EXECUTIVE SUMMARY:
Impact of COVID-19 in Africa

It is too early to know the full impact of COVID-19 on Africa. To date the experience has been varied. There are causes for concern, but also reasons for hope. Early estimates were pessimistic regarding the pandemic’s impact on the continent. But the relatively low numbers of COVID-19 cases reported thus far have raised hopes that African countries may be spared the worst of the pandemic. While the virus is present in all African countries, most countries have recorded fewer than 1,000 cases. The African Union acted swiftly, endorsing a joint continental strategy in February, and complementing efforts by Member States and Regional Economic Communities by providing a public health platform.

Caution is warranted, however, as these are early days in the life cycle of a disease that is still not fully understood and where we have seen repeated patterns of first slow, then exponential growth in the number of cases. The low numbers recorded so far could be linked to minimal capacities for testing and reporting cases. WHO has warned that the pandemic could kill between 83,000 and 190,000 people in 47 African countries in the first year, mostly depending on governments’ responses; and the socio-economic impacts could “smoulder” for several years.

Moreover, as with other regions, there is not one homogenous narrative around the COVID-19 pandemic in Africa. The pandemic is affecting African countries differently, given varied strengths and vulnerabilities. Only one third of Africans have access to proper hand washing, for instance, and there is less than one doctor per one thousand people on the continent. But some countries also have a wealth of relevant lessons from dealing with previous HIV/AIDS and Ebola epidemics on engaging communities, communicating risks and adapting local and innovative methods to craft African approaches to control spread of the disease. The Africa Centre for Disease Control and Prevention is boosting the region’s capacities by building testing capabilities, promoting knowledge-based pandemic management, and supporting governments’ efforts to mobilise resources for a sustained health response.

While the immediate health impact is still evolving, the indirect consequences beyond health already bring a heavy toll. These include food insecurity, lack of medical supplies, loss of income and livelihood, difficulties in applying sanitary and physical distancing measures, a looming debt crisis, as well as related political and security risks. This policy brief takes a
snapshot of immediate impacts of the pandemic on health, economies, peace, security, human rights and humanitarian assistance in Africa. It outlines response measures currently being taken by African and external stakeholders and provides recommendations to protect gains in the fight against the pandemic and maximise opportunities in the recovery for a more inclusive and sustainable future as countries emerge from this crisis.

THE FOLLOWING KEY FINDINGS EMERGE FROM OUR ANALYSIS:

HEALTH:
The global health response must emphasize solidarity towards developing countries, guided by the notion of health as a global public good. African countries, with partner support, can take measures to improve testing capacities, access to medical supplies, and participation in vaccine and treatment research; enhance production and innovation through intra-African collaboration; expand deployment of community health workers, which proved effective during previous health crises; and boost medical personnel capacity, including by tapping into diaspora expertise. Once vaccines or medical treatment for COVID-19 are discovered, it is critical that Africa benefits from equal access. In addition, these measures must be part of a comprehensive effort to improve the resilience and preparedness of healthcare systems that will be increasingly exposed to risks, from climate-induced natural disasters to conflicts.

SOCIO-ECONOMIC:
To help address the devastating economic and social consequences of this crisis, we need a comprehensive global response package amounting to a double-digit percentage of global Gross Domestic Product. For Africa, that means more than $200 billion. All of Africa’s partners must mobilize. We also need an across-the-board debt standstill for African countries as well as comprehensive options towards debt sustainability and solutions for structural issues in the international debt architecture. Increased resources from the multilateral lending agencies, including through raising IMF Special Drawing Rights, will also be critical to the region’s success in dealing with the consequences of the pandemic. It is vital that measures to address the economic and social fall-out of the crisis include direct support that will keep households afloat and businesses solvent. There must be a focus on the most affected. The steps so far taken by African governments to save lives and protect livelihoods with a “people first” approach, and their efforts to support large, medium and small enterprises, as well as the informal sector, which is the predominant sector for women’s employment, need to be scaled up substantially, supported by all partners. Emergency budgetary support is also needed to procure essential lifesaving materials and effect the immediate socio-economic response.

FOOD SECURITY:
Many Africans risk becoming food insecure as a consequence of this crisis. It is important to prioritize agriculture by declaring it a critical sector that should not be interrupted by COVID-19 related measures. Food corridors need to be secured, and farmers supported, to ensure uninterrupted supplies and food security. Similarly, focus should be on regions and communities where risks are most acute, strengthening social protection systems and safeguarding access to food and nutrition for the most vulnerable groups, especially young children, pregnant and breastfeeding women, older people and other at-risk groups.
PEACE AND SECURITY:
While dealing with the menace of the pandemic, maintaining peace and security in Africa remains paramount. Priorities in this regard include silencing the guns, implementing the Secretary-General’s and the African Union Commission Chairperson’s appeal for a cease-fire, sustaining peace processes and critical peace operations. The response to COVID-19 needs to be “conflict-sensitive” and avoid generating new tensions. Decisions regarding planned national elections should be taken in an inclusive and consultative manner. An inclusive security approach would also ensure that the spike in violence in the home and harmful practices, such as child marriage, and sexual abuse as a result of the pandemic, are integrated through preventive measures into all response planning.

HUMAN RIGHTS:
Keeping human rights considerations to the fore of COVID-19 response results in better outcomes. Citizen trust in institutions, transparency and social cohesion appear to enhance compliance with response measures. Inclusion and participation of women and youth, and respect for human rights need to be upheld in the delivery of COVID-19-related services and in the fight against the virus. Recovery from the crisis must lead to more equal, inclusive and sustainable economies and societies.

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SECTION 1:
Introduction

The COVID-19 pandemic arrived at a moment when prospects for many African countries were promising. At the beginning of 2020, Africa was on track to continue its economic expansion, with growth projected to rise from 2.9 per cent in 2019 to 3.2 per cent in 2020, and 3.5 per cent in 2021. Important gains were being registered in poverty reduction and health indicators. Technology and innovation were being increasingly embraced across the continent, with young Africans acting as early adopters of new platforms such as mobile money.

Progress had also been made with respect to political unity and economic integration. The entry into force of the African Continental Free Trade Area (AfCFTA) in May 2019 promised to boost intra-African trade by as much as 25 per cent by 2040. Furthermore, Africa enjoyed some of the highest global returns on foreign direct investment (FDI). Several inclusive elections, increasingly the norm for a majority of African countries, were due to be held in 2020.

At the same time, as with other regions of the world, Africa faced important challenges. It was not on track to achieve the goals of the 2030 Agenda and Agenda 2063. Weak governance, corruption, environmental degradation, human rights violations, lack of economic diversity, and humanitarian and conflict situations, among others, further undermined progress.

It is against this backdrop that African countries are dealing with the COVID-19 pandemic. While the pandemic’s full impact has yet to be felt, the prolonged lack of investment in critical health systems and decades of economic growth that also exacerbated grievances and inequality, increase Africa’s vulnerability. If not controlled early, the pandemic could quickly morph into humanitarian, socioeconomic, development, and political crises, with profoundly destabilising effects.

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4 UNCTAD, 2019, Economic Development in Africa.
6 Sixth session of the Africa Regional Forum on Sustainable Development: summary, key messages and Victoria Falls Declaration, ECA/RFSO/2020/16, 24 March 2020
The first case of COVID-19 on the continent of Africa was reported on 14 February 2020. By 13 May, cases had been reported in all 54 countries. The African Union acted swiftly, endorsing a joint continental strategy in February, and complementing efforts by Member States and Regional Economic Communities by providing a public health platform. The African Union Chairperson, President Cyril Ramaphosa of South Africa, appointed four Special Envoys to mobilize international support for Africa’s efforts to address the economic fallout of COVID-19.

The Africa Centres for Disease Control and Prevention (Africa CDC), established in 2017, is curating real time information, in close collaboration with the World Health Organization (WHO). The Africa CDC’s new Partnership on Accelerated COVID-19 Testing (PACT), which aims to test 10 million people within six months, will complement government efforts while building important inroads into promoting knowledge-based pandemic management. WHO support for a significant ramp up to achieve this target will be vital, given that, to date, there is limited availability of test kits across the continent.

The Africa CDC has also established the Africa COVID-19 Response Fund, in collaboration with the public-private AfroChampions initiative, to raise an initial $150 million for immediate needs and up to $400 million to support a sustained health response and socio-economic assistance to the most vulnerable populations in Africa.

Most African countries moved swiftly, enforcing quarantines, lockdowns and border closures. So far, countries with higher levels of testing have experienced lower infection rates, but limited capacity has rendered it difficult to discern accurate transmission, hospitalization and mortality rates. Regional Economic Communities have also been proactive, unveiling initiatives within their respective regions.

African countries are also addressing the economic and humanitarian fallout of the pandemic. Many have already announced remedial fiscal and monetary measures, as well as food distribution and financial support to the most vulnerable groups. More is needed in terms of immediate and direct assistance to cushion against lost income and export earnings, dwindling remittances and decreased

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7 Sources: WHO COVID-19 Situation Reports. First case was reported in Egypt. Lesotho was 54th country to report, with first case announced on 13 May.
8 The East African Community, the Southern African Development Community, the Economic Community of West African States and the Intergovernmental Authority on Development have unveiled initiatives within their respective regions.
government revenue. However, relatively few countries have articulated initiatives to mitigate the socio-economic impacts of COVID-19 (see below).

African countries have largely taken a middle-of-the-road approach to prevention, maintaining some level of economic activity. Ghana, for example, opted for a partial lockdown for a limited period and enforced close monitoring of people’s movements, providing sanitary facilities and free water to the most vulnerable. Botswana has focused on boosting the livelihoods of vulnerable households by buying food from local communities. The relative effectiveness of the different strategies across the region will only be known in time.

Box 1: African Experience from Previous Epidemics

Africa’s experience in dealing with both HIV/AIDS and Ebola has created communities of practice with innovative strategies for tracing, treatment, isolation and caring for the sick. Countries are also drawing lessons from previous epidemics to engage communities, communicate risks and adapt local and innovative approaches to craft an African approach to pushing back against the pandemic. During the Ebola health crisis in West Africa, one of the main causes of the rapid spread of the disease was mistrust of government, which affected public cooperation. Collaboration with local peace-builders, trusted and respected community members, created the right environment where the local population could collaborate with health workers and government institutions. Another lesson learned is the importance of disseminating clear information about the disease and how it spreads to prevent rumours, especially in remote areas.

With digitalisation already transforming Africa’s economies in important ways, most African countries have also actively employed digital technologies to shift to cashless transactions, for example, through the use of mobile money in East Africa, which has helped reduce the risk of the spread. In Ethiopia and

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9 Source: Index Mundi, 2020 (www.indexmundi.com)
Senegal, tech startups\(^\text{10}\) are using 3D printing to develop face shields and ventilator valves. South Africa is using cell phones for contact tracing, as opportunities for telehealth also open up.

In addition, African civil society actors and the private sector are forming unprecedented partnerships to fight the disease. In Nigeria, the Coalition Against COVID-19 has brought together local banks to mobilise resources to support social protection and the purchase of PPE. The African Influencers for Development initiative, supported by UNDP, has rallied medical professionals, finance, logistics, production and more. Tech volunteers from the Ethiopian diaspora are working with the government to develop tools for contact tracing, information campaigns and data collection. African sovereign wealth and pension fund leaders have announced collaboration on supply chain and trade support through digitization, especially in healthcare and agriculture. Ethiopian Airlines has refurbished 31 ventilators for the Ministry of Health and is set to launch the production of ventilators with foreign partners.

UN “Solidarity Flights,” led by WHO, the World Food Programme (WFP), the African Union and Africa CDC, are delivering urgently needed medical equipment to all African nations in the fight against COVID-19.

## CHART 1:

### Level of preparedness by countries in Africa to COVID-19

<table>
<thead>
<tr>
<th>Country</th>
<th>HDI rank</th>
<th>Human development index (HDI) (value), 2018</th>
<th>Inequality-adjusted HDI (value), 2018</th>
<th>Inequality in HDI (percent), 2018</th>
<th>Physicians (per 10,000 people), 2010-18</th>
<th>Nurses and midwives (per 10,000 people), 2010-18</th>
<th>Hospital beds (per 10,000 people), 2010-18</th>
<th>Current health expenditure (% of GDP), 2016</th>
<th>Mobile phone subscriptions (per 100 people), 2017-18</th>
<th>Fixed broadband subscriptions (per 100 people), 2017-18</th>
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Source: UNDP
SECTION 3: Impact of COVID-19 in Africa — Risks and Opportunities

HUMAN IMPACT

While African countries have responded decisively to the pandemic, and the numbers of cases and deaths are for now relatively low, the magnitude of the challenge and the continent’s underlying vulnerabilities cannot be underplayed. As of 18 May 2020, the virus had infected 4.6 million people and claimed 311,847 lives worldwide. The corresponding figures for Africa on that date were 84,183 cases and 2,739 deaths. Many African countries (75 per cent) have recorded fewer than 1,000 cases while South Africa alone has reported almost twice more cases than the bottom 35 countries combined (see Chart 2).

Low case numbers relative to other regions have raised hopes that African countries may be spared the worst of the pandemic, but caution is in order. The disease is still not fully understood. Minimal capacities for testing and reporting cases may mean that official numbers do not provide a full picture of the COVID-19 caseload in Africa. WHO estimates that the pandemic could kill between 83,000 and 190,000 people in 47 African countries in the first year. The mortality rate would largely depend on individual governments’ responses. The WHO has stated that the virus and its impact could “smoulder” for several years.

3.1. Social and Economic Impacts

Africa will be hard hit by the projected medium to long-term social and economic impacts of the pandemic. Chart 3 illustrates these effects in the African context. The drop in GDP could lead to stalled economies and exacerbate historical structural inequities in most African economies. In many African countries the majority of people earn their livelihoods through the informal economy with little insurance against unexpected disruptions. At the same time many formal businesses, especially small businesses, are running out of reserves to sustain themselves. Over time, we could see a recession and a full-blown financial crisis. Economic recovery measures typically happen after crisis triggers and humanitarian challenges have received some attention. This approach will not work with COVID-19 because unemployment, job losses and wealth depletion (asset stripping) have started to happen very early on, even before the health impacts.

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### CHART 2. REPORTED COVID-19 CASES IN AFRICA (ON 18 MAY 2020)

- **South Africa**: 15515 cases
- **Egypt**: 12229 cases
- **Bottom 35**
  - **8465** cases
  - **South Africa**
  - **15515** cases
  - **Egypt**
  - **12229** cases
- **Algeria**: 7201 cases
- **Morocco**: 6930 cases
- **Nigeria**: 5959 cases
- **Ghana**: 5735 cases
- **Cameroon**: 3105 cases
- **Guinea**: 2658 cases
- **Sudan**: 2591 cases
- **Senegal**: 2544 cases
- **DR Congo**: 1455 cases
- **Somalia**: 1421 cases
- **Gabon**: 1320 cases
- **Tunisia**: 1037 cases
- **Guinea-Bissau**: 990 cases
- **Kenya**: 912 cases
- **Niger**: 904 cases
- **Mali**: 874 cases

*Source – UNDP Africa*

### CHART 3. ILLUSTRATED CONSEQUENCES OF COVID-19 IN AFRICA

<table>
<thead>
<tr>
<th>First Order Effects</th>
<th>Second Order Effects</th>
<th>Third Order Effects</th>
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<td><strong>Economic</strong></td>
<td><strong>GDP drops</strong></td>
<td><strong>Recession</strong></td>
</tr>
<tr>
<td>• GDP drops</td>
<td>• Domestic supply chains collapse</td>
<td>• Recession</td>
</tr>
<tr>
<td>• Trade Balance worsens</td>
<td>• Economic activity stalls</td>
<td>• Debt crisis</td>
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<tr>
<td>• Job and livelihood losses</td>
<td>• Increased non-formal activity</td>
<td>• Financial distress</td>
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<tr>
<td>• Wealth depletion</td>
<td></td>
<td></td>
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<tr>
<td>• Increased health and related spending</td>
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<tr>
<td><strong>Social</strong></td>
<td><strong>Loss of lives</strong></td>
<td><strong>Increased inequalities</strong></td>
</tr>
<tr>
<td>• Loss of lives</td>
<td>• Widespread deprivation</td>
<td>• Human development</td>
</tr>
<tr>
<td>• Social spending reduced</td>
<td>• Social disaffection</td>
<td>• Losses</td>
</tr>
<tr>
<td>• Disproportionate impact on vulnerable groups</td>
<td>• Breakdown in social services</td>
<td>• Vulnerable groups victimized</td>
</tr>
<tr>
<td>• Social services disrupted</td>
<td></td>
<td>• Societal unrest</td>
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<td><strong>Political</strong></td>
<td><strong>Politicized responses</strong></td>
<td><strong>Political unrest</strong></td>
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<td>• Politicized responses</td>
<td>• Erosion of trust</td>
<td>• Political unrest</td>
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<td></td>
<td>• Politicization of law enforcement</td>
<td>• Political violence</td>
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</table>

*Compiled based on data from Africa CDC.*
i. **IMPACT ON PUBLIC HEALTH**

Approximately 600 million Africans (43.6 per cent) live in urban areas, of which 56 per cent live in slums. Many African urban households live in a single room (71 per cent in Kampala), do not have potable water (80 per cent in Lagos) or reside in over-crowded neighbourhoods (density in Johannesburg is 9,000 per sq km). Only 34 per cent of the African population has access to handwashing facilities.\(^{15}\) Weak health systems and the prevalence of underlying health conditions, such as HIV/AIDS, tuberculosis, malaria and malnutrition, as well as challenges to state authority from armed groups, render parts of the continent particularly susceptible to contagion. The pandemic has further exacerbated existing gender inequalities resulting in women having even more limited access to critical health services, systems and information.

Africa, which has 16 per cent of the global population and 26 per cent of the global disease burden, accounted for less than 2 per cent of the nearly $9.7 trillion spent globally on health in 2015.\(^{16}\) Health systems are likely to be overwhelmed by a rapid spread of the disease. Many African countries lack physicians (0.2 per 1,000 people), hospital beds (1.8 per 1,000) and the necessary health infrastructure to adequately respond to the pandemic. Twenty-three African countries in particular, may face an extremely high risk of COVID-19 mortality due to a lack of hospital beds (less than 2 per 1,000 persons) and high rates of deaths from infectious and respiratory diseases (3-8 deaths per 1,000 people). As the pandemic exacerbates the burden on already weak health systems in Africa, there is a vital need to ensure that existing health services are protected, not just repurposed, for COVID-19.

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BOX 2: RECOMMENDATIONS FOR HEALTH

Health supplies

- As an immediate measure, suspend tariffs for all essential healthcare products. To reduce heavy dependence on imported pharmaceutical supplies, consider boosting domestic production capacities, including through intra-African and south-south cooperation, and other external partnerships.

- Reassess and re-imagine overall supply and value chains, while focusing on urgent needs, including PPE, diagnostics and clinical products. The COVID-19 Supply Portal\(^\text{17}\) has been established to facilitate the request of critical supplies.

Research and innovation

- Support Collaboration between African engineering and medical universities and local manufacturers to innovate and build critical medical equipment, such as ventilators, including by supplying 3D printers.\(^\text{18}\) Repurpose manufacturing towards closing gaps in supply of essential products such as PPEs.

- Create platforms, or scale up existing ones, for exchange of knowledge and skills, cross-fertilization of ideas, joint initiatives and collaborative research.

- Africa, including through the Africa CDC, to be more closely involved in the current efforts to find vaccines or medical treatment for COVID-19. Once such vaccines or medicines are discovered, it is also critical to ensure that Africa has equal access to them.

Human capital

- Scale up use of community health care workers, based on previous experience. Diaspora communities could be tapped into to create a rotating roster of volunteers to alleviate shortages of medical personnel, especially critical care nurses, anaesthesiologists and tech persons operating ventilators.

Data management

- Disaggregate and analyse outbreak and recovery data by sex, age, location and disability to understand inequalities and gendered differences in exposure and treatment as a critical first step in effectively supporting marginalized groups. As emphasized in the Policy Brief on COVID impacts on women, failing to include sex disaggregated data or gender analysis can both miss important opportunities to accelerate recovery, and risks doing harm. At present, sex- and age-disaggregated data is only available for 20 percent of those infected.\(^\text{19}\)

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\(^\text{17}\) https://covid-19-response.org


Limited access to COVID-19-related supplies and equipment, such as test kits, PPE, ventilators and pharmaceuticals can overwhelm health systems. Disruptions in global supply chains and import tariffs are a threat since most African countries are dependent on the outside world for the majority (94 per cent) of the continent’s pharmaceutical needs. As of 24 April, 80 nations had imposed restrictions on the export of essential COVID-medical equipment and supplies (ventilators, PPE). Efforts are underway to convert existing manufacturing capacities to produce essential equipment. Nurturing African productive capacities is essential to ensure that innovations during COVID-19 outlive the pandemic, laying the groundwork for future preparedness and more diversified and expanded economic activity.

Reliable energy access is key for medical service delivery, including those relating to lighting, refrigeration and sterilization. During the COVID-19 crisis, decentralized renewable energy solutions have been proven to be sustainable, clean and reliable ways to power isolation centres and health facilities in Africa.

ii. **ECONOMIC IMPACT**

The COVID-19 pandemic began to impact African economies heavily and destroy livelihoods well before it reached the shores of the continent. Among the factors were: falling demand for Africa’s commodities; capital flight from Africa; a virtual collapse of tourism and air transport associated with lockdowns and border closures; and depreciation of local currencies as a result of a deterioration in the current account balance.

African countries cannot afford to wait until the virus is contained before implementing socio-economic support programmes. Africa’s significant informal sector workers (85.8 per cent of the workforce) cannot comply with social distancing and stay-at-home orders without severe consequences for their lives and livelihoods. Many household earners would be forced to choose between the virus and putting food on the table. Additionally, almost 90% of women employed in Africa work in the informal sector, with no social protections. Female headed households are particularly at risk.

The July 2020 start date of trade under the AfCFTA has been postponed due to the pandemic, delaying the promise of opportunities for new exports, jobs, investments in infrastructure and financing for Africa’s development. While negotiations for the AfCFTA are on hold, there is an opportunity for African countries to assess the potential impact of a prolonged delay and to lay the technical ground for its implementation.

As elsewhere in the world, the African airline industry, which supports 6.2 million people, and tourism, which accounts for a significant share of the GDP, in particular, of Small Island Developing States (SIDS), have been severely disrupted. The resulting financing challenges will likely spill over to the rest of the economy as the risk of Non-Performing Loans rise. Not only has this been a hugely disruptive impact of the

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22 "Electrification of health clinics in rural areas: Challenges and opportunities" Welland Alicia, Smart Villages 2017.
23 ILO, 2018: "Women and men in the informal economy: A statistical picture".
24 According to UNCTAD, SIDS are the most vulnerable to tourism collapse as the sector accounts for nearly 30% of their GDP. This share is over 50% for Seychelles. A decline in tourism receipts by 25% will result in a $7.4 billion or 7.3% fall in GDP in SIDS.
25 South African Airways is on the brink of collapse, Ethiopian Airlines had lost an estimated US$550 million by early April, Air Mauritius has been placed under voluntary administration and RwandAir has cut salaries by 8 and 65 per cent, respectively for lowest paid employees and top earners.
Risks and Opportunities

| IMPACT OF COVID-19 IN AFRICA |

...crisis on tourism and the African airline industry, but also a blow to the institutional infrastructure that connects the continent, built over the past two decades. Governments, shareholders and IFIs could explore how to provide support to ensure sustainability and liquidity in these sectors, including through loan guarantees and temporary waiver of taxes.

Remittances, an important income source or supplement for numerous households in Africa, are projected to decline with heavy impact on countries such as the Comoros, the Gambia, Lesotho, Liberia and Somalia, where such inflows account for more than 10 per cent of GDP. The World Bank estimates that, sub-Saharan African countries will see remittance flows drop by 23.1 per cent (US$37 billion in 2020). In Somalia, remittances, which amount to US$1.4bn per year and comprise the largest single category of external financial support, have declined sharply. Sub-Saharan Africa currently has among the highest remittance fees, averaging 9.1 per cent per transaction.

The combined effect of the crisis has led to exchange rate depreciations and a projected decline in Africa’s GDP. The UN Economic Commission for Africa (ECA) projects a 1.1 per cent growth rate in 2020 in the best-case scenario and a contraction of -2.6 per cent in the worst case, depriving 19 million people of their livelihoods and, in the context of weak social protection programmes in Africa, pushing up to 29 million more people into poverty. Oil exporting nations could lose up to US$ 65 billion in revenues as crude oil prices continue to tumble.
iii. DEBT BURDEN — UNPRECEDENTED FISCAL DEFICITS AMIDST ALREADY CONSTRAINED BUDGETS

In Africa, the average debt-to-GDP ratio has increased from 39.5 per cent in 2011, to 61.3 per cent in 2019. Heavy debt burdens are partly due to commercial borrowing to finance the continent’s large annual infrastructure financing gap of US$68 billion to US$108 billion — equivalent to about 3 to 5 per cent of the continent’s GDP.27 In addition, most African countries lack the fiscal space to respond adequately to the crisis due to low domestic saving rates; low levels of domestic resource mobilization; high illicit financial outflows; capital flight; volatile commodity prices; high fiscal deficits and stagnating official development assistance (ODA) and FDI flows. (See Figures 5 and 6).

African Ministers of Finance and the African Union have called on development partners to provide US$100 billion, including US$44 billion in debt relief28 to support health systems, safeguard jobs and provide safety nets for vulnerable groups. The United Nations Secretary-General has called for more than $200 billion for Africa as part of a comprehensive global response package, as well as an across-the-board debt standstill, options towards debt sustainability and solutions for structural issues in the international debt architecture.29 Official creditors have mobilized up to US$57 billion for Africa so far, including about US$18 billion each from

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the IMF and the World Bank. Private creditor support in 2020 could amount to an estimated US$13 billion. Further, the G20 countries have decided to suspend debt repayment for low income countries from 1 May 2020 to the end of the year. The IMF has also provided debt relief for 19 African countries. In addition, individual countries, such as EU Member States, the US and China, have offered support either to individual countries or to the continent as a whole. This support is crucial, but considerable additional measures, including by creditors, that are commensurate with the exceptional nature of the crisis, will be necessary.

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**BOX 3: RECOMMENDATIONS FOR ECONOMIC AND DEBT ISSUES**

**Immediate relief and social protection:**
- Scale up measures to protect livelihoods, including through loans, guarantees and tax breaks for large businesses and small and medium enterprises. Stimulus packages that embrace a “people first” approach to target also the informal sector, women and other vulnerable groups, including through expansion of social protection measures, and a mix of regulatory and financing instruments.
- Support to key sectors, such as tourism and the African airline industry, to ensure their sustainability and liquidity, including through loan guarantees and temporary waiver of taxes.
- Supplementary support from development partners to mobilize US$100 billion to resource a US$15 billion healthcare fund and provide emergency budgetary support. The fund to be used to procure, through WHO and Africa CDC, the materials needed to save lives, share and promote research, provide vaccines and manufacture health equipment and supplies.
- Cut the cost of remittance fees to close to zero, and at minimum to the 3 per cent, as called for in SDG 10.

**Debt relief**
- A debt standstill for African countries, to be followed by debt restructuring, to free up much needed resources to respond to the pandemic and its fallout. This should be complemented by increased resources from the multilateral lending agencies, including through raising IMF Special Drawing Rights, to support implementation of COVID-19 containment measures and provide liquidity to African countries over the next two years.
- Greater flexibility in capital account management, as needed, to ensure that financing provided through debt relief helps stabilize the financial situation.

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32 [https://g20.org/en/media/Documents/G20_FMCG_BG_Communique%C3%A9%20EN%20(2).pdf](https://g20.org/en/media/Documents/G20_FMCG_BG_Communique%C3%A9%20EN%20(2).pdf)
34 World Economic Forum, 2018: “Cutting money transfer fees could unlock $15bn for developing countries.”
iv. A FOOD CRISIS

It is becoming clear that one near-term impact of this pandemic will be a dramatic rise in food insecurity and potentially devastating disruptions to the global food supply chain. Africa is likely to be deeply impacted. Despite its agricultural resources, Africa is a net importer of agricultural and food products, with ten basic foods making up 66 per cent (US$46 billion) of total African food imports. If unchecked, the current economic crisis is likely to escalate to a serious food crisis, with potential implications for peace and security. Several major staple crop exporters have imposed export restrictions on rice and wheat. These measures could heighten food insecurity in Africa and result in a sharp rise in food prices and rising hunger and malnutrition. Every percentage point drop in global GDP is expected to result in an additional 0.7 million stunted children. Along with the pandemic, a second wave of desert locusts is threatening East Africa with estimates that it will be 20 times worse than the February wave that hit eight countries in the region and was the worst outbreak in 70 years. Together, they present an alarming threat to food security and livelihoods in the Horn of Africa.

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**BOX 4: RECOMMENDATIONS FOR FOOD SECURITY**

- Focus where risks are most acute, strengthen social protection systems and safeguard access to food for the most vulnerable groups, especially for young children, pregnant and breastfeeding women, older people and other at-risk groups.
  - Release food from government grain reserves to counter potential food shortages.
  - Enforce anti-hoarding and anti-price gouging policies on food and other essential goods through measures such as informant hotlines.
  - Set up food banks in major cities and other affected areas and create mechanisms to identify those in need and to mobilize and receive donations (monetary or in-kind) from local and diaspora sources.
- Designate the agriculture sector an essential economic activity that must continue regardless of pandemic-related emergency restrictions.
  - In addition to supporting smallholder farmers’ ability to increase food production and maintain sufficient liquidity, focus on urgent measures to reduce post-harvest loss through improved storage methods for key food staples.
  - Establish and protect food supply corridors (for collection, transport and distribution to markets), especially for land-locked and island states.
  - Measures, such as temporary reduction of VAT and other taxes on food, to be encouraged to keep food prices affordable.
- Africa’s development partners to ease existing export restrictions, including export bans on food.

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36 UN Policy Brief on Food Security and COVID (forthcoming).
v. EDUCATION

Prolonged school closures at all levels, combined with wide-spread economic hardship, risk undermining aspirations and potentials and widening inequalities. In sub-Saharan Africa, close to 90 per cent of students do not have access to household computers and 82 per cent are not able to get online. School closures have left over 330 million learners of all levels and over 8.5 million teachers, unable to learn or teach from home. While mobile phones can support young learners, around 56 million live in areas that are not served by mobile networks, and access numbers are consistently worse for girls and women. Even where computers are provided, unreliable power supply and poor internet connection, coupled with financial costs, undermine the impact of such investments. Increased internet reach can lessen the gap in education access through continued learning and provide a vital source of information and awareness about the pandemic.

39 UNESCO has published a list of resources for mobile/low technology learning: https://en.unesco.org/covid19/educationresponse/solutions

3.2. Peace and security impacts

To date, many African countries have managed the political risks associated with the measures to respond to the pandemic. Opposition to lockdowns and other restrictive measures has been sporadic and political tensions surrounding elections have so far been mostly kept in check. In some countries, the COVID-19 context strengthened political dialogue among national stakeholders and society-wide mobilization to support national response plans. However, prolonged suspension of critical economic activity; continued emergency measures, in some cases associated human rights violations; delayed electoral processes and political transitions; as well as inequalities in access to food and basic services disproportionately affecting the poor and other vulnerable groups, including women and girls as well as children caught up in conflict; could coalesce, in some contexts, to spark unrest, (re)ignite conflicts or upset fragile peace processes. Hence, the political risks associated with the pandemic require close monitoring and management by national and regional actors.

The virus could strike hardest in countries with ongoing conflicts or fragile political transitions. As the pandemic unfolds, we are not only likely to witness a shift in dynamics in a number of conflicts, but also a possible deterioration in UN relationships with parties in conflict and communities. Despite increased peacebuilding efforts in recent decades, violence and conflict, at times exacerbated by terrorism and the spread of violent extremism, transnational organized crime, and weak institutions, continue to pose a challenge in some areas and will inevitably complicate efforts to tackle the virus. Similarly,
gaps in state authority, and disregard for arms embargoes, are still present in some parts of the continent. Criminal groups have become more active in finding new routes and methods to traffic drugs and illicit goods, as well as prey on people’s vulnerabilities caused by the loss of income.

On 23 March, the United Nations Secretary-General called for a global ceasefire to fight the COVID-19 pandemic. Echoing the continent’s “Silencing the Guns” initiative, the Chairperson of the African Union Commission, Moussa Faki Mahamat, also called for a ceasefire. The Secretary-General also appealed for an end to the escalation of violence targeted at women and girls, including domestic violence, as the pandemic spreads.

These efforts have yielded some initial positive responses with 17 Member States across the continent having endorsed the appeal. In Cameroon, South Sudan and Sudan, armed groups announced temporary unilateral cease-fires. Nevertheless, these responses remain fragile and reversible. In Libya, the announcement of a humanitarian truce has proved tenuous, as both parties to the conflict continue their military operations on the ground. In Cameroon, despite one of the major armed separatist groups having responded positively to the Secretary General’s call, violence has also continued. In Somalia, Al-Shabaab has intensified attacks. In Central African Republic, calls for a cease-fire have not been fully followed, with continuing clashes resulting in dozens killed.

i. ADAPTING DEMOCRATIC PARTICIPATION TO COVID-19

In 2020, at least 22 African countries are scheduled to hold elections, including nine for the position of president. Several countries have already held elections since the WHO declared the pandemic. Some countries appear set to proceed with elections as planned or are deliberating their feasibility, while others have decided to postpone polls.

Delays might be particularly sensitive in countries with highly polarized political landscapes or countries without constitutional provisions for interim governance. In Somalia, the elections to be held by the end of the year mark an important political milestone. In such settings, inclusive and sustained political dialogue can be key to mitigating tensions around elections.

In countries opting to proceed with elections, governments will need to strike a balance between conducting credible elections and ensuring the effectiveness of COVID-19 preventive measures. Broad stakeholder consultations are key in this regard, including with national electoral authorities and public health officials. Additionally, women candidates, who often have fewer resources and time to spend on a campaign, may be disproportionately affected by postponed elections or elections taking place under restricted conditions. Decisions on holding or postponing elections need to be inclusive and should ensure women’s participation. UN good offices and election-related technical support remain available to Member States.

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41 Guinea, Mali and Togo held elections.
42 Côte d’Ivoire and Ghana are deliberating the feasibility of holding elections.
43 Ethiopia, Gambia, Nigeria and Zimbabwe.
ii. STAYING THE COURSE ON POLITICAL TRANSITIONS AND PEACE TALKS

While many African peace processes have continued despite the COVID-19 disruptions, the pandemic introduces new risks that could threaten fragile gains, including in women’s leadership, participation and priorities, and disrupt momentum. This is particularly true where peace or security agreements are being negotiated, or in countries implementing political transitions or peace processes, such as in the Central African Republic, Guinea-Bissau, Libya, Somalia, South Sudan and Sudan.

International, regional, national and local capacities for good offices, mediation, peace-building and peacekeeping are also affected by COVID-19. Mediators and parties have had to postpone meetings and talks, cancel key diplomatic events or other confidence building measures. However, several meetings and summits, such as the Berlin International Follow-up Committee on Libya, have been held virtually. Other processes (e.g. Central African Republic and Sudan) have managed to switch to online discussions. Scaling up the use of technology creates new opportunities to enhance the inclusivity of peace processes. These should be leveraged to ensure women’s full and meaningful participation, as well as engagement of young people, and bridging some of the digital divide that may exist between urban and rural areas.

Strengthening the leadership and meaningful participation of women, including in particular women frontline workers, as well as young people, in all COVID-19 related decision-making is key. They leverage their constituencies for a wide-range of COVID-19 related prevention work and to sustain the momentum for the implementation of peace agreements. Their inclusion leads to better outcomes.

iii. SUSTAINING EFFORTS TO COUNTER AND PREVENT TERRORIST THREATS

In various parts of the continent (notably the Sahel, the Horn of Africa and the Lake Chad Basin) conflict, terrorism and the spread of violent extremism continue to take a heavy toll on communities. The COVID-19 context further complicates efforts to address violent extremism, and African countries will require strengthened support to sustain this engagement at the same time as they face the pandemic. Spikes in attacks, often involving the use of improvised explosive devices, were observed in the Sahel from February to April 2020 — reaching 1,784 fatalities around March 2020 — before dropping to 726 in April.

Boko Haram has already increased its attacks in the Lake Chad region, provoking strong counter offensive operations by the countries in the region. In the Sahel, terrorist and violent extremists have also maintained pressure on international, national and local security forces. The group described government public health warnings and measures as illegitimate and indicated it opposed the closure of mosques and Islamic schools, making the population and communities under its control particularly vulnerable to COVID-19 infections. Elsewhere, Al Shabaab continues its attacks in Somalia and, in Mozambique, insurgents affiliated to the Islamic State launched unprecedented large-scale assaults in Cabo Delgado. Beyond attacks, these groups have been instrumentalizing the pandemic, propagating hatred and fundamentalism, rumours that the virus is not lethal, and further offering services and protection in areas where the State is absent. These attacks have had negative humanitarian consequences with increased IDPs and refugees.
iv. **IMPACT ON LOCAL AND INTERNATIONAL CAPABILITIES TO SUPPORT PEACE AND SECURITY**

The pandemic is impacting capacities to support peace and security efforts in Africa, including on United Nations missions and country teams and regionally led operations, as well as local peacemakers. There are currently seven United Nations peacekeeping operations based in Africa and 17 special political missions working on African issues. The pandemic is expected to affect the operational effectiveness of UN missions, for example through restrictions on troops rotation, restrictions in regional travel or necessary adjustments in operational practices. Despite these constraints, UN missions continue to fulfill their mandates and are also supporting host-country preparedness and response plans, for example, by providing and transporting medical equipment, raising awareness on public health measures through UN radios, working with humanitarian and other partners, as well as supporting regional coordination efforts.

UN field presences have adapted to continue their work. For example, they are increasingly using technology to remain actively engaged with parties to peace negotiations and other stakeholders while strictly adhering to COVID-19 related host-country measures, and are reaching out to communities and continuing to protect civilians while maintaining physical distancing rules. However, in some cases, restrictions on travel and in-person meetings with partners, have inevitably affected some of the effectiveness of these efforts or the perception thereof. Some Missions are reporting hostility from local populations, as well as attempts to scapegoat the United Nations and exploit anti-UN sentiments.

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3.3. **Human rights impacts**

Approaching the response to and recovery from this pandemic through a human rights lens will lead to better outcomes for everyone, ensuring that vulnerable groups are not overlooked. Measures, such as quarantines, school closures, isolation and limited freedom of movement, while necessary given the scale and severity of the pandemic, need to be exceptional, proportional, temporary, subject to oversight and should not harm physical integrity and human dignity. Cases of excessive use of force by security officials when enforcing emergency measures have been documented in several countries.

The risks of sexual and gender-based violence, and of grave violations affecting children, including in refugee and internally displaced persons (IDP) camps and conflict-affected areas, have risen. Overcrowded detention facilities in many countries continue to present both health and human rights challenges despite efforts by many States to decongest prisons. Steps such as those announced recently by South Africa and other countries to parole and release vulnerable populations from detention are welcome and set a positive example.

It is crucial for all actors to redouble their efforts to promote accountability, transparency, tolerance, social cohesion and inclusion, as well as to ensure compliance with human rights obligations in the COVID-19 response and recovery.

In various parts of the world, disinformation and conspiracy theories, advanced through social media and other online platforms, have fuelled hate speech against

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44 For example, the African Union-led mission in Somalia, the Multinational Joint Task Force in the Lake Chad Basin and the G5 Sahel Joint Force.
45 The Secretary-General’ Policy Brief, COVID-19 and Human Rights: We are all in this together, April 2020.
46 The Secretary-General’ Policy Brief, COVID-19 and Human Rights: We are all in this together, April 2020.
foreigners, refugees, migrants, as well as nationals returning to their home countries, and those who test positive for the virus. COVID-19-related hate speech amplifies underlying social and economic inequalities, including between men and women, as well as promoting violence and undermining social cohesion.

The dissemination of accurate, clear and evidence-based information and awareness-raising campaigns are among the most effective tools against discrimination, stigmatization and xenophobia, which feed on misinformation and fear. Governments, public and private media, as well as civil society actors and global social media platform owners are encouraged to act collaboratively in response.

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**BOX 6: RECOMMENDATIONS FOR PEACE AND SECURITY, GOVERNANCE AND HUMAN RIGHTS**

**Peace and security and governance**

- Parties to conflicts to silence their guns to allow the fight against the virus to proceed unimpeded, in line with the UN and African Union’s calls for a global ceasefire and the Silencing the Guns Initiative. The United Nations and its peacemaking and peacebuilding instruments are at the disposal of all parties to work with them in the cause of peace.

- Decisions regarding electoral calendars to be taken in a consultative and inclusive manner to mitigate any tensions that could arise due to COVID-19.

- Response measures to be conflict-sensitive to avoid fuelling conflict dynamics. Ensure inclusion and community participation in the delivery of COVID-19 related services, as well as respect for human rights in all aspects of the response. This includes strengthening the leadership and meaningful participation of women, including women frontline workers and young people in all decision-making.

- Continued engagement and leadership by African and global actors, particularly the UN Security Council and the AU Peace and Security Council, is needed to sustain progress in key peace processes across the continent.

- Scale up the use of digital tools among negotiating parties and leverage the opportunities that these may offer to enhance the inclusivity of peace talks.

- All contributors of personnel and political or financial support to UN and African peace operations to maintain their engagement.

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47 See: Statements by Secretary-General on misinformation and hate speech [hyperlink].
Human Rights

- Action against hate speech and stigmatization by political leaders, educational institutions and social media companies.
- Alternatives to pre-trial detention and the commutation or temporary suspension of certain sentences to reduce new admissions to prisons and reduce the risk of COVID-19 transmission. This will be particularly relevant in the case of minor offences, including those of a non-violent and non-sexual nature.
- Human-rights complaint protocols for law enforcement officials in the context of emergency measures, and ensure training of such officials.
- Awareness on human rights in the context of emergency measures, and access to justice to ensure accountability and redress.
- Ensure civil society space, including responsible media, and democratic political participation.

3.4. Humanitarian Impact

It is important to take account of the links between the health, humanitarian, peace and development in responding to COVID-19. Africa’s 25.2 million refugees, asylum-seekers, internally displaced persons and stateless people are some of the most vulnerable to COVID-19. Many are hosted in crowded camps and areas of fragile security, weak health systems and limited access to services such as water, sanitation, and hygiene. Measures like repeated handwashing and physical distancing would be difficult to comply with in IDP or refugee camps in these situations.

Violent conflicts, often involving extremist groups, exacerbate their predicament as they damage social services infrastructure. They also reduce humanitarian access, disrupt supply chains and prevent vulnerable populations from safe income generation and resilience. At the same time, border closures, detention and other limits on freedom of movement have dramatically increased the risks for people seeking asylum and protection.

On 25 March, the United Nations Secretary-General launched a US$2 billion global humanitarian plan to fund the fight against COVID-19 in priority countries, the majority of which were in Africa. The Plan was updated in May, requesting a total $6.7 billion, with coverage expanded to additional countries from the continent, along with a list of countries to watch. He also encouraged governments to designate humanitarian workers as essential workers to ensure humanitarian access during COVID-19. The positive response of the international community to fund the UN humanitarian response plan would be a vital part of successfully fighting the pandemic in Africa.

BOX 7: RECOMMENDATIONS FOR HUMANITARIAN IMPACT

- Maintain or increase support to UN and African humanitarian initiatives for both COVID-19 and country-specific humanitarian response plans.
- Maintain the civilian nature of both humanitarian and COVID-19 responses and ensure that vulnerable groups, such as IDPs, migrants, women and children and older persons, are not discriminated against and their needs are met, including through inclusion in national health services and response plans.
Beyond the effort to deal with the COVID-19 health crisis and its immediate ramifications, the response and recovery could create a new post-pandemic narrative for the continent. This may be an opportunity for transformative change, for a stronger and more resilient Africa to emerge — an Africa that is not only prepared to face the next pandemic, but also to draw vital lessons from this experience for the Decade of Action. African countries could minimise inequalities; bolster health systems, social protection, cohesion, and inclusion; resuscitate economies and shape new policies resilient to shocks. This will require not only political will, resources and individual and collective commitment by African countries, but also global solidarity.

NEW DIRECTIONS COULD INCLUDE:

VITAL CONTINENTAL INTERESTS
As confirmed by the COVID-19 pandemic, a critical priority area for public health in Africa is access to pharmaceutical products. To mitigate the Continent’s dependence on imported pharmaceuticals, Africa should accelerate the realization of its Pharmaceutical Manufacturing Plan, which aims to address the lack of access to quality, affordable medical products. The AfCFTA could be an opportunity to promote pharmaceuticals trading and contribute to strengthening African healthcare systems for the long-term.

The disruptive impact of the COVID-19 pandemic on Africa’s food supplies underscored that food security remains a high priority for the continent and the need for renewed efforts to boost sustainable food systems and trade. Durable solutions for food security require investments in irrigation, storage, transport, and agri-processing systems to boost production, reduce post-harvest losses and volatility in the supply and price of food.

The pandemic has highlighted the need for governments to ensure that critical infrastructure needed during health emergencies (ports, buildings, roads, railways, airports and bridges, and electricity grids), which is exposed to severe risks induced or exacerbated by climate-related disasters, have built-in resilience.

GENDER EQUALITY
Women’s entrepreneurship, leadership, and the percentage that women’s trade in the informal economy contribute to the overall economy, are avenues for recovering stronger and faster, as
well as more equally. Targeted investment, equal representation in leadership and expanded social protections are critical to harness this potential.

THE PROMISE OF AFRICA’S YOUTH
The future of Africa is with its youth. Sixty per cent of the population in Africa is under 25. Educating and providing the youth with necessary skills will provide the continent with a driving force for its economic and social development.

GOVERNANCE
The experience of dealing with COVID-19 has the potential to help foster inclusive national dialogue and decision making, stronger social contracts between states and communities, increased trust in institutions and enhanced peacebuilding efforts. African countries could rigorously implement anti-corruption strategies and enhance transparency in the mobilization and utilization of development financing resources. For their part, it is critical that Africa’s partners honour their commitment to support Africa’s efforts in fighting illicit financial flows and its quest to achieve greater representation and voice in global governance systems.

Significant efforts will be needed to buttress the resilience, protection and inclusion of displaced populations, including in employment and education. Wherever possible, displaced populations should be integrated in national development planning.

FINANCE
Debt moratoria, debt relief and debt forgiveness are important, but they are not enough. There is a need to address structural issues in the international debt architecture to prevent defaults, leading to prolonged financial and economic crises. To avoid debt crises in the long-term, Africa should seek alternative sources of financing. These include stronger domestic resource mobilization, increased production, value addition and economic diversification.

Disaster risk finance and insurance mechanisms are essential tools within a comprehensive approach to disaster risk management. The African Risk Capacity could be allowed to expand the scope of its assistance to include provision of rapid financial support during epidemic episodes.48

ECONOMY
COVID-19 has amplified the risks of the world’s heavy dependence on a few countries for global supply chains of key products. African countries could position themselves better to attract manufacturing activities as global manufacturing firms seek to diversify geographically the sources of supply. For this, African countries need to continue to scale up their infrastructure, improve logistics, invest more in skills development, reduce the cost of doing business and embrace digital technology more broadly, including by leveraging the AfCFTA. Africa could also use its recovery-related financing support to invest in renewable sources of energy at a significant scale and to move away from dependence on fossil fuels.

Opportunities exist for governments to act to simultaneously strengthen their healthcare systems and economies while also improving their preparedness and resilience to the impacts of climate change. Investments made today in the green economy have the potential to create millions of jobs in the energy, transport,
agriculture, conservation and manufacturing sectors. These investments are critical to attaining the AU’s Agenda 2063 and the Sustainable Development Goals.

DATA AND TECHNOLOGY
African countries have the chance to build on the digitalisation transformation that is taking root in Africa and adapt to the realities of the changes made urgent by the pandemic. This would require investing in internet access, e-government, e-learning, e-justice, e-trade, and e-health to create effectiveness, efficiency and to connect more Africans to opportunities.

Civil registration is an important tool for tracking the long-term effects of the pandemic. More than 40 per cent of Africans lack proof of identity in the form of a birth certificate or a national ID. African governments could accelerate the process of digital ID systems following the ECA framework principles for good digital identification, based on inclusion and privacy.
Conclusion

The COVID-19 pandemic has not spared the African continent. Each country’s experience will be unique but some common challenges arise, as detailed in this policy brief. To date, lessons from other regions where the virus is more advanced have been successfully applied. Considerable additional support and solidarity will be needed to remain on this trajectory.

Success in controlling the virus in Africa is in the interests of the whole world for we will not be safe as long as the virus finds sanctuary somewhere. The United Nations will continue to stand by Africa as it confronts the COVID-19 threat in both its immediate and longer-term manifestations.