

Impact of COVID-19 in Africa: A scenario analysis to 2030 (July 2020)

Policy responses and recommendations

Jakkie Cilliers

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Africa has not been asleep at the wheel. In addition to country-level efforts, the African Union (AU) has established the Africa COVID-19 Response Fund, appointed AU COVID-19 Special Envoys to support resource mobilisation, and is seeking postponement of debt repayment and in some cases debt cancellation.

It has established an Africa Centres for Disease Control and Prevention (CDC)-led initiative for pool procurement and distribution of pharmaceutical products and health equipment to member states, and created ministerial-level task forces on health, finance, transport, trade and industries. [1]

In June 2020, AU chairperson Cyril Ramaphosa launched the Africa Medical Supplies Platform as a single online marketplace to enable the supply of COVID-19-related critical medical equipment in Africa. A summit on COVID-19 responses with China was also hosted.

Beyond the emergency policies to fight the pandemic and mitigate its associated short-term economic impact, there is an obvious need for policies to build future resilience and improve long-term growth prospects. To this end, four strategic priorities flow from our analysis of the COVID-19 crisis.

The first, and most urgent, is effective responses to Africa's emerging debt crisis. The second relates to the importance of increased and more effective health spending if the continent is to effectively respond to future pandemics. Third is the provision of safe water, improved sanitation and other basic infrastructure — something that Africa in general has underinvested in. The final policy priority is the necessity of spurring Africa's economic transformation to boost much more rapid and inclusive economic growth and compensate for the impact of COVID-19.

Debt

Concerns about Africa's increased debt levels have been growing for several years fuelled, in part, by large loans for infrastructure by countries such as Angola, Kenya and Ethiopia. Many countries have also shifted from concessional multilateral creditors such as the IMF and the World Bank to non-concessional debt on the commercial market with higher interest rates, lower maturities and higher refinancing risks.

In addition to pre-COVID-19 rising debt levels, African countries are now also borrowing additional funds to ameliorate the immediate impact of the pandemic such as for business relief and to provide social grants to the poor.

Whereas a debt burden of 70% of the GDP may not be a problem for an economy growing at 6%–7% per annum, it suddenly becomes a very large problem when growth rates decline to 2%–3% and that money is linked to commercial rates. Most countries on the continent also pay a premium based on perceptions of higher risk in Africa. The continent pays 5%–6% interest on 10-year government bonds compared to near zero in Europe and America. [2]

COVID-19 now probably means a debt crisis and may even serve as a tipping point that could see a return to some of the requirements associated with the establishment of the Heavily Indebted Poor Countries (HIPC) initiative by the World Bank and the IMF in 1996. HIPC provided debt relief and reduced debt service payments of up to 80% for eligible countries. [3] It saw, for the first time in their history, the IMF and the World Bank writing off their own debt.

For example, Sudan is at risk of relapsing into political instability and potential conflict. The impending crisis saw Sudanese Prime Minister Abdalla Hamdok write to the UN Secretary-General, indicating that COVID-19 poses 'profound challenges' to

the country's health system, economy, and society as a whole. He asked for financial and technical support to tackle the pandemic. [4]

The question is where to find additional financial means to respond to the crisis. Inevitably, the first option is to look in national budgets, including the amounts spent on debt payments which are generally larger, as a portion of the GDP, than that spent on health.

In Kenya, when the 2020/2021 budget report was presented to its National Assembly, it revealed that of the US\$15 billion total projected revenue collection, US\$8.5 billion (56%) would go to repayments on the country's US\$58 billion debt. [5] At this level, debt repayments squeeze out social investments and undermine the fight against poverty and inequality.

According to the IMF, Africa would need an estimated US\$114 billion in 2020 to manage the coronavirus. [6] Albert Zeufack, Chief Economist for Africa at the World Bank, stated that: 'Africa alone will not be able to contain the disease and its impacts on its own; there is urgent need for temporary official bilateral debt relief to help combat the pandemic while preserving macroeconomic stability in the region.' [7]

In addition to the Republic of Congo, Mozambique, Somalia, South Sudan and São Tomé and Príncipe that are already all in debt distress, Burundi, Cape Verde, Cameroon, Central African Republic, Chad, Djibouti, Ethiopia, The Gambia, Ghana, Kenya, Malawi, Mauritania, Liberia, Sierra Leone, Togo and Zambia are at high risk of debt distress. [8]

As the depth of the crisis becomes evident, the initial calls for a standstill are shifting to debt forgiveness and cancellation, including by China that operates bilaterally, outside of the Paris Club, and where contractual details are opaque. China is now the biggest bilateral creditor of Africa and is owed some US\$145 billion.

To supplement measures towards better revenue management, including from taxes, the World Bank now calls for adherence to five key principles to improve debt transparency and improve investment flows: [9]

- 1. Spell out loan contract terms and payment schedules
- 2. Full disclosure of the stock of public and publicly guaranteed debt, State Owned Enterprise liabilities, and debt-like instruments
- 3. Enable borrowers to seek relief from excessive confidentiality clauses so they can proceed with more transparent data reporting
- 4. Promote effective and prudent use of collateral and liens in sovereign borrowing; and
- 5. Insist that borrowers and lenders avoid violations of legal requirements of other creditors, such as negative pledge clauses.

At the G20 summit in April 2020, Africa called for a two-year debt standstill on all principal debt and interest payments to see if rebuilding and growth would resume. The G20 countries subsequently agreed on a limited standstill on bilateral payments that would postpone approximately US\$11.53 billion of payments due by poor countries this year, well short of the US\$44 billion debt relief that the AU envoys and African finance ministers are seeking.

Globally, 73 countries are eligible for relief under the Debt Service Suspension Initiative (DSSI) although some, such as Ghana that are at high risk of distress, are not participating in the initiative since opting for the relief could negatively affect the cost of existing loans from private lenders. [10]

In addition, Africans have called for the allocation of more IMF Special Drawing Rights to help withstand the shocks caused

by the pandemic. China subsequently joined the G20 plan for a temporary freeze on bilateral debt repayments, but it does not deal with private bondholder debt which makes up almost one-third of Africa's total debt load. [11]

Support from institutions such as the World Bank and the IMF are encouraging. However, as a recent blog by the Center for Global Development notes,[12] more borrowers will need grants, not loans. In addition, it is necessary to adjust the terms of such assistance to promote the sustainability of debt and repayment. [13]

Health and health spending in Africa

The epidemics of Ebola, Zika and now the COVID-19 pandemic demonstrate the global significance of new emerging diseases with potentially catastrophic effects. Yet most African countries are spending below the 2001 Abuja Declaration target of allocating at least 15% of public revenue to health. [14] Many, such as Ethiopia, also rely on significant levels of external funding, which may decline in the current environment. The COVID-19 pandemic necessitates significant additional health financing to prepare for, respond to and treat the disease, never mind expenditure on other health priorities. [15]

Given the global economic slump, it is clear that African countries will struggle to even maintain current levels of health expenditure. [16] The COVID-19 pandemic could, like Ebola in West Africa, result in resources being channelled away from basic healthcare services. The limited funds for medical research and development in Africa may also decline. Governments must therefore ensure that their focus on COVID-19 does not result in an increase in malaria, HIV/AIDS and tuberculosis (TB), among others. They should also invest in the different technologies that can produce vaccines.

According to an Imperial College study: 'Maintaining the most critical prevention activities and healthcare services for HIV, TB and malaria could significantly reduce the overall impact of the COVID-19 epidemic.' [17] The study found that 'in high burden settings, HIV, TB and malaria related deaths over five years may be increased by up to 10%, 20% and 36%, respectively, compared to if there were no COVID-19 epidemic.' [18] Decreases in vaccination rates compounded these challenges. [19]

A sharp focus is also required on maternal mortality rates. These rates may easily increase as the number of women giving birth in hospitals and health clinics drops, due to concerns about being infected and a health system seized with other priorities.

Because of the various factors at play, it is crucial that Africa and its development partners carefully consider investments in the healthcare system. The emphasis should be on domestic resources and cost-effective management of existing funds.

Africa also needs to prepare for the eventual availability of a vaccine against the novel coronavirus. In 2020 there were more than 220 projects under way globally to develop an effective vaccine, 16 of which had entered clinical trials, and hope is growing for a breakthrough. [20]

But once medicine or a vaccine is available, the global demand could quickly outstrip supply and it is probable that populations in poor countries will struggle to access these treatments. As the continent most likely to be severely affected in this regard, African leaders should make their voices heard.

Africa must enhance its domestic research and development, and vaccine production capability to avoid remaining a net consumer that would prevent the continent being continuously dependent on external supplies. African countries with

proven capacity must be encouraged to undertake domestic COVID-19 vaccine production using local isolates and well-established vaccine technologies. This is an area in which the AU and the Africa CDC should play an important role. [21]

In response to growing awareness of the challenges in this regard, the European Union (EU) has secured nearly US\$8 billion to help ensure universal and affordable access to COVID-19 medication, including supporting a 'people's vaccine'. On 19 May 2020, the World Health Assembly called for equitable access to vaccines and treatments against the virus. Then there are the various financial instruments by the global vaccine alliance Gavi aimed at incentivising vaccine manufacturers to produce sufficient quantities of COVID-19 vaccines, and to ensure access for developing countries. [22]

The successful rollout of a vaccine in Africa would involve simultaneously navigating the complex interplay of poor health systems, the challenge of maintaining treatments of other diseases such as malaria, as well as managing insecurity and political instability. Countries such as Chad, Mali, the DR Congo, South Sudan and Somalia have limited infrastructure, weak political institutions, high burdens of poverty and large displaced communities that will complicate the delivery of a vaccine, in addition to their existing high disease burdens such as from malaria. [23]

Other important issues may also fall by the wayside such as limiting access to sexual and reproductive health and increasing gender-based violence. Given the importance of advancing Africa's demographic dividend with all its attendant advantages, much greater efforts are required to roll out modern contraceptives and to use the COVID-19 pandemic to refocus Africa on the essentials of basic healthcare.

Among the measures required are:

- Adequate investment in preventive measures, including education and awareness campaigns around hand washing, social distancing and overall responsible behaviour by the general public.
- · Adequate allocation of funds to public healthcare facilities where the majority of the population can access treatment.
- Greater investment in primary healthcare and capacity building for basic testing and diagnostics, particularly in rural areas.
- Creating a flexible operating framework to ensure adequate healthcare personnel through simplified hiring processes, including greater collaboration between public and private hospitals.
- Promoting better cooperation between national, sub-national and local authorities that engage to build on local knowledge and capacity, especially that acquired by countries that have experienced epidemics like Ebola.
- Creating disease and public health surveillance systems to systematically collect, analyse and monitor data to establish trends, and predict and minimise havoc from disease outbreaks.
- Agitating for better, transparent and efficient procurement systems. Africa is currently facing a shortage in testing
 equipment owing to global demand and competition. Having a united voice and action plan on a continental level could
 provide additional traction in this regard.
- Much greater transparency, with prioritised and efficient use of available resources, is necessary to ensure optimum results in combating the disease.
- Apart from greater integration of scientists into public policy debates, promoting innovation, use of technology and partnerships in medical research and infrastructure are crucial to cut costs.

- Re-engineering health systems in Africa to broader visions beyond COVID-19, to cater to specific needs of different groups of people in cities and rural areas.
- · Generally strengthening governance in the health sector to improve the quality of health services.
- Finding ways to partner with private healthcare service providers to unlock their capacities, such as is occurring in South Africa.
- International support for the above via funding and technical support.

The next pandemic that Africa faces could be more deadly than COVID-19.

Poor levels of access to water, sanitation and hygiene (WaSH)

It is clear that Africa's high communicable disease burden reflects and contributes to its lower levels of human development compared to other regions globally. Inadequate access to clean water, proper sanitation and hygiene is central to this burden.

It is therefore not surprising that Africa's urban citizens have some of the lowest levels of access to basic services worldwide. In fact, access to modern medicine, rather than proper planning and water, sanitation and hygiene (WaSH) infrastructure, has been helping to keep epidemics and ill health at bay in much of urban Africa — until COVID-19 further underlined the deficit in basic infrastructure. [24]

Given the low levels of access to safe water, sanitation and hygiene services, Africa finds itself at a disadvantage in tackling the COVID-19 contagion. How does one undertake the most basic countermeasures, such as washing of hands, without access to clean water?

Poor access to WaSH is a well-established contributor to the global burden of disease that inhibits sustainable development, and which is complicated by rapid urbanisation. Urbanisation in Africa has seen the rapid growth of large informal settlements that do not have the basic infrastructure, such as safe water and waterborne sewage, to cope with the large influx of people on top of natural population growth. Many housing units are almost exclusively self-constructed and neighbourhoods are organised independently of the central governing authority.

Africa's urban population is forecast to more than double by 2050, adding more than 800 million people to Africa's cities. The UN Population Division anticipates that between 2018 and 2035, all ten of the world's fastest growing cities will be in Africa and 21 will be in the top 30. [25] Twelve of these 30 cities are in West Africa, four of which are in Nigeria, and they will add about 200 million people to urban areas in Africa by 2050.

Hypothetically, the centralisation of service delivery points for water, sanitation and health in urban areas should make service delivery easier, compared to the challenge of rolling out healthcare or sanitation in sparsely populated rural areas. However, most of Africa's cities are poorly designed, already congested and growing rapidly.

Lack of adequate access to improved hygiene facilities and safe water are even more dire in rural areas. The implications are widespread and go beyond just facilitating the spread of communicable diseases and other health issues like malnutrition and stunting. Inadequate access to WaSH services in rural areas also aggravates existing social and gender inequalities. Women and girls in particular spend more time travelling long distances to fetch water. This not only predisposes them to greater risk of violence, but they are also forced to forego education.

The lack of access to safe water therefore impedes an effective response to COVID-19 in many countries and is compounded by the widespread practice of water sharing among households. Although there is currently no evidence that the virus can survive in drinking water, the act of water sharing or the need to fetch water can facilitate COVID-19 transmission through close interpersonal interactions. [26]

The lack of access to safe water in Africa, particularly in urban areas, is a function of poor management and outdated infrastructure that has not kept up with growing demands for WaSH services. In the short term, government bodies charged with management and delivery of water should ensure that:

- Clean water is delivered to people living in informal settlements on a regular basis, even if that is done by deploying water tankers.
- Portable sanitation services are provided at strategic points with regular cleaning services to maintain hygiene.
 Where possible, hand sanitisers are provided to mitigate situations where people have limited access to water. A number of beer breweries and distilleries have shifted production to hand sanitisers, and this is a way in which governments could spur small-scale business while combating the virus.
- Community awareness campaigns continue to encourage responsible behaviour and sensible individual decision making, even under difficult circumstances.
- · Underground water is better used, through boreholes and wells.

For the long term, governments should promote:

- Conscientious engagement with the private sector, establishing public-private partnerships in order to ensure the delivery of WaSH infrastructure.
- Appropriate urban planning and design to enable real-time planning and scaling of urban services.
- Increased investments in water and sanitation to adequately account for current and projected needs of populations to 2030 and beyond. Africa currently invests just 0.5% of GDP in water and sanitation. [27]
- Better management strategies for dealing with water stress. This includes greater investment and capacity in wastewater treatment plants and reuse of wastewater.
- Investment in modern and locally available material for water distribution and sanitation facilities. The infrastructure in many African cities dates back to colonial times.
- Viable provision of water: many African countries can barely manage the costs of supplyand distribution of water despite
 often disproportionate fees. Others rely on unsustainable subsidies, making it difficult for the private sector to augment
 the limited offerings from the public sector.
- Educational and awareness campaigns about conservation of water to ensure consumers play their part in water management.
- Local and biodegradable technologies in sanitation facilities to ensure even rural communities get access to hygienic sanitation.

African countries should make WaSH part of their economic recovery, encourage community engagement and explore new and localised ways for service delivery. Modern technology can help overcome much of Africa's basic infrastructure gap in poor urban and even rural communities. It can combine smart metering, pay-as-you-go, big data, geolocation and the internet of things to establish smart grids, solar home systems, map sanitation facilities, monitor decentralised water points, operate water ATMs in informal settlements, and manage waste flows.

Pay-as-you-go models allow low-income customers to make small incremental payments towards otherwise unaffordable goods and services including water and sanitation. The result is a sustainable business model able to respond to the challenges of the urban poor and urban poverty traps. [28]

Need for economic transformation in Africa

This investigation into the impact of COVID-19 underlines the immense challenges that Africa faces in achieving the SDGs and realising the ambitions set out in the AU's Agenda 2063 vision. Our forecast of a post-COVID-19 average economic growth rate of 2.6% (L scenario) to 3.2% (V scenario) is several times too low to change the continent's development prospects to 2030. Much more robust and inclusive growth is required.

Once the immediate crisis has been contained, governments will have to work hard to claw back the ground lost due to the pandemic. This will include putting their countries back on a pathway towards debt sustainability. That will, in turn, require a renewed determination to implement revenue-mobilisation, debt-management and public financial reforms. Employment-intensive growth will require private-sector investment and a facilitating business environment.

Indeed, the COVID-19 pandemic underscores the importance of accelerating structural transformation in African economies towards much more rapid, sustainable and inclusive growth — while also illustrating some of the potential pathways that could accelerate that transition. [29]

Commodity exports have been particularly hard hit, underlining the need for the diversification of Africa's economies to reduce the 'boom and bust' cycle so evident across much of the continent's development pathway. Regional trade initiatives such as the African Continental Free Trade Area and technology offer particularly important avenues to boost manufacturing in Africa as firms overcome constraints imposed by narrow domestic markets. The crisis has, however, created new, cross-sectoral and multi-stakeholder platforms between business, governments, international partners and civil society. These offer important opportunities for new ways of managing the economy in the future.

Already the African Export-Import Bank (Afreximbank), UNECA and the AU are jointly advocating for the removal of trade tariffs and other restrictions on medical supplies in Africa in the context of the COVID-19 pandemic. [30]

Similar to other regions, intra-African trade has relatively higher industrial content than Africa's trade with the rest of the world. The result is that the opportunity to trade freely in a much larger region will increase the value-add of intra-African trade with each passing year. That, and the extent to which global value chains are shifting and manufacturing is shifting closer to the consumer, could all be to the continent's advantage, but only if Africans make it clear that the continent is open for business.

African countries must push rapid digitisation as a pathway to more rapid and sustainable growth. Only a third of Africa is currently connected to the Internet and connections are often slow and unreliable. The Digital Transformation Strategy for Africa 2020 to 2030 already provides a framework for the development of a Digital Single Market for Africa and implementation must be speeded up. [31]

African governments need to partner with the private sector to expand access through provision of more bandwidth and

national access. Digitisation would unlock other productivity advancing initiatives such as in education and the more rapid formalisation of Africa's large informal sector.

COVID-19 also underlines the need for a more rapid transition to renewable energy. For example, on 28 May 2020 the World Bank, International Energy Agency, World Health Organization and International Renewable Energy Agency issued a joint statement agreeing that the real lesson from COVID-19 is that investments in renewable energy, both for homes and business, have remained profitable, while those in fossil fuel projects have declined. [32]

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