

COVID-19 PANDEMIC: THE SOCIO-ECONOMIC AND HEALTH CHALLENGES TO AFRICA.

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Abstract

Covid-19 is characterized as pandemic based on vastness of areas to which it has spread within its course. The human to human spread of the virus occurs due to close contact with an infected person, exposure to coughing, sneezing, respiratory droplets or aerosols. These aerosols can penetrate the human body (lungs) via inhalation through the nose or mouth. Within a short time, this virus caused an upheaval and unrest across the globe. This study employs the discursive analysis method to evaluate the social, economic and health challenges the pandemic has posed on Africa generally. The findings reveal that African countries have been affected in different ways by the coronavirus pandemic with unimaginable effects. The pandemic affects socio-cultural interactions and economic, intellectual and religious activities through the imposed social distancing policies that have different levels of strictness in several African countries. The implication of the findings is that social policies can affect the social and economic well-being of citizens. One outstanding social consequence of the covid-19 pandemic for African citizens is the creation of social anxiety among families and communities in the region. The phenomenon has also shown how vulnerable African societies are in facing health hazards. This study recommends that policymakers should enforce social policies that unite communities in hardtimes, to reduce social anxiety. African countries must strike a fine balance between protecting health, minimizing economic and social disruption, and respecting human right.

Keywords: Covid-19, Coronavirus, Pandemic, Africa, Health, Infection

Introduction

The Corona virus disease (Covid-19) has profoundly affected life around the globe. Isolation, contact restriction and economic shutdown imposed a complete change to the socio-economic environment in affected countries; and, as Fegert (2020) rightly noted, “they have the potential to threaten the health conditions of individuals significantly.” Even though this crisis can bring with it opportunities for personal growth and strengthen family cohesion in Africa, disadvantages may outweigh these benefits. For instance, speaking with reference to child and adolescent, Fegert noted that anxiety, lack of peer contact and reduced opportunities for stress regulation are main concerns (Fegert et al., 2020). This applies to every individual more or less. There is also the threat of increase in criminal acts and domestic violence.

Urgent research questions include understanding the consequences of social distancing and economic lockdown on the social, cultural, and health aspects of Africans, much of whom are already disadvantaged and marginalized. Research is also needed to assess the implications of policies enacted to contain the pandemic in various parts of the continent. In Nigeria, for instance, there was lockdown, suspension of economic activities, closure of schools, Churches and Mosques; social distancing, limiting of any public gathering to maximum of 20 persons; request to report self or anyone suspected with corona virus symptoms, compulsory use of facemasks; stay at home; washing of hands with sanitizer constantly under running water; home schooling and so on. There is need to estimate the risks and benefit ratio of these measures in order to be better prepared for future developments.

In Nigeria, schools and businesses were closed down as well as public places of worship. Social contacts were strongly limited and out-of-home leisure time activities canceled. Parents were asked to support their children with home schooling, while at the same time working from home. External support by other family members and social support systems fell away. Also, as Fegert (2020) remarks, in addition to “worries and anxieties related to COVID-19, the economic situation has worsened with high and rising levels of unemployment in all affected countries.” These, no doubt, have put so much pressure on the society and everyone was affected including children, adolescents, adults, old men and women, the poor and the rich. The resultant effects were distress and other health problems, crime and violence – some of which the society is still living with today.

As the pandemic is evolving through phases, this paper evaluates the impacts these phases might have on Africa’s socio-cultural and health situations. The paper highlights some key challenges and concerns for remedy across Africa during the different pandemic phases and offers some recommendations that can be adopted. During the acute phase, the main issue has been associated with social distancing, increased pressure on families and reduced access to support services. After the pandemic, economic recession and consequences of anxiety, stress, violence exposure and how to reorganize society became predominant issues.

Immunization campaigns covering measles, yellow fever, polio and other diseases have been postponed in many African countries in 20020. The introduction of new vaccines has been halted and several countries have reported running out of vaccine stock (Boakye-Agyemang, 2020). As things are return to normality and restrictions being eased, it is critical that they implement catch-up vaccination campaigns quickly. For as Boakye-Agyemang(2020) said, “the longer, larger numbers of children remain unprotected against measles and other childhood diseases, the more likely we could see deadly outbreaks flaring up and claiming more lives than covid-19.”

Covid-19 is one of the most serious health challenges in a generation, but it is also an opportunity to drive forward innovation, ingenuity and entrepreneurship in life-saving health technologies. The pandemic has put a fresh impetus on the need to invest in innovation and to put the right policies and strategic frameworks in place to unleash African ingenuity on the world. Indeed, African countries must strike a fine balance between protecting health, minimizing economic and social disruption, and respecting human rights.

The study is structured as follows. The first section is the introduction. The second section attempts a definition of coronavirus/covid-19. It also examines the challenges of different phases of the pandemic. The third section reviews some health issues related to covid-19 and how this has posed a challenge to the communal living in Africa. The fourth section looks at the challenges covid-19 has posed on African communities and families. The fifth explores some beneficial consequences of covid-19 pandemic. The unfolding of the pandemic in its last phase is the central focus of the sixth section. The seventh section presents a general evaluation of the socio-economic impact of the pandemic in Africa. Finally, the last section offers concluding remarks and indicates directions for future development in this field.

Corona Virus: Meaning and Phases

The coronavirus disease 2019 (covid-19) is a communicable respiratory disease caused by a new strain coronavirus that causes illness in humans (African Union, 2020). Scientists are still learning about the disease, and think that the virus began in animals (African Union, 2020). Indeed, Adnanshereen (2020) has stated that “Genomic analysis revealed that SARS-COV-2 is phylogenically related to severe acute respiratory syndrome-like bat viruses, therefore bats could be the possible primary reservoir.” It belonged to the Coronaviridae family of viruses. Corona represents crown-like spikes on the outer surface of the virus, hence, it was named coronavirus (corona – Latin for crown) (Adnanshereen, 2020). At some point, one or more humans acquired infection from an animal, and those infected humans began transmitting infection to other humans. The disease spreads from person to person through infected air droplets that are projected during sneezing or coughing. It can also be transmitted when humans have contact with hands or surfaces that contain the virus and touch their eyes, nose, or mouth with the contaminated hands (Adnanshereen, 2020).

Adnanshereen (2020) further explained that the subgroups of coronaviruses family are alpha, beta, gamma and delta coronaviruses. These viruses were thought to infect only animals until the world witnessed a severe acute respiratory syndrome (SARS) outbreak caused by SARS-CoV, 2002 in Guangdong, China. Only a decade later, another pathogenic coronavirus, known as Middle East respiratory syndrome coronavirus (MERS-CoV) caused an endemic in Middle East countries. Recently at the end of 2019, Wuhan an emerging business hub of China experienced an outbreak of a novel coronavirus that claimed millions of life. This

virus was reported to be a member of the beta group of coronaviruses. The novel virus was named as Wuhan coronavirus or 2019 novel coronavirus (2019-nCov) by the Chinese researchers. The International Committee on Taxonomy of Viruses (ICTV) named it as SARS-CoV-2 and the disease as Covid-19.

Initially, it was suggested that the patients infected with this coronavirus induced pneumonia in China may have visited the seafood market where live animals were sold or may have used infected animals or birds as a source of food (Adnanshereen, 2020). However, further investigations revealed that some individuals contracted the infection even with no record of visiting the seafood market. These observations indicated a human to human spreading capability of this virus, which was subsequently reported in more than 100 countries in the world. The human to human spreading of the virus occurs due to close contact with an infected person, exposure to coughing, sneezing, respiratory droplets or aerosols.

These aerosols can penetrate the human body (lungs) via inhalation through the nose or mouth. Within a short time, this virus caused an upheaval and unrest across the globe. The consumption of infected animals as a source of food is the major cause of animal to human transmission of the virus and due to close contact with an infected person (for reason already stated), the virus is further transmitted to healthy persons.

Meanwhile, the World Health Organization has characterized covid-19 as a pandemic. In an Opening Remarks of the director-General, he writes (WHO, 2020):

...we are deeply concerned both by the alarming levels of spread and severity, and by the alarming levels of inaction. We have therefore made the assessment that COVID-19 can be characterized as a pandemic. Pandemic is not a word to use lightly or carelessly. It is a word that, if misused, can cause unreasonable fear, or unjustified acceptance that the fight is over, leading to unnecessary suffering and death.

Unlike an epidemic which is content with spreading in a particular geographical area, the spread of a pandemic cuts across geographical areas. Thus, a pandemic is defined as “an epidemic occurring worldwide, or over a wide area, crossing international boundaries and usually affecting a large number of people” (Last, 2001).

Fegert (2020) divides the pandemic into three phases, and she identifies different psychological reactions within each phase. These phases are preparation phase, punctum maximum phase, and return to normality phase. In the first phase,

governments enforce social distancing, shutdown and general measure of hygiene in order to contain and mitigate the spreading of the infection. The second phase is the phase when the highest incidence of new cases is reached. This point was not reached at the same time by various countries. Some countries seem to have passed this point when many others have not yet reached it. The third phase is the period of recovery from the pandemic, which requires reorganizing and re-establishing services and practices.

None of these phases are actually attained together and at the same time by all affected countries. The return to normality phase is not an exception, and indeed, not all the countries have returned to normality even today. Those that have returned, reorganizing and re-establishing services are taking different speeds. Some countries were more reluctant to suspend the covid-19 policies than others. And of course, some individuals and groups make some gains out of those policies. In general, as Fegert noted, measure of containment and mitigation, such as social distancing and hygiene, can succeed in reducing the height of the *punctum maximum* (number of infected subjects), but with a more prolonged time course for returning to normality.

Health Related Risks and our Africanness

During the recent corona virus disease outbreak in China, the impact of the outbreak on health in Africa can be rated as moderate to severe, with depressive symptoms and anxiety being conditions most often observed (Wang et al., 2020). This crisis imposes multifaceted burdens on individuals, families, and groups throughout the period. According to Fegert (2020), these burdens include the socio-ecological impact of the pandemic, which is understood to be enormous. She noted that the environment of children was affected at different levels including community and family, as well as the individual child itself.

Since the pandemic was announced, at the community level, there has been disruption of, or more limited access to basic services, such as schools and routine medical care, market, banks, churches etc.

In affirmation to this reality, Fegert writes:

Several countries have seen a re-organization of hospital services with provisional care (including re-assigning doctors and nurses not usually involved in critical care). There have been closures, partial closures or reduced services of [in-patient] and day care facilities, with [outpatient] contacts reduced in some places to emergency cases only. Some hospitals have been unable to accept new [in-patients] due to the risk of infection (2020).

In Nigeria, one could observe a reluctance of people with ill health to avail themselves in the hospitals, and even a refusal to go for medical checkup. This is because, as Fegert noted above, there was a reduced service of day care facilities and services and some hospitals were not accepting new in-patients. Medical personnel wanted to protect and preserve their own lives. And often, even if a person is suffering from only headache, it would be labeled corona virus even in the hospitals. So people did not feel safe anymore going to hospital even when they were really sick. If one goes, the person might be avoided as a carrier of the virus, and the depression alone coming from this is capable of causing death.

One realizes that the common bond of unity and communality with which Africa has identified itself through the ages was rapidly moving to extinction. Even the immediate family members of a sick folk in the hospital could hardly afford a visit, talk less of touching or staying with the patient. If a person happened to cough in public, such person would be looked at with great suspicion and sometimes, those sitting or standing around would begin to relocate themselves to somewhere else. Ordinarily one would expect to get immediate help from people in such instance, but the reverse was the case because everybody wanted to preserve their own lives. The Africanness of the Africans disappeared. One can then wonder whether the communal life of Africa is actually something ontological.

Moreover, leisure time activities have been limited in most African countries. In Nigeria, for instance, children were not allowed to freely use the play grounds, social group activities were prohibited and sports activities were closed too, insofar as it may warrant body contact and breach the rule of social distancing. Social relations have been strongly limited to closest family members. In some places, contact to peers was prohibited or severely limited; and, as Fegert (2020) rightly noted, this can have a negative impact on children and adolescents given the importance of peer contact for well-being. Meetings were not allowed. The only language understandable was social distancing.

Many African countries have experienced a lockdown of schools. As Fegert (2020) pointed out, however, school closure may not have a major impact on reducing infections and preventing deaths. Hence, possible negative consequences such as loss of education time, restricted access to peer all need to be taken into account when estimating the advantages and disadvantages of this particular pandemic. Moreover, as we have pointed out already, stigmatization of infected people occurred in many places.

Besides, covid-19 pandemic-related quarantine in several countries could significantly affect mental health. Fegert (2020) reports that in a recent review on the psychological impact of quarantine, Samantha Brooks and Colleagues pointed out that post-traumatic stress symptoms occur in 28 to 34% and fear in 20% of subjects in quarantine. Additional quarantine-related health problems include

depression, low mood, irritability, insomnia, anger and emotional exhaustion. The scarcely available data point towards a detrimental effect of disease-containment measures such as quarantine and isolation on individuals.

Challenges within Communities and families

At the community and family levels, the pandemic has led to a re-organization of everyday life. All community and family members have to cope with the stress of quarantine and social distancing. School shutdowns have led to home-schooling and potential postponement of examinations including that of the West African Examination Council and other final examinations. Parents have experienced increased pleasure to work from home, to keep jobs and business running as well as to take care of schooling children. At the same time, connection with the wider family who could have been of help was restricted.

Clearly, then, family connections and support were disrupted. Fear of losing family members who belong to a risk group also increased. In case of death, the pandemic disrupted the normal bereavement processes of families. Mourning of lost family members, especially in cases where contact with the infected member was restricted or refused also raised several problems and pressure on many families.

The pandemic has major economic implications and it put financial pressure on many families. First, economic recession has brought about low socioeconomic status on many individuals and families. In addition to this, other factors such as unemployment, income decline, and unmanageable debts are significantly associated with a decrease in mental well-being. In addition, during conomic recession a significant increase in domestic violence can be observed.

Quarantine can lead to decreased freedom and privacy, and consequently higher stress. Income loss and economic hardship can lead to feelings of economic stress and consequent marital conflict. It may also increase existing criminal behaviors by perpetrators as they struggle to regain a sense of control. Exposure to these perpetrators of crime is increased, and the possibilities of victims to escape abusive partners are reduced. Lending her voice to this fact, Fegert (2020) writes:

In the current COVID-19 crisis, there have been reports from all over the world about a significant increase in domestic violence. UN secretary general Antonio Guterres pointed out a “horrifying global surge in domestic violence...with the potential to create long-term consequences.”

Based on this, for the covid-19 pandemic, a worldwide increase in the risk for families and communities is a plausible assumption.

It was also observed that some countries were setting prisoners free in order to decongest prisons and reduce chances of contacting the virus, and that for this reason, anyone arrested by the police could not be detained for more than 24 hours (Dickson et al., 2020). All this could add to proliferation of crime and perpetrating of various forms of violence in the society. There was equally an increase of all forms of maltreatment and unlawful extraction of money from innocent citizens by covid-19 monitoring teams such as the police and other men in uniform: recognized and unrecognized (Dickson et al., 2020).

We have already remarked that disease-containment measures such as quarantine and isolation on individuals can have detrimental effects. One other quarantine-associated threat we wish to mention is an increased risk of online sexual exploitation. With regard to children and adolescents Fegert (2020) writes:

Since the beginning of the pandemic, children and adolescents have spent more time online, which may increase the risk of contact with online predators. Due to limited social encounter, children's outreach to new contacts and groups online has increased.

The adults too are not left out. As more adults have been isolated at home, there may also be an extended demand for pornography. Europal (2020) has already reported an increase in child pornography since the beginning of the pandemic. In summary, phases one and two of the current covid-19 pandemic represent a dangerous accumulation of risk factors. There was reorganization of family life, massive stress, fear of death of relatives, economic crisis with simultaneous loss of almost all support systems and opportunities for evasion in everyday life, limited access to health service as well as a lack of social stabilization.

Beneficial Consequences of Covid-19 Pandemic

The multiple threats and challenges notwithstanding, the covid-19 pandemic could also provide opportunities. When families successfully complete the initial transition phase, the absence of business appointments, guests and business trips can bring rest and relaxation into family life. Several external stressors disappear. Mastering the challenges of the covid-19 crisis together may strengthen the sense of community and cohesion among family members. Again, more time with caregivers can go along with increased social support, which strengthens resilience (Fregert, 2020). In addition, children troubled by school due to whatever reason (e.g. bullying, punishments, or other stressors), can experience the situation of home schooling as relieving.

Furthermore, mastering covid-19 challenges can contribute to personal growth and development. Personal growth is an experience of psychological development as compared with a previous level of functioning or previous attitudes towards life.

Thus, successful management of stress and trauma can lead to personal growth, which in turn reinforces the sense of competence and becomes a protective factor for coping with future stressors.

However, environmental factors such as socio-demographics, individual social networks and social support affect the outcome of a crisis (Schaefer, 1992). This means that the opportunity for personal growth may vary from person to person and from place to place. Nevertheless, Fegert noted that “personal characteristics determine stress-related growth as well.” These factors, according to her, include intrinsic religiousness and positive affectivity. The former is suggested to help to find meaning in crisis, while the relevance of the latter shows the importance of positive mood and attitude for stress-related growth (Fegert, 2020).

Back to Normality

In the third phase of the pandemic (return to normality), it will be important to quickly re-organize and re-establish lost treatment with patients and develop strategies to deal with the burden and strain of new patients not seen and not referred during the pandemic. During the acute phase of the pandemic in many African countries, only emergencies have been addressed. Offering adequate services to families for dealing with the aftermath of the pandemic is central for reducing long-term consequences of corona virus in the society

Furthermore, the economic crisis brought by the pandemic could have long-term negative consequences leading to increased family conflict, abuse, theft, substance abuse, rape, suicide attempt, etc. Access to health services is also needed to cope with the increased demand in times of economic recession (Haw, et al., 2015). As observed earlier, reports are indicating a decline of people using medical services for fear of being infected by corona virus. Consequently, after the crisis there might be a sudden surge to hospitals to a possibly overwhelming magnitude.

During the acute phase of the pandemic, victims of domestic violence and other abuses may not be noticed due to restrictions and lack of social interaction. In phase three, due to relaxation of restrictions and more contact to others, some of these victims may confide incidents during the pandemic to others. The Government should be prepared to offer specific treatment for these individuals, especially children and youths. Fegert (2020) rightly suggests that in case of suspicion, specific anamnesis should be taken, and diagnostic clarification made.

Social-Economic Impact of Covid-19 in Africa

The adoption of lockdown measures aiming at curbing the spread of the coronavirus pandemic had profound socio-economic implications across Africa. The fact remains that containment measure is hardly consistent with the organization of African societies where, as CamilloCasola noted, informality is the rule. According to Casola (2020), a good number of the African population lives in informal settlements, such as slums or shantytowns; and they survive by means of

informal economy. Perhaps this is due to rapid urbanization which has seen the rapid growth of informal settlements without the basic infrastructure to cope with a large influx of people on top of natural population.

The International Labour Organization (ILO) reported that “informal employment is the main source of employment in Africa,” accounting for about 89% in sub-Saharan Africa – the highest rate being found in Burkina Faso (94.6%), the lowest in South Africa (34%) (Casola, 2020). A basic characteristic of the informal economy is self-employment, that is, individuals working on their own account and most typically in precarious situations. Generally, the covid-19 pandemic will have a dramatic impact on Africa’s labor market, leading to a sharp increase in underemployment (up to 30 million jobs could be lost), while the wages and working conditions of surviving jobs could significantly worsen with many workers switching to the informal sector to maintain their incomes (Casola, 2020). Among the social consequences of the covid-19 crisis, a strong rise in poverty will be inevitable. As Casola (2020) remarks, poverty rates were reduced from 54% in 1990 to 41% in 2015, albeit the absolute number of people who live below the international poverty line of \$1.90 per day rose from 278 million to 413 million due to demographic growth. Regional situation also vary. Casola noted that half of the African poor lives in Nigeria (85 million), democratic Republic of Congo, Tanzania, Ethiopia and Madagascar, followed by Mozambique, Uganda, Malawi, Kenya and Zambia (hosting a further 25%) (Casola, 2020).

The prevalence of poverty is higher among workers in the informal economy, namely activities such as small subsistence farming, breeding, fishing, and street peddling) who have no salary, social security nor saving accounts. Before the covid-19 crisis, poverty rates in Africa were expected to decline by 0.71% in 2020 and 0.67% in 2021. On the contrary, the African Development Bank (AFDB) has foreseen that the recession that the coronavirus pandemic generated will increase poverty rates throughout the continent in 2020 by at least 2% and further deepens by an additional 2.5% to 3.6% it in 2021 (Casola, 2020).

This means that an additional 26 to 58 million people in the sub-Saharan region will fall into extreme poverty conditions, mainly in West and Central Africa – “Nigeria and Democratic Republic of Congo will be particularly affected (Casola, 2020).” While a vast majority of Africa’s poor lives in rural areas, and is directly dependent on farming or pastoral activities, the “new poor” mainly lives in urban areas, possesses some level of education are perhaps self employed in sectors different from agriculture. This may fall back into poverty due to loss of jobs or social security income benefits.

Casola (2020) is of the view that the fact of informality in Africa’s productive system will be the main ground for deteriorating economic conditions. He writes:

As a feature typical of African societies and productive systems, informality exposes the

populations of the continent to serious vulnerability. Forced to comply with lockdown measures to prevent the spread of the virus, households that are dependent on unprotected informal wages are at risk of losing their income sources and running out of livelihoods. This will lead to an increase in social inequalities, exacerbating insecurity, and deteriorating the economic conditions of individuals and communities faced with the dramatic choice of either starving or getting sick (Casola, 2020).

In addition, Casola noted that curfews and border restrictions have disrupted supply chains, trade activities and agricultural production. They also limited transportation of goods to markets, reduced the availability of basic food items and intensified price increases, thereby leaving the poor masses struggling to access food. Inevitably, both the rural and urban dwellers had to cut down on the quantity and quality of their consumption due to rising food prices; and this have direct consequences on their nutrition and health levels.

Indeed, the number of people on the brink of starvation is expected to double in Africa, with a high share of them in Nigeria due to combined effect of the pandemic and other drivers of social upheaval such as Fulani herdsmen, Boko Haram terrorist movement, violent conflicts and several protests. So, while we are dealing with dealing with the covid-19 pandemic, we are at the same time also on the verge of a hunger pandemic.

Furthermore, the social impact of the pandemic and its economic consequences in Africa pose a serious risk of sliding back in terms of development. As stressed by the African Development bank, the covid-19 crisis could move the continent further from the Sustainable Development Goal of eradicating extreme poverty. In order to mitigate this risk, it is paramount for African governments to provide adequate assistance to food-insecure households and invest their financial resources in strengthening social security measures and alleviating the effects of the covid-19 pandemic on the most vulnerable citizens.

Potentially, the full implementation of the African Continental Free Trade Area (AfCFTA) which will provide countries with opportunities for growth and economic diversification, particularly through industrialization and manufacturing, could be a game changer for Africa. By addressing the fragmentation of African economies, in the long run, the AfCFTA is also likely to boost agricultural output. According to the World (2020b), the AfCFTA has the potential to increase intra-African exports of agricultural products by 49% by 2035 (compared to 10%

growth without the AfCFTA); while also lifting between 30 and 68 million people out of poverty (World Bank, 2019).

Conclusion

The novel coronavirus, first reported in China as an infectious upper respiratory disease, has since spread worldwide presenting one of the most serious global health crises in history with socio-economic and health costs. While the health impacts are directly through contagion, the economic impacts are largely a consequence of the preventive measures adopted by the respective governments to curtail its spread. Prominent measures adopted by most African countries include the closing of their frontiers and partial or complete lockdown of economies which among other things have seen the temporary closure of businesses, schools and social services. These measures, however, have generated significant setbacks for African economies mainly in terms of lost productivity and trade. Specifically, these measures have significantly strained almost all major growth enhancing sectors of many economies, and ultimately, on their overall income. While the regional and country specific impacts could be similar in Europe and Asia depending on which sectors were severely affected, due to the continents' lack of economic resilience and diversification, Africa faces greater risks of seriously negative impacts from covid-19 for several reasons.

Crowded informal urban settlements have made physical distancing difficult and ordinarily could have made Africa particularly susceptible to covid-19. This is exacerbated by limited access to safe water, undernourishment, poorly funded health systems and underlying health conditions like tuberculosis and HIV/AIDS. Nevertheless, mortality rates are to date, significantly lower than other regions of the world, probably due to Africa's hot weather and younger population.

Therefore, government should maintain regular and emergency treatment as far as possible in order to reduce negative consequences. Health workers should be aware of the numerous health threats associated with the pandemic and employ flexibility and creativity to ensure treatment during the different phases of the pandemic. Covid-19 associated health risks have disproportionately hit the advantaged and marginalized of society. A specific focus should be set on them in order to prevent aggravating pre-existing disadvantages.

In addition to emergency policies to fight the pandemic, there is a need to build resilience and improve long-term growth prospects by investing in basic infrastructure and driving economic transformation. Urbanization has seen the rapid growth of informal settlements without the basic infrastructure to cope with a large influx of people on top of natural population. The pandemic presents an opportunity for African countries to make provision of water and sanitation a focus of their economic recovery stimulus, and improve a range of development indicators in the process. Also the sources of origination and transmission of

coronavirus are important to be determined in order to develop preventive strategies to contain the infection. Most importantly, human corona viruses targeting African traditional vaccines and antiviral drugs should be designed that could be used against the current as future epidemics and pandemics. Beside the development of most efficient drug, a strategy to rapidly diagnose covid-19 in suspected patients is also required by means of African traditional medicines. Also, there should be caution if not a complete ban on the use of wild animals and birds as a source of food.

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