

Applicability of WHO COVID-19 Regulations on Poverty Affected Regions: Case Study of Africa

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Abstract: Management and containment of COVID-19 in Africa has been affected by several vulnerability factors peculiar to the region. The transmission rate in Africa has seen a sharp increase recently and containing the virus has proved to be tough under the existing WHO guidelines. The preconditions required for the implementation of the COVID-19 guidelines do not exist in Africa due to its vulnerabilities caused by poverty. Africa is poorly equipped, lacking basic services, water, and sanitation and having fairly weak health systems, poor hygiene facilities, and high population mobility such that the Stay-at-Home guideline, lockdowns, regular hand washing and social distancing have proven difficulty to meet the African context. This study analyzed the applicability of WHO COVID-19 guidelines in the African region. The study recommended that certain policies in support of the poor population be implemented so as to make the WHO Guidelines effective in Africa or development of a separate set of guidelines suiting the African Context so as to contain, mitigate and manage the pandemic in this region.

Keywords: Guidelines, Policies, Poverty, Pandemic, Transmission, COVID-19

1. Introduction

Corona viruses are a family of infectious viruses, which can cause a variety of mild to severe respiratory conditions (AITakarli, 2020). Previous studies indicated that COVID-19 can spread through direct or indirect contact with infected people, contaminated objects and surfaces (WHO, 2020). In a bid to contain, mitigate and fight the pandemic, certain guidelines have been put in place by the World Health Organization. These guidelines have been proven sufficiently successful in suppressing the virus in countries such as China. China succeeded in reducing the number of infected people from thousands to hundreds (AITakarli, 2020). As of 20 July 2020, the global village had recorded 14 476 729 cases and 605 979 deaths (European Centre for Disease Prevention and Control). Africa reported the least number of cases at 721 879 but the continent was projected to experience a sharp rise in COVID-19 cases with about 110 million people likely to be affected (Kiaga, 2020).

Africa is poorly equipped lacking basic services, water, sanitation and having fairly weak health systems, poor hygiene facilities, and high population mobility. The quality and nature of Africa's urbanization may intensify COVID-

19 transmission making its containment and response more difficult (Maseland, 2019). The rate of spread of corona has seen a sharp increase in Africa from 2.8% in early June to 5% of the reported cases by mid-July (CDC, 2020). Despite the guidelines that have been put in place by WHO, Africa is a peculiar continent that requires separate analysis, and probably a different set of guidelines. Inequalities in Africa such as income inequality and digital divide makes implementation of some guidelines difficult. To buttress this, the study seeks to analyze the applicability of WHO COVID-19 regulations on the poor economies and proffer solutions on how best these regulations can be implemented to contain the virus without making the economies worse off.

2. Methodology

The study is a literature based analysis of the applicability of WHO COVID-19 guidelines on the struggling economies. Literature review provided the basis for developing a conceptual model adapted from the COVID-19 guidelines and African Poor conditions stated in the World Bank (2018b) report on Poverty and Shared Prosperity.

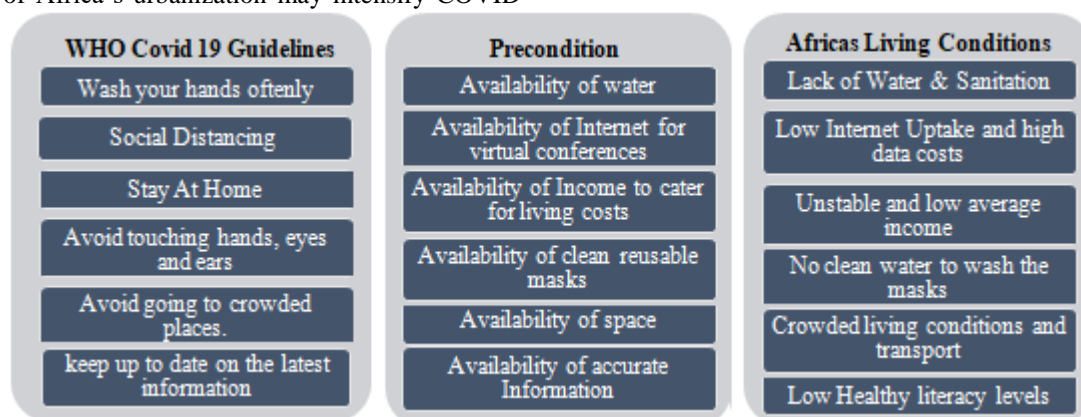


Figure 1: WHO Guidelines and Africa's living conditions

Source: Authors Computation

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Effectiveness of COVID-19 W.H.O Guidelines in Africa

Following the increased spread of the COVID-19 pandemic, several recommendations were put in place by the World Health Organization to help stop the spread of the pandemic. The first World Health Organization's recommendation was that of washing hands regularly with soap and water (WHO, 2020). This Guideline makes the availability of safe water a prerequisite against COVID-19 combat. (Cooper, 2020). Coverage of basic hand washing facilities with soap and water in sub-Saharan Africa was approximately 15 per cent (WHO, 2017). In Africa the applicability of this guideline is weak because the region lags behind other regions in supplying its population with clean water sources. Approximately 33.9 percent of the population of Sub-Saharan Africa has no access to clean drinking water (WorldBank, 2018). Inadequate supply in clean water and sanitation renders poor people vulnerable to infectious diseases (Marcio Cruz, 2015).

The second World Health Organization guideline was to stay at Home or self-isolate (WHO, 2020). This measure has proved effective in countries like China. A study carried out in China assessed the impact of the Wuhan lockdown during the COVID-19 epidemic and confirmed that the lockdown accompanied by the Stay At Home Movement changed the rapidly increasing curve of newly diagnosed infections and helped to contain those infections (Yuan, 2020). However mapping such measures in Africa might prove not effective if certain policies to sustain the informal sector are not put in place. The ILO (2018) report indicated that informal employment was the main source of employment in Africa, accounting for 85.8 percent of all employment. In sub-Saharan Africa, approximately 70% of the totals employed are self-employed (Fields, 2019).

Informal workers feed from hand to mouth and will be unlikely to endure a lockdown for more than a couple of days since they cannot afford to stock food stuffs. These workers are not protected and do not receive health insurance, social security or representation. (FAO, 2020). The need for many urban residents to earn their daily income to pay for rent, food, school fees, hospital bills and other expenses are a clear challenge to enforcing the restrictions on movement and physical proximity (Maseland, 2019). Policies that cater for these groups of population are vital if the lockdown and stay at home guideline are to be effective. Post the outbreak of the COVID-19 pandemic, many governments in the developed countries have extended social security coverage towards the self-employed.

Australia has extended the Job Seeker Payments and the Youth Allowance to the self-employed and freelancers, In Sweden, the self-employed now receive pay during the first 14 days of sickness. In the UK the Self-Employment Income Support Scheme offers support to over 80% of those who get the majority of their income from self-employment regardless of how badly affected their business is (Stuart Adam, 2020). The United States have included the self-employed, freelancers and gig economy workers in the income protection package launched in response to the corona virus crisis, providing them with access to unemployment benefits (Kiaga, 2020). Therefore such policies are needed for the guidelines to work otherwise

besides that the self-employed would rather go to work and not die from hunger posing a major risk to the population at large

Most African economies have forcibly introduced the Stay At Home guideline closing educational, work and training facilities which pose a major disadvantage for those who may not be able to benefit from distance and e-learning. Establishment of The Work at Home facilities and online education in the developed world might not be successful in Africa as the continent lacks adequate infrastructure to sustain virtual conferences and meetings. In sub-Saharan Africa, one gigabit (GB) of data costs about 40 percent of the monthly average wage (World Economic Forum, 2017). As a result of the high data costs and poor network coverage, only 23% of the region's population accesses the internet via mobile phones (Lucini, 2016). Poor internet uptake has staggered electronic transactions resulting in a greater use of paper currency and long bank queues raising the public's vulnerability to the virus. As such, the very guidelines that are critical to slowing the spread of the virus directly cost over three quarters of the population (Kiaga, 2020)

WHO also advised the public to avoid going to crowded places. The African Continent has the largest share of households living in overcrowded conditions. In 2019, about 47% of Africa's urban population lived in slums or informal settlements (Maseland, 2019). According to WHO, a distance of less than six feet may cause one to breathe in the droplets produced by coughing or sneezing of an infected person. Maintaining such a social distance in Africa is difficult as many people live in crowded quarters (Lall, 2017). Approximately, 28 and 50 percent of residents live at least three to a room in Dares Salaam, Tanzania and Abidjan, Côte d'Ivoire respectively (WorldBank, 2015c). The region has 60 percent of its urban population living in slums (United Nations, 2015)

Inefficiencies in public transit systems in Africa make social distancing ineffective. Research conducted by the National Household Travel Survey (NHTS) in 2014 showed that approximately 30 percent of South African households own a car with the other 70 percent relying on taxis, buses, trains or other overcrowded non-motorized mode of transport as operators need to maximize their income. African cities often have high population densities coupled with overcrowded public transport and marketplaces (Maseland, 2019). It is difficult to contain the virus with these overcrowding conditions, because the transmission exposure is high.

WHO emphasized the need for the public to avoid touching eyes, nose and mouth as hands touch several objects and can pick up viruses (WHO, 2020). In a behavioral assessment research at the University of New South Wales, 26 students reported touching their faces on average 23 times each hour and about 44 percent of the time, it included eyes, nose and mouth contact (Yen Lee Angela Kwok 1, 2015). Conclusively the analysis found that face-touch is a form of clear regulatory movements and it needs comprehensive behavioral intervention and community understanding of its regulation. The use of masks can help to achieve this

guideline as one will desist from directly touching their faces. According to the Center for Disease Control and Prevention (CDC), fabric face masks should be washed after every use, but these reusable cloth masks may increase the chance of an outbreak in Africa due to the prevailing water crises, since they are rarely washed and sometimes washed in unclean water sources.

Furthermore, the public should be kept up to date on the latest information from credible sources (WHO, 2020). In Africa there has been so many misleading information on COVID-19 through the media, politicians and social commentators (Russonello, 2020). Conspiracy theories have emerged on COVID-19 which range from the creation of a biological weapon to break the economic power of China against other economically endowed nations like the US to the use of local herbs or products to cure the virus (Analytica, 2020a). Unlike other regions, Africa holds low health literacy levels According to the World Health Organization (WHO) in 2020 they define Health Literacy as “the cognitive and social skills which determine the motivation and ability of individuals to gain access to, understand and use information in ways which promote and maintain good health.”

Health literacy was stated as a key factor in slowing virus spread (Abdel-Latif, 2020). Social media has presented a higher risk in the COVID-19 era, as the dissemination of false information and access to reliable information increased (Abdel-Latif, 2020). Political actors have taken advantage of the situation to subdue their opponents and leverage on the virus outbreak for their political gain using the same channels of communication (Analytica, 2020b). The key concern is that this misconception or misleading news drowns official advice on COVID-19 for public safety. When the COVID-19 situation in Africa becomes a threat to public health, regulating information sources is vital for the continent to provide only reliable and accurate knowledge.

3. Recommendations

If certain policies and mechanisms are put in place to help the vulnerable groups in Africa, the WHO Guidelines will work in containing, mitigating and managing COVID-19. The study recommends that:

- Policies should be put in place to ensure ongoing access to food and other basic commodities to the poor population. Support should be targeted to the less privileged, informal workers, women, children and the elderly. Food hampers and other basic requirements should be home delivered monthly to support these livelihoods. This should be done by independent commissions to avoid corruption by government officials. Offers and Rewards should be granted to those who have stayed at home and penalties levied to those who have failed to adhere by the guideline regardless of having basic supplies.
- The study recommends that the local Shopping centers should be supported so that they are able to stock sufficient food to avoid the public from travelling to town for basic commodities. This will ease congestion on the transport system and the shopping malls. Private transport operators who sign MOUs should be enrolled

and monitored if they are following Covid Response measures.

- The World Health Organization (WHO) should mandate the African Governments to engage companies into CSR and help in channeling water to the communities that lack water. Home treated water deliveries should be done for those without running water. For Example Schweppes Zimbabwe limited in Partnership with Danish Church Aid donated purified water as a nationwide COVID-19 response to assist the communities that lack water in Zimbabwe (Food Business Africa, 2020). Science students should be engaged to install cheap water dispensers. In the Long run there is need for investing in the water supplies of Africa. Multilateral Bodies should assist Africa to meet the SDG Goal.
- Due to the Digital Divide in Africa, there is need for subsidizing internet bundles to allow both e-learning and working from home. However distance education should be facilitated more on the radios than on the internet so as not to disadvantage those without computers or mobile phones. Post crisis, there is need to give supplementary lessons to those students who could not benefit from distance learning.
- Promote Home Based projects like animal husbandry and gardening to ensure food security. Supporting local farmers will help to expand agricultural production and assist to meet local demand by sustaining food supply chains

4. Conclusion

If certain policies and mechanisms to support vulnerable groups in Africa are put in place, the WHO Guidelines will work in containing, mitigating and managing COVID-19. However if the regions vulnerabilities are not addressed WHO has to come up with separate guidelines for these economies. Guidelines that were established to curtail COVID-19 pandemic in Asia and Europe cannot be easily transferred to Africa, they require supportive policies before they are enforced in poor regions.

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