for enforcement of the COVID-19 restrictions. Guideline 7 places ultimate responsibility for management of the curfew on the National Police Service. Ancillary forces may be incorporated in curfew management with full knowledge of the Constitution, Police Service Standing Orders and the NPS principles and guidelines. That notwithstanding, the guidelines do not provide guidance on non-violent measures in curfew management.

The NPS guidelines instructed officers to identify themselves as police officers, enforce the curfew by stopping, searching and detaining vehicles, individuals and premises, and to use proportionate force where non-violent means were inadequate. Guideline 1 provides that “the Office of the Inspector-General declares a zero-tolerance policy for all acts of unlawful, excessive and disproportionate use of force, including sexual and gender-based violence.” As such no law enforcement operation would be conducted in a way that kills or seriously injures any person. The guideline further stresses the importance of police officers providing assistance to persons in need as opposed to resorting to violence. Guideline 3 specifically states that police officers should not use firearms, police cordons, tear gas and water cannons to manage public movement and compliance with curfew hours. It further notes that congestion, water and tears may exacerbate transmission of COVID-19 to large numbers of people. Instead, law enforcement officers should identify and communicate roads or escape routes for the crowds to disperse. Gender sensitivity must be maintained during rapid responses and crowd control operations.

The NPS guidelines also did not provide for permissible exceptions for emergencies during curfew. This might include people taking themselves or

others for medical treatment and lawyers attending to clients who are arrested and need assistance with bail or bond. Lastly, they did not outline distance conscious policing procedures to protect the public and officers from the further transmission of COVID-19. These gaps and the choice to release the guidelines on the very day of the curfew, left very little time for officers to internalise or to receive clarification and training on the guidelines.

According to an Amnesty International report, in the first five nights of the curfew at least seven people were killed, sixteen hospitalised and tens hurt in the police operations across seven counties (Amnesty International 2020).¹⁷ Journalists, health-workers and human rights defenders complained of intimidation and assaults by police officers. Four Police Officers have been interdicted on allegations of use of excessive and lethal force, use of teargas and batons. On April 1, His Excellency the President apologised for the excessive force that was used during the curfew.

The NPS Guideline 2 stipulates that urgent consideration be given to the protection and wellbeing of police officers deployed to manage the COVID-19 pandemic. As such, personal protective equipment must be availed and excessive length of duty should be prevented. All police officers are required to be provided with training, psychosocial support and counselling when needed.

The NPS Guideline 4 also place personal criminal responsibility on police officers and commanding officers who engage in unlawful acts or issue unlawful orders in the course of duty. The role of the Independent Policing Oversight Authority (IPOA) and Internal Affairs Unit to receive reports, investigate, remove and punish police officers that have engaged in unlawful acts. In line with this, guideline 5 and 6 require police officers and

¹⁷ Amnesty International, "Human Rights-Based COVID-19 Policing Guidelines for the National Police Service," 7 April 2020, <<http://www.amnestykenya.org/human-rights-based-covid-19-policing-guidelines-for-the-nps/>> (accessed 16 July 2020).

commanding officers to inform and allow victims to file complaints, seek medical, legal and psychosocial support and pursue compensation, reparation and rehabilitation. The guidelines reaffirm that not all compensation for rights abuses will be borne by the state but also by officers that are found to be criminally liable. Further, a special team is established for documentation, investigation and monitoring of complaints against police officers that have perpetrated human rights violations against the public. The team has special expertise on gender-based violence, rights of children and persons with disabilities

1. Health or Security issue: How Police Intervention in the COVID-19 pandemic was Legitimised

Generally, a pandemic such as COVID-19 should be viewed as a health issue that would necessitate health related interventions to contain its spread amongst the populace. The role of healthcare workers would be central in addressing the pandemic. However, the impact of the COVID-19 pandemic has been multifaceted, complex and beyond matters public health. The impact of COVID-19 has transcended economic, social, cultural and political spheres due to its unique preventive measures. These preventive measures require strict compliance for containment of the virus. The criminalization of breaches of COVID-19 restrictions legitimized the use of police in the management of these government responses. Therefore, the focus on the fight against the pandemic mutated into a law and order issue; the police were pushed to the frontline to enforce the restrictions.

In addition to sanctioning restrictions, the law and policy guidelines expressly conferred on the police powers to oversee enforcement. For instance, the law conferred powers on the police to provide bond and bail for persons arrested for misdemeanour offences without reference to court procedures. The use of police to manage COVID-19 restrictions was exacerbated by the initial temporary downscale of court operations.

A landmark court case sought to address the issues posed in this article with reference to the curfew. HCCC Petition No. 120 of 2020 (Covid 025) Law Society of Kenya –vs- Hillary Mutyambai, Inspector General-National Police Service and 4 Others; Kenya National Commission for Human Rights and 3 Others the Law Society of Kenya (LSK), Kenya National Commission for Human Rights (KNCHR), Kituo cha Sheria-Legal Advice Centre (KITUO) and Federation of Women Lawyers (FIDA-Kenya) joined efforts with the Independent Police Oversight Authority (IPOA) in suing the Attorney-General and the Inspector General of Police on the alleged unconstitutionality and illegality of the curfew order, use of police brutality in execution of the curfew imposed due to the COVID-19 pandemic and recognition of legal services as essential services.¹⁸

The Petitioners argued that the curfew failed to comply with section 8 of the POA; they asserted that a curfew should have been legislated under the PHA as the COVID-19 pandemic was a health issue and not a security issue. The Petitioners argued that the curfew was unlawful as it limited the enjoyment of some fundamental rights and freedoms yet did not meet the elements of article 24 of the Constitution, did not specify the time frame for its execution and it could only be used to deal with crime or state of emergency not a health issue such as the COVID-19 pandemic.

On the other hand, the Respondents contended that the main objective of the curfew order is to minimize the spread of the coronavirus and hence protect the lives of people which is a legitimate constitutional responsibility of the Government and hence in compliance with the POA. The curfew order was brought under the POA as complementary to the PHA.

The COVID-19 pandemic can hence only be categorised as a public emergency if the Government of Kenya finds it necessary. The President has

¹⁸ Kenya Law, "Petition 120 of 2020 (Covid 025)," <<http://kenyalaw.org/caselaw/cases/view/193192/>> (accessed 16 July 2020).

not declared an emergency arising out of the pandemic.¹⁹ The 4th interested party hence argued that since the President had not declared an emergency, then a curfew order was not necessary and limitation of rights within the context of a curfew could only happen within a state of emergency that was open to oversight by the National Assembly and the Judiciary. The parties further argued that there was no evidentiary support that curfew would contain the spread of COVID-19. Further, they challenged police harassment and brutality of persons undertaking essential services. The omission of legal services as essential services was said to be unconstitutional due to the importance of such services. Persons arrested during the curfew were barred from receiving legal representation contrary to articles 22, 23, 48, 49 and 50 of the Constitution.

The Court acknowledged that rights may be limited as provided in article 24 of the Constitution of Kenya.²⁰ The Honourable Court held that the POA was enacted to combat criminal activities; its main purpose was to bring law and order. He however noted although some statutes were multipurpose, a statute cannot be used for a purpose for which it was not intended. In this case, the Court found that POA is multipurpose and applicable to public

¹⁹ Article 58 of the Constitution of Kenya empowers the as follows:

- (1) A state of emergency may be declared only under Article 132(4) (d) and only when-
 - (a) the State is threatened by war, invasion, general insurrection, disorder, natural disaster or other public emergency; and
 - (b) the declaration is necessary to meet the circumstances for which the emergency is declared.
- (2) A declaration of a state of emergency, and any legislation enacted or other action taken in consequence of the declaration, shall be effective only-
 - (a) prospectively; and
 - (b) for not longer than fourteen days from the date of the declaration, unless the National Assembly resolves to extend the declaration...
- (3) A declaration of a state of emergency, or legislation enacted or other action taken in consequence of any declaration, may not permit to authorise the indemnification of the State, or of any person, in respect of any unlawful act or omission; See also article 132 of the Constitution of Kenya.

²⁰ Article 4(1) of the International Covenant on Civil and Political Rights allows for limitation of rights in times of public emergency that threatens the life of the people.

health emergencies. Section 16 of the PHA allows for application of provisions of other relevant statutes to matters relating to health. In this particular case, it was necessary to supplement the PHA with the curfew provisions under the POA.²¹

The court noted that the temporary limitation of rights was essential and backed in law to preserve the right to life of Kenyans. However, the manner of implementation of restrictive and precautionary measures was unconstitutional, unprocedural and illegal. Furthermore, it has been acknowledged by the State in this particular case that the curfew order was not for security purposes but for a public health purpose. Therefore, public health and not security measures should be utilized in the enforcement of any precautionary measures.

The Honourable Court, in its dicta, indicated that the issuance of permits under the curfew order should hence not be the preserve of police officers but rather that of medical officers, local or county administrators. Further the restrictive measures should not be implemented through the use of force but rather through intensive public education and campaign on the coronavirus, its symptoms, preventive and protective measures so as to inspire behavioural and attitude change. More specifically, the Court stated:

“...in confronting the coronavirus, which is by all means a faceless enemy, the police brought the law and order mentality to the fore. Diseases are not contained by visiting violence on members of the public. One cannot suppress or contain a virus by beating up people. The National Police Service must be held responsible and accountable for violating the rights to life and dignity among other rights...”

²¹ Section 16 of the PHA provides: Provisions of the Act in relation to other Acts (1) Except as is specially provided in this Act, the provisions of this Act shall be deemed to be in addition to and not in substitution for any provisions of any other Act which are not in conflict or inconsistent with this Act; (2) If the provisions of any earlier Act are in conflict or inconsistent with this Act, the provisions of this Act shall prevail.”

The Court proceeded to issue a declaratory order that the unreasonable use of force in enforcing the Public Order (State Curfew) Order, 2020 is unconstitutional. Further, the Court compelled the Cabinet Secretary of Interior to amend the law within five days to include the Independent Police and Oversight Authority and members of the Law Society of Kenya (qualified advocates) in the list of “services, personnel or workers” exempted from the curfew order. The amendment of the curfew order has not been undertaken. However, legal services are now regarded as essential services.

2. Conclusion and Recommendations

An analysis of the legal framework on COVID-19 prevention and protection clearly shows that the State has adopted the approach of criminalisation of conduct that encourages the spread of the virus. In other words, compelling behavioural and lifestyle change of communities through deterrent criminal measures i.e. imposition of fines and imprisonment terms. The functions of law in society are broad. Other than regulation, the law has been viewed as an educational and stimulatory tool. While the law can legitimize the restrictive measures, it cannot forcefully be applied to effectively control the spread of the coronavirus. These preventive measures demand a paradigm shift in human relations, social interactions and lifestyle. Consequently, attaching sanctions to the restrictions is inadequate to inspire fear and compel change in human behavior.

The manner of transmission of COVID-19 and its appurtenant preventive measures make a strictly health related response strategy inadequate and inefficient. The success of restrictive measures such as curfew and any possible future lockdown depends on collaborative, inclusive human rights-based and distance conscious approach. Preventing COVID-19’s transmission requires authorities to foster trust with communities. This will ensure their participation and behavioural change in following sanitation and social distancing guidelines. The restrictive measures should also be contextualized and informed by the socio-economic status of people. The justiciability of

the restrictive measures is essential, but it should be accompanied by intensive public health education and awareness on the disease and developmental projects that enhance socio-economic status of the people.

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Burundi et le COVID-19: Scenarii de Fragilité

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Résumé: Le présent texte analyse les risques que présente le quotidien burundais face à la pandémie Covid 19. Se servant d'une nouvelle écrite en mars 2020, il démontre combien la salutation et la mise en quarantaine constituent en elles-mêmes des façons de disséminer la maladie. En effet, la nouvelle met en scène une mère, brave paysanne «descendue» des collines pour serrer dans ses bras sa fille, religieuse de son état, qui arrive de l'étranger. Quelle n'est pas son amertume quand on lui empêche de saluer son enfant! Qui plus est, son fils lui recommande de se laver les mains! Infantilisation! Du côté des personnes mises en quarantaine (dite quatorzaine), la proximité fait renaître de vieux mais agréables sentiments: la religieuse retrouve un ancien amant, et les masques que les deux portent pendant leurs promenades n'empêchent pas les yeux de se parler et de renouer les sens. Quand l'homme meurt de Covid 19, expire dans les bras de son ex, lèvres contre lèvres à travers des masques. Baisers masqués.

Mots clés: confinement, masque, salutation, quarantaine.

Introduction

Les sciences, avec leur souci d'exactitude, présentent régulièrement l'avancée macabre du Covid 19 dans le monde. Bénéficiant d'une étrange protection, le Burundi reconnaissait avoir eu jusqu'à ce 4 juillet 2020 rien que 109 cas dont un seul décès dû à la pandémie. Or selon ce que rapporte l'actualité de la recherche et des médias, le virus s'en donne de plus en plus à cœur joie car de nouveaux foyers de dissémination se manifestent même là où il y a à peine un mois on le déclarait sous contrôle. Si au Burundi le drame n'est pas encore dramatique (encore faut-il vraiment le vérifier pour le croire), rien ne semble pouvoir diminuer la fragilité à laquelle le peuple

burundais est exposé. Nous analysons, ici, dans un empirisme littéraire¹, quelques raisons qui nous poussent à considérer cette hypothèse comme pertinente. Nous nous intéresserons à la salutation et à la «mise en quatorzaine».

La salutation au Burundi

Si les Burundais disent que «amaboko ataresha ntahana amasho» pour dire que «seuls se saluent en s'embrassant les personnes de même rang», et que «bwakeye ntibubuza abankana» («se dire bonjour n'efface pas les inimitiés»), se saluer va toujours dans le sens de dire et agir: dire bonjour / bonsoir et se toucher, serrer la main. On dirait qu'une salutation ne peut être valide que quand on sent ce contact, cette chaleur que dégage l'autre corps quand on serre la main, quand on se livre à une accolade, voire plusieurs (surtout après un long moment de séparation)... Aujourd'hui, on voit les jeunes et des moins jeunes «branchés» se donner la bise (ou le bisou), légèrement en s'effleurant les joues l'un l'autre et se serrer la main après. D'autres qui se serrent entre les bras à s'étouffer... Comme quoi le contact corporel reste l'élément essentiel de la salutation.

Et voilà que le Corona Virus s'en mêle! Et, naturellement, des dociles ont vite adopté les gestes qui sauvent, notamment le fait d'éternuer dans son coude. Pour ensuite adopter le «chek» de Bruce Greenstein en se saluant par... le coude. Mais ici, peu de personnes saisissent la vraie portée du geste. Un coude qui vient d'être inondé par des postillons positifs au corona virus ne peut-il pas contaminer ce qui le touche? Et ce fameux «chek» au coude se généralise, confirmant encore que se saluer au Burundi c'est se toucher.

La sensation de l'autre contre soi semble tellement être une véritable richesse pour les Burundais qu'il faut un réel effort personnel pour se

¹ Nous offrons une lecture d'une nouvelle que nous avons écrite sur le thème du Corona Virus dès le mois de mars 2020, convaincus que la fiction n'est pas autre chose que la traduction verbale de possibles de l'expérience humaine.

contenter d'un salut à distance. Des personnes perçoivent le salut à distance comme un signe de mépris. Voire de le prendre pour un porteur de mort. On ne serre pas la main à un pestiféré, c'est connu. Bien entendu, une telle interprétation donne lieu à des malentendus, telle cette femme du passage² suivant qui vient accueillir sa fille religieuse qui rentre après un séjour quelque part dans un pays qu'elle ne connaît pas, juste le jour où le pays prononce la mise en quarantaine de tous ceux qui rentrent de l'étranger. Nous voyons...

...la vieille mère dans l'immense hall de l'aéroport illuminé par des lampes qu'elle ne voit pas, autant impressionnée qu'intimidée mais aussi d'une fierté à tout rompre. Se savoir la mère de cette jeune femme capable d'aller porter la Sainte Parole aux mécréants donne du poids. Un bruit étrange qui lui fait bondir le cœur envahit l'atmosphère et les gens se précipitent aux grandes baies vitrées: une sorte de gros lézard ailé blanc file à toute allure, là-bas, dans un grondement infernal. C'est cela donc un avion! se dit-elle. Et sa fille est là-dedans! Dommage, pense-t-elle encore, que je ne l'ai vraiment pas vu descendre du ciel. Mais elle se sent tout drôle, le cœur bat encore plus rapidement, ses membres ne la portent presque plus. Elle tremble. Un de ses fils, ayant compris combien sa mère est secouée par l'émotion, la rattrape au bon moment et la reconduit à sa place. Et c'est à cet instant qu'une voix venue de nulle part se met à vomir l'impardonnable consigne:

- *Suite à la pandémie du Corona virus, les passagers qui débarquent devront se tenir à l'écart de toute personne. Ils seront conduits dans un hôtel où ils observeront un confinement de quatorze jours. Ceux qui sont venus les accueillir pourront les saluer sans les toucher.*

C'est dit en langue nationale mais la vieille femme ne se sent pas concernée. Ça c'est pour les autres. Elle ne peut pas ne pas embrasser sa fille. Et comme dans un rêve, un flot de passagers sort d'un portail subitement ouvert dans

² Extrait de la nouvelle «Le baiser masqué». (Inédit) Tous les textes illustratifs ici proposés sont tirés de ce texte.

un mur à côté d'elle. Elle voit, là au fond, sa fille chérie dont le voile flamboie de blancheur immaculée dans la foule des arrivants. Elle lève et agite la main en un salut insistant. Elle s'étonne que sa fille ne répond pas. Elle croyait pourtant avoir rencontré son regard! S'est-il qu'elle ne me reconnaît plus? se demande-t-elle. Mais si, la religieuse a vu sa mère mais ses bras sont chargés de lourdes sacoches. Quand elle arrive enfin dans le hall, la mère court à sa rencontre. Quelle n'est sa stupéfaction quand un homme habillé en blanc de pied en cap comme les démons des marais surgit de nulle part et lui barre le passage, en lui rappelant que sa fille ne peut pas la toucher maintenant, qu'elle attendra qu'elle rentre!

- *Mais, comment rentrera-t-elle autrement? Elle est là, je veux juste toucher un de ses doigts. Cette maladie ne peut quand-même pas être transmise par un seul doigt! Et puis qui vous a dit que ma fille est malade? Elle est tout de même consacrée à Dieu! Je suis une chrétienne! Dieu nous a gardés, moi et les miens jusque-là! Est-ce aujourd'hui qu'il nous abandonnera?*

Et dans ses lamentations, elle se rend compte que même l'extraterrestre qui lui barre le passage fait tout pour ne pas entrer en contact avec elle. Elle le sent qui l'accusant de porteuse de Corona Virus.

- *Mais, Mana yanje (Mon Dieu!)? Tu me soupçonnes moi aussi de porter cette saleté? Regarde-moi. Est-ce que je ressemble à une malade? Est-ce que je ressemble à quelqu'un pouvant porter cette vilenie de blancs?*

Un de ses fils meurtri de honte de voir sa mère se conduire comme cela en public intervient et la reconduit dehors, laissant sa sœur derrière eux, tétanisée par la douleur de sa mère. La pauvre religieuse apprend qu'elle ne peut même pas passer ses cadeaux à sa famille... Et sa mère s'éloigne secouée de gros sanglots.

Voici donc une famille qui va être rongée de ressentiment et d'incompréhension suite à cette perturbation de ses habitudes de salutation!

Et à la maison, imaginons cette mère encore courroucée de ne pas avoir été autorisée de saluer son enfant, obligée par son fils à se laver les mains:

- *En voilà encore! Et maintenant, qu'ai-je touché? Des excréments? Mes mains n'ont pas été jugées dignes de toucher celles de ma fille! Et maintenant, elles se sont salies d'elles-mêmes! Que vous ai-je donc fait mon fils? Tiens, regarde-les, mes mains! Sont-elles si sales pour m'obliger...*
- *Mais, maman, l'interrompt son fils meurtri, moi aussi je me suis lavé les mains dès que je suis arrivé! On le répète à la radio, à la télévision, se laver les mains est l'une des façons d'éviter la contamination au Corona Virus!*
- *Ah, comme je suis malheureuse, hommes de ma mère! Toi aussi, mon propre fils, tu me trouves sale? Est-ce moi donc que ce virus attaquera la première? M'a-t-on jamais vue sortir de la maison sans me laver? Doit-on encore m'apprendre à me laver les mains à mon âge? Quel mépris! Ne t'en fais pas, mon fils, je pars demain, je ne vais plus apporter de la saleté dans ton beau salon!*

Elle fit un gros coup de pied par terre, accompagné d'un autre de l'avant-bras contre ses flancs et sortit de là!

On croirait de telles incompréhensions dignes de la fière paysanne qui ignore les réalités du monde citadin. Et pourtant, que des fois n'entend-on pas des citadins justement jurer leurs grands dieux que c'est plus qu'absurde de se laver les mains à tout bout de champ! Qu'on ne fuit pas son voisin de siège dans un bus...

Confinés, masqués, masqués confinés

Le Corona Virus a ressuscité des modèles de gestion de crise sanitaire qu'on ne connaissait plus que dans les livres: la quarantaine. Et la science a précisé que pour le cas qui nous concerne, la quarantaine se réduit à une «quatorzaine». En français, peut-être avec le doute sur la durée réelle de la quarantaine nécessaire pour un contrôle de la pandémie, on entendit parler de «confinement». Matérialiser les confins des royaumes individuels ou familiaux. Et chez-nous?

Les premiers voyageurs qui arrivaient de l'étranger se virent «confinés» dans des hôtels. Aux frais de l'Etat? Peut-être mais nous entendions toujours des «mis en 'quatorzaine'» demandant de l'argent pour subvenir à leurs besoins. Peu importe. Penchons-nous à leur vie en communauté de malheur. Confinés qu'ils étaient, avec un régime quotidien militarisé, en perdaient-ils autant de leurs défauts et qualités humains?

Nous imaginons que la responsabilité de ceux qui géraient désormais et pour cause l'établissement de confinement était de distribuer des masques pour les cas où les confinés seraient obligés de sortir de leurs chambres, ne fût-ce que pour de petites promenades dans les jardins de l'hôtel. Or pendant ces promenades, il était fort possible que des regards s'accrochent, faisant naître ou renaître des sentiments nouveaux ou oubliés, telle une religieuse qui avait un copain avant de se consacrer à Dieu. Je ne mets nullement en doute sa détermination et sa foi en la protection de Jésus mais tout le monde sait que sous la robe qu'elle porte se trouve un corps de femme. Une femme, que dis-je, une religieuse en dehors de son couvent qui, comme sa longue robe, protégerait son corps des regards concupiscent. On n'est plus aux premiers siècles de l'Eglise où des ascètes et des vierges faisaient des vœux de chasteté et de pauvreté tout en restant dans le monde³. Non. Pour se protéger, il faut maintenant des murs hauts

³ E. Jombart, *Manuel de Droit Canon* (Paris: Beauchesne et Fils, 1949), 163.

comme ceux d'une prison. Mais même dans une prison, on peut, on doit avoir du temps pour se promener. Et c'est lors d'une telle promenade que de loin, à deux mètres, elle remarque un regard qui, autrefois, faisait bondir son cœur. Des yeux qui lui rappellent les rares occasions de sa jeunesse où elle a joui pleinement de son état de femme belle et désirable. Elle avait tourné le dos à tout cela. Oui, mais... Et à ces deux mètres de distance, les yeux qui ont fait bondir le cœur de la religieuse ont le leur qui bat la chamade! Albert a rencontré Anésie. Plus de vingt ans de séparation. Le Covid 19 offre une occasion de raviver les plaisirs et déchirements de deux jeunes amoureux forcés de se séparer à la fin d'un cycle scolaire. Tout bêtement comme ça! Et que se disent-ils? Comment vivent-ils leurs retrouvailles dans ces circonstances pour le moins particulières?

Si Albert avait encore l'ombre d'un doute, Anésie était sûre: ces yeux étaient uniques au monde. Ils s'étaient incrustés dans les siens vingt ans plus tôt. Se savoir séparée de son Albert fut la principale raison de son postulat. Et maintenant qu'elle était missionnaire des Filles de Marthe, une congrégation dont l'œuvre est axée sur l'annonce de la parole chez les païens, la voilà confrontée à cette réalité qu'elle avait cru définitivement enterrée. Oh que si! Elle était définitivement enterrée, cette réalité. Mais où? En elle-même. Les litanies, les jeunes et les mortifications n'avaient finalement pas effacé ce qu'un amour jeune avait construit. Elle qui avait repoussé tant d'avances des prêtres, les unes plus explicites que les autres, la voici qui perdait ses moyens devant des yeux surmontant un masque. Elle voyait rapidement monter et descendre la pomme d'Adam de son vis-à-vis. Un signe qu'elle reconnaissait, qu'elle retrouvait. Elle fit un effort surhumain pour passer son chemin après avoir mentalement fait un signe de croix comme devant le diable ou un de ses anges de malheur. Mais une voix reconnaissable entre mille retentit:

- Anésie!

La même, avec ce trémolo de vieillard dont elle se gaussait souvent! Une foule de pensées l'envahit, mêlés à des souvenirs qu'elle aurait voulu perdre vu son statut actuel. Mais non, l'envie de lui répondre fut la plus grande:

- *Bonjour Albert!*

Les deux esquissèrent en même temps un pas pour tomber l'un dans les bras de l'autre. Mais un des «surveillants» de l'hôtel se manifesta comme par magie à quelques mètres de là. Rien qu'un pas, ils se seraient touchés, re-touchés, re-sentis cette chaleur qui animait autrefois leurs sentiments! Non! Pas permis. Tellement pas permis qu'ils devaient se déplacer en sens inverse: Anésie rentrait à la fin de sa promenade, Albert la commençait. Tous deux frustrés de leurs retrouvailles ratées, ils se séparèrent. Albert eut le courage de presque crier:

- *Tu es restée très belle!*
- *Et toi, aussi élégant!*
- *Je suis au 212.*
- *Inutile, nous n'aurons plus l'occasion de nous revoir...*

Il la suivit de son regard attendri et déchiré, oubliant même qu'il était, lui, au 2011. Au moment où il se retournait, il tomba nez-à-nez contre le surveillant qui riait aux éclats dans son masque. Il toucha la main d'Albert comme pour le consoler:

- *Patience, il ne reste que dix jours!*

L'interpellé faillit répondre: «qu'en sais-tu?» mais se tut et continua sa promenade. En rentrant, Albert entre dans sa chambre sans passer par le seau: un seau à l'eau chlorée ou alcoolisée est au début du couloir. Il néglige de se laver les mains, il l'a fait tant de fois, même trente minutes avant. Tout à ses stratégies de revoir sa bien-aimée maintenant voilée. Et quelle n'est pas sa surprise en entendant une voix chanter de l'autre côté du mur! Impossible de la confondre avec une autre. La même avec peut-être plus de

finesse due certainement à un entraînement intensif. Il écoute pieusement le cantique qu'il reconnaît d'ailleurs: «j'ai trouvé un trésor sans prix». Parlait-elle de Jésus ou de son amoureux? A une époque, ils se chantaient le cantique pour parler l'un de l'autre. Il ouvre la fenêtre et entend mieux. Comme si la religieuse l'avait senti, elle ouvre la sienne aussi. En se penchant, ils peuvent se voir et se parler... En concluant toujours par un «Imana iratubona» («Dieu nous voit [protège]»).

Les Burundais ne l'ont-ils pas bien compris quand ils disaient que «ikiyago gisumba ikivi» («une bonne causerie vaut plus qu'une bonne tâche»)? Les deux protagonistes parlaient à longueur de journée, à longueur de nuit. Ils s'informaient de tout et de rien, et un jour, la religieuse informa son ami de la mort de leur «surveillant»!

- *Quoi? s'inquiéta Albert. De quoi est-il mort?*
- *De quoi peut-on mourir ici? D'ennui? De chagrin de ne pas voir les siens? Non, non mon cher, du virus! Il est mort du Covid-19!*

Est-il possible de trouver des mots pour décrire les sentiments qu'éprouve un homme qui apprend que son voisin vient de mourir d'un mal qui le guette lui aussi? Certains se désolent au point de dépérir, voire de mourir finalement de peur, d'autres prennent la chose à la légère, comme si ce sont les autres que le mal concerne. Et ceci semble l'attitude de beaucoup de Burundais. Quand le monde entier criait «au confinement» les Burundais croyaient dur comme fer que ce virus ne pouvait les atteindre, sûrs d'être protégés par Dieu. Un Dieu qui n'avait pas été capable de protéger le Pape lui-même (rien qu'à le voir à la messe de Pâques...), pouvait-il éviter le Corona Virus à un aussi petit pays que le Burundi qui l'adore d'ailleurs par procuration? Puisque ce n'est pas le Burundi qui a choisi d'être chrétien ou musulman! Nous doutons.

Albert ne pouvait passer un moment sans imaginer la meilleure possibilité de rejoindre la religieuse. Il avait tout essayé, avait chaque fois échoué. Même

son surveillant avait refusé son argent. Des euros fraîchement sortis de la BCE! Quatre jours avant la fin de la quatorzaine, Albert commença à avoir des frissons. Il était dix heures, il venait de finir son petit-déjeuner. Le matin-même, lors de sa promenade, il avait appris que son voisin d'en face s'était suicidé la veille. Personne ne savait s'il avait déjà été contaminé ou s'il avait tout simplement trouillé. Car de morts, il paraissait qu'il y en avait chaque jour. Mais les confinés n'en savaient rien. Les nouvelles venaient du dehors et traversaient jardins et murs avec la dose nécessaire de parasites! Le filtre de la radio ne fonctionnait pas car personne ne reconnaissait l'existence inquiétante de ce fléau mondial. Non, le Burundi, ble-ble-ble, ble-ble-ble; bla-bla-bla, bla-bla-bla...

Trois jours avant la fin! Albert se sent de plus en plus faible. Très haute température malgré ses frissons. Difficultés à respirer. Il n'a même pas senti l'odeur de son petit déjeuner qu'on a glissé sous la porte. Alors qu'hier encore, il le sentait de la douche. Il se lève difficilement, se penche à la fenêtre et appelle son amie. Elle accourt vite. A son «je me sens mal», elle sent ses propres forces la quitter. Elle entend ses lamentations où revient le mot «baiser», «juste un baiseeeeer».

La religieuse tambourine sur sa porte. Il faut appeler quelqu'un. Et effectivement quelqu'un vient et ouvre sa chambre-cellule.

- C'est pour mon voisin d'à côté. Il se meurt.

Mais le surveillant qui ne l'avait jamais vue sans ses atours de religieuse n'entend rien et reste sans voix devant cette déesse. Autrement, il aurait certainement pris son temps pour lui demander comment elle le savait et la sermonner sur les consignes de ne pas se parler entre co-confinés! La déesse est obligée de crier, en enfilant sa robe et agrafant son voile:

- Il se meurt! Aidez-le! Allez appeler un médecin.

Le pauvre homme sort en courant, suivi d'Anésie et convaincu que Dieu qui les crée sait s'offrir les meilleures. Il oublie les instructions et donne ses clés à la religieuse: ce virus, si insolent soit-il, ne s'attaquerait pas à elle, tout de même.

Le mourant voit sa bien-aimée dans toute sa splendeur et réclame toujours, entre deux suffocations, un baiser. «Rien que cela?, pense la religieuse, je te donnerais même plus, j'ai toujours été à toi». Elle va se pencher et, très vite, se rend compte qu'elle ne porte pas son masque. Elle rebrousse chemin, court dans sa chambre pour en mettre un et revient. Le médecin la trouve sa bouche masquée collée sur celle d'un homme mort, mort masqué, soigneusement enroulé dans ses couvertures. Il se dit que ce satané virus a encore des candidats à emporter.

Ainsi finit cette histoire qui replace le Burundais face à ce terrible destin dessiné par le Corona Virus. Si on y ajoute les convictions de cabaret et de réseaux sociaux selon lesquels Covid-19 est une fabrication des laboratoires tantôt américains, tantôt chinois; le fait que ce que l'œil ne voit pas ne peut nuire à moins que ce ne soit un esprit démoniaque, la liste des scénarii de fragilité de notre pays sera complète.

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