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# Coronavirus: Africa braces for impact 'like nothing we have seen'

by [Nita Bhalla \(/profile/?id=003D0000017ihrLIAQ\)](/profile/?id=003D0000017ihrLIAQ) | [@nitabhalla](https://twitter.com/nitabhalla) (<http://www.twitter.com/@nitabhalla>) | Thomson Reuters Foundation  
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~~With wealth scarce and social distancing a luxury, COVID-19 cases are rising on the continent.~~

(/)  
But some hope lessons from Ebola have left governments better prepared

*Coronavirus is changing the world in unprecedented ways. Subscribe **here** (<https://nam02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fsurveys.trust.org%2Fs3%2FCoronavirus-daily-briefing&data=02%7C01%7CSonia.Elks%40thomsonreuters.com%7C47>) a daily briefing on how this global crisis is affecting cities, technology, approaches to climate change, and the lives of vulnerable people.*

By Nita Bhalla

NAIROBI, April 6 (Thomson Reuters Foundation) - With densely-packed slums, poor access to water, widespread disease and weak health systems, Africa will struggle to control the coronavirus, but health experts hope the continent's youthful population could help in the fight against COVID-19.

The pandemic has been slow to arrive in the world's poorest continent but now cases are rising exponentially as the virus spreads within local communities.

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So far 51 of the continent's 54 nations have detected cases, bringing the total number to **NEWS** an 9,000 with over 400 deaths, **says the Africa Union's Centre for Disease Control.**

(/)(<https://twitter.com/AfricaCDC/status/1247065084284764162>)

World Health Organization (WHO) officials said not only were implementing measures such as social distancing and regular hand-washing major challenges for many Africans, the lack of vital equipment such as ventilators also posed a major concern.

"There is an enormous gap in the numbers of ventilators needed in African countries for this COVID outbreak," said Matshidiso Moeti, the WHO regional director for Africa.

"It is certainly an area of great challenge in African countries coming. We have seen how it has been one of the biggest challenges that more developed countries with more resources are having."

South Africa, Algeria and Egypt have recorded the highest number of cases with about 1,955, 1,250 and 1,170 respectively but health experts say numbers are likely to be much higher as most nations do not have the diagnostic or testing capabilities.

Kenya, for example, has detected about 160 cases to date - with government officials predicting this could surge to 10,000 by the end of April.

### THREE VENTILATORS FOR 5 MILLION

For sub-Saharan Africa - where more than 40% of the 1.2 billion population live on less than \$1.90 a day, and malaria, malnutrition, anemia, tuberculosis and HIV/AIDs are widespread - health experts fear a

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tsunami is coming.

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**Africa has much more vulnerability when I hear it's older people, that's**

nonsense from the point of view of vulnerable communities," said Joia Mukherjee from the charity Partners in Health, pointing to the continent's heavy disease burden.

"The death toll in my opinion will be 4-5 times higher than even in Wuhan. We are looking at a very deadly pandemic in Africa," added Mukherjee, associate professor at Harvard Medical School, at an online panel at the Skoll World Forum last week.

Sub-Saharan Africans have the worst health in the world, according to the **International Finance Corporation (IFC)** ([https://www.ifc.org/wps/wcm/connect/REGION\\_\\_EXT\\_Content/IFC\\_Saharan+Africa/Priorities/Health+and+Education/](https://www.ifc.org/wps/wcm/connect/REGION__EXT_Content/IFC_Saharan+Africa/Priorities/Health+and+Education/)). The region has 11% of the world's population, but carries 24% of the global disease burden.

Health experts fear such diseases already weaken immune systems and could stifle the ability of patients to fight off a COVID-19 infection - resulting in much higher case loads of young people contracting the virus, unlike in the West or China.

This could quickly overwhelm Africa's already rudimentary and under-resourced hospitals. The continent accounts for less than 1% of global health expenditure and 3% of the world's health workers, added the IFC.

Aid workers are already sounding the alarm across the continent - particularly in nations wracked by conflict.

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"Health-care systems across Africa could collapse under the added weight of the pandemic, said Patrick Youssef, incoming regional director for Africa for the International Committee of the Red Cross

(/) (<https://www.icrc.org/en/document/were-racing-slow-spread-covid-19>).

In northern Mali, for example, 93% of health-care facilities have been completely destroyed, said Youssef, adding that the few remaining community health centres were struggling to treat illnesses like malaria and could not treat COVID-19 patients.

While in the Central African Republic (CAR), there are **just three ventilators (<https://www.nrc.no/news/2020/march/just-three-ventilators-to-cope-with-covid-19-in-central-african-republic/>)** for a population of five million people, according to the charity, the Norwegian Refugee Council (NRC).

"Rich nations are in panic mode stating that thousands of ventilators will not be enough," said David Manan, NRC's country director. "It just brings to light how poorer nations like the CAR don't stand a chance in the fight against COVID-19."

### SOCIAL DISTANCING A LUXURY

As well as grappling with the onslaught of COVID-19 patients expected to flood hospitals and clinics, health experts warned that containing the spread of the disease will also pose serious obstacles for African governments.

Many African cities are home to sprawling, densely populated informal settlements, where the two key solutions of containing the spread of the coronavirus, regular hand-washing and social distancing, were a luxury.

<https://news.trust.org/item/20200406160051-t6vri/>

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In the Kenyan capital Nairobi, for example, there is little access to clean water or space for isolation in vast settlements such as Kibera which ~~land (and) more than 170,000 people most of whom work as domestic~~ workers, drivers, security guards.

Families of more than five live in tiny one-room shacks made of wood and corrugated iron. There is no piped water so residents must buy it from private tankers, and a lack of toilets means nearby streams are filled with sewage.

Only 14% of Kenyans have hand-washing facilities with soap and water at home, according to the **United Nations children's agency, UNICEF** (<https://www.unicef.org/kenya/water-sanitation-and-hygiene>).

It is no better in Africa's crammed refugee and displacement camps hosting millions fleeing conflict, persecution or climate-related disasters such as droughts or floods.

Sub-Saharan African nations hosts more than six million refugees, says **the U.N. refugee agency UNHCR** ([http://reporting.unhcr.org/sites/default/files/gr2018/pdf/03\\_Africa.pdf](http://reporting.unhcr.org/sites/default/files/gr2018/pdf/03_Africa.pdf) **749519196.1584435858**), while almost 18 million people are displaced within their own countries.

South Sudan, which is recovering from a six-year conflict, detected its first case of the coronavirus on April 3, sparking concerns over the impoverished nation's ability to contain the disease within the camps, and amongst the wider population.

"More than 1.5 million people are internally displaced and almost 200,000 live in overcrowded, cramped camps without access to proper hygiene facilities," said **Carolyn Sokouwa, South Sudan** [www.trustora.com](http://www.trustora.com) **Trustora** ([https://trustora.secure.force.com/members/members\\_login?flag=true/](https://trustora.secure.force.com/members/members_login?flag=true/))

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at the International Rescue Committee.

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"Only 34% of households in the country are able to access a borehole or tap stand in less than 30 minutes."

High rates of poverty and no financial security net will additionally pose challenges for Africans as governments impose curfews and lockdowns, leaving tens of millions of informal workers unable to earn an income and feed their families.

"One-fifth of Africa's population, nearly 250 million people, doesn't have enough to eat - this is double any other region," said Mercy Corps' Regional Director for Africa, Sean Granville-Ross.

"This doesn't just mean that people are more susceptible to becoming ill from the coronavirus, but with lockdowns, border closures and the ability to access food curtailed, the impact of COVID-19 on Africa could be like nothing we have seen before."

African nations such as Somalia in the east to Mali in the west are also burdened by both **conflict and erratic weather linked to climate change (<https://news.trust.org/item/20200401122142-1kxvq>)** which will likely hamper their ability to slow the spread of COVID-19, said aid workers.

## EBOLA LESSONS, YOUTHFUL POPULATION

The continent does, however, have some advantages which could help the response to the pandemic, health experts said.

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Lessons learned from Ebola outbreaks in west and central Africa, for example, have left governments such as Sierra Leone, the Democratic Republic of Congo and Liberia better equipped in terms of screening, contact tracing and surveillance.

Community health workers in far-flung villages are being mobilised in countries such as Senegal to use their experience **during the Ebola outbreak (<https://news.trust.org/item/20200325183817-mntyc>)** to conduct public health campaigns.

Aid agencies say cash transfers and livelihood support mechanisms set up during the outbreak can also be resurrected to help vulnerable communities affected by COVID-19.

Similar experiences in other nations, such as South Africa in responding to the AIDS epidemic, could also help.

Health experts also pointed to Africa's large youth population, which could potentially withstand the virus without requiring medical attention.

More than half of sub-Saharan Africa's population is aged between 15-64, while more than 40% is below 14 years, **World Bank data (<https://data.worldbank.org/indicator/SP.POP.65UP.TO.ZS>)** shows.

Only 3% of Africans are aged 65 years or older, compared to China and Italy where the elderly account for 11% and 23% of the population respectively.

Patrick Amoth, director general at Kenya's health ministry, admitted it could be an asset, but also warned of the country's high disease burden.

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"One thing that could work to our advantage is the fact that our population is more **NEWSFUL**, so potentially it is possible that our people will be able to catch the virus but probably just it will pass on as a mild illness," he said.

"What may work against us, of course, is our weak health system and our disease burden especially HIV. Those who are not adherent to their medicines would have lack of viral suppression and therefore could be at risk."

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# Biometric IDs can be 'gamechanger' in

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As authorities consider antibody tests and vaccines, biometric ID systems can help keep track in countries without ID systems

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 a daily briefing on how this global crisis is affecting cities, technology, approaches to climate change, and the lives of vulnerable people.

By Rina Chandran

BANGKOK, April 8 (Thomson Reuters Foundation) - As countries begin to lift coronavirus lockdowns, biometric identification can help verify those who have already had the infection, and ensure that the vulnerable get the vaccine when it is launched, health and technology experts said.

Confirmed cases of COVID-19, the respiratory disease caused by the coronavirus, total more than 1.4 million, with about 82,000 deaths worldwide, according to a Reuters tally.

## Coronavirus: our latest stories

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## China **lifted a two-month lockdown**

(<https://news.trust.org/item/20200408065455-56idj/>) in the epicentre of Wuhan on Wednesday, and authorities in Britain and elsewhere said they would begin antibody tests to see whether people had been infected, to allow them to return to work or travel.

A biometric ID system can keep a record of such people and those getting the vaccine, said Larry Dohrs, Southeast Asia head at iRespond, a Seattle-based nonprofit that launched its technology last month.

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"We can biometrically identify the individual and tie them to the test results, as well as **news** security document, The person then has 'non-refutable' proof that they have immunity due to antibodies in their system," he said.

"It would be a very valuable credential," he told the Thomson Reuters Foundation. The nonprofit already provides biometric IDs for refugees and stateless people.

From disinfecting drones to talking robots and artificial intelligence to develop vaccines, **countries around the world** (<https://news.trust.org/item/20200316140626-x791z/>) have fast-tracked **technology during the coronavirus outbreak** (<https://news.trust.org/item/20200320105803-ztaq0/>).

Now, firms such as iRespond and Simprints - a UK-based nonprofit that develops biometric IDs for health and humanitarian use - are adapting their technology for the next steps.

More than 1 billion people worldwide have no way of proving their identity, according to the World Bank.

This will present a massive challenge for governments trying to ascertain who has received the vaccine, said Prashant Yadav, a senior fellow at the U.S.-based Center for Global Development.

"The initial COVID-19 vaccine supply will be limited, so it will be essential to verify each dose reaches a real patient. Corruption, leakage, and even accidental duplication waste precious supply and are deadly," he said.

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"Biometric digital IDs can be a gamechanger. They can help governments target population segments e.g. healthcare professionals or elderly population, more easily verify people who have received vaccination, and have a clear record," he said.

Digital identity systems are already in use in many countries, linking biometric data such as fingerprints and iris scans to a unique digital code, allowing for remote identification.

These can be leveraged for tracking vaccination too, Yadav said, although the vaccination infrastructure that is built around children will need to be retooled for adults.

Many biometric systems are also based on fingerprints, which can be a transmission risk for the coronavirus, so Simprints is developing a "touchless" technology that scans the face or the palm, said chief executive Toby Norman.

Such systems can also be abused by governments and private companies, according to digital rights groups which have raised **concerns over the risk of increased surveillance** (<https://news.trust.org/item/20200305002314-damsj>).

To prevent any abuse, there has to be certainty about what the data will be used for and for how long, and when it will be deleted, said Norman.

"National governments don't have a very good record of giving up new powers once a crisis has passed," he said.

"Technology we use for disease surveillance today should not become tools for state surveillance at a later date."

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