Life inside the lockdown
Cameroon, DRC, Kenya, Nigeria, Sierra Leone, South Africa, Zimbabwe
The coronavirus does not respect borders. It does not respect the sovereignty of states. It does not listen to orders. It cannot be voted away, or imprisoned, or censored. It does not know if you are rich, or if you are poor. It does not care if you are a member of the ruling party.

To fight the virus, we too must rise above these divisions. These are strange, unsettled times. To combat this unprecedented threat, our societies are evolving before our very eyes. Our way of life is changing, perhaps irrevocably; and our leaders are making decisions whose impact we will feel for generations to come.

Rarely has the need for accurate, in-depth and regular information been more pressing.

We are journalists from across the African continent. We cannot administer testing kits. We cannot operate life-saving ventilators. But nonetheless, we have a vitally important job to do: we keep you informed. And we hold our leaders to account.

Only by working together can we overcome the pandemic, and minimise its impact. That is why we are launching a weekly publication that brings together the best reporting from all across our continent. Only by understanding each other can we be united.

We cannot deliver a physical newspaper to you, which is why we have chosen this unusual format – so we can reach you instantly, wherever you may be confined. The Continent is designed to be read on smartphones, and shared on social media platforms like WhatsApp and Facebook.

Rarely has the need for accurate, in-depth and regular information been more pressing.

We don’t ask you to pay for this news – although we do welcome donations. Instead, we ask you to carefully share this publication with the people who you think might benefit from it, and that you commit to doing so every week.

And please WhatsApp us to say hi (on +27 73 805 6068) – knowing how many people are reading will help us raise funding. ■
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**Say hi.** We want to hear from you. WhatsApp us on +27 73 805 6068, from wherever you are in Africa, or the world. This is important for us: it gives us an idea of how many people are reading the paper, which helps to raise funding for more journalism.

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**Inside:**
- **The News Quiz:** How Pan-African are you really?
- **Jack Ma vs Bill Gates:** Does Africa need another billionaire?
- **True or false:** Alcohol weakens your immune system
- **PLUS** first-hand reporting from Nigeria, Kenya, Sierra Leone, Zimbabwe, Cameroon and South Africa

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**Or WhatsApp ‘NEWS’ to +27 73 805 6068** and we will send you a link to the latest issue.
The percentage of the World Health Organisation’s budget that is funded by the United States of America, which works out to between $400 million and $500 million per year. This week, Donald Trump said he will withhold any further funding, saying that the WHO was slow to respond to the coronavirus crisis. His claims have been widely discredited by public health experts who have praised the WHO’s response.

The number of countries that will receive immediate debt relief from the International Monetary Fund. This includes 19 African countries: Benin, Burkina Faso, Central African Republic, Chad, Comoros, the Democratic Republic of Congo, Gambia, Guinea, Guinea-Bissau, Liberia, Madagascar, Malawi, Mali, Mozambique, Niger, Rwanda, São Tomé and Príncipe, Sierra Leone, Togo.

The length of the prison term that Zimbabwean President Emmerson Mnangagwa wants to slap on the author of a forged statement claiming that Zimbabwe’s lockdown will be extended.

The surge in data usage reported by Kenyan telecoms operator Safaricom. Kenyans are watching more movies and spending more time on Facebook to relieve lockdown stress.

Top 12 countries in Africa by prevalence of Covid-19

Number of people confirmed to have Covid-19 and number of deaths as of April 16 2020
Maria Wanjiru works on one of the sprawling flower farms that have made Nakuru the centre of Kenya’s horticulture industry. Or at least she did, before the coronavirus pandemic threw the industry into disarray. Few European clients are still buying, and cargo flights have been severely disrupted.

Now Wanjiru’s future is uncertain. She is not getting paid to pick flowers any more, so she has had to take on other work, like washing clothes. “I wonder why they cannot buy flowers abroad if many people are dying there. Don’t they need them for the funerals?”

Kenya is Africa’s largest exporter of fresh flowers. Last year the industry was worth 120 billion Kenyan shillings (US$1.14 billion). Now it is losing 30 million shillings a day ($290,000), according to the Kenya Flower Council, with losses only likely to increase.

Flowers rot quickly, which means that businesses cannot hold on to their stock until things improve. “We are only exporting around 30-35% of our usual bulk. The rest is going into the compost pits,” said Jack Kneppers, the owner of Maridadi Flowers.

More than 100,000 people work in Nakuru County’s flower industry. Analysts suggest that more than half are likely to lose their jobs permanently.
Eric Wule has a problem. He lives in Kumbe, a city in south-west Cameroon, and his government has told him this week - along with all other 25 million citizens - that it is illegal to appear in public without a face mask. This is part of the government’s measures to prevent the spread of the coronavirus (as of 16 April, Cameroon had recorded 848 cases of the disease, including 17 deaths).

But surgical masks are in short supply, and he is struggling to find one. The masks that are being sold, he cannot afford: the price has quintupled, from 100 CFA francs to 500 CFA francs (from US$.17 to $.83).

Wule is not the only person struggling to comply with the emergency regulations. There are simply not enough face masks in Cameroon for everyone. “The masks are scarce and even seem unavailable. Family and friends will use that which is available in turns just to escape police trouble,” commented one civil society activist, who asked not to be named.

Many people have started making masks themselves, from fabric, but this comes with its own risks. “They have not been well educated on how to use these reusable masks... they are being fabricated in homes and no attention is paid to sterilisation after fabrication. The Covid-19 status of the persons fabricating them are also not known,” said Dr Ade Harrison M., the Director of Benakuma District Hospital.

Dr Harrison has also observed people trying on face masks before purchasing them. “This seems to be a new mode of transmission. Imagine buying a mask that has been tried on previously by about ten people whose status you do not know. It is risky!”

The World Health Organisation cautions that wearing a mask alone is not an adequate defence against Covid-19, and that “there is currently no evidence that wearing a mask (whether medical or other types) by healthy persons in the wider community setting, including universal community masking, can prevent them from infection with respiratory viruses, including Covid-19.”

Amindeh Blaise Atabong is a media fellow with Germany’s Konrad Adenauer Stiftung.
Residents say crime is on the rise - but police disagree

Aanu Adeoye and Oluwatosin Adeshokan

Jim Nwankebie, a landlord in Oke-Aro, Ogun State, woke up to terrible news one morning this week. There were reports that two fellow landlords had been killed by armed robbers - and the robbers had threatened to come back.

Nwankebie, a retired civil servant, said he was alerted to this news by neighbours.

“The government announced a lockdown but did not make any plans for security,” Nwankebie said. “Now, we have to guard ourselves.” Along with other residents, he has formed a neighbourhood watch group to patrol his suburb. They shut the doors into the community at 8 pm, and have volunteers standing guard all night.

The lockdown in Lagos and Ogun states, as well as the capital Abuja, began on 30 March and has been extended until 27 April. The lockdown was designed to prevent the spread of Covid-19 - but may have contributed to increased insecurity in Lagos and Ogun.

The police deny there has been an uptick in crimes, instead blaming residents for the panic. “Those setting bonfires and organising vigilantes are the ones causing these panics,” said Lagos state police spokesman Bala Elkana. Despite their public stance, Nigeria's central police have deployed two additional units to the two states, and claim to have arrested nearly 200 suspects and seized 15 home-made guns, 52 live cartridges and 42 assorted axes and cutlasses.

The insecurity highlights the difficult decisions that must be made by the government, which must balance public health concerns with harsh economic realities. On this early evidence, that balance has yet to be struck.
Kokoro Korona, Corolla Virus, Mororo Moros: How to translate a pandemic

The key to containing Covid-19 is to speak to people in their own languages. Shola Lawal

Mororo Moros. Corolla Virus. Coro. These are the aliases that the deadly novel coronavirus goes by in West Africa. As the virus pummels Europe and the United States, governments here are scrambling to prevent an outbreak by enforcing lockdowns and ramping up public health campaign efforts.

But reaching people that don’t speak or understand English - more than half the population in some cases - is hard. Explaining to them that the virus makes no distinction between poor and rich is not straightforward.

In countries where families live ten to one room, a disease that’s forcing people apart is senseless. Prevention measures come in terms so foreign that there are no literal translations for them in many local languages. But to save the lives of millions, finding the words to communicate the severity of the pandemic is crucial.

It’s why Freetown-based publicist Vickie Remoe got to work the minute neighbouring Ghana and Nigeria announced index cases of the virus. Remoe, the founder of marketing company VR & C, knew the virus would soon knock at Sierra Leone’s doors. So when the country’s first case was announced on March 31, she and her team had created fliers and radio dramas urging people to Was yu an, Dey na os and Kip tu yusef. In the widely-spoken Krio language, these translate to wash your hands, stay at home and keep to yourself.

Prevention measures come in terms so foreign that there are no translations for them in local languages.

“My instinct was if we are producing anything it has to be in a language that’s accessible to the majority of people and that language is Krio,” Remoe told the Mail & Guardian.

Communicating ineffectively to rural populations in an outbreak can be dangerous. At least 11 health workers...
were killed in the Democratic Republic of Congo during the most recent Ebola outbreak in the east of the country, in part because of the failure to convince some local communities that medical professionals could be trusted.

In North Kivu, where the virus hit hardest, responders used medical terms like the French phrase ring de vaccination, which refers to a method of vaccinating suspected Ebola patients. But the phrase evoked images of violence: in the local Kinande language, it translated to boxing ring. The resulting distrust of health workers made them targets of deadly attacks.

Remoe said she particularly wants to reach children who may not understand why they can’t go to school. She knows how it feels, she said, having lived through the Sierra Leone war with little understanding of why people were hurting each other. Now, kids listen to the story of folklore character Koni Rabit, on Freetown’s radio stations. Koni Rabit, who stubbornly refuses to stay home eventually has someone cough on her and infect her with a disease.

The drama series is also accessible to unlettered adults, Remoe said. It’s killing two birds with a stone. Still, translating terms like self-quarantine is challenging. It has no reference point in Krio, Remoe said.

In Iseyin, an agrarian town in Nigeria’s southwest, villagers have heard of kokoro korona. They’ve also heard it’s spreading because of G5 (5G) masts. It means Sola Fagorusi must plan carefully. Fagorusi is the team lead at Onelife initiative, an NGO spreading awareness of the virus. With a spreadsheet, his team finds the right Yoruba words to explain how the virus spreads. The words they use must be factual and appropriate in the local context.

**Communicating ineffectively can be dangerous.**

“Explaining social distancing is one of the toughest things here,” he told the M&G on a rainy Wednesday morning while doing his rounds. Most people understand handwashing, he said. Using oti - alcohol - to wipe hands after touching surfaces is easy. But distancing is a no-go area.

“This is how we live,” villagers protested when Fagorusi told them e je ka sun fun ra wa - let’s stay feet apart. At one point, even as he spoke, someone reached out to touch him.

As for stay-home directives? “That’s just not going to happen,” Fagorusi said. Many of the villagers live on daily wages. The most they are willing to do, they told him, is not shake hands.

Using posters in local languages may not be sufficient. They are handy for frontline responders and semiliterates, but in-person campaigns work best, Fagorusi said. His team gets to answer the many questions locals have, even if they expose themselves in the process.

“We are a talking and listening people,” Fagorusi said. “We love to talk and we love to be heard.”
On Wednesday, Donald Trump announced that he would suspend funding to the World Health Organisation, claiming that the organisation did not raise the alarm early enough about the severity of the Covid-19 crisis. Few others agree. Here’s the story in quotes.

“I am directing my administration to halt funding while a review is conducted to assess the World Health Organisation’s role in severely mismanaging and covering up the spread of the coronavirus.”

Donald Trump, US President

“The WHO’s budget is around the equivalent of a large US hospital, which is utterly incommensurate with its global responsibilities. If the US president were a global health leader, he’d be leading a call to at minimum double the WHO budget in the face of this pandemic.”

Lawrence Gostin, public health law professor at Georgetown University

“Please don’t politicise this virus. If you want to have many more body bags, then you do it. You have many other ways to prove yourselves. This is not the one to use for politics, it’s like playing with fire.”

Dr Tedros Adhanom Ghebreyesus, WHO Director-General

“Halting funding for the World Health Organisation during a world health crisis is as dangerous as it sounds. Their work is slowing the spread of Covid-19 and if that work is stopped no other organization can replace them.”

Bill Gates, Co-Chair of the Gates Foundation

“The African Union (AU) fully supports WHO and Dr Tedros. The focus should remain on collectively fighting Covid-19 as a united global community. The time for accountability will come.”

Moussa Faki Mahamat, Chair of the AU Commission
Global carbon emissions could drop by at least 5% this year because of the Covid-19 economic slowdown. That is more than the total emissions from all African countries each year.

The 5% figure comes from an analysis by climate publication CarbonBrief, and would be the single biggest emissions drop in history. Those emissions are trapping heat in the atmosphere and driving climate change around the world, causing everything from more and worse floods to droughts and wildfires.

This record drop is not enough, however: the United Nations has said that a drop of 7.6% is needed every year until 2030. That rate of decrease should keep global heating to below 1.5 degrees Celsius, a number that African states have fought for. Anything above this will result in dire consequences for the continent.

The world has already heated by over one degree Celsius, according to the UN.

Plans to prevent further warming were meant to be strengthened this year, ahead of the next round of international climate negotiations in Glasgow at COP26. With Britain hosting, the hope was that it would use its formidable diplomatic reach to convince countries to be more ambitious. Thanks to Covid-19, the negotiations have been put back a year.

China, the world’s largest polluter, is reportedly delaying its new climate plan until the outcome of the presidential election in the US. It is also trying to kick-start its economy by signing off on a new wave of coal-fired power plants. If every country follows the same path, the 5% drop could be quickly eclipsed by an even greater increase in carbon emissions.
Jack Ma vs Bill Gates: does Africa need another benevolent billionaire?

The latest member of the global philanthropic elite could learn from what his peers have done right, and wrong. Simon Allison

On a grey Sunday morning last month, a high-profile reception committee assembled on the tarmac of Addis Ababa’s international airport. The Ethiopian health minister, Lia Tadesse, was there; as was South Africa’s ambassador to the African Union, Edward Xolisa
Makaya. To underscore the significance, John Nkengasong, the director of the Africa Centres for Disease Control, took a break from overseeing Africa’s response to the coronavirus pandemic to wait on the runway.

“This is huge,” Nkengasong said, when the plane from Guangzhou finally arrived.

There were no VIPs on board. But there was plenty of very important cargo. 5.4 million face masks. 40,000 sets of protective clothing. 60,000 sets of protective face shields. More than a million coronavirus detection kits. All courtesy of Chinese billionaire Jack Ma, who was using this moment as part of a campaign to announce himself as a global philanthropist. The supplies were a donation, to be distributed equally among African countries.

“This is a huge shot in the arm,” said Rwandan President Paul Kagame.

Jack Ma is no ordinary billionaire, if such a thing exists. He made his fortune - now in excess of $40 billion - during China’s tech boom, by founding Alibaba, the wildly successful online retailer. Not bad for a man who, in his own words, can barely use a computer. “I’m not a tech guy. Up till now, when I use a computer, I can just send and receive emails,” he said during a recent United Nations panel discussion (much to the amusement of his fellow panellist, Melinda Gates of the Bill and Melinda Gates Foundation).

**Donation diplomacy**

Ma no longer takes an active executive role in the company. Instead, he has become, as Quartz put it, the “best-known face of corporate China”: a charming, quirky and altogether more likeable answer to the likes of Mark Zuckerberg and Elon Musk, and a fixture at high-profile international conferences and trade forums.

Whether by design or not, Ma has also become a potent weapon in China’s soft power arsenal. When it comes to softening China’s image, and projecting a friendly face - well, they don’t come much friendlier than Jack Ma. Although Ma has dabbled in charitable projects before, mostly within China, his much-publicised response to the coronavirus...
pandemic - featuring donations not just to Africa but across the world, including one million masks and 500,000 testing kits to the United States - has catapulted him into the league of the global philanthropists.

This is no accident. On the eve of his retirement, Ma told Bloomberg that he was inspired by Bill Gates, a fellow tech billionaire, to set up his own charitable foundation. “There’s a lot of things I can learn from Bill Gates,” he said.

The Bill and Melinda Gates Foundation is the largest private charity in the world. Since 2000, it has disbursed billions of dollars in support of public health goals that it has identified, pouring money into combating diseases such as HIV/AIDS, malaria and tuberculosis. The Foundation is so influential in the public health arena that it gets its own vote at the World Health Organisation; and its funding underpins the health systems of several African countries.

If Jack Ma really does want to follow in the footsteps of Bill Gates, he has got a long way to go.

“It’s great that Jack Ma has promised some Personal Protective Equipment and diagnostic tests, but it’s not significant in financial terms or in level of effort compared to the investments that the Bill and Melinda Gates Foundation has been making in Africa for decades, and in global health institutions,” said Amanda Glassman, executive vice-president at the Centre for Global Development. The Gates Foundation has pledged $100 million towards finding a vaccine for Covid-19, in addition to the
funds it has already committed to pandemic prevention.

Other commentators have raised questions over Jack Ma’s independence from the Chinese government. “It’s a kind of donation diplomacy,” said Cobus van Staden, a researcher at the South African Institute of International Affairs and the co-host of the China in Africa Podcast. “It’s always difficult to say how orchestrated this is by the Chinese government. From an outside perspective, it doesn’t look like an official Chinese government initiative, but it certainly has complete support and approval and facilitation from the government.”

No quick fix
For African countries, an even bigger question looms over Jack Ma’s arrival as a charitable force: does the continent really need another benevolent billionaire?

There is no easy answer. “My experience of foriegn aid in South Africa around the HIV/Aids epidemic was positive and negative, if that makes any sense,” said Susan Goldstein, deputy director of Wits University’s Centre for Health Economics and Decision Science. On the one hand, donors were able to deliver desperately-needed funding for treatment for HIV when the government was failing to take responsibility; on the other hand, donors were simply providing a quick fix for a failing system, rather than pushing for a whole new system.

“These billionaires gain from the way that the society functions, so are not about to overthrow it or change it,” said Goldstein.

Billionaires also have an unfortunate habit of skewing health priorities towards whatever they have decided to prioritise, said Unni Karunakara, the former international president of Doctors Without Borders and a public health expert. “As people who have money, they can put the money wherever they want it, however they want it. But they should be mindful of the fact that it’s not up to individuals to set global priorities when it comes to global health.”

As Jack Ma embarks on his own philanthropic journey, these are words he would be wise to heed. For now, however, pragmatism rules: “As a continent we are going to need all the assistance possible,” said Shakira Choonara, an independent public health practitioner and member of the African Union Youth Advisory Council. “Right now, Jack Ma...is a crucial part of the response.”
SO, YOU THINK YOU’RE A REAL PAN-AFRICAN?

Take this quiz to find out how well you really know our continent.

1. In his lockdown exercise video, released on social media, how many push-ups did Yoweri Museveni complete?
2. What is the largest city in Tanzania?
3. Sadio Mane, the 2020 African Footballer of the Year, is from which country?
4. Jack Ma is the founder of which company?
5. Which West African president released a song urging citizens to wash their hands?
6. Are South Africans allowed to purchase alcohol during their lockdown?
7. The Africa Centres for Disease Control is based in which city?
8. Which country has the longest coastline in Africa?
9. From Brazzaville, if you look across the Congo River, what city can you see?
10. How many African capital cities begin with the same letter that they end with (a non-African example: Oslo)? Name them.
11. Which country’s currency is the Birr?
12. What is the capital of Mali?

HOW DID I DO?

WhatsApp ‘ANSWERS’ to +27 73 805 6068 and we will send you the answers immediately.

0-4 “I think I need to start reading more newspapers.”
5-8 “I can’t wait to explore more of this continent.”
9-12 “My friends call me Kwame Nkrumah.”
He South African government claims that drinking alcohol makes it difficult for the body to fight infections like Covid-19. Current lockdown regulations in South Africa ban the sale and transport of alcohol.

Question: Is the government’s claim that alcohol weakens your immune system backed by scientific evidence? We checked.

The immune system is an organism’s internal defence against infection. The human immune system is complex, using several mechanisms to prevent or fight disease.

When the immune system detects a foreign body – such as the new strain of coronavirus – it releases chemicals and specialised cells to try destroy it. There are many of these defence mechanisms, and they all work in different ways to destroy the invaders.

Alcohol’s effects on the immune system have been known to experts for a long time, according to a 2015 issue of the journal Alcohol Research: Current Review. These include slower immune response and slower recovery rates.

A Nigerian study in the African Journal of Biomedical Research found that these effects were especially pronounced if an alcohol user also smoked cigarettes.

Conclusion: Studies have found that alcohol reduces the immune system’s ability to fight disease.

Several experts told Africa Check that the claim was correct, citing extensive research into the effects of alcohol on the immune system. In particular, heavy alcohol use has been shown to have negative long term effects on immune health. Data shows that most South Africans who use alcohol are binge drinkers.

There is some evidence that moderate alcohol consumption is harmless, but only in specific circumstances. Experts say the available research is not clear on how much alcohol a person could consume without damaging their immune system.

This is an edited version of a report written by Africa Check, a non-partisan fact-checking organisation. View the original piece on their website: https://bit.ly/AfricaCheck1
DRC: On the verge of defeat, Ebola strikes back

Sarah Smit

Last week health workers in the Democratic Republic of Congo (DRC) were getting ready to take a collective sigh of relief. The Ebola outbreak in the country — the second-largest on record — was about to come to an end.

But last Friday, the country’s health ministry confirmed that a 26-year-old man in Beni in eastern DRC had died from the virus.

News of another death, this time of an 11-month-old girl, quickly followed — dashing hopes the outbreak would be considered over as the fight against the coronavirus intensified.

“This is a bit of a nightmare scenario for us,” said Robert Ghosn, head of operations for the International Federation of Red Cross in Goma, 242km south of Beni.

“We were really hoping that Ebola would recede before Covid started hitting this part of the DRC. And that did not happen. So it is very, very difficult.”

By Tuesday there were 235 cases of Covid-19 in the country and 20 deaths. Most of these cases are in the country’s capital, Kinshasa.

The DRC “is probably the most fragile place on Earth today”, Ghosn says. “There was a lack of provision of basic services already before Ebola, which hit the DRC for more than 18 months and now is still ongoing. Now Covid is coming.”

But both local and international health workers in the country have pledged to continue fighting both diseases. “Although the ongoing Covid-19 pandemic adds challenges, we will continue this joint effort until we can declare the end of this Ebola outbreak together,” said Dr Matshidiso Moeti, WHO Regional Director for Africa.

False hope: After 52 days without any new cases, a 26-year old man in Beni, DRC, died from Ebola last week.
Photo: John Wessels for AFP
In 1994, the year I turned 11, my uncle Josiah Ssesanga was admitted to Mulago hospital, Uganda’s biggest, with cryptococcal meningitis. He was HIV-positive. Between him and certain death stood Uganda’s tattered postwar health system, and nobody was naive about his prognosis. The end of his life was months away at best.

Treatments for HIV/Aids existed in other parts of the world, but were very limited in Uganda. So my uncle agreed to participate in a clinical trial.

The day after he was admitted, “people from some American project” as my aunt, his sister, recalls it, came to the family with a mountain of paperwork. The “project” was a clinical trial seeking to test a particular combination therapy. “There were about three pages on possible side effects of the drug. We were also warned that he would need to keep taking the drugs even if the project ended,” she recalls. “But for most of us, in that hour, our answer was yes. We were desperate. Anything to stop that pain.”

Cryptococcal meningitis causes very severe headaches. In my uncle’s case, the headaches literally drove him out of his mind. He often needed to be physically restrained.

As part of the trial, he was treated with a combination of two drugs. Within two weeks, he was out of hospital. In the subsequent months, he completed his degree at university and went on to become an inspector of schools, checking in regularly as an out-patient with the researchers. These visits often entailed painful diagnostic lumbar punctures to track his recovery.

Several months later, the clinical trial ended. My uncle was told that if he wanted to continue the treatment, he would have to pay for it himself. He quietly stopped taking the medication, and stopped visiting the hospital. He needed 14 pills a week, and the family could not afford even two pills. Three years later, he died, in pain and without

My late uncle, and the ethics of clinical trials in Africa

Despite the long history of medical racism, any potential Covid-19 vaccines must be tested in Africa — but not only in Africa. Lydia Namubiru
access to antiretrovirals.

My family is proud that my uncle contributed to the development of combination therapy, which has restored hope and dignity to so many AIDS patients around the world. But we are also still heartbroken that he died for lack of access to the same therapy.

In keeping with a long history of medical racism, African patients were used as test subjects for new drugs - even though the immediate beneficiaries of those drugs would be anyone but them.

Recently, two French doctors suggested that coronavirus vaccine trials should be targeted at African patients - to widespread anger across the continent. The Director General of the WHO, Tedros Adhanom Ghebreyesus, described the doctors’ comments as a hangover from a “colonial mentality” and promised that “Africa can’t and won’t be a testing ground for any vaccine.”

I understand the anger. My family knows all too well what it means to be a testing ground.

But despite the painful history of medical racism, vaccine trials can and must happen in Africa - as well as in other parts of the world. Excluding the continent from ongoing Covid-19 research would be a serious problem, and risk leaving Africa last in line when it comes to receiving any new vaccines. Instead, we must ensure that these trials are conducted with the highest ethical standards, and are subject to the medical ethics review boards which have been set up in many African countries.

Rather than pushing against vaccine trials, we should be pushing to change or flout restrictive global patent laws which have long prevented the citizens of poorer countries from obtaining life-saving drugs. These laws may make it too expensive for many Africans to obtain any coronavirus vaccine, when it is finally approved for use.

That is a solution that may have saved my uncle’s life. It could yet save others.
Sierra Leone: Malaria spiked during Ebola. Will it happen again?

Abdul S Brima

As far as diseases go, malaria is the biggest killer on the African continent — although, thanks to impressive continent-wide interventions, it is not as lethal as it used to be. Between 2000 and 2015, the number of malaria cases in Africa declined by 42%, according to the World Health Organisation, and the number of malaria deaths dropped by two-thirds.

This impressive progress is under threat because of another disease — Covid-19. As African countries scramble to respond to the pandemic, there is a risk that they neglect the continuous public health measures necessary to reduce cases of malaria.

It has happened before. When the first case of Ebola was recorded in Sierra Leone, on May 24 2014, it had a devastating effect on the country’s healthcare system. Among the 3589 Ebola-related deaths were at least 221 healthcare workers, an enormous loss in a country where there is, on average, just one nurse per 10 000 people. At the same time, poor communications and distrust of the government means that people became increasingly reluctant to go to hospital — after all, that is where almost all of the Ebola victims would go to die.

During this time, there was a surge in deaths attributed to malaria. Deaths that, in normal circumstances, should and would have been prevented. The same was true of deaths attributed to HIV and tuberculosis. Overall, a study in the Emerging Infectious Diseases journal estimated an extra 2819 people died from malaria, HIV and tuberculosis.

These statistics should provide a stark reminder to policymakers today. Even while governments fight to contain the coronavirus, they cannot neglect the treatment of other diseases such as malaria.

As African countries scramble to respond to Covid-19, there is a risk that they neglect the continuous public health measures necessary to reduce cases of malaria. It has happened before.

Abdul S Brima is a journalist from Sierra Leone who has covered public health extensively. He is a Media Fellow of Germany’s Konrad Adenauer Stiftung
The outlook for South Africa’s economy - Africa’s second largest - is bleak. The International Monetary Fund (IMF) expects it to contract by 5.8% as a result of the massive disruptions caused by Covid-19.

South Africa is expected to be hit much harder than most other African economies. The IMF’s prediction for sub-Saharan Africa as a whole is a contraction of 1.6%.

The government is reported to be considering approaching the IMF for emergency funding, although the institution’s senior resident representative in South Africa, Montfort Mlachila, said this week the country has not made a formal request for funding to the global lender - and the discussions would only take place once a request has been made.

Earlier, finance minister Tito Mboweni said South Africa would look to various funding avenues to support “Covid-19 specific packages” rather than normal budget items. Mboweni and the ruling African National Congress have been loath to approach lending institutions that might demand terms with their loans, but said the country was looking at all options for funding.

The IMF has already made significant interventions in other African countries. It approved immediate debt service relief to 25 countries; 19 of them in Sub-Saharan Africa. This allows countries to cover their debt obligations to the IMF over the next six months, allowing them to spend money instead on programmes that tackle Covid-19.

This week also saw Ghana and Senegal being approved for the disbursement of US$1 billion and US$442 million respectively under the IMF’s Rapid Credit Facility and the Rapid Financing Instrument.

“This is unprecedented in IMF history to have so many countries ask for financial assistance at the same time,” Mlachila said.

Thando Maeko and Tshegofatso Mathe are Adamela Trust business reporters at the Mail & Guardian
Many residents of Harare, Zimbabwe's capital city, do not buy their groceries locally. “Everyone knows that if you have a big family you can't buy here, it's expensive,” said Brenda Mazviita. Instead, they do their shopping across the border at the supermarkets in South Africa, where the shelves are always full and the price remains stable.

Mazviita does not go herself, of course. She gives her shopping list to someone who will do it for her. The omalayitsha - the word roughly translates from the shona as ‘someone who transports goods informally’ - usually adds a 30% fee to the cost of the groceries.

But when South Africa began its national lockdown in late March, it also locked down its borders - including Beit Bridge, the main crossing between Zimbabwe and South Africa. That means that Mazviita is having to join long queues outside Harare supermarkets. “I am getting desperate. I ran out of cooking oil and I could only get used cooking oil from South Africa which is cheaper,” she said.

The border closure is also bad news for the omalayitshas. “Since the border closed, I am stranded,” said Obert Kamudyariwa. Usually he makes two trips to South Africa each week, which earns him R6000 (US$320). Now he’s in limbo. “Every day I receive at least three calls from people asking me when I think I will go back to SA as they are running out of food. Without South Africa, some people who will survive Coronavirus will die of hunger.”

Effie Ncube, a spokesperson for Zimbabwe’s National Consumer Rights Association, warned that the closure of Beit Bridge could be devastating for Zimbabwe’s economy, which relies on South Africa to supply essentials like maize meal, cooking oil, and soap. “Without that border being open, it will be difficult to sustain lives in Zimbabwe,” he said. “Its importance is not limited to Zimbabwe. It takes food to Zambia, Malawi and the Central Africa Republic. The border is an important trading route.”

"Without that border being open, it will be difficult to sustain lives in Zimbabwe."
The Big Picture

Shining light: This photo was taken in Khartoum in June last year, in the uncertain period following the Sudanese revolution which ousted the dictator Omar al-Bashir. In it, a young man recites poetry while demonstrators chant slogans calling for civilian rule. The photo was chosen as the 2020 World Press Photo of the Year. Yasuyoshi Chiba, the photographer, said: “This moment was the only peaceful group protest I encountered during my stay. I felt their undefeated solidarity like burning embers that remain to flare up again.” (Photo: Yasuyoshi Chiba for AFP)