

## Cadernos de Estudos Africanos

41 | 2021 Crossing the Lines

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### Ndangwa Noyoo



#### Electronic version

URL: https://journals.openedition.org/cea/6546 DOI: 10.4000/cea.6546 ISSN: 2182-7400

#### **Publisher**

Centro de Estudos Internacionais

#### Printed version

Number of pages: 195-199 ISSN: 1645-3794

#### Electronic reference

Ndangwa Noyoo, "Afterword: COVID-19 Developmental Impacts, Challenges and Responses: Perspectives from below and local agency", *Cadernos de Estudos Africanos* [Online], 41 | 2021, Online since 08 February 2022, connection on 09 February 2022. URL: http://journals.openedition.org/cea/6546; DOI: https://doi.org/10.4000/cea.6546



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# Afterword: COVID-19 Developmental Impacts, Challenges and Responses: Perspectives from Below and local agency

# Ndangwa Noyoo

Department of Social Development University of Cape Town Rondebosch, 7710 Cape Town, South Africa

ndangwa.noyoo@uct.ac.za

Esta publicação é financiada por fundos nacionais através do Camões - Instituto da Cooperação e da Língua Portuguesa, I.P.

In late 2019, there was an outbreak of a new and extremely deadly virus in the city of Wuhan in China. This virus was identified as the Coronavirus (COVID-19). Immediately after this, many Chinese citizens were hospitalised or lost their lives due to COVID-19. In early 2020, the virus rapidly spread to other parts of the world and infected countless people with many losing their lives in the process. Due to this dangerous and unprecedented situation, the World Health Organisation (WHO) declared COVID-19 a global pandemic in January 2020. It would not take long before Africa identified its first case of COVID-19 and this was recorded in Egypt on 14 February 2020. The virus had reached the continent through travellers returning from hotspots in Asia, Europe and the United States. While the virus was slow to reach the continent, compared to other parts of the world, infection grew exponentially and continues to spread to date (WHO, 2020).

Given Africa's weak health and social infrastructure prior to the outbreak of the pandemic, many health experts and observers were afraid that the continent would be decimated by the pandemic. Curiously, the pattern of COVID-19 infections and deaths did not unfold as in other parts of the world, especially Europe and the United States, where there were uncharacteristically high numbers of fatalities despite these parts of the world having state-of-the-art hospitals and medical facilities. Africa's "unique" position vis-à-vis COVID-19 was attributed to various causalities raging from a youthful population to countries not adequately reporting their numbers of fatalities. These hypotheses have remained inconclusive, however. Since 2020, various "waves" of COVID-19 have besieged African countries, with some either in their third wave or having just passed through it due to various variants of the virus. Encouragingly, different African countries are now rolling-out vaccination programmes under the auspices of the COVAX initiative, which is co-led by the WHO, the United Nations Children's Fund (UNICEF) and other partners. Despite this, the North-South divide has become quite stark and is typified by inequities referred to as "vaccine imperialism". This situation is expressed in the manner in which developed nations have hoarded vaccines for themselves and desisted in sharing them equitably with developing nations. This has happened even though many Western pharmaceutical firms have managed to produce vaccines because they have manufacturing plants in the developing world. Also, these firms had conducted trials in the same developing countries, to arrive at a stage where their vaccines could be deemed effective. Nevertheless, after criticisms from various quarters, the shipment of the Johnson and Johnson COVID-19 vaccines from Africa to Europe was halted.

The cited "vaccine imperialism" and other inequities between the Global North and South, which have been compounded by COVID-19, partly mirror this special journal's theme. This theme, among other issues, points to the lopsided type of development "partnerships" or initiatives that African countries have pursued since their independence at the behest of the Global North. Indeed, the said approach has mostly favoured the Global North while entrenching Africa's underdeveloped status. While Africa's development endeavours were initially informed by classical "developmentalism" of the late 1940s and 1950s, the neo-liberal agenda seems to predominate in Africa's quest to develop itself nowadays. Between 1940 and 1980, classical developmentalism was the mainstream theory of economic development. It was adopted by the World Bank and other multilateral aid agencies to "dispense" "development" from their perspectives (Bresser-Pereira, 2020). After the 1980s, developmentalism was closely allied to the Structural Adjustment Programme (SAP) which attenuated the socio-economic gains made by African countries during the "golden age" of developmentalism in previous decades. With the insertion of the World Bank and IMF into the development equation of African countries, there seemed to be less room for policy autonomy on the part of African countries. Unsurprisingly, local agency was also denuded in indigenous development efforts across Africa during the top-down implementation of the SAP by different governments.

It is noteworthy that the prevailing global uncertainty triggered by COVID-19 has negatively impacted every facet of human endeavour, and not just the health sector. It has also hamstrung local agency, especially in Africa, as countries have again become more reliant on their Western development partners' support to contain the spread of COVID-19. The Organisation for Economic Co-operation and Development (OECD) (2020) argues that the pandemic negatively impacted global economies in three ways: (i) lower trade and investment from China in the immediate term; (ii) a demand slump associated with lockdowns in the European Union and OECD countries; and (iii) a continental supply shock affecting domestic and intra-African trade. The economic challenges wrought by the pandemic were and continue to be monumental in Africa, given the fact that the continent has the largest number of actors in the informal economy. According to the International Labour Organisation (ILO) (2018), 85.8% of employment in Africa is in the informal sector. In addition, the largest number of informal sector workers are women, who continue to be marginalised across Africa in many ways. It is important to note that people working in the informal economy in Africa are vulnerable to impoverishment, hunger, and disease, as they lack the necessary social protection coverage and support mechanisms if they lose their livelihood. These include waste recyclers, street vendors, transport workers, construction workers, domestic workers, and many more, for example, small peasants in rural or peri-urban areas that were producing for the urban market (ILO, 2020, p. 3).

Most local responses to COVID-19 in Africa have not been insulated from the broader global macro-economic and structural inequities that have rendered the continent underdeveloped and dependent on its former colonisers for development aid. Despite this seemingly helpless situation in Africa, there have been some innovative local responses which, if pursued post COVID-19, can propel Africa's development much faster. For instance, at the height of the pandemic in 2020, African countries such as Senegal developed capacities to test for the virus. Others, such as South Africa, began producing medical masks and personal protective equipment (PPE) which hitherto had been imported from China and Europe. Rwanda, in partnership with an American company, had local drones delivering medicine to people living in far flung communities in the rural areas. Furthermore, during the pandemic, there seemed to be more co-operation between the public sector and the private sector across the continent. If nurtured and supported, the aforesaid initiatives and others have the potential to make Africa more self-reliant and self-sufficient. Thus, there was and still is agency during this pandemic at the local level in Africa, notwithstanding the continent's development impediments inherited from the colonial era.

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