

Covid-19 and the Resilience of Systemic Suppression, Oppression and Repression¹

Francis B. Nyamnjoh
Professor of Social Anthropology
University of Cape Town
5.23 AC Jordan Building
Private Bag X3
Rondebosch 7701
Cape Town
South Africa
Tel: +27 21 650 3681
Email: Francis.nyamnjoh@uct.ac.za
Nyamnjoh@gmail.com

Abstract

Covid-19 offers much food for thought to critically review prevalent and conventional teleological modernist neoliberal assumptions about and usages of the notion of resilience. Such assumptions seem to take attention away from the power of resilient inequalities and injustices while deceptively encouraging the overdramatization of the delusory power of ordinary folks to transform and transcend their circumstances with the benevolence and active assistance, supposedly, of the very same oppressive, repressive and suppressive elite, who, though not being a monolith, have structural power and privilege in common. The paper argues that resilience as an empowerment or recognition of human agency for the overwhelming majority of ordinary folks the world over, is possible not through mimicry, elite outsourcing of blame, prescriptiveness and trickledown munificence, but only to the extent that deeply embedded systemic – covert, tacit and everyday – inequalities are comprehensively and systematically excavated, deactivated and reconfigured in accordance with the logic and humility of incompleteness and conviviality. To transcend perennial elite domination that has effectively neutralised productive contestation by ordinary folks, the paper calls for carefully negotiated and inclusive action, creativity, innovative and convivial modes of solidarity beyond the irrational ecstasy of ephemeral euphoria and exuberance.

Introduction

This paper is about the resilience of systemic, structural or institutional inequalities (informed by real or imagined categories such as race, ethnicity, culture, geography, class, gender, sex and age) and the interconnecting global and local hierarchies that sustain such inequalities and the tokenism of their transcendence despite repeated attempts by their victims to effectively undo them. The Covid-19 pandemic offers a commanding kaleidoscopic prism through which to examine resilience, not so much from the vantage point of the valiant investments by ordinary people and their advocates to resist, overcome and get by despite their precarities and the overwhelming forces that seek to subject, numb, blame, neutralise and co-opt them, their rights, entitlements, freedoms, creative endeavours and their very existence. This is not to downplay the power and successes of

¹ A 1200 word summary of this paper was published as "Covid-19: The Humbling and Humbled Virus with much to Say about Resilience" in *Corona Times*, www.coronatimes.net/covid-19-humbling-humbled-virus

social movements by and on behalf of the systematically suppressed, oppressed and repressed. Rather, the paper looks at resilience from the angle of the often hidden and invisible underpinnings (re)engineered by the dominant (elite) interests/order (north, south, east and west, global and local) to disguise or camouflage their power, influence, privileges and suffocating grip on resources, opportunities and the minds, bodies, souls and humanity of dependent others, while speaking the language of autonomy, inclusivity and accessibility. The paper digs deep, into the structural foundation of human relations across races, ethnicities, geographies, classes, genders, sexualities and generations, among other factors, to show how resilient inequalities, injustices, poverty and underinvestment in critical social services, for instance, systematically continue to undermine and neutralise the efforts of the most vulnerable and dispossessed majority of humanity globally to organise, mobilise, assert and fulfil themselves in meaningful ways.

Covid-19 offers much food for thought to critically review prevalent and conventional teleological modernist neoliberal assumptions about and usages of the notion of resilience. Such assumptions seem to take attention away from the power of resilient inequalities and injustices while deceptively encouraging the overdramatization of the delusory power of ordinary folks to transform and transcend their circumstances with the benevolence and active assistance, supposedly, of the very same oppressive, repressive and suppressive elite, who, though not being a monolith, have structural power and privilege in common. The paper argues that resilience as an empowerment or recognition of human agency for the overwhelming majority of ordinary folks the world over, is possible not through mimicry, elite outsourcing of blame, prescriptiveness and trickledown munificence, but only to the extent that deeply embedded systemic – covert, tacit and everyday – inequalities are comprehensively and systematically excavated, deactivated and reconfigured in accordance with the logic and humility of incompleteness and conviviality. To transcend perennial elite domination that has effectively neutralised productive contestation by ordinary folks, the paper calls for carefully negotiated and inclusive action, creativity, innovative and convivial modes of solidarity beyond the irrational ecstasy of ephemeral euphoria and exuberance.

Covid-19: Symbol of Globalisation as a Process of Flows and Closures

In its early stages, especially prior to May 2020, Covid-19 was presented as the ultimate symbol of globalisation as a homogenising process devoid of all trappings of hierarchies and inequalities. Every TV channel, radio station, press release, blog and Facebook post, and WhatsApp forward that fed my anxious and eager palate in those early days of the pandemic sought to reassure with sobering words. Reassurances well captured by Zou Yue, CGTN anchor, in a viral WhatsApp video clip² thus: “Covid-19 respects no national borders, no social bounds, no political systems and no cultural values. It hits us just as hard. It levels the world.” A sentiment echoed in March 2020 by Mike Ryan, executive director of the World Health Organization (WHO) Health Emergencies Programme: “Viruses know no borders and they don’t care about your ethnicity, the color of your skin or how much money you have in the bank³.”

Really? Yes, and No.

To what extent is Covid-19 no respecter of national borders? It may have been first identified in Wuhan, China⁴, but Covid-19 has rapidly proven, through its invisible nimbleness of feet and

² “What works against the virus?” 19 March 2020, <https://news.cgtn.com/news/2020-03-19/What-works-against-the-virus--OZBF710PiU/index.html>

³ “WHO official warns against calling it ‘Chinese virus,’ says ‘there is no blame in this’”, by Morgan Gstalter, 19 March 2020, <https://thehill.com/homenews/administration/488479-who-official-warns-against-calling-it-chinese-virus-says-there-is-no>

⁴ A point Donald Trump reiterates repeatedly for political effect, insisting that China be held accountable for having “unleashed this plague on to the world”, a message he repeated on September 22 2020 in a virtual speech at the UN General Assembly, that coincided with the US death toll for coronavirus, a disease he has often downplayed, rising to more than 200,000, the highest in the world. See “UN General Assembly: US-China tensions flare over coronavirus”, by BBC, 22 September 2020, <https://www.bbc.com/news/world-54253408>; see also “Trump’s UN speech was a bizarre feat of gaslighting and fantasy,” by Michael H Fuchs, 24 September 2020, <https://www.theguardian.com/commentisfree/2020/sep/24/trumps-un-speech-was-a-bizarre-feat-of-gaslighting-and-fantasy>

wings, that it is *not only* a Chinese or a Wuhan virus. Its giant compressor ambition is no respecter of walls, real or imaginary. It has spread at lightning speed, metamorphosing almost at the blink of an eye into a truly global crisis that requires nothing short of a well-coordinated global response.

In this regard, it is regrettable that whilst it has spread rapidly and sparing no corner of the globe, effective public health responses have remained rather local and national. This poses the “danger that Covid-19 will do long-term damage to migrant rights, as states continue to adopt inward-looking policies” partly to contain the movement of “people seeking better economic opportunities” as well as to keep out “those fleeing political persecution”⁵. In terms of compression of time and space, neoliberalism in its various guises and disguises runs the risk of losing out to the virus, bringing about a new global order, if current rates of transmission are not contained with imagination, creativity, and innovation.

As bubbly in generosity as it seems, Covid-19, just like neoliberalism, thrives on hierarchies and their interconnections, globally and locally. It follows, celebrates, and is encouraged by the same orifices of cosmopolitan fertility, melting pots, and triumphs.

Outside of Wuhan, even as it has hit major cities of Europe and the Americas more than anywhere else, it has not exactly ignored (nor can it afford to, given its global ambitions of dominance) the underdeveloped and the underprivileged North and South, East and West, urban and rural.

It is true – thanks largely to its invisibility and insensitivity to various technologies of containment and regimes of detection, detention, and deportation – that the coronavirus is more aggressive at border crossings than capital, privileged forms of labour, the frequent flyer elite, consumerism, or any world religion has ever been.

Like a cockroach in the perforated luggage of an undocumented and underprivileged wayfarer at a heavily policed border crossing, Covid-19 has a debilitating ability to neutralise borders (physical, social, cultural, bodily, and ideological) that others hold in awe with norming ease and deadening silence. Notwithstanding its invisibility, Covid-19’s mode of travel and privileged crucibles of self-activation remain human. This is not unique to Covid-19, argues Howard Phillips, as many other diseases, HIV, TB and past pandemics inclusive, are equally invisible and share similar modes of self-propagation in a manner that makes history instructive in a time of plague.⁶

Curiously, without much ado and almost with the press of a button, the virus has humbled strongmen of politics, and their penchant for hubris and for power without responsibility. It may have much in common with fake news in the digital age of post-truths. But it is far more real and potent than any digitally driven fake news virus. The vectors and vehicles that transmit Covid-19 are humans hungry for sociality, intimacy, and *ubuntu*. Hence the insistence on policies and practices of physical and social distancing, though as Hassan Yosimbom observes, these forms of sociality and conviviality are not easy to unlearn or suspend, especially in densely-populated places and spaces of poverty, vulnerabilities and precarity, where the only physical and social distancing possible is the ever-widening gap between the rich and the poor.⁷ As Chambi Chachage rightly observes, this reality is not to imply that social and physical distancing are impossible, if and when Africans see a need for it.⁸

Those who propagate the virus unknowingly do not need manipulation to desire and seek to be desired through relationships of interconnection with fellow humans. Being human in tune with

⁵ “Letter from Africa: Spare a thought for stranded migrants”, 17 May 2020, www.bbc.com/news/world-africa-52645702

⁶ See Howard Phillips, “More eyes on COVID-19: Perspectives from History: The need for history in a time of plague. *South African Journal of Science*, 2020;116(7/8), Art. #8495, 1 page. <https://doi.org/10.17159/sajs.2020/8495>

⁷ “The myth of physical and social distancing in Cameroon”, by Hassan M. Yosimbom, 15 April 2020, <https://www.coronatimes.net/myth-social-physical-distancing>

⁸ “Social distancing and “flatten the curve”: Africa can do it”, by Chambi Chachage, 30 March 2020, <https://www.coronatimes.net/social-distancing-africa-can-do-it/>

the humanity of others does not require engineering or inducement to do what should come naturally to humans as social beings.

Unlike fake news viruses, Covid-19 does not need the hidden hand of tech giants, hackers, or spyware manufacturers to activate its potency as an efficacious malicious agent. Like Dracula, all it requires is our schooled taste and hunger for human warmth and connectivity as social beings to lure us, one and all, to its vampirish inferno of appetites. In typical vampire fashion, Covid-19 opportunistically insinuates its fangs into our intimacies, by preying on our sociality, comparative disadvantages, pre-existing precarities and related physical frailties that feed from and into debilitating hierarchies of systemic inequality and poverty. Jair Bolsonaro, the President of Brazil, the second most coronavirus-afflicted country globally, after the USA, with over 1 million and 670 thousands infections, and nearly 67,000 Covid-19 related deaths as of July 8 2020, callously remarks, “I’m sorry, some people will die, they will die, that’s life”⁹, Two Brazilian researchers, Carolina Parreiras and Viviane Mattar, note that:

All the government needs to do is to let certain forces operate without constraints, so that they can cause suffering and death. In this instance, a biological entity (Covid-19) works together with the pre-pandemic structural factors that already thwart the possibility to live and prosper for many people – an under-resourced public health system, higher rates of pre-existing medical conditions caused by structural racism, and so on. The government lets people die by not enforcing more effective regulations to curb the spread, and by not doing enough to strengthen and expand the capacity of the public health system.¹⁰

Globally, no sooner have economies reopened than they have been reported surges in infections and deaths, leading some countries or regions/provinces/states within countries to reintroduce states of disasters, suspend or slow down plans to reopen their economies. The repeated insistence by leaders such as Trump and Bolsonaro that economies should reopen despite the enormity of deaths and continued surges in coronavirus infections, reflects a perplexing resilient investment in a zero-sum economic logic of suppression, oppression and repression that undermines the need to focus both on saving lives by curbing the spread of Covid-19 and keeping economies alive in a responsible manner that does not simply throw Covid-19 a lifeline with sighs of resignation such as Trump’s: “Something I don’t like saying about things, but that’s the way it is.”¹¹

New kinds of connectivity and effective leadership are necessary to defeat Covid-19

(a) A different type of connectivity

Paradoxically, defeating the virus requires a different type of connectivity – one that is not necessarily physical, but certainly social and emotional. Policy options and prescriptions such as physical and social distancing, handwashing and sanitisation, to be effective, cannot afford to downplay, as Jess Auerbach reminds us, that human beings are inherently social, and cannot thrive without communities of trust, belief and practice.¹² As Katrien Pype illustrates in her study of “consolation, compassion, and the digital during Covid-19 in Kinshasa”,¹³ humans must harness a virtual form of solidarity to enable coming together while staying apart. For, as it is aptly and

⁹ “Bolsonaro’s politics of death, Covid-19 and racial inequality in Brazil”, by Carolina Parreiras and Viviane Mattar, 8 July 2020, <https://www.coronetimes.net/bolsonaro-politics-death-covid-19-race-brazil/>

¹⁰ Ibid.

¹¹ “Trump concedes pandemic to ‘get worse before it gets better’”, by Anthony Zurcher, 22 July 2020, <https://www.bbc.com/news/world-us-canada-53494766>

¹² “More eyes on COVID-19: Perspectives from Anthropology - What people believe is a lot less important than that they believe it,” by Jess Auerbach, 29 July 2020, *South African Journal of Science*, 2020;116(7/8), Art. #8491, 1 page. <https://doi.org/10.17159/sajs.2020/8491>

¹³ “Consolation, compassion, and the digital during Covid-19 in Kinshasa”, by Katrien Pype, 16 June 2020, <https://anthrocovid.com/2020/06/16/consolation-compassion-and-the-digital-during-covid-19-in-kinshasa/>

repeatedly stressed, coronavirus does not spread itself, people spread it. To discipline, punish, and curb its excesses in turn demands of us discipline enough to suspend our immediacy in the senses of touch, taste, and smell, by embracing technologies of presence in absence and absence in presence. This, of course, is not to deny the serious threat Covid-19 poses to the livelihoods of all those who depend exclusively on in-person presence in particular places and spaces to be effective in the services they deliver and/or seek. As Anna Lekas Miller, communications manager at the Media Diversity Institute in London remarks, it soon became evident to her that Covid-19 “was going to be impacting people that couldn’t necessarily stay home and work from home” and that these were mostly working-class people of colour, who have suffered disproportionately from inequalities and poverty.¹⁴ Of South Africa, Pumla Dineo Gqola observes that while it is possible for employers to socially distance by working from home, “this does not extend to the women who clean their houses, who are not able to work away from the physical sites of their jobs. Working-class black women in domestic work and similar employment are obliged to travel long distances almost daily.”¹⁵ Hence, far from radically disrupting established hierarchies of inequalities in livelihoods, Covid-19 has mostly preyed upon and in some instances exacerbated existing victimhood and vulnerabilities.

(b) Leadership

Defeating the virus requires leadership in the production and sharing of quality research, to inform evidence-based decision-making, policies and practices. It is gratifying to know that almost without exception the scientific community is stepping up to provide such leadership, notwithstanding distractions by peddlers in conspiracy theories.¹⁶ There are initiatives afoot to “align research funders towards a coordinated effort for supporting high-quality research for the most pressing global needs ... around Covid-19 and for future epidemics and pandemics”, the aim being to “improve relevant research outputs, ensure outputs are shared rapidly to permit consolidation and review, inform policy and practice and ensure lessons are learned to improve responses within this pandemic and for future epidemics and pandemics.”¹⁷ Even a cursory surfing of the internet with keyword Covid-19 related searches, would evidence that the WHO, in collaboration with centres for disease control at national and regional levels are actively involved in promoting such research, reaching in and reaching out to universities and research institute for relevant expertise in fostering such scientific collaboration.

The scientific findings and knowledge require political leadership at local and global levels to inform policy and practice. Unfortunately, such leadership has been slow at coming. While most contemporary heads of state are men, the Covid-19 pandemic appears to have “revealed the weakness of strongmen” in power¹⁸, with female leaders seemingly more successful at managing it. As Henley and Eleanor Ainge Roy of *The Guardian* remark, “Plenty of countries with male leaders have also done well. But few with female leaders have done badly.”¹⁹

In general, globally, leaders have, regardless of gender, actually used their individual leadership potential and national resources to combat the pandemic. While they have not achieved full liberation from the rampaging virus, they have demonstrated a human effort to tackle the virus.

¹⁴ “Key quotes: Covid-19 and reporting on communities of color”, by Taylor Muleahy, 2 July 2020. <https://ijnet.org/en/story/key-quotes-covid-19-and-reporting-communities-color>

¹⁵ “On movement, human rights and Covid-19,” by Pumla Dineo Gqola, 26 March 2020, <https://www.newframe.com/on-movement-human-rights-and-covid-19/>

¹⁶ “John Oliver on coronavirus conspiracy theories: ‘People are going to get burned’”, by Adrian Horton, 20 July 2020, <https://www.theguardian.com/tv-and-radio/2020/jul/20/john-oliver-coronavirus-conspiracy-theories-people-are-going-to-get-burned>

¹⁷ “Strengthening the global effort on Covid-19 research”, by Alice Norton, Jeffrey Mphahlele, Yazdan Yazdanpanah, Peter Piot and Marta Tufet Bayona, 16 July 2020, <https://www.thelancet.com/action/showPdf?pii=S0140-6736%2820%2931598-1>; see also, “Funder principles for research in epidemics”, by the United Kingdom Collaborative on Development Research and the Global Research Collaboration for Infectious Disease Preparedness, <https://www.ukcdr.org.uk/resource/funder-principles-for-research-in-epidemics/?preview=true>

¹⁸ “The Pandemic Has Revealed the Weakness of Strongmen”, by Helen Lewis, 6 May 2020, <https://www.theatlantic.com/international/archive/2020/05/new-zealand-germany-women-leadership-strongmen-coronavirus/611161/>

¹⁹ “Are female leaders more successful at managing the coronavirus crisis?”, by Henley and Eleanor Ainge Roy, 25 April 2020, <https://www.theguardian.com/world/2020/apr/25/why-do-female-leaders-seem-to-be-more-successful-at-managing-the-coronavirus-crisis>

Masks and the wearing of masks have been presented by health experts as a means of preventing the spread of Covid-19, and almost everywhere, masks have acquired a significance, symbolism and potency beyond the simple but important fact of their relevance in fighting Covid-19. In Cameroon, for instance, according to Divine Fuh, masks have been “deployed for generating prestige, to navigate belonging, to lampoon the state and the international community, and ultimately to seek to survive in a context where every country had retreated to themselves, leaving Covid-19 to everyone.”²⁰ Some male leaders have, however, been far more preoccupied with how much of their macho masculinities would be drained out of them if they were to venture to wear a mask in public. These tensions are captured by Helier Cheung in a BBC article about why some male leaders who had resisted wearing masks in public, finally yielded to doing so. Of Donald Trump and Boris Johnson, Cheung writes:

In the past few days, both US President Donald Trump and UK Prime Minister Boris Johnson have been seen wearing masks in public for the first time.

It’s a dramatic turnaround - Mr Trump previously mocked others for wearing masks, and suggested some might wear such personal protective equipment to show their disapproval of him, even after the US Centers for Disease Control recommended face coverings.

Meanwhile, the UK government was initially reluctant to advise the general public to wear face coverings, even as other countries in Europe did.

It introduced rules requiring people to wear face coverings on public transport in June, and now says people in England must wear face coverings in shops or face a fine.²¹

Despite Trump’s very reluctant concession to be seen wearing a mask in public, he, contrary to the recommendation by the top US infectious diseases expert Dr Anthony Fauci that everyone should use masks, rejects mandatory masks nationwide, insisting: “I want people to have a certain freedom.”²² Even as in an apparent volte-face – of appearing to care at long last, in the hope, perhaps, that the electorate would forget his initial inertia and failure to rise to the occasion and provide leadership²³ – on July 21 Trump claimed wearing masks a show of “patriotism”; warned that the coronavirus pandemic “will probably unfortunately get worse before it gets better”; appealed to everybody to “wear a mask, get a mask” when “not able to socially distance”; and admitted that masks “have an impact” and “an effect” regardless of one’s attitude towards wearing them.²⁴ His position contradicts the urgency of the situation, with over 6,896,274 people in the USA having tested positive for Covid-19, and at least 200,807 having died from the disease by September 23 2020.²⁵ Trump may have reluctantly yielded on masks, but he still self-consciously believes mask wearing somehow diminishes one’s masculinity. On September 3 2020 Trump mocked his opponent, Democratic party nominee, Joe Biden for wearing a mask. A Paul LeBlanc of the CNN reports, “Speaking to a largely mask-less crowd in Pennsylvania, Trump asked his supporters if they know ‘a man that likes a mask as much’ as Biden. ‘It gives him a feeling of security,’ the President said. ‘If I was a psychiatrist, I’d say this guy has some big issues.’”²⁶

²⁰ “The time of masks: everyone to themselves and Covid-19 for us all”, by Divine Fuh, 8 May 2020, <http://publicanthropologist.cmi.no/2020/05/08/the-time-of-masks-everyone-to-themselves-and-covid-19-for-us-all/>

²¹ “Coronavirus: Why attitudes to masks have changed around the world”, by Helier Cheung, 14 July 2020, <https://www.bbc.com/news/world-53394525>

²² “Coronavirus: Donald Trump vows not to order Americans to wear masks”, 18 July 2020, <https://www.bbc.com/news/world-us-canada-53453468>

²³ Watch “Trump again says Covid-19 will ‘disappear’ in first virus briefing in months, The 11th Hour, MSNBC”, by Brain Williams, 21 July 2020, <https://www.youtube.com/watch?v=3JV5LuqCm90&feature=youtu.be>

²⁴ “Trump concedes pandemic to ‘get worse before it gets better’”, 22 July 2020, <https://www.bbc.com/news/world-us-canada-53494766>

²⁵ “Tracking Covid-19 cases in the US”, by Sergio Hernandez, Sean O’Key, Amanda Watts, Byron Manley and Henrik Pettersson, 23 September 2020, <https://edition.cnn.com/interactive/2020/health/coronavirus-us-maps-and-cases/#/>

²⁶ “Trump mocks Biden for wearing mask: ‘Did you ever see a man that likes a mask as much as him?’”, by Paul LeBlanc, 3 September 2020, <https://amp.cnn.com/cnn/2020/09/03/politics/trump-biden-coronavirus-mask/index.html>

Trump may vacillate on masks, but he has continued, with remarkable consistency, to promote and defend the use of hydroxychloroquine as a cure, retweeting a video of and praising a controversial Cameroon born Houston based medical doctor-cum pastor, Dr Stella Immanuel, who has actively touted the efficacy of the drug and who is said to believe “demons cause illnesses.”²⁷ Describing her as “very impressive”, President Trump speaks of Dr Stella Immanuel as someone who has had “tremendous success with hundreds of different patients”, adding: “I thought her voice was an important voice but I know nothing about her.”²⁸ President Trump’s endorsement of the unproven cure contradicts his own public health officials, including Dr Anthony Fauci, a leading member of the White House coronavirus task force, who maintains that “every single good study [...] has shown that hydroxychloroquine is not effective in the treatment of Covid-19”, and “regulators warn it may cause heart problems.”²⁹ The situation is further complicated by allegations that even renowned and authoritative journals as the *Lancet* and the *New England Journal of Medicine*, are sometimes pressured to accept for publication papers with contested conclusions by “financially powerful” pharmaceutical companies interested in promoting or taking attention away from a particular drug.³⁰ The *Lancet* reformed its editorial policy three months after retracting a controversial peer-reviewed study it published in May 2020, “which concluded that Covid-19 patients who received the drug hydroxychloroquine were dying at higher rates”, although “figures on the number of deaths and patients in hospital cited by the authors did not match up with official government and health department data”.³¹

Indeed, as Tara McKelvey reports, 2020 being an election year in the USA, “[t]he wearing of masks has become a catalyst for political conflict, an arena where scientific evidence is often viewed through a partisan lens.” While “[m]ost Democrats support the wearing of masks ... [m]ost Republicans do not. The Republicans are following the lead of the president: Trump has been reluctant to wear a mask, saying that it did not seem right to wear one while he was receiving heads of state at the White House.”³² Trump’s exploitation of presidential power to settle political scores and secure political advantage against his opponents by denying them the necessary resources or deploying America’s financial abilities to commandeer personal protective equipment (PPE), is largely seen to have encouraged the spread of the virus in the USA. Trump’s vacillations have been condemned in general, including even from within the ranks of his governing Republican party. In “Fighting Alone”, an opinion piece in *The Washington Post* on July 16, Larry Hogan, the Republican governor of Maryland, criticises Trump for not providing timely federal leadership to mitigate the high number of Covid-19 related deaths in the USA. Governor Hogan writes: “So many nationwide actions could have been taken in those early days but weren’t. While other countries were racing ahead with well-coordinated testing regimes, the Trump administration bungled the effort.”³³ To Joe Biden, Trump’s Democratic party opponent for the presidency in the 2020 election, “It is long past due for President Trump to listen to somebody other than himself in how to fight this virus, because after six straight months of deadly mismanagement it is spiralling even more out of control.”³⁴ To Jeremy Konyndyk, a senior policy fellow at the Center

²⁷ “Trump retweeted a video with false covid-19 claims. One doctor in it has said demons cause illnesses”, by Travis M. Andrews and Danielle Paquette, 29 July 2020, <https://www.washingtonpost.com/technology/2020/07/28/stella-immanuel-hydroxychloroquine-video-trump-americas-frontline-doctors/>

²⁸ “Stella Immanuel - the doctor behind unproven coronavirus cure claim”, by Dickens Olewe, 29 July 2020, <https://www.bbc.com/news/world-africa-53579773>

²⁹ “Coronavirus: Hydroxychloroquine ineffective says Fauci”, by BBC, 29 July 2020, <https://www.bbc.com/news/world-us-canada-53575964>

³⁰ “Lancet Editor Spills the Beans and Britain’s PM Surrenders to the Gates Vaccine Cartel”, by Alliance for Human Research Protection (AHRP), 5 June 2020, <https://ahrp.org/lancet-editor-spills-the-beans-and-britains-pm-surrenders-to-the-gates-vaccine-cartel/>; see also, “Surgisphere: mass audit of papers linked to firm behind hydroxychloroquine Lancet study scandal”, by Melissa Davey and Stephanie Kirchgessner, 10 June 2020, <https://www.theguardian.com/world/2020/jun/10/surgisphere-sapan-desai-lancet-study-hydroxychloroquine-mass-audit-scientific-papers>

³¹ “The Lancet changes editorial policy after hydroxychloroquine Covid study retraction”, by Melissa Davey, 22 September 2020, <https://www.theguardian.com/world/2020/sep/22/the-lancet-reforms-editorial-policy-after-hydroxychloroquine-covid-study-retraction>

³² “Coronavirus: Why are Americans so angry about masks?”, by Tara McKelvey, 21 July 2020, <https://www.bbc.com/news/world-us-canada-53477121>

³³ “Fighting alone: I’m a GOP governor. Why didn’t Trump help my state with coronavirus testing?”, by Larry Hogan, 16 July 2020, <https://www.washingtonpost.com/outlook/2020/07/16/larry-hogan-trump-coronavirus/?arc404=true>

³⁴ “My statement on Donald Trump’s continued failure to control Covid-19”, by Joe Biden, 19 July 2020, <https://medium.com/@JoeBiden/my-statement-on-donald-trumps-continued-failure-to-control-covid-19-1d0bddb9504f>

for Global Development who contributed actively to US government response to Ebola in 2014, the Trump administration's response to the coronavirus is "one of the greatest failures of basic governance in modern times" – "a leadership failure of astounding proportions".³⁵ Critical of leaders who have downplayed and sabotaged collective efforts to tackle the pandemic, UN Secretary General Antonio Guterres calls for humility and global solidarity. He regrets the "total lack of coordination among countries" in response to the pandemic, criticising the world's biggest powers in particular for failing to work together, and thereby "creating the situation that is getting out of control."³⁶ Yet, only such creative and innovative forms of solidarity at local and global levels, could encourage and build on experiences such as reported in *Business Insider SA*, where South Africa came to the rescue by exporting 800,000 masks to Italy in the early days of Covid-19 in Europe, when no fellow European Union country would assist.³⁷ As Sanne van der Lugt remarks, Italian hospitals, running out of stock of medical protection gear and desperate, naturally "asked their European partners for help. However, the first reaction from the rest of Europe was to stockpile face masks and other equipment to help their own citizens and not one European country came to the rescue. Instead, it was South Africa that sent the first batch of face masks to Italy."³⁸

On Friday 2 October 2020, President Donald Trump, "being 74, a man and someone categorised as obese" and "in a higher-risk category for Covid-19"³⁹ tweeted: "Tonight, @FLOTUS and I tested positive for COVID-19. We will begin our quarantine and recovery process immediately. We will get through this TOGETHER!"⁴⁰ Two days after his was admitted for treatment at to the Walter Reed National Military Medical Center close to Washington DC, Trump sought to reassure the American public: "I came here, wasn't feeling so well, I'm much better now," he said, later adding: "Over the next period of a few days I guess that's the real test. We'll be seeing what happens over those next couple of days."⁴¹ Speaking in on CBS' *Face the Nation*, House Speaker Nancy Pelosi, a Democrat, was critical of the president's "anti-science" attitude to the virus, which she said was shared by Republicans in congress. She expressed hope that following his positive Covid-19 diagnosis, President Trump's "heart will be open to the millions of people who have been affected" and "signal that we really have to do better in preventing the spread of this virus."⁴² Determined to continue downplaying the deathly virus, on Monday 5 October, "feeling really good", Trump tweeted he would be releasing himself from hospital later that day, with these defiant words: "Don't be afraid of Covid. Don't let it dominate your life. We have developed, under the Trump Administration, some really great drugs & knowledge. I feel better than I did 20 years ago!"⁴³

In Africa, while many countries have responded favourably with strict lockdowns that have surprised many a gloom and doom prediction⁴⁴ of the continent being a "timebomb' waiting to explode" or "to fall apart under the weight of a public health emergency" like the coronavirus⁴⁵, some leaders have been equally opportunistic and indifferent to the risks posed by Covid-19, in their pursuit of personal power. Some have gone ahead to conduct presidential elections, ignoring

³⁵ "After 200,000 coronavirus deaths, the US faces another rude awakening," by Ed Pilkington, 22 September 2020, <https://www.theguardian.com/world/2020/sep/22/us-coronavirus-deaths-trump-autumn>

³⁶ "UN chief criticizes lack of global cooperation on Covid-19", by Edith M. Lederer, 24 June 2020, <https://abcnews.go.com/US/wireStory/chief-criticizes-lack-global-cooperation-covid-19-71417094>

³⁷ "SA exports 800 000 masks to Italy, as the WHO warns of a global mask shortage due to Covid-19," by Jay Caboz, 5 March 2020, <https://www.businessinsider.co.za/the-world-faces-a-mask-shortage-due-to-covid-19-the-who-warns-as-sa-exports-800-000-to-italy-2020-3>

³⁸ "Taking back responsibility: A joint effort to increase the production of medical masks in Europe", by Sanne van der Lugt, 2 April 2020, <https://www.clingendael.org/publication/joint-effort-increase-production-medical-masks-europe>

³⁹ "Trump Covid: President criticised over drive-past," by BBC, 5 October 2020, <https://www.bbc.com/news/election-us-2020-54415532>

⁴⁰ "Trump Tests Positive for the Coronavirus," by Peter Baker and Maggie Haberman, 2 October 2020, <https://www.nytimes.com/2020/10/02/us/politics/trump-covid.html>

⁴¹ "Trump says he is doing well, but next couple of days the 'real test'," by the BBC, 4 October 2020, <https://www.bbc.com/news/election-us-2020-54405734>

⁴² "Trump health monitored after weekend of confusion," by BBC, 5 October 2020, <https://www.bbc.com/news/election-us-2020-54413536>

⁴³ "Trump to leave hospital on Monday after weekend Covid treatment," by BBC, 5 October 2020, <https://www.bbc.com/news/election-us-2020-54427390>

⁴⁴ "How to Talk about COVID-19 in Africa," by Nanjala Nyabola, 15 October 2020, <http://bostonreview.net/global-justice/nanjala-nyabola-how-talk-about-covid-19-africa>

⁴⁵ "Africa has defied the covid-19 nightmare scenarios. We shouldn't be surprised," by Karen Attiah, 22 September 2020, <https://www.washingtonpost.com/opinions/2020/09/22/africa-has-defied-covid-19-nightmare-scenarios-we-shouldnt-be-surprised/>

the prevention measures, leading to a spike in Covid-19 positive cases and deaths of numerous leading personalities. There was an allegation that former president of Burundi died at a time he was diagnosed Covid-19 positive and that death led to short-lived constitutional crisis.⁴⁶ In Malawi as well, elections were held in June, and two weeks thereafter the country witnessed a spike and a number of notable public figures have died including a member of parliament, a district commissioner, senior academics in public universities, and politicians both in the ruling and opposition parties.⁴⁷ Another curious case is Tanzania, that suspended testing if not just reporting of cases ostensibly to allow for upgrade of its testing capacity which had been producing mixed results. The number of reported cases in that country have been frozen at 509 for three months, thereby feeding the illusion that there is no Covid-19 or that it has been controlled.⁴⁸ President John Magufuli reported told worshippers in a church in Dodoma: “The corona disease has been eliminated thanks to God.”⁴⁹ Tanzania is heading to the polls in October 2020, and it could be argued that for political expediency the incumbent president would not like news of rising cases and deaths as it may affect his re-election at the polls.

Towards the quest for compassionate, decisive, selfless, principled and foresighted leadership beyond the resilient diktats of dominant masculinities and strongman politics, the following words by Helen Lewis, a London-based staff writer at *The Atlantic*, offer food for thought in contemplating the gendered dynamics of leadership in an interconnected world that yearns for the humility of incompleteness and conviviality: “Women leaders aren’t the cause of better government. They are a symptom of it.”⁵⁰

Covid-19 in Connivance with Systemic Inequalities and Hierarchies

It is true that Covid-19 is humbling leaderships, economies, and predictabilities globally. But that is the story at a general level. At a structural and layered level, the story is much more complex and nuanced. The more closely one looks, the clearer the pictures of power, privilege, and hierarchies become, at sub-national, national, regional, and global levels.

Globally, the coronavirus has gained a reputation as a pandemic that kills without negotiation, mercy, or remorse, making of everyone a potential victim. Stories of death and dying are truly horrendous. As Father Mario Carminati from a small town in northern Italy, an area hard hit by the virus, put it: “Authorities didn’t know where to put the coffins.”⁵¹

However, while every social category is affected, not everyone is affected to the same degree. Everywhere, elderly people are dying disproportionately to the young. Could this turn out to be Africa’s saving grace as a youthful continent, where three quarters of the population is aged below 35?

There are also gender differences in how the virus affects humans. Writing for BBC Future, a science site, Martha Henriques observed: “In the US, for example, twice as many men have been dying from the virus as women. Similarly, 69% of all coronavirus deaths across Western Europe have been male. Similar patterns have been seen in China and elsewhere.”⁵² On the other hand, with the confinement measures, women are losing jobs at higher rates” and “were making less

⁴⁶ “Burundi’s president died from COVID-19: reports”, by Ahmet Emin Donmez, 16 June 2020, <https://www.aa.com.tr/en/africa/burundis-president-died-from-covid-19-reports/1878252>; “Burundi president dies of illness suspected to be coronavirus”, by Jason Burke, 9 June 2020, <https://www.theguardian.com/world/2020/jun/09/burundi-president-dies-illness-suspected-coronavirus-pierre-nkurunziza>

⁴⁷ “Malawi lawmaker dies of COVID-19”, by Moses Miachael-Phili, 17 July 2020, <https://www.aa.com.tr/en/africa/malawi-lawmaker-dies-of-covid-19/1913615>; “Malawi Confirmed Coronavirus Cases Are Rising Faster - Death Toll At 8”, by Osman Faiti, 18 June 2020, <https://allafrica.com/stories/202006190052.html>

⁴⁸ “Is Tanzania covering up the real number of coronavirus deaths?”, by Jaclynn Ashly, 12 May 2020, <https://www.aljazeera.com/news/2020/05/tanzania-covering-real-number-coronavirus-deaths-200511054304751.html>; “Coronavirus in Tanzania: What do we know?”, by Peter Mwai and Christopher Giles, 19 June 2020, <https://www.bbc.com/news/world-africa-52723594>

⁴⁹ “Coronavirus: John Magufuli declares Tanzania free of Covid-19”, by BBC, 8 June 2020, <https://www.bbc.com/news/world-africa-52966016>

⁵⁰ “The Pandemic Has Revealed the Weakness of Strongmen”, by Helen Lewis, 6 May 2020, <https://www.theatlantic.com/international/archive/2020/05/new-zealand-germany-women-leadership-strongmen-coronavirus/611161/>

⁵¹ “Italy small town priest deals with death on industrial scale”, by Flavio Lo Scalzo, 28 March 2020, www.reuters.com/article/us-health-coronavirus-italy-coffins-idUSKBN21F0M6

⁵² “Why covid-19 is different for men and women”, by Martha Henriques, 13 April 2020, www.bbc.com/future/article/20200409-why-covid-19-is-different-for-men-and-women

money to begin with.”⁵³ In terms of gender identities, Miriam Aurora Hammeren Pedersen argues that the transgender community is being hit especially hard. As she observes:

Lockdown in South Africa and elsewhere has meant that queer meeting places such as bars and cafés have had to close their doors. The ban on social gatherings has put a stop to queer events and social gatherings. LGBTQ+ rights and support organisations have had to move their meetings online.

As universities have closed their doors, students all over the world have been sent home, supposedly, to their families to complete the term through online studies. This poses problems and potential risks for those trans people who are now forced to move back in with less accepting families or into less accepting communities.

Trans people, especially trans women of colour, are at high risk of harassment, violence and homicide. Covid-19 has provided little relief.⁵⁴

In Cape Town, such inequalities generated a response by seven queer activists operating under the name #WeSeeYou, who occupied an Airbnb mansion at Camps Bay to draw attention to the plight of LGBTQI communities by linking home, homelessness, lack of housing, land repossession and sexual identity.⁵⁵

There is discrimination along racial lines as well. In Europe and North America, racialized people are dying in inverse proportions to their white counterparts. In Chicago, for example, Blacks “account for half of all coronavirus cases in the city and more than 70% of deaths, despite making up 30%” of the city’s ‘population’⁵⁶. Indigenous populations have a higher risk as well, leading some experts to speculate that Covid-19 could destroy whole nations and communities of indigenous peoples. “In the US, one in every 2,300 indigenous Americans has died, compared to one in 3,600 white Americans – making them the second most at-risk ethnic category in the US after black Americans.”⁵⁷ Brown people are equally at higher risk than white people. At face value, the higher risk experienced by black, brown and indigenous populations in the US reflects the inaccessibility of affordable and quality healthcare as well as systemic exclusion from other societal services and benefits. It also reflects their lowly positions on the hierarchy of socioeconomic and political visibility that neoliberalism and legacies of the institution of enslavement have enshrined and perpetuate even in camouflage.⁵⁸ Hence, former President Barack Obama’s comment: “A disease like this just spotlights the underlying inequalities and extra burdens that black [brown and indigenous] communities have historically had to deal with in this country.”⁵⁹

Ethically, how does one negotiate and navigate the delicate balancing act of representing these disproportionalities, scientifically, journalistically, politically, and otherwise, without implying that the lives of those most adversely affected matter less?⁶⁰ Thomas Cousins, Sabina Leonelli, Michelle Pentecost, and Kaushik Sunder Rajan in their conversation on Covid-19 and the implications for democracy of the epidemiological and political challenges it poses, suggest that such a delicate balance is attainable through “a community-driven approach [that] provides a more democratic

⁵³ “Why covid-19 is different for men and women”, by Martha Henriques, 13 April 2020, www.bbc.com/future/article/20200409-why-covid-19-is-different-for-men-and-women

⁵⁴ “Trans people have been hit hard by Covid-19 disruptions – here is why”, by Miriam Aurora Hammeren Pedersen, 9 June 2020, <https://www.coronatimes.net/trans-people-hit-hard-covid-19-disruptions>

⁵⁵ “Camps Bay Mansion Occupiers: Who’s Who and their Mission,” by Refilwe Pitjeng, accessed 16 October 2020, <https://ewn.co.za/2020/09/28/camps-bay-mansion-occupiers-who-s-who-and-their-mission>; “Camps Bay Airbnb saga: Occupiers leave mansion, as second group yells at them not to,” by Jenni Evans, 8 October 2020, <https://www.news24.com/news24/southafrica/news/camps-bay-airbnb-saga-occupiers-leave-mansion-as-second-group-yells-at-them-not-to-20201008>

⁵⁶ “Coronavirus wreaks havoc in African American neighbourhoods”, 7 April 2020, www.bbc.com/news/world-us-canada-52194018

⁵⁷ “How Covid-19 could destroy indigenous communities,” by Terri Hansen, 30 July 2020, <https://www.bbc.com/future/article/20200727-how-covid-19-could-destroy-indigenous-communities>

⁵⁸ “Opinion: The hustle — white saviors and hashtag activism”, by Angela Bruce-Raeburn, 12 June 2020, <https://www.devex.com/news/opinion-the-hustle-white-saviors-and-hashtag-activism-97463>

⁵⁹ “Coronavirus: Obama criticises Trump administration’s virus response”, 17 May 2020, www.bbc.com/news/world-us-canada-52694872

⁶⁰ “How to Talk about COVID-19 in Africa,” by Nanjala Nyabola, 15 October 2020, <http://bostonreview.net/global-justice/nanjala-nyabola-how-talk-about-covid-19-africa>

mechanism, which leads not only to more salutary political outcomes, but also to better epidemiological ones.”⁶¹

While the economic effects globally are devastating for most as the virus drives productivity into hibernation, some people are losing their businesses and jobs faster than others. In many an African country and turgid democracies where citizens have mostly failed over the years to jolt the reigning dictatorships out of their slumber of inaction and complacency, Covid-19 has succeeded in attracting, at the level of hollow rhetoric at least, the attention of governments to the urgency of the moment. Even if only to regret, or appear to regret, the deplorable public health systems they have ignored or underfunded with impunity for decades – preferring, as they often have, to head elsewhere for more prestigious healthcare for themselves and their immediate families. That not even the health systems of Africa’s most competitive economies are spared the brutish embarrassment of being overwhelmed by the coronavirus, is exemplified by “An exclusive, weeks-long BBC investigation inside filthy hospitals in South Africa” that “exposed an extraordinary array of systemic failures showing how exhausted doctors and nurses are overwhelmed with Covid-19 patients and a health service near collapse.”⁶² Despite imposing one of the world’s strictest lockdowns, South Africa, by July 2020 –with an official Covid-19 infection rate of over 470,000 and a death toll above 7500 – had risen to the fifth highest case count in the world behind the USA, Russia, Brazil and India, and the government had reportedly “begun digging large, makeshift cemeteries in preparation for more deaths.”⁶³

Africa’s Covid-19 Predicament

Compared to Europe, Asia and the Americas, Covid-19 cases and deaths in Africa have been much lower, with barely 1,569,680 cases and 38,196 deaths reported in a population of 1.3 billion, on the continent⁶⁴, compared to a global total of 36,754,395 confirmed cases and 1,064,838 deaths, by October 9 2020.⁶⁵ Commenting on this state of affairs, British politician and former UK Prime Minister Tony Blair suggests that this could be attributed to Africa having a more resilient and immune population, the youthfulness of the population, the possibility that Africa is not recording all of its Covid-19 related deaths, the fact that Africa is not doing enough testing, or that the worst is yet to come.⁶⁶ Kevin Marsh and Moses Alogo of the African Academy of Sciences Covid-19 research team provide substantiation for some of Blair’s hunches.⁶⁷ Others, like Karen Attiah of the *Washington Post*, rightly draw attention to the timely action taken by African governments to impose strict lockdown measures, as well as to the pre-existing pandemic response infrastructure in some African countries from the Ebola outbreak of late 2013 to 2016, as well as from the management of past pandemics and viral diseases.⁶⁸ Whatever the reasons, the growing threat of Covid-19 is particularly challenging for Africa where “health-care systems are already stretched” and “Conventional social distancing is next to impossible.” Added challenges include “prevalence of already life-threatening conditions such as malaria, tuberculosis and acute malnutrition”, compromised immunity in persons living with HIV/AIDS, “acute shortages of trained medical

⁶¹ “Situating the biology of Covid-19: A conversation on disease and democracy”, by Thomas Cousins, Sabina Leonelli, Michelle Pentecost, and Kaushik Sunder Rajan, 3 July 2020, <https://www.theindiaforum.in/article/situating-biology-covid-19>

⁶² “Coronavirus in South Africa: Inside Port Elizabeth’s ‘hospitals of horrors’”, by Andrew Harding, 15 July 2020, <https://www.bbc.com/news/world-africa-53396057>

⁶³ “South Africa braces for more coronavirus deaths as cases surge”, by Max Bearak and Marco Longari, 30 July 2020, <https://www.washingtonpost.com/graphics/world/2020/07/30/south-africa-coronavirus-deaths/>

⁶⁴ “Coronavirus Disease 2019 (COVID-19): Africa CDC Dashboard Region”, by Africa CDC, 11 October 2020, <https://africacdc.org/covid-19/>

⁶⁵ “WHO Coronavirus Disease (COVID-19) Dashboard”, by WHO, 9 October 2020, <https://covid19.who.int/>

⁶⁶ “Forecasting Covid-19 for Sub-Saharan Africa”, by Tony Blair, 10 July 2020, <https://www.facebook.com/watch/?v=1325632400972592>; see also, “Planning for the worst and hoping for the best: Forecasting Covid-19 for Sub-Saharan Africa”, by O.B. Sesay, Maryam Abdullah, and Elizabeth Smith, 10 July 2020, https://institute.global/advisory/planning-worst-and-hoping-best-forecasting-covid-19-sub-saharan-africa?fbclid=IwAR2SmCm-8Tlh1fyoio0T0XSGF67O9qF7c3_nyf127zLQkcL7xTqdOCJ96U.

⁶⁷ “COVID-19: examining theories for Africa’s low death rates”, by Kevin Marsh and Moses Alogo, 7 October 2020, <https://theconversation.com/covid-19-examining-theories-for-africas-low-death-rates-147393>

⁶⁸ “Africa has defied the covid-19 nightmare scenarios. We shouldn’t be surprised”, by Karen Attiah, 22 September 2020, <https://www.washingtonpost.com/opinions/2020/09/22/africa-has-defied-covid-19-nightmare-scenarios-we-shouldnt-be-surprised/>

staff, medical supplies and crucial equipment”⁶⁹, as well as long term consequences on health and beyond. If aggressive and massive testing is necessary to contain the ravages of Covid-19, how do African countries of preponderantly modest means and underfunded public health services afford the testing and personal protective equipment needed by medical and public health practitioners to do justice to such an expectation? And what will be the long-term impacts that “the huge focus” on the virus has had on “other health issues being neglected”⁷⁰? The answer, in part, is for African states and government to seek inspiration from popular traditions, practices and wisdoms that African communities have accumulated endogenously, before, during and after the continent’s encounters with European colonialism and its resilient zero-sum logic of superiority and orthodoxy in everything human.⁷¹

(a) Covid-19 catalysed risks of dying of hunger

The potentially devastating economic effects, especially those of the African continent rendered economically poor by poor practices and policies, are frightening to contemplate. The reports of ordinary folks driven to disarmingly horrendous levels of desperation are widespread and surging. In Kenya for example, Peninah Bahati Kitsao, a Mombasa-based widow, was reportedly “cooking stones for her eight children to make them believe she was preparing food for them”, hoping “they would fall asleep while they waited for their meal.”⁷² While her story caught the attention of many Kenyans who apparently rallied to her aid, it is not impossible to imagine thousands or even millions of fellow Kenyans and Africans in similar positions not being as lucky, as they run the risk of dying as much from hunger as from Covid-19. Kenya is not alone. In South Africa, where a hard lockdown was enforced on March 27, a national survey in July, four months on, showed “large groups of households” were experiencing “tremendous hardship” such as job and income losses and mounting household food insecurity as a direct result of the lockdown, despite social protection measures instituted by government to safeguard livelihoods.⁷³ Indeed, warns Oxfam, the coronavirus could push an estimated 122 million of the world’s poorest people to the brink of starvation, with 12,000 people a day dying from hunger than from Covid-19 itself.⁷⁴ Paradoxically, amidst such risks of chronic hunger and risk of starvation and the disturbing reality of underfunded and overwhelmed public health systems, are reports of some rich and high profile Kenyans “rush[ing] to install ICU beds in their homes, complete with all the required equipment” and with “arrangements for standby private doctors and nurses”,⁷⁵ notwithstanding a nationwide “major shortages in chest specialists, hospital physicians and emergency care nurses.”⁷⁶ Resilient coloniality, power, privilege and unequal distribution of resources informed by hierarchies of humanity are all too evident in these account of the unfolding ramifications of Covid-19 in Kenya and the rest of Africa.

(b) Victim of perennial racism and neocolonialism

African scientists, working through universities and research institutes as well as under the auspices of national, regional and continental academies of sciences, centres for disease control, and other advocacy groups and networks, have contributed significantly to studying the

⁶⁹ “African nations must urgently prepare to confront Covid-19”, by Tony Blair, 28 March 2020, <https://institute.global/tony-blair/african-nations-must-urgently-prepare-confront-covid-19>

⁷⁰ “Coronavirus in Africa: Contained or unrecorded?” 20 May 2020, www.bbc.com/news/world-africa-52702838

⁷¹ “Social distancing and ‘flatten the curve’: Africa can do it”, by Chambi Chachage, 30 March 2020, <https://www.coronatimes.net/social-distancing-africa-can-do-it/>

⁷² “Coronavirus: Kenyans moved by widow cooking stones for children”, 30 April 2020, www.bbc.com/news/world-africa-52494404

⁷³ “South Africa faces mass hunger if efforts to offset impact of COVID-19 are eased”, by Gabrielle Wills, Leila Patel, Servaas van der Berg and Bokang Mpeta, 26 July 2020, <https://theconversation.com/south-africa-faces-mass-hunger-if-efforts-to-offset-impact-of-covid-19-are-eased-143143?>

⁷⁴ “Covid-19 could kill more people through hunger than the virus itself, warns Oxfam”, by Harriet Barber, 9 July 2020, <https://www.telegraph.co.uk/global-health/science-and-disease/covid-19-could-kill-people-hunger-virus-warns-oxfam/>

⁷⁵ “Covid-19: Race against time as rich Kenyans install ICU beds in homes”, by Eric Wainaina, 10 July 2020, <https://www.pd.co.ke/news/covid-19-race-against-time-as-rich-kenyans-install-icu-beds-in-homes-43404/>

⁷⁶ “Covid-19 exposes weaknesses in Kenya’s healthcare system. And what can be done?”, by Abdu Mohiddin and Marleen Temmerman, 27 July 2020, <https://theconversation.com/covid-19-exposes-weaknesses-in-kenyas-healthcare-system-and-what-can-be-done-143356?>

coronavirus and its ramifications. They have been actively involved with various initiatives, from the several different quick tests that were developed (in countries such as Senegal and Ghana, for example) and rolled out really quickly at the beginning of the pandemic, to provision of expert advice on managing pandemics, involvement in vaccine trials as scientists, and constitution of myriad research projects.⁷⁷ Such contributions have tended to be overshadowed by certain controversies around resilient racism and neocolonialism.

The controversies have provoked questions such as the extent to which African governments are committed to resisting the pressure to simply handing over the African populace to be used as guinea pigs and experimented upon to guarantee salvation for the lives of others higher up the reigning hierarchies of humanity. Would it be proper for Africans to come last in terms of access to and prioritisation of personal protection equipment, only to be prioritised and privileged in testing for the effectiveness of various vaccines on trial? This would be unwise, as suggested by the racism row provoked by two French doctors suggesting on a TV show in a rather condescending manner that virus vaccines be tested “in Africa where there are no masks, no treatment or intensive care.”⁷⁸ Being critical of vaccine trials that seek to take advantage of Africans by devaluing their humanity is not to deny the need for Africans to volunteer and avail themselves for vaccine trials along with volunteers of other continents and races, as the race for a cure to Covid-19 intensifies. As Richard Fisher, a volunteer in the trial of a Covid-19 vaccine developed by Oxford University remarks, the “vaccine trial may not turn out to be the success that many wish for. It may not meet the safety and efficacy threshold that takes us out of these difficult times. But that’s how science works – it’s long-term, collective and filled with wrong turns – and right now I’ve never been more glad that we have it.”⁷⁹ Finding a Covid-19 vaccine is of such preoccupying urgency that organisations in the UK, USA and Canada trying to develop a coronavirus vaccine have been reportedly targeted by hackers “highly likely with the intention of stealing information and intellectual property relating to the development and testing of Covid-19 vaccines.”⁸⁰

There are legitimate concerns about a lingering “colonial mentality” in Europe and North America⁸¹, an attitude that has drawn widespread condemnation as well as suspicion and the circulation of rumour and conspiracy theories among Africans towards trials for “a vaccine that works worldwide – and not just for richer nations.”⁸² Beyond conspiracy theories, Carmen Paun reports in *Politico* that “across Africa, health officials are growing increasingly concerned they won’t be able to afford the potentially life-saving therapies currently under development.”⁸³ A concern reiterated in an open letter published in *The Washington Post* by eight world leaders, including the leaders of three African countries (Cyril Ramaphosa of South Africa, Sahle-Work Zewde of Ethiopia, and Elyes Fakhfakh of Tunisia), calling for “global solidarity” for fairness in distributing any Covid-19 vaccine that may be developed. Maintaining that “Where you live should not determine whether you live”, the leaders called for strategic action to ensure benefits for countries across the world for any vaccine developed:

At this point in time, with almost 200 potential Covid-19 vaccine candidates currently at different stages of development, there is hope that soon one or more will prove to be both safe and effective.

⁷⁷ See for example, “Resources: Documents and publications from Africa CDC,” <https://africacdc.org/resources/>, accessed 19 October 2020.

⁷⁸ “Racism row as French doctors suggest virus vaccine test in Africa”, by Rebecca Rosman, 4 April 2020, <https://www.aljazeera.com/news/2020/04/racism-row-french-doctors-suggest-virus-vaccine-test-africa-200404054304466.html>

⁷⁹ “Coronavirus: What I learnt in Oxford’s vaccine trial”, by Richard Fisher, 22 July 2020, <https://www.bbc.com/future/article/20200721-coronavirus-vaccine-trial-what-its-like-to-participate>

⁸⁰ “Coronavirus: Russian hackers target Covid-19 vaccine research”, 16 July 2020, <https://www.bbc.com/news/technology-53429506>

⁸¹ “Africa has defied the covid-19 nightmare scenarios. We shouldn’t be surprised,” by Karen Attiah, 22 September 2020, <https://www.washingtonpost.com/opinions/2020/09/22/africa-has-defied-covid-19-nightmare-scenarios-we-shouldnt-be-surprised/>

⁸² “Coronavirus: Why Africans should take part in vaccine trials”, by Anne Mawathe, 18 May 2020, www.bbc.com/news/world-africa-52678741

⁸³ “In race for vaccine, African countries fear coming in last,” by Carmen Paun, 31 July 2020, <https://www.politico.com/news/2020/07/31/african-governments-fear-losing-out-in-vaccine-distribution-389213>

What happens next is equally important. This cannot be a race with one winner. When one or more vaccines are successful, it must be a win for all of us.

We cannot allow access to vaccines to increase inequalities within or between countries — whether low-, middle- or high-income.⁸⁴

A related concern stirred by the controversy around Covid-Organics, a “herbal cure” proposed by the Malagasy Institute of Applied Research (IMRA) and promoted by President Andry Rajoelina of Madagascar as a “herbal tea [that] gives results in seven days”,⁸⁵ poses the additional problem of the unresolved tensions between the competing and often conflictual healthcare traditions on the continent – one generally termed “plant-based”, “traditional”, “African” or “endogenous” and the other roughly equated with being “medical”, “scientific”, “orthodox”, “Western” and “colonial” in origin.

According to President Rajoelina, people would not be so sceptical if a European country had discovered the remedy. As he told France 24’s Marc Perelman and RFI’s Christophe Boisbouvier in an interview: “What if this remedy had been discovered by a European country, instead of Madagascar? Would people doubt it so much? I don’t think so.”⁸⁶ Following President Rajoelina expression of scepticism on France 24, an announcement on July 20, 2020, that a vaccine developed by Oxford University had shown promising results in trial was widely and favourably reported across the world, despite the cautious reaction of medical experts such as Dr Sarah Pitt, a virologist at the University of Brighton, who cautions that although the Oxford University vaccine has been proven to induce an immune response, “we don’t necessarily know that it will protect us from infection, which is the next stage of their investigations.”⁸⁷ Such caution has not stopped governments from rushing to place orders for AZD1222, as the vaccine is called. “The UK has ordered 100 million doses of the vaccine, while a number of other governments around the world, including the US, France and Germany, have entered into supply deals” with AstraZeneca the company with which Oxford University has partnered to produce the vaccine, should the vaccine “prove effective and gain regulatory approval.”⁸⁸

The President of Madagascar is categorical that what is truly in question about Covid-Organics as a “preventive and curative remedy” is the assumption that nothing good can originate from Africa: “What is the problem with Covid-Organics, really? Could it be that this product comes from Africa? Could it be that it’s not OK for a country like Madagascar, which is the 63rd poorest country in the world... to have come up with (this formula) that can help save the world?”⁸⁹ While there is clearly reason to be concerned about the resilience of a colonial mentality in Europe’s relations with Africa, it must be said as well that African leaders have often been quick to mobilise anti-imperialist rhetoric when faced with accountability pressures. Reports in July 2020 that Madagascar’s coronavirus cases and deaths were increasing rapidly, and overwhelming hospitals are an indication that the efficacy of the concoction is not good enough.⁹⁰ Equally, the rising infections and deaths reiterate the need to watch against opportunistic deployment of anti-imperialist rhetoric in order not to throw the baby of scientific accountability out with the colonial bathwater. In this regard, it is a step in the right direction that the WHO and the Africa Centres

⁸⁴ “The international community must guarantee equal global access to a covid-19 vaccine”, by Justin Trudeau, Sahle-Work Zewde, Moon Jae-in, Jacinda Ardern, Cyril Ramaphosa, Pedro Sánchez Pérez-Castejón, Stefan Löfven and Elyes Fakhfakh, 15 July 2020, <https://www.washingtonpost.com/opinions/2020/07/15/international-community-must-guarantee-equal-global-access-covid-19-vaccine/>

⁸⁵ “Coronavirus: Caution urged over Madagascar’s ‘herbal cure’”, 22 April 2020, www.bbc.com/news/world-africa-52374250

⁸⁶ “Exclusive: Madagascar’s president defends controversial homegrown covid-19 cure”, 12 May 2020, www.france24.com/en/africa/20200512-exclusive-madagascar-s-president-defends-controversial-homegrown-covid-19-cure

⁸⁷ “Possibility of several vaccines - or none”, by Kaye Adams, BBC Radio Scotland, 21 July 2020, <https://www.bbc.com/news/coronavirus>

⁸⁸ “Coronavirus vaccine: Oxford trial is ‘safe’ and produces immune reaction, first study results show”, by Samuel Lovett, <https://www.independent.co.uk/news/health/coronavirus-vaccine-oxford-university-study-trial-result-covid-19-safe-a9628491.html>

⁸⁹ “Exclusive: Madagascar’s president defends controversial homegrown covid-19 cure”, 12 May 2020, www.france24.com/en/africa/20200512-exclusive-madagascar-s-president-defends-controversial-homegrown-covid-19-cure

⁹⁰ “Coronavirus: Hospitals in Madagascar ‘overwhelmed’”, by Felix Tih, 23 July 2020, <https://www.aa.com.tr/en/africa/coronavirus-hospitals-in-madagascar-overwhelmed/1919657>

for Disease Control and Prevention (Africa CDC) on July 22, 2020, in a joint effort, “launched an expert advisory committee/panel to provide independent scientific advice and support to countries on the safety, efficacy and quality of traditional medicine therapies”, by conducting in collaboration with the countries concerned, “clinical trials of traditional medicines in compliance with international standards.”⁹¹

Not unrelated, African governments also need to protect their citizenry from the proliferation of fake cures, by paying particular attention to fighting opportunistic fake pharmaceutical drugs, especially given the “lack of regulatory oversight” that makes parts of the continent “so attractive to criminals in the business of falsifying medicines” to prey upon vulnerable health-seeking Africans in under-resourced health systems.⁹² Even as some African governments have invited Christian, Muslim and endogenous religious authorities to help spiritually in combating the pandemic⁹³, they have been called upon as well, to protect their citizens from false hope churches and related religious and spiritual outfits and false prophets that offer prayer as both prevention and antidote, with promises of miracle cures through divine intervention, on the continent and from beyond.⁹⁴

Reminiscent of the way Chinese and other East Asians were treated in other parts of the world in the beginning of the pandemic, reported resurgence in prejudice, stereotyping, discrimination, and physical and social distancing from Africans in China⁹⁵ is worrying, and another test of whether African governments truly care beyond declarations of intent. Covid-19 has indeed exposed that African governments and states have a persistent challenge of rendering meaningful the citizenship and humanity of their nationals in a manner that buttress the self-confidence and dignity of their people, especially in relationships with peoples of other races, ethnicities and continents.

(c) Coping with attendant economic downturns and recessions

The International Monetary Fund (IMF) and World Bank are predicting downturns and recessions for economies globally and especially on the African continent,⁹⁶ where by July 30, 2020, at least 33 countries had already received approval of millions of US dollars in IMF loans – with South Africa having the lion’s share of US\$4.3 billion – to redress the severe economic impact of the Covid-19 crisis.⁹⁷ Concomitantly, the United Nations Secretary-General António Guterres, in his Nelson Mandela Annual Lecture 2020 speech, has called for a more critical attitude towards certain “fallacies and falsehoods” perpetrated by these same institutions. Among these untruths, he lists: “The lie that free markets can deliver healthcare for all; The fiction that unpaid care work is not work; The delusion that we live in a post-racist world; [and] The myth that we are all in the same boat.” That these are falsehoods, fallacies and myths is evidenced by the fact that the “legacy of colonialism still reverberates [...] in economic and social injustice, the rise of hate crimes and xenophobia; the persistence of institutionalised racism and white supremacy.” To Guterres, only

⁹¹ “WHO, Africa CDC in joint push for Covid-19 traditional medicine research in Africa”, by Africa CDC, 22 July 2020, <https://africacdc.org/news-item/who-africa-cdc-in-joint-push-for-covid-19-traditional-medicine-research-in-africa/>

⁹² “Fake pharmaceutical industry thrives in West Africa”, 14 July 2020, <https://www.bbc.com/news/world-africa-53387216>.

⁹³ “Fighting Covid-19: Interventions from Ghana’s Traditional Priests,” by Samuel Aniegye Nteuwusu and Samuel N. Nkumbaan, 13 May 2020, <https://religiousmatters.nl/fighting-covid-19-interventions-from-ghanas-traditional-priests/>

⁹⁴ “Now more than ever, Ghana’s Christians don’t need false prophets,” by Joseph Oduro-Frimpong, 27 June 2020, <https://www.coronatimes.net/ghana-christians-dont-need-false-prophets-covid-19/>

⁹⁵ “Victimisation of Africans in China threatens Afro-Sino relations”, by Mills Soko and Mzukisi Qobo, 14 April 2020, www.dailymaverick.co.za/article/2020-04-14-victimisation-of-africans-in-china-threatens-afro-sino-relations

⁹⁶ “Coronavirus: World faces worst recession since Great Depression”, by Szu Ping Chan, 14 April 2020, www.bbc.com/news/business-52273988, and “Sub-Saharan Africa faces R1.4-trillion output loss and food crisis due to covid-19, says World Bank”, by Bekezela Phakathi, 13 April 2020, www.businesslive.co.za/bd/national/2020-04-13-sub-saharan-africa-faces-r14-trillion-output-loss-and-food-crisis-due-to-covid-19-says-world-bank

⁹⁷ “Covid-19 Financial Assistance and Debt Service Relief”, by IMF, 30 July 2020, <https://www.imf.org/en/Topics/imf-and-covid19/COVID-Lending-Tracker#AFR>; “IMF Executive Board Approves US\$4.3 Billion in Emergency Support to South Africa to Address the COVID-19 Pandemic”, by Geoffrey W.S. Okamoto, 27 July 2020, <https://www.imf.org/en/News/Articles/2020/07/27/pr20271-south-africa-imf-executive-board-approves-us-billion-emergency-support-covid-19-pandemic>

a major reform of the UN security council, the IMF and the World Bank, could begin the process of meaningfully addressing systemic inequalities exposed by the coronavirus pandemic.⁹⁸

Even the Big Tech companies (Amazon, Facebook, Apple and Google), largely reported as winners in the Covid-19 era⁹⁹, have been negatively affected by the economic fallout of the coronavirus pandemic, reporting either less than expected profits or marginal declines.¹⁰⁰ More generally, the economic effects of the pandemic are likely to be sweepingly devastating. According to some estimates, because of Covid-19, extreme poverty in the world is estimated to rise by about 50 million people in 2020, undoing all the progress made in poverty reduction since the launch of the Sustainable Development Goals (SDGs) in 2015.¹⁰¹ A survey conducted for the BBC World Service in 27 countries by GlobeScan in June 2020, revealed that the Covid-19 pandemic “has had a more severe impact on people in poorer countries and has exacerbated existing inequalities” and “opened up a gulf between young and old”, with younger generations claiming “they have experienced a tougher time than older generations”.¹⁰² Calls for intelligent, rigorous, and robust responses by African governments are greeted with the proverbial beggars’ bowl, outstretched, unscrupulously and unashamedly, and not without dubious intentions in some cases, West and East, notwithstanding that these regions are facing their own worst economic nightmares. With 36,754,395 confirmed cases of Covid-19, including 1,064,838 deaths worldwide as of October 9 2020¹⁰³, and with many of the traditional countries Africa usually relies on for aid reported as having the most deaths, it is easy to see that reprioritisation of resources would likely affect Africa negatively.¹⁰⁴ In addition, the African Union has hurriedly put in place a committee to seek urgent assistance from developed economies towards addressing the crisis.¹⁰⁵

If the rest of the world has in the past and under relatively normal times not been that generous or effusive in their *ubuntu* towards Africa, there is little to suggest that, plagued by their own problems under the coronavirus tsunami, they are suddenly going to become evangelists of selfless philanthropy. Even as every country and everyone worldwide is challenged to lend each other a hand in order to survive Covid-19 and its devastations¹⁰⁶, how amenable are countries and individuals cultivated to dramatize zero-sum articulations of autonomy and survival to a logic, ethic, morality and practice of inclusivity, looking out and being there for one other in sickness or in health? Africans must do more to disabuse themselves of the complacency that feeds stereotypes of dependency and helplessness among predators and treasure-hunters disguised as benevolent and selfless saviours. If Africans have not been sure about what to do with the neo-colonial and neoliberal umbilical cord that ties them and their continent to a fantasy of Western philanthropy, it could be argued that the Covid-19 pandemic is an opportunity for African leaders and people to think and realise that dependency may be a very convenient option, but a debilitating one. Beg, borrow, or repatriate misappropriated funds, one thing is certain: Fighting Covid-19 requires not rhetoric and vacillation but appropriate action, creativity, and innovative modes of solidarity.

⁹⁸ “Tackling the inequality pandemic: A new social contract for a new era”, United Nations Secretary-General António Guterres’s Nelson Mandela Annual Lecture 2020, 18 July 2020, <https://www.nelsonmandela.org/news/entry/annual-lecture-2020-secretary-general-guterres-full-speech>

⁹⁹ “How Big Tech got even bigger in the Covid-19 era,” by Robin Wigglesworth, 1 May 2020, <https://www.ft.com/content/d2e09235-b28e-438d-9b55-0e6bab7ac8ec>

¹⁰⁰ “Amid the Covid-19 pandemic, Big Tech companies report mixed earnings,” 31 July 2020, <https://www.livemint.com/companies/company-results/amid-the-covid-19-pandemic-big-tech-companies-report-mixed-earnings-11596154637567.html>

¹⁰¹ “Turning back the poverty clock: How will covid-19 impact the world’s poorest people?” by Homi Kharas and Kristofer Hamel, 6 May 2020, www.brookings.edu/blog/future-development/2020/05/06/turning-back-the-poverty-clock-how-will-covid-19-impact-the-worlds-poorest-people/?preview_id=804150

¹⁰² “Coronavirus: BBC poll shows stark divide between rich and poor countries”, <https://www.bbc.com/news/world-54106474>, accessed 11 September 2020

¹⁰³ “WHO Coronavirus Disease (COVID-19) Dashboard”, by WHO, 9 October 2020, <https://covid19.who.int/>

¹⁰⁴ According to the BBC, as of June 29 2020, “More than 501,000 people have died after contracting coronavirus, according to a tally by Johns Hopkins University in the US. Here are 10 countries reporting the highest number of deaths: United States: 125,803; Brazil: 57,622; United Kingdom: 43,634; Italy: 34,738; France: 29,781; Spain: 28,343; Mexico: 26,648; India: 16,475; Iran: 10,508; Belgium: 9,732”, <https://www.bbc.com/news/live/world-53216079>.

¹⁰⁵ “Trevor Manuel in bid to find international support for Africa”, by Linda Ensor, 13 April 2020, www.businesslive.co.za/bd/economy/2020-04-13-trevor-manuel-in-bid-to-find-international-support-for-africa

¹⁰⁶ “Covid-19 as a global challenge: towards an inclusive and sustainable future”, by Helen Lambert, Jaideep Gupta, Helen Fletcher, Laura Hammond, Nicola Lowe, Mark Pelling, Neelam Raina, Tahrat Shahid, Kelsey Shanks, [https://www.thelancet.com/pdfs/journals/lanplh/PIIS2542-5196\(20\)30168-6.pdf](https://www.thelancet.com/pdfs/journals/lanplh/PIIS2542-5196(20)30168-6.pdf)

The Challenge of Resilient Covid-19

Innovative modes of solidarity are a global imperative, as Covid-19 continues to defy popular and political impatience with scientific rigour, magical thinking and our human propensity to hope. The world is far from getting a handle on the virus. Very much like the proverbial elephant and the blind men, each who experiences the virus and lives to tell the tale adds to the growing understanding of just what untold havoc the virus is capable of wrecking. This is what we gather from Richard Quest of CNN, who is one of the lucky ones to recover from an attack of Covid-19. The terror in his description of Covid-19 is evident:

I got infected back in mid-April. The onset of symptoms came quickly. I suddenly noticed I was feeling very tired and I had a new cough. I got tested and the morning after I received a phone call from the medical center, I had tested positive for coronavirus.

The virus is like a tornado. When it lands, it swirls through the body, causing chaos, confusion, coughs, wreaking damage to each organ it touches. Some won't survive its visit. For those that do, when it has gone, one surveys the damage to the human landscape and realizes it's much greater than first thought. My symptoms were on the milder side: I never had breathing difficulties, or loss of sense or smell. I was wiped-out tired and I always had 'the cough,' which has now returned.¹⁰⁷

To recover in the immediate and short term, might not say much about the real impact of the virus on a victim's person. The coronavirus affects the entire human body. It "damages not only the lungs, but the kidneys, liver, heart, brain and nervous system, skin and gastrointestinal tract." Other effects include "causing the blood to clot, the heart to lose its healthy rhythm, the kidneys to shed blood and protein and the skin to erupt in rashes. It causes headaches, dizziness, muscle aches, stomach pain and other symptoms along with classic respiratory symptoms like coughing and fever."¹⁰⁸ Although Quest has supposedly recovered from the virus, it is difficult to be categorical. As Quest puts it:

The cough has come back, without warning and seemingly for no reason; so has the fatigue. True, neither are as debilitating as when I had the actual virus, but they are back.

Like many others, I am now coming to realize that I am living and suffering from the long tail of Covid-19.¹⁰⁹

He adds:

I am also discovering new areas of damage: I have now become incredibly clumsy. I was never the most lissom person, no one ever called me graceful, but my clumsiness is off the chart. If I reach for a glass, or take something out of a cupboard, I will knock it, or drop it on the floor. I have tripped over the curb and gone flying. I fall over furniture. It is as if that part of my brain, which subconsciously adjusts hand and movement to obstacles it sees, isn't working.

At times there's a sense of mild confusion. The micro delay in a thought, the hesitation with a word. Nobody would notice but me.

My digestive system is peculiar, to say the least.

¹⁰⁷ "I got Covid-19 two months ago. I'm still discovering new areas of damage", by Richard Quest, 7 July 2020, <https://edition.cnn.com/2020/07/07/health/richard-quest-covid-wellness-intl/index.html>

¹⁰⁸ "How coronavirus affects the entire body", by Maggie Fox, 11 July 2020, <https://edition.cnn.com/2020/07/10/health/coronavirus-entire-body-effects-columbia/index.html>

¹⁰⁹ Ibid.

It doesn't matter whether I call them symptoms, traits, or wreckage -- my body doesn't feel quite right.¹¹⁰

These potentially long-term ramifications of Covid-19 on humans, along with the extended effects of Covid-19 induced pollution of the environment¹¹¹, make the case for global unity in the service of humanity even more compelling. UN Secretary General Antonio Guterres, who delivered the 2020 Nelson Mandela Foundation Lecture on July 18 via video link from New York, used the opportunity to reiterate his call for global solidarity and leadership in tackling “the inequality pandemic.” He maintained that the Covid-19 “pandemic has demonstrated the fragility of our world”, and “laid bare risks” which the powerful and privileged few “have ignored for decades” despite the critical voices that have sought to draw attention to such realities as: “inadequate health systems; gaps in social protection; structural inequalities; environmental degradation; the climate crisis.” He appealed for a “New Social Contract and a New Global Deal that create equal opportunities for all, and respect the rights and freedoms of all.” Such a contract and deal should “enable young people to live in dignity; [...] ensure women have the same prospects and opportunities as men; and [...] protect the sick, the vulnerable, and minorities of all kinds.” It should ensure that we “right the wrongs of the past and move forward together, for the good of all.”¹¹²

Conclusion

The coronavirus has without doubt proven itself to be a truly global pandemic, and in the process has drawn fresh attention to a proliferation of excruciatingly resilient local and global infrastructure of inequities and inequalities. No geographical region or social category has escaped devastation by Covid-19. In some regards, it could be argued that some countries usually categorised in a taken-for-granted manner as rich, industrialised, technologically advanced, pacesetters in modernity, and at the apex of civilisation have been the most afflicted by the virus. The USA, renowned for its litany of systemic racism and related inequalities, belongs in this category and is arguably the world's leading economy, is leading as the worst-affected country in the world by coronavirus infections and deaths. Brazil, a giant of the Global South, a country with “a long legacy of racism” and the last country in the Americas to abolish slavery, follows closely. As Djamila Ribeiro observes, while Brazil may not have resorted to “a legal apartheid like the US or South Africa”, the state has done little in public policy to desegregate society institutionally and structurally since slavery was abolished in 1888.¹¹³ While it is true that the situation in both Brazil and the USA has been exacerbated by the incompetent, ignorant and arrogant leadership of their respective presidents, it has also revealed Covid-19 to be particularly savagely drawn to preying upon resilient systemic inequalities, injustices and hierarchies of humanities in both societies. Due to similar structural inequalities inherited from the apartheid era and compounded by corruption and lip service to transformation under the ruling African National Congress (ANC) government¹¹⁴, in South Africa, timely national state of disaster and prolonged lockdown measures taken under the active leadership of President Cyril Ramaphosa may have mitigated the explosive proliferation of

¹¹⁰ Ibid.

¹¹¹ As reported on the BBC, with the advent of the Coronavirus and the need for protection against it, “The masks you throw away could end up killing a whale”, as “more and more protective equipment is ending up in the sea.” According to Ocean Conservancy, “We are putting 129 billion face masks and 65 billion plastic gloves into the environment every month, according to Ocean Conservancy”, 8 July 2020, <https://www.bbc.com/news/av/science-environment-53287940/coronavirus-the-masks-you-throw-away-could-end-up-killing-a-whale>. It is worth noting that the environmental issues are greater than this. Other effects include increased use of detergents, sanitisers, alcohol-based substances that enter water ways and seas with as yet under-assessed implications; there is some research suggesting covid is entering sea through waste water systems, again with unknown consequences for marine life; increased use of medications, which, as waste, enter water ways etc.

¹¹² “Tackling the inequality pandemic: A new social contract for a new era”, United Nations Secretary-General António Guterres’s Nelson Mandela Annual Lecture 2020, 18 July 2020, <https://www.nelsonmandela.org/news/entry/annual-lecture-2020-secretary-general-guterres-full-speech>

¹¹³ “Brazil’s racial reckoning: ‘Black lives matter here, too’”, by Katy Watson, 25 July 2020, <https://www.bbc.com/news/world-latin-america-53484698>

¹¹⁴ “A king’s allowance and almost a king’s ransom in tenders for presidential spokesperson’s husband”, by Ferial Haffajee, 28 July 2020, <https://www.dailymaverick.co.za/article/2020-07-28-a-kings-allowance-and-almost-a-kings-ransom-in-tenders-for-presidential-spokespersons-husband/#gsc.tab=0>

Covid-19, but with over 646,398 positive cases and more than 15,378 deaths as of September 11 2020¹¹⁵, the country has still emerged as having the most cases and the most deaths in Africa so far. Dr John Nkengasong, director of the Africa CDC, is very concerned that the virus is seeping into vulnerable populations around big cities, the less-privileged areas and the slums in South Africa.¹¹⁶ There is concern as well, that a newly approved IMF loan to mitigate the negative economic effects of Covid-19, might only compound the precarious situation of the South African poor, for a range of reasons, amongst which, the IMF's notoriety as a cure that is often more dangerous than the disease.¹¹⁷ Indeed, moved by nationwide outrage at reports of corruption in his ANC government's response to the coronavirus pandemic, President Ramaphosa wrote a letter to fellow members of the ANC in which he expressed his support for the popular anger and disillusionment in these terms:

I write this letter to you, my fellow ANC member, as our movement and our country face one of the greatest challenges since the advent of democracy.

I am sure that you are aware that across the nation there is a sense of anger and disillusionment at reports of corruption in our response to the coronavirus pandemic.

This anger is understandable and justified. In recent weeks, we have heard stories of tenders for personal protective equipment that have been given to individuals associated with ANC leaders and of public servants flouting the law in issuing tenders.

What has caused the greatest outrage is that there are private sector companies and individuals (including civil servants) who have exploited a grave medical, social and economic crisis to wrongfully enrich themselves. This is an unforgivable betrayal for the millions of South Africans who are being negatively affected by the impact of Covid-19, experiencing hunger daily, hopelessness and joblessness.¹¹⁸

Almost everywhere, regardless of geography, the fact of a resilient racialised configuration of the world has meant that black and brown people have borne the brunt of coronavirus infections and deaths, as Covid-19, in its globalised nimble-footedness, has opportunistically insinuated itself into intimacies, by preying on sociality, comparative disadvantages, pre-existing precarities and related physical frailties that feed from and into debilitating hierarchies of systemic inequality and poverty. The fact of racial and ethnic hierarchies of humanity has meant that while Chinese and other East Asians have been stereotyped and unfairly victimised as vectors in other parts of the world in the beginning of the pandemic, in China for instance, Africans have in turn been subjected to similar prejudice, stereotyping, discrimination, and physical and social distancing by Chinese. To what extent, in our post-covid-19 world, will we in positions of power and privilege have learnt to exercise greater accommodation of those we tend to dehumanise, and either to immobilise or to mobilise purely on our own terms? If and when borders and airports closed down in a bid to police the spread of Covid-19 are reopened, what lessons in global solidarity and tolerance will we have learnt and how generous to strangers, foreigners and migrants are we prepared to be,

¹¹⁵ "Latest confirmed cases of covid-19 in South Africa (11 sept 2020)" by National Institute for Communicable Diseases, 11 September 2020, <https://www.nicd.ac.za/latest-confirmed-cases-of-covid-19-in-south-africa-11-sept-2020/>

¹¹⁶ "Covid-19 Lessons from South Africa: Africa warned about dangers of pandemic taking root in vulnerable communities", by Peter Fabricius, 23 July 2020, <https://www.dailymaverick.co.za/article/2020-07-23-africa-warned-about-dangers-of-pandemic-taking-root-in-vulnerable-communities/#gsc.tab=0>

¹¹⁷ "The IMF's \$4bn loan for South Africa: the pros, cons and potential pitfalls", by Danny Bradlow, 28 July 2020, <https://theconversation.com/the-imfs-4bn-loan-for-south-africa-the-pros-cons-and-potential-pitfalls-143553>

¹¹⁸ "Let this be a turning point in our fight against corruption," by Cyril Ramaphosa, 23 August 2020; See also "End of Cyril Ramaphosa 'The Consensus Man?'" by Stephen Grootes, 23 August 2020, <https://www.dailymaverick.co.za/article/2020-08-23-end-of-cyril-ramaphosa-the-consensus-man/>; "Read the full letter Ramaphosa sent to the ANC on corruption," <https://ewn.co.za/2020/08/23/read-the-full-letter-ramaphosa-sent-to-the-anc-on-corruption>, accessed 24 August 2020.

regardless of race, geography, class, gender, sexuality, culture, religion and related categories that inform our judgement, policies and decisions on who belongs or not?¹¹⁹

In other respects, the virus has adopted and in certain instances reinforced pre-existing hierarchies of race, class, space, gender and age as loci of vulnerabilities. While every social category is affected, not everyone is affected to the same degree. Everywhere, people aged 55 and above are dying more than their younger counterparts, despite reports that “People in their 20s, 30s and 40s account for a growing proportion of the cases in many places, raising fears that asymptomatic young people are helping to fuel the virus’s spread.”¹²⁰ There are also gender differences in how the virus affects humans, with men more likely to be infected and to die of the virus than women, and women in turn more likely to suffer disproportionately from loss of economic and academic opportunities and from gender-based violence as a result of being physically and socially confined in the same spaces and places with men under prolonged lockdown in contexts of patriarchy and insensitivity to the rights and humanity of women.¹²¹ There is discrimination along racial lines as well, in racialised societies (like the UK, USA, Brazil and South Africa) that privilege whiteness and its system of values, where black and brown people are dying in inverse proportions to their white counterparts. Such disproportionate deaths, at face value, reflect the inaccessibility of affordable and quality healthcare as well as systemic exclusion from other societal services and benefits. They also reflect the preponderant, albeit contested, positions of servitude, subservience, subjugation and invisibility of black and brown people on the hierarchy of socioeconomic and political visibility that neoliberalism and legacies of the institution of enslavement and racialism have normalised, actively maintained and reproduced in various guises and disguises.¹²²

While the economic effects globally are devastating for most as the virus drives productivity into hibernation, some regions and social categories are more acutely affected than others because of the systemic hierarchies of inequalities. In Africa, the attention to Covid-19 by governments is severely mitigated by deplorable under-staffed and overwhelmed public health systems, where health workers are disproportionately testing positive for Covid-19 due to shortages of personal protective equipment¹²³. There is the added risk of dying as much from hunger and poverty as from Covid-19. If the rest of the world has in the past and under relatively normal times not been that generous to or in solidarity with Africa and its claim to human equality and dignity, there is little reason to be optimistic that plagued by their own Covid-19-imposed-challenges, they would maintain or enhance their philanthropy towards the continent. Yet, it is precisely innovative modes of solidarity that are needed to tackle what the UN Secretary General Antonio Guterres, has rightly termed “the inequality pandemic” that has opened the floodgates to an opportunistic pandemic like Covid-19 to prey upon a racialised Eurocentric male dominated world of crippling inequalities and insensitivities.¹²⁴ It is significant that Guterres, in his Mandela lecture, is on the side of victims of systemic exclusion, especially given that the UN as the institutional locus of his enunciation is a contributor to the problem. The world cannot continue to appeal to victims of systemic inequalities and injustices to bend over backwards to the point of contortion to demonstrate resilience while simultaneously turning a blind eye on the pernicious resilience of the very same

¹¹⁹ See “Writing about “that kind of country” in a time of coronavirus,” by Jess Auerbach, 19 March 2020, <https://africanarguments.org/2020/03/19/writing-about-that-kind-of-country-in-a-time-of-coronavirus/>; “Convivial networks: how migrants cope with the pandemic in South Africa,” by Tamuka Checkero and Helidah Refloce Ogude, 14 September 2020, <https://www.coronatimes.net/convivial-networks-migrants-pandemic-south-africa/>

¹²⁰ “As Virus Surges, Younger People Account for ‘Disturbing’ Number of Cases”, by Julie Bosman and Sarah Mervosh, 23 July 2020, <https://www.nytimes.com/2020/06/25/us/coronavirus-cases-young-people.html>

¹²¹ The full psychological and social impact of prolonged periods of lockdown are still a matter of speculation. See, “How lockdown may have changed your personality,” by Christian Jarrett, 29 July 2020, <https://www.bbc.com/future/article/20200728-how-lockdown-may-have-changed-your-personality>

¹²² See Faye Harrison interviewed, “ODVV interview: Systemic racism in the US assumes a variety of covert and overt forms,” by Kourosh Ziabari, 25 June 2020, <http://www.odvv.org/blog-3049-ODVV-interview-Systemic-racism-in-the-US-assumes-a-variety-of-covert-and-overt-forms>

¹²³ “Coronavirus ‘disproportionately hit African health workers’”, by Rhoda Odhiambo, 23 July 2020, <https://www.bbc.com/news/live/world-africa-47639452>

¹²⁴ “Tackling the inequality pandemic: A new social contract for a new era”, United Nations Secretary-General António Guterres’s Nelson Mandela Annual Lecture 2020 speech, 18 July 2020, <https://www.nelsonmandela.org/news/entry/annual-lecture-2020-secretary-general-guterres-full-speech#search-form>

structural injustices and inequalities at the roots of the savage trinity of repression, suppression and oppression that continues to neutralise their dignity and determined pursuit of fulfilment.