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Editorial

Greetings from the Editorial Team of Development Cooperation Review (DCR). We are happy to note that DCR enters its third year, thanks to your constant patronage and support. In order to make it further attractive, it has been decided to enrich the journal with longer, more analytical pieces related to development cooperation to provide the readers an incisive view of the challenges ahead. Keeping in mind the need to change for the better, it has been decided that from this year onward DCR will be published quarterly, i.e. four times a year. Most of the issues will focus on some specific and relevant issues. The present issue deals with the concerns of and challenges to development cooperation in relation to the global pandemic currently battering people and countries across the globe.

As the global pandemic, COVID-19 has spread to more than 190 countries, economies all around the world are faced with the challenge of falling income levels, increasing unemployment, declining consumer demand, worsening public health and food security situation and shrinking export revenues and foreign direct investments. Most major economies of the world like the US, UK, Germany, France, China, etc., are on the verge of a collapse. It is being said that the US, where the unemployment rate has shot up to 14.7 per cent, is facing its worst economic crisis since the Great Depression. Countries from the global South have also been severely affected. Reviving the faltering economies on a war-footing would be the immediate goal of development cooperation among the countries.

The present issue of DCR focuses on the impact of COVID-19 on African economies and how the challenge can be effectively handled by the African nations. So far, there have been more than 60,000 confirmed cases of COVID-19 in the African continent with more than 2000 deaths. Only recently, the WHO has stated that up to 1,90,000 could die in Africa due to COVID-19 and between 29 to 44 million people could contract the disease if mitigation measures fail.

Being the poorest continent in the world, the healthcare sector in Africa already suffers from various shortcomings in the form of having very few doctors and healthcare workers, limited critical care units, etc. There is a need to greatly upgrade the public health infrastructure in most African nations. Since there is a high prevalence of illnesses like
HIV, Tuberculosis, Hypertensions, etc., in many African countries, there is greater chance that the comorbid populations will suffer from high mortality rates. As a way to mitigate that, public expenditure on hospital beds per capita, critical care units, ventilators, etc., needs to be increased rapidly. Governments should scale up testing and contact tracing to isolate individual cases in order to curtail spread of the virus. Moreover, the need to create reliable pharmaceutical supply chains and develop domestic capacities in bio-technology cannot be over emphasized.

Greater access to technology is necessary to control the spread of the virus. Mobile payment systems, digital banking platforms, etc., help in avoiding congestions and maintain social distancing. Several national governments have also introduced various web based apps to disseminate information regarding the pandemic to people and help in taking preventive measures.

To ensure food security, storage and distribution infrastructure need to be upgraded in all African nations. Mechanisation level of farms need to be enhanced and any wastages in the supply chain should be minimized.

Governments should encourage the creation of a basic income support fund to which all countries must contribute and which could be used for facing further such pandemics and other natural disasters. Similar such support funds should also be created by regional groupings of various countries.

It is predicted that the African Continental Free Trade Area (AfCFTA) will increase consumer spending by USD 1.6 trillion by 2030. As shown by African Economic Outlook 2019, Africa could gain around USD 134 billion each year, if other developing countries reduce their tariff and non tariff barriers by half. African nations need to implement monetary and fiscal policies to stimulate domestic demand and help businesses. Hence the implementation of AfCFTA should be speeded up to provide additional fiscal revenues.

The present issue of DCR, in its new format, touches upon many of these prime concerns.

Your contributions in the form of full length research articles, commentaries, comments and reports from the ground would enrich the forthcoming issues in a meaningful way.
The COVID-19 pandemic, that started in a wet market in Wuhan China, has spared no country though marked differences are noticed in its spread and severity across nations. While the highest number of infections in Africa has been reported by Egypt, South Africa and Algeria, the sub-Saharan Africa have these numbers in three digits or less. Africa with its young population may not be as badly hit as societies with older and ageing populations, yet economic effects could be devastating. Slow spread in Africa has also provided it sufficient lead time to put right policies in place, and learn from the experiences of others. However, the danger from this invisible enemy is not over yet, and one could still see a late surge of the pandemic stretching well into the second quarter of 2020. It is clear that different countries have peaked at different times since the initial cases started getting reported some three months ago.

Beyond the direct human costs of any pandemic, the measures to fight the virus invariably impose cost across the economic, social and psychological spectrum. An eventual political price may also be paid, depending on how the Governments show up on the parameters of good governance and delivery of care and succor.

*The costs associated with this crisis are testing each nation’s capabilities and posing a moral dilemma: to save lives or livelihood!*

“Amar Sinha* 

* *Distinguished Fellow, RIS. Views expressed are personal.*
Without a cure or a vaccine in sight most governments have relied on the only proven way to deal with a contagion - reliance on lockdowns and extreme physical distancing - to flatten the curve, delay the spread, and protect their limited health sector capabilities from getting completely overwhelmed. Health care facilities even in the most advanced and rich nations have been found wanting, unable to cope with the speed and scale of the pandemic’s spread. The costs associated with this crisis are testing each nation’s capabilities and posing a moral dilemma: to save lives or livelihood!

IMF while predicting the largest contraction in African GDP, around 1.6 per cent, also provides a positive outlook on its ability to bounce back. While many African nations were growing at a fast clip, others were struggling with low growth coupled with high indebtedness. These nations may find it impossible to honor their debts at this moment. The real challenge at present is minimising damage so that its effects do not become a drag on future African growth trajectory. Nations with non-diversified economies especially dependent on tourism, hospitality, agriculture, oil and gas and other minerals are more vulnerable.

“The problem facing the rich countries, daunting as they are, are dwarfed by those awaiting many poor ones” writes The Economist. Their prediction may not be too off the mark. The poorer countries whether in Asia or Africa, will not only have to contend with weak and inadequate national health sectors, but additionally would have to grapple with their lack of manufacturing capacity, import dependence, insufficient funds to pay for the much needed imports (of medicines, testing kits and PPE). Even if resources were available they may run into walls of export restrictions imposed by others, either equally in need, or worse due to a misguided policy of “Me First”

As The Economist noted, “International goodwill has been in short supply.” There are stories coming out of nations holding on to what they have, or even diverting supplies meant for other destinations by outbidding the original buyer. Clearly efforts to ramp up domestic manufacturing capabilities are slow to take off. The danger of falling prey to fly by night operators engaged in price gouging or supplying substandard equipment is real, as already recorded in several countries, including India.

Way Ahead
The pandemic will lead to serious policy rethink in many Capitals especially on issues related to geopolitics, utility of multilateralism and globalisation, definition of strategic self-reliance, and the entire set of rules that governed interstate
relations hitherto. As perception of global institutions failing to live up to their tasks grows, invariably their roles would be minutely scrutinised. Unfortunately, most nations with the ability to help others will remain preoccupied with domestic challenges, and may be averse to diverting resources to nations with the greatest needs.

Crisis requires cooperation and joint action, but the logic of geopolitics seems to suggest that multilateralism would be the major casualty. Given this challenging background, where internationalism and international cooperation will take a backseat, the argument for South-South becomes stronger. Analysts have drawn lessons from the recent past, when the global financial crisis of 2008 spurred greater international cooperation, and a growing realisation that challenges of today need collective action. No nation can do it alone. Recently UN adopted by consensus under ‘silent procedure’ a resolution that calls for ‘international cooperation and multilateralism’.

**India’s Role**

An abiding belief in collective action and common prosperity has guided Indian policies since her independence, and it is time India took a leading role in creating a new architecture and institutions that focus on South South cooperation and pooling of resources from the North to leverage the collective experiences and expertise of the South. This effort has to be supported by think tanks, civil society organisations and also other like-minded countries.

A modest yet effective initiative has been taken by RIS (a think tank specialising in economic, regional integration and sustainable developmental issues) in setting up a Global Development Centre that leverages India’s growth experiences and attempts to take it to the developing countries, and creates a platform for exchange of global best practices. This initiative found support of UK’s DFID, recognising India as a leading provider for such public goods that build local capacities on the ground.

While Government of India was supplying medical assistance and facilitating shipments of much demanded essential medicines to countries in need, RIS/GDC along with the Public Health Foundation of India (PHFI) delivered a three Webinars on COVID-19, attended by over 150 participants from nearly 20 countries in Asia and Africa. The Webinar covered every aspect of the pandemic- from detection, testing, diagnosis, treatment, to ICU care, isolation as well as protection of health care professionals. Innovation successfully overcame the limitations imposed by the lock down and ban on travel. The popularity of this initiative among the public health
professionals was clearly discernible in the active conversations that followed each presentation. This is just a small example of how practical and cost effective cooperation at the grassroot level will continue, despite the geopolitical strains caused by the pandemic. India and her various institutions will be on the frontline assisting our friends and neighbours. Standing by each other in this moment of global crisis is the demand of the hour. There would be time for geopolitics to play out, but for the moment that could wait.

SOUTH KOREA COLLABORATES WITH AFRICAN NATIONS IN FIGHTING COVID-19

New opportunities for cooperation have emerged between South Korea and Africa due to COVID-19. South Korea, whose regime of extensive testing and contact tracing has been praised worldwide, has already started to engage with African nations.

South Korean President Moon Jae-in who was in talks with the Ethiopian Prime Minister Abiy Ahmed agreed to the importance of G-20 states in providing support to the African states. The Director General of the World Health Organization (WHO), Dr. Tedros Adhanom Ghebreyesus had urged Moon to provide medical equipment and testing kits to African states to prevent the spread of the virus, to which Moon agreed. The South Korean President has also promised to expand South Korea’s support to WHO and UN-led Coronavirus response program.

The Foreign Ministers of South Korea and Morocco agreed to a transaction under which Morocco bought 100,000 testing kits from a South Korean medical supplier. A similar arrangement involving the sale of testing kits was made with South Africa as well. According to a South Korean Foreign Ministry official the country intends to donate COVID-19 testing kits to 6 countries across Africa and the Middle East.

Other than the government, South Korean nonprofit organisations are also taking a lead in providing assistance to African countries. For instance, in Ethiopia, a South Korean NGO Warmth Day, has begun to provide its beneficiaries with masks and personal protective equipment (PPE). Also, a South Korean NGO called Africa Freedom Foundation and Anyang Global Methodist Church have donated 10 ambulances to Madagascar.

As the COVID19 ravaged Wuhan city of China - its epicenter, and Chinese production centers went silent following a lockdown, African economies relying on the Chinese market as both export destinations and major source of imports encountered an unprecedented scenario. Further, shutdown in other global economies, especially in Europe and North America, worsened the situation. The major sectors of tourism, oil, gas and agriculture have been grossly affected. Mckinsey and Company (2020), project that in the best-case scenario, Africa’s GDP will dip to just 0.4 per cent from 3.9 per cent under normal circumstances. Deficiencies in the continent’s health care systems pose enormous challenges in countering the pandemic. The shock waves of COVID-19 are far-reaching. The article analysis impacts of COVID-19 on Africa’s development processes.

**COVID-19: Impacts on Trade, manufacturing and Industrialisation in Africa**

Exports from Sub-Saharan Africa - mainly oil, raw materials and agricultural products - amount to USD 2.8 billion (World Bank 2018). As the manufacturing sector closed down in China, Africa’s largest trading partner, the market for the continent’s exports significantly...
declined. Moreover, the shutdown in China disrupted the global value chains. Africa, relying on China for over 60 per cent of her import, mostly finished consumer products is encountering several shortages. However, the tipping point appears to be a slowdown in demand from other major global markets especially Europe and North America, and break in supply of the continent’s imports especially industrial machinery, manufacturing, and transport equipment. With these shortages in essential production supplies and the slowdown in demand for output, factories have been compelled to either operate at minimum capacity or completely shut down operation. Intra-Africa trade estimated at 16.7 per cent can barely absorb existing production levels. Moreover, as several countries enter lockdown, hope in the manufacturing sector, which has shown a resilient annual average growth of 3.5 per cent for the period 2005-2014 (Signe, 2018), and a GDP contribution of 10.9 per cent, has been dashed. Furthermore, there is despair as over 11 per cent of the continent’s workforce employed in the industrial sector face a lay-down. However, the just concluded African continental free Trade Area (AFCTA) offers a ray of hope. AFCTA is expected to increase consumer spending by USD 1.6 trillion by 2030. Increased demand along with free access to the continents 1.2 billion population, with a combined GDP of USD 2.5 trillion is an incentive to maximize economies of scale consequently lowering prices and increasing employment opportunities.

**COVID-19 and Africa’s Digital Economy**

In the wake of COVID-19, digital economies, generally desirable, gained even more relevancy in Africa. WHO encouraged digital transactions as a means of curbing the spread of the virus. In this regard, mobile payment systems have become a significant health care tool. Mostly run by telecom companies, 60 per cent of adults in Africa own mobile money accounts. Moreover, telecom companies and commercial banks created an interface with telecom - prior to the crisis - enabling mobile money account holders to access money in their bank accounts. In the wake of COVID-19, commercial banks have encouraged the use of digital banking platforms. This measure would reduce strain, travels and congestion in accessing the poorly distributed commercial banks in the continent especially during this time of social distancing. Further an interface created between commercial banks and telecom companies that enable clients to access funds in their accounts through their mobile money – most popular payment system. Considering that most of Africa’s rural population depend on remittances from urban dwellers, sustaining uninterrupted transfer of
funds is important in reducing the strain on the needy rural dwellers during the lockdown.

However, it is notable that amount of money processed through Point of Sale (POS) in Africa remain 5 per cent of Africa’s GDP while the online transactions are still low despite the rise in smart phone concertation. COVID-19, is therefore, a challenge for the banking sector to maximize their digital payment options. In this regard, there are several lessons, especially drawing from India’s Unified Payment system (UPI). The UPI allows multiple accounts in a single application and providing cost effective and instant transfer of funds, an ideal platform commercial banks need to promote digital payment.

It is also worth noting that amidst expected higher digital purchasing power, online stores - serving a population of 21 million customers, growing at 18 per cent - are weak for minimising market movements in search of groceries and other necessities.

COVID-19: Peace, Conflict, and Post-Conflict Africa

In a very rare move, separatist groups in North-West and South-West Cameroon unilaterally declared a ceasefire in the wake of the COVID-19 outbreak in the region. The conditional and seemingly temporary ceasefire though welcomed appears to be symbolic, yet behind the symbolism lies a completely broken healthcare system. Furthermore, large proportions of the population - mostly women, children, and the elderly - are malnourished in crowded refugee camps, across the continent, with barely the basics for survival. All these factors make COVID-19 response in conflict and post-conflict regions of Africa even more challenging.

The COVID-19 Challenge to Multilateralism: Regional Economic Communities (RECs) in Africa

Largely a global trend, COVID-19 is a significant test of the strength of regionalism in Africa. Several countries basing on national assessments acted unilaterally to close border points or suspend incoming international passenger flights, international flights were particularly sensitive to reduce imported cases. Coordinative power bestowed on the Regional Economic Communities has largely remained unutilised. However, the Economic Community for West African States (ECOWAS) - popular for handling political stalemates - had a unique response. ECOWAS promptly convened a COVID-19 preparedness and response meeting. The South African Development Community (SADC) also instituted a peer-reviewed assessment of national readiness, but like other RECs, it was
a reaction to already reported cases in the region. It is important that the REC’s in Africa coordinate response measures to reduce instances of cross border infections but also facilitate cross border smooth flow of essential goods. Furthermore, REC’s would act as a hub for collaborative research and sharing of best practices.

**Countering COVID-19 in Africa: Fiscal and Monetary Policies**

African countries have stepped forward measures to contain the economic impact of the crisis. The policies which encompass debt restructuring, reduction in credit ratio, purchase of bonds sold by commercial banks, among others, aim not only at increasing liquidity but also supporting the vulnerable companies to stay in business. However, these expansionary monetary policies will increase aggregate demand, yet the supply of essential commodities especially food is expected to remain constant at least in the short run, risking high inflation rates. While economies like Rwanda have accompanied such policies with price regulation for staple foods and other most essential commodities, others have still left it to the market forces, risking the welfare of low-income groups.

Furthermore, most African countries hold relatively small reserves. As key sectors - tourism and hospitality, agriculture, oil and gas, are strangled by the COVID19 pandemic, and domestic revenue collections plummet, many African economies are experiencing difficult times. Rwanda is already meeting her Balance of Payment needs with USD109 million Rapid Credit Facility from the IMF, and a similar fate awaits many other African countries. It is also apparent that Africa has lost the capacity to meet her USD 500 billion (World Bank, 2018) debt commitments. The future post COVID19 will necessitate debt restructuring and debt forgiveness from all major lenders.

**Looking Forward**

COVID-19 in Africa has drawn responses from medical and military officers, local and International community, civilians and corporates, and temporarily healed political divisions. With no end yet in sight, the virus is sure to wash down the economic progress the continent has accumulated, with even dire consequences to low-income groups. Across the continent, supply has been disrupted and demand is declining - a perfect recipe for a recession. However, to enhance response, resilience and recovery, the continent will have to articulate prudent fiscal and monetary policies and hopefully enjoy continuous support from the international community. The African Union has a more critical role to play in coordinating regional
and national post COVID-19 recovery plans. Furthermore, the AU has an important role of facilitating trade with emphasis on cross border digital trade and repositioning the continent into regional and global value chains. In preparation for future pandemics, the AU has to focus on providing regional public health goods, and facilitate research and development.

References

RUSSIA PROPOSES ESTABLISHMENT OF A SPECIAL FUND TO ASSIST AFRICA

Russian President Vladimir Putin has pledged support to the African continent in its fight against coronavirus. At the G20 virtual summit that took place in March, Putin proposed the creation of a special fund to assist Africa and stressed on the need to continue regular exchange of information regarding the pandemic.

Putin urged the World Health Organization (WHO) to focus its efforts towards detecting hidden coronavirus epidemic in countries which were not able to organise testing and also stressed upon joint research by countries to speed up the development of vaccines and medications. According to an executive decree, Russia has agreed to contribute USD 1 million to the WHO to fight coronavirus.

South African President Cyril Ramaphosa who is also the Chairperson of the African Union has stressed upon the need for medical supplies and equipment and has emphasized on international support and cooperation. The African Union Covid-19 Response Fund was created on March 26 to which its members have pledged a sum of USD 12.5 million.

According to several estimates from health organisations, at present there are more than 10,000 confirmed cases of COVID-19 across the African continent.

COVID-19 is deeply attacking our societies at the core. With a population of 1.3 billion, Africa is likely to suffer far more than other continents. High prevalence of malnutrition, anaemia, malaria, HIV and tuberculosis is going to tremendously increase its burden further with nearly 40 per cent of its population residing in the urbanised areas and approximately 53 million in crowded slums. Eighty five percent of them live on less than USD 5.50 a day, around 70 per cent of them are under 30 years of age and nearly 4 per cent are over 65. One in three of its children under five suffers from stunting. Around 40 per cent of them live in the water stretched environment. Their health system, which is already far too thinly stretched, is going to be overwhelmed by the unprecedented challenge.

As on 16 May 2020, 52 African Union Member state have reported 78194 COVID-19 cases with 2630 deaths and 29453 recoveries. Largest number of confirmed COVID-19 cases have come from South Africa(13524), Egypt(11228), Morocco(6652) and Algeria(6629). According to a highly disturbing report by Arkebe Oqubay[R2] on project-syndicate.org, carried by Africa CDC, researchers at Imperial College of London recently estimated the virus will kill 300,000 people in Sub-Saharan Africa not to mention the economic costs.

*Director (Fin. & Admin), RIS. Views expressed are personal.
According to IMF, COVID-19 has caused far deeper recession than 2009. We have with us 51 vulnerable or conflict affected countries in Africa, Middle East and Latin America within its grips. It has started causing historic levels of unemployment and deprivation all around. Tens of thousands of deaths, unprecedented economic devastation and lockdowns across the world are becoming the new normal. It has suddenly upended our assumptions to work on well-established ways and forced some of our highly democratic societies to think and act in an authoritarian way to stall its advance.

Our response to deal with its unbearable impact in Africa has to be well coordinated; quick and decisive without being incremental or graduated; science based and cooperative as time is of essence. It has to match its magnitude combined with innovative, localised and differentiated strategies anchored on the basic premises that there is no vaccine or treatment for it and it can only be suppressed through social distancing and fortification of immunity level of the people. They have to be sternly advised to follow the medical advice for hand washing. Africa has the advantage of learning from the devastating experience of other countries, including China, United States and Europe and has to act fast to stop witnessing piles of dead bodies all around.

Though everyone is at high risk from it in the continent, those who are being immediately impacted by it are women, youth, low wage workers, newly established SMEs, people living in extreme poverty or living in unserved areas, lacking basic social and political protections, particularly those who live in densely populated areas and are unable to self-isolate. It is bound to exacerbate feminisation of poverty, push violence and deeply hurt women equality. More and more women would henceforth be doing unpaid work. People in large population zones and engaged in large informal sectors are going to face its greatest impact because they earn their food and living on day to day basis.

Being the Africa’s largest investor, China has around 10 million of its nationals in the continent. Thousands of Africans students continue to study in China. All of them are going to be impacted by COVID-19. Current African growth, which is to a great extent run by Chinese investment, engineering expertise and training programmes, would also suffer intensely. Shrinking Chinese financial muscle due to ongoing trade wars and declining exports is likely to limit Chinese assistance to emergency assistance to the region. According to UNECA, African growth is likely to drop to 1.8 per cent from 3.2 per cent and with drastic fall in
commodity prices Africa is bound to face unbearable fiscal pressure in its key sectors like mining, tourism, oil and hospitality.

According to WHO, around 10 per cent of the global GDP is needed to meet the COVID-19 challenge. ILO says there would be between 5 to 25 million job losses costing between 86 billion to USD 3.4 trillion. While IMF has USD 600 to 700 billion available to lend, it requires around USD 2.5 trillion. It has asked G-20 for doubling up of its resources to give debt relief to the poor countries. In some cases, Western countries have deferred the period of debt servicing by African countries by six months without writing them off to enable them to purchase medical equipment to deal with the situation locally so that the industrialised world does get impacted afresh from its new waves from Africa.

The most important question confronting the global economies, including Africa, is how to get people back to work, how to get students back to schools and how to narrow down the social distancing, which has set the world apart. The key to defending from the COVID-19 problem is suppression of its transmission through physical distancing, quarantine, isolation, lockdown, testing and rapid contact screening, and frequent washing of hands with sanitisers or clean water to wash the virus away. Similarly, food and vegetables have also to be thoroughly washed. Unfortunately, most of the African countries lack clean running water, suffer from high population, and observe family co-habitation which is going to prevent much needed physical distancing to keep the virus at bay. The high percentage of Africans participating in social gatherings as a matter of routine is going to further aggravate the situation unless they are persuaded to stay away from such congregations for personal and collective good of society. Africa desperately needs medical equipment, disinfectants, sanitisation products, masks and ventilators, apart from electricity and oxygen to use them. As 70 per cent of women make up the medical workforce, they are bound to face the highest risk.

The entire financial burden of African countries in their fight against the virus has completely fallen on the national governments without much support coming from their private sector or external partners who are already under tremendous financial stress. However, some prominent private sector leaders, religious institutions and prominent public figures have lent their financial support to government’s initiatives which is commendable. It has completely blurred or removed the line between public and private sector and with the shutdown of manufacturing there is a halt in key sectors now. Even the WHO is under tremendous financial stress.
As part of its philosophy of considering the world as a large family transcending religious, ideological or geographical boundaries, India is proactively sharing its vast experience and expertise in this field, including supply of critical medicines, to needy countries in the world, including South Africa, Egypt, Uganda and some other countries in Africa, apart from the USA, Spain, Germany, Brazil and Australia and its neighbouring countries, including Bhutan and Nepal as its service to humankind. Its medical professionals are sharing their experiences with the partner institutions in developing countries through a wide range of Webinars. Global Development Centre at RIS has already organised three Webinars for medical professionals and workers on how to deal with COVID-19 from Asia and Africa with the help of Public Health Foundation of India and the fourth one is going to be organised shortly.

At this juncture, digital technology is playing an extremely vital important role towards facilitating business continuity, connecting people more than ever before and helping them maintain good mental health. The electronic and social media have also played an extremely important role in guiding people how to deal with the evolving situation. Unfortunately, around 3.6 billion people around the world continue to live offline. China, South Korea, Japan, Taiwan, Singapore and India have substantially benefitted from the innovative use of digital technology in this regard. The main public heroes are the medical professionals, including doctors, nurses, and sanitary and other frontline workers who are supported by and law enforcement officials who are working 24/7 to enforce public safety guidelines. Media has to be effectively managed through immediate quashing of fake news and the public concerns have to be effectively allayed with the help of personalised audio/video messages on social media and all television channels by prominent personalities from the world of medicine, films, dance and music, religious leaders and even comedians in whom general public has greater trust than the politicians, to stay indoors, observe social and physical distancing and lockdowns.

The key challenges are how to save lives, livelihood and emerge stronger. As the vaccines against COVID-19 is unlikely to be available between 12-18 months or until its genetic sequence is obtained by medical research institutions at national, regional and global level, the only possible treatment is quarantine and enhancement of immunity of its victims. The business sector has to play an extremely important role during this turbulent period by adhering...
to safety guidelines and by giving economic cushions to the workers and facilitating more work from home facility. Africa has to reduce its growing dependence on imports, raw material exports and embark on the road to self-reliance by producing more than it consumes by giving special importance to agriculture and agriculture processing industries, along with light manufacturing sectors and strongly support micro entrepreneurs and encourage the development of enterprises with multiplier effect.

Mobile phones and internet service providers are witnessing exponential growth in their business all over the world, including Africa, and they should assist the general public to the maxim possible extent to deal with the emerging situation effectively.

During this traumatic time, the only way forward is to overcome this challenge with close engagement of general public.

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**FOOD CRISIS IN AFRICA DUE TO COVID-19**

Food insecurity in Africa looms large due to the pandemic COVID-19. The domestic supply chains have been disrupted due to the lockdown halting food production. Also, in Eastern Africa crops have been devastated due to the locust swarms, thus making the continent more dependent on food imports. But since countries world over have been reducing their food exports, African nations are facing food crisis.

Due to the lockdown restrictions, food trucks are not operating even though they are exempt, as their drivers fear for their own safety. A Trucking logistics firm Kobo360 has said that nearly 30 per cent of its fleet across Nigeria, Kenya, Togo, Ghana and Uganda was not operating. According to United Nations and the World Bank, millions of people in the African region are at the risk of not getting the food they need due to disruptions.

Major suppliers of food crops to Africa, that include India, Vietnam and Cambodia have either reduced or banned their exports to the African nations. At the same time, food prices have shot up in African nations due to food shortage. The World Bank has warned that Sub-Saharan Africa, which is also the world’s largest rice importing region, could be heading from a health crisis directly to a food security crisis.

Nigeria’s Agriculture Minister Nanono has said that Nigeria has at least 38,000 tonnes of grains in government-controlled strategic reserves which it thinks of replenishing with 100,000 additional tonnes. Throughout Sub-Saharan Africa, countries are dependent on around 40% of rice imports. These countries are specially at a risk of food crisis.

COVID-19 has been described through various terms, analogies and metaphors like unprecedented, wild card, force majeure, rarest of the rare event, etc. While its occurrence has been unrivalled in the living memory, its impact has also been unmatched in all facets of life i.e economic, social, political and environmental. Its impact has mostly been negative in the realm of social and economic development although, the environment is seeing a new lease of life. Even the positive impact on the environment is said to be only temporary (Henriques, 2020). The global (inequality) schism of North-South is not only becoming ever more distinct in the present scenario but is also being observed domestically across the countries of North and South. Multilateralism and global institutions which were already under stress, are now observing renewed threats and trust deficits with increased inward-looking policies and egotistical actions in the global North. This write-up will touch upon the novel coronavirus’s differential impact across issue areas on North and South; and its accentuated pressures on multilateralism.

Before this write-up discusses the substantive issues, it is important to briefly revisit the North-South nomenclature. There have been various definitions put forth as to what global South is and the associated North-South divide. The understanding of the term ‘South’ (in the
post Second World War era) was mainly understood to be part of the world which was once a European colony. It further progressed to an industrialised (North) vs non-industrialised (South) debate and in present times the term global South is associated to address the space and people who have been negatively impacted by contemporary capitalist globalisation (Mahler, 2017). Fortunately, the number of positive COVID-19 cases and associated deaths in the global South has been much lower as compared to the global North. However, if, the pandemic extensively spreads in the countries of Asia, Africa and Latin America, the cases and fatalities would quickly surpass that of the North. Limited testing facilities, diagnostic kits, hospitals, ventilators, and health care professionals would wreak havoc in these countries. For the moment, for example, the cases in Africa is at a manageable level. South Africa, Algeria, Egypt and Morocco are the worst hit in Africa with these countries having less than 4000 positive cases, and all Sub-Saharan African countries (barring Cameroon and Ghana) have less than 1000 positive cases, though the numbers are increasing across the continent on a daily basis (Worldometers, 2020).

The count becomes gravely problematic once we take into account the number of ventilators and intensive care unit (ICU) beds in various African countries. For example, South Sudan has a mere 24 ICU beds for a population of 12 million (Smith, 2020), Somalia with a population of 15 million has 1 ICU bed per million. Access to ventilators is abysmally low as well. South Sudan has 4, Liberia and Central African Republic have 3, and Sierra Leone has 13. In comparison, the United States has 172,000 ventilators and 64,000 ICU beds. Similar is the case with number of doctors. Sierra Leone has 0.25 medical doctor per 10,000 people. This number is less than 1 for most of West African and Sub-Saharan African countries. For all Northern countries, this number is well above 20 (WHO, 2020) In this regard Latin America does better than Africa and Asia with most Latin American countries having comparable numbers with countries of the North. Thus, it is not a surprise that tests conducted per million of respective populations is also proportional to the access to healthcare. The number stands at 13,073 for the United States, 19,896 for Spain, 25,028 for Italy, and 24,738 for Germany. In comparison, Alegria which has maximum number of deaths in Africa (402) is only conducting 148 tests for a million population (Worldometers, 2020). The number for Nigeria (largest population in Africa) with close to 200 million population is 39 and Ethiopia with over 100 million people has conducted only 5000 tests till now.
Death figures differ vastly (based on race and ethnicity) between regions in some of the industrialised countries as well. The winners and losers of globalisation have been impacted differentially in the United States. The most recent figures of Chicago show that African Americans have accounted for 69 per cent of all COVID-19-related deaths despite comprising just 30 per cent of the city’s population. In Louisiana, where the number of infections is approaching 15,000, African Americans account for 32 per cent of the population but comprised more than 70 per cent of all deaths from COVID-19 (Gupta, 2020). These numbers are phenomenal when one puts them in context that till now racial and ethnic information is currently available for only about 35 per cent of the total deaths in the United States (JHU, 2020). Even in a developing country like India where the major chunk of labour force is employed in the unorganised sector and are daily wage earners, anecdotal evidence shows that this particular group has been disproportionately the hardest hit (Sharma, 2020). The disaggregated casualty data is not yet available in India but, this specific group has had to suffer economic consequences and migration hardships due to policy imperatives with respect to the lockdown. One has to depend on anecdotal evidence in most of the Southern countries because of the data divide between the countries of North and South. Limited data and lack of intersectional data makes it harder for Southern nations to identify the problem and take proper relevant and timely policy measures to tackle the problem.

COVID-19 is also unique in exacerbating the changes in the sphere of geopolitics. US under President Trump has frequently shown his displeasure towards multilateralism be it for NATO alliance in security arena (Borger, 2019) or referring negatively to United Nations (UN) and World Trade Organisation (Johnson, 2019). He said in his (in) famous speech at UNGA 74 “The future does not belong to globalists. The future belongs to patriots” (Gearan and Kim, 2019). Even during the pandemic, the announcement by the US President regarding rescinding the financial contribution to World Health Organisation (WHO) did not

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**COVID-19’s Devastating Impact On African Americans**

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<th>African American share of state/city populations and COVID-19 deaths (as of Apr 06, 2020)</th>
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<tr>
<td><strong>Share of state/city’s population</strong></td>
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Sources: 2010 Census, respective state/city health departments
Source: Gupta, 2020
come as a surprise. Even some of its allies like Japan is thinking on similar lines (Wakatsuki, 2020). Cooperation and multilateralism in the European Union (EU) have also come under tremendous stress in this situation. EU Commission President, Ursula von der Leyen extended a ‘heartfelt apology’ to Italy on behalf of Europe, admitting that it had not been by its side since the beginning of the crisis (Gill, 2020). Relations between US and EU soured as well when France\(^1\) and Germany\(^2\) in separate incidents blamed the United States of highjacking the consignments of masks when the shipments were ready to be flown to the European countries from Shanghai and Bangkok airports respectively.

On the contrary, regional cooperation initiatives in the South during the pandemic is being operationalised successfully. 8 member South Asian grouping of SAARC has accumulated USD 21.8 million for the special COVID-19 Emergency Fund (Roche, 2020). Continentally, The Africa Centres for Disease Control and Prevention has planned to distribute over 1 million COVID-19 testing kits under the Partnership to Accelerate COVID-19 Testing, or PACT to help countries across Africa to address a testing shortfall (AlJazeera, 2020). A Regional Contingency Plan has been set up by Central American countries (Sistema de la Integracion Centroamericana) to control the threat of the virus not only in terms of sanitation and health, but also of economic impact which is already striking various parts of the region (SICA, 2020). In continual tradition of sending doctors and health care professionals, Cuban Medical Brigade sent 37 doctors and 15 nurses to Italy (a rare occasion of South-North Cooperation) to assist the crumbling health care facilities (On Cuba, 2020). Also, in an unprecedented incident, around 24,000 US citizens currently in India decided not to go back to the US despite special flights arranged by US State Department to fly them back home (Times of India, 2020).

In a way, the incremental power shift from North to South that has been taking shape for decades now will both speed up and the manufacturing hub (presently in China) may get re-distributed across the South. Various experts are already claiming the bigger presence and enhanced influence of China in the international organisations like UN and WHO (Lee, 2020). The adverse impact on the global economy may help the North to re-think global value chains and shift some manufacturing units away from China by diversifying its risks through distribution of production units across the South. At the same time, it is a wakeup call for all nations to take global public goods and global public health more seriously and take sincere steps to strengthen health care facilities and other social protections for its citizens. After all, it
was recently that US (Devi, 2020) and Great Britain (Neville, 2019) reduced their public health budgets and India plans to spend 2.5 per cent of its GDP towards health care only by 2025, at present the number stands at a mere 1 per cent of GDP (Soni, 2020).

Endnotes

References


Cuba has agreed to send more than 200 doctors to South Africa to help the nation fight against Coronavirus. These doctors will be deployed to different provinces by South Africa’s Department of Health. Cuba is well known throughout the world for its medical diplomacy, its primary healthcare to fight epidemics and also has the highest ratio of doctors to population in the world.

South African President Cyril Ramaphosa has suggested that the total number of infections in the country could reach their peak in August and has warned against overconfidence. Thousands of health workers in South Africa have been involved in screening its population for COVID-19.

South Africa is also seeking international assistance to fund its USD 26 billion rescue package to help its economy. To assist the country’s poorest households, the government intends to create welfare grants as millions of people have become unemployed.

India-Africa relations are at an all time high at present and the current global pandemic presents an opportunity to further strengthen our relations with the continent in various sectors and through various modalities. Working together during this global pandemic outbreak presents an opportunity for both sides to illustrate the power of South-South Cooperation in the provision of Global Public Goods (GPGs). India-Africa relations are guided by the principles laid down by Prime Minister Modi during his visit to Uganda, and these principles include commitments towards improving agriculture, increasing private investment flows based on local priorities, addressing climate change, helping the African nations to benefit from digital-led transformations, addressing the aspirations of the African youth and building a sustained partnership that seeks to work together for an inclusive world order. Leveraging these principles to guide India-Africa efforts in fighting the global pandemic will provide an example to the world of the power of developing countries in managing and overcoming adversities during the times of a crisis. As such the focus of the India-Africa partnership needs to be on four key areas when fighting the pandemic:

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* Policy Manager, GDC. Views expressed are personal.
Health
It is amply clear that the current pandemic is fatal among members who are of an advanced age and suffering from other conditions such as diabetes, cardio-vascular diseases, etc. Hence the surest way of combating the disease is by having a robust public health system for the elderly and those suffering from Non-Communicable Diseases (NCDs). Unfortunately many developing countries have experienced an increase in the percentage of elderly in their population with low awareness of NCD prevention. Apart from a robust public health system, there is also the need for a reliable pharmaceutical supply chain which ensures the health security of the population. Today many developing countries are dependent on a single supplier of Active Pharmaceutical Ingredients (APIs) and this dependence on global value chains (GVCs) has cost them dear. The third aspect which is specific to the current crisis is the rapid genetic changes occurring in the virus. Combating this rapid mutation and creating vaccines tailor made for the genetic profile of the host are challenges that require the presence of advanced bio-technological skills. All of the above points, i.e. the need for a robust public health system for the elderly and those suffering from NCDs; the need for derisking the API supply chain and creating reliable pharmaceutical value chains; and the need for developing domestic bio-technological capacities are areas that can be focal points for the India-Africa efforts at combating the pandemic. The modalities for the same can include sharing of best practices, creation of focused investment funds, capacity building programmes, collaborative research initiatives, and other initiatives that effectively address these areas.

Agriculture
The preventive measures to contain the spread of the pandemic include implementing a lockdown leading to a severe disruption in the domestic economies of all the implementing countries. In such situation the most vulnerable are the poorest of the population who suffer disproportionately in terms of food shortages, hunger, malnutrition, and similar issues. Combating this requires the presence of robust food security systems, distribution and storage infrastructure, as well as investments in improving agricultural productivity and nutritional quality. All these areas are suitable focal points for an India-Africa partnership in the agricultural sector targeted to mitigate the long-term impact of the pandemic on the poorest people in developing countries. Modalities in this area will need to include private sector outreach, collaborative development of technology suitable for local conditions, capacity building programmes, and other suitable initiatives.
**Digital Technologies (including ICT based E-governance)**

The need for reducing direct people to people contact during this crisis has necessitated the use of digital technologies for carrying out several tasks that were handled personally during pre-crisis times. Activities such as shopping, reading a newspaper, learning in a classroom, interacting with friends, meeting with colleagues, etc. are best handled using digital technology to ensure minimal risk of being infected while continuing with regular work. Apart from this, handling of the crisis itself can be done effectively using digital technology.

There are now a slew of apps that are designed to identify, manage, and disseminate information regarding the people infected with the pandemic. This helps in the ease of governance when it comes to the activities required of the public health system in implementing preventive and other measures for combating the pandemic. Hence the digital technologies must be a focus area for any India-Africa efforts aimed at the pandemic. In this the modalities to be used should be challenge funds, public private initiatives, capacity building programmes, collaborative technology research, and other sector-specific modalities.

**Development Practices and New Frameworks**

Finally the pandemic is also a disruption to the global economic order. It has caused all the prevailing GVCs to collapse. The worst affected economies are also the ones which were prevailing suppliers or consumers in the old order. Major input suppliers like the Latin American economies, manufacturing centres such as China, financial centres such as the UK, and consumption powerhouses such as the USA and the EU are projected to experience massive unemployment and decline in economic growth for the near term. In such a scenario it is fairly obvious that global treaties regulating trade, investment, intellectual property, and domestic support may be temporarily overlooked. Moreover new sanitary and phyto-sanitary barriers may be introduced, new testing procedures and norms may be introduced, movement of people may be restricted, and new rules and standards may have to be negotiated globally. It is imperative that these negotiations if they occur are not skewed in the favour of particular countries but are inclusive and take into account the development needs of everyone at the table. India and Africa are still in a relatively favourable position with regard to the pandemic in terms of infections and deaths. However if their efforts in combating the pandemic overlook
As things stand the pandemic is a crisis situation. However, with cooperation between countries, it may also be an opportunity for making disruptive changes that may make for a more inclusive world in the long run. If India and Africa can partner together in the key areas as discussed they would not only be able to come out of this crisis successfully but also provide a shining example of the provision of GPGs to the world.

**SOUTH AFRICA FIGHTS COVID-19 WITH INNOVATIVE TECHNOLOGY**

South Africa has been under lockdown till the end of April to stop the spread of Coronavirus. In this situation, technology is proving to be extremely useful in helping to combat the outbreak.

Contact tracing apps are becoming popular worldwide, and several countries are creating their own indigenous variants. Such an app uses Bluetooth and location technology to track people who are infected and notify those who were in close proximity to them in the last 15 days. Telkom, South Africa’s biggest telecom company, has collaborated with Samsung to help the government in contact tracing.

About 1500 handsets have been distributed by Samsung to the provinces that have been hardest hit by the epidemic. Trackers will be connected free of charge using Telkom’s FreeMe packages for the next 6 months and will fast track the government’s ability to track and trace infected cases throughout the country.

GIS and location technologies are particularly useful in providing real-time visualisations and identifying hotspots. South African government has also approached private tech players that are involved in community mapping. For instance, the Vulnerable Communities Map uses publicly available data to identify and support vulnerable communities.

Introduction

As the global pandemic COVID-19 has spread throughout the world, economies all around the globe are facing disruption in supply chains and international trade. Countries are facing the prospects of increasing unemployment, shrinking consumer demand, declining exports, falling investments as they continue to shut down their borders and impose lockdowns. Most advanced economies are resorting to income transfers to assist their poorer populations and employing fiscal stimulus packages to avert domestic crisis. Countries like the US, UK, Italy, Spain, Iran, Germany, etc. are amongst the worst affected by the current pandemic.

United Nations has stated that the global economy could contract by up to 1 per cent in 2020 due to the pandemic, as opposed to the rate of 2.5 per cent at which the world output was expected to grow earlier. In an assessment report, “Covid-19 and World of Work: Impacts and Responses”, the International Labour Organization has forecast that the outbreak could lead to a loss of almost 25 million jobs worldwide with workers facing income losses between USD 860 billion and USD 3.4 trillion by the end of 2020.¹

* Research Assistant, RIS. Views expressed are personal.
COVID-19 and Africa

African nations have also started bracing for the impact of COVID-19. Countries like South Africa, Zimbabwe, Senegal, Sudan, Burkina Faso, etc. have already imposed lockdowns to control the spread of the virus. A 12-month-long state of emergency has been declared in Sierra Leone, while Rwanda has shut down its borders (Rotberg, 2020).

The current pandemic can negatively affect the income and employment levels, food security situation, export revenues, foreign direct investment in most African economies. Although the pandemic has arrived late in the African region as compared to the rest of the world, there is a need to tackle the various challenges posed by it head-on.

Being the poorest continent, the current outbreak can wreak havoc in Africa. The various effects of COVID-19 on African economies can be understood in terms of its impact on the following sectors.

Health: In terms of population demographics, Africa’s population is relatively young. Hence, it is in a better situation in comparison to the rest of the world since the severity of illness caused by COVID-19 is higher in the elder population, as can be learnt through the case of countries like China or Italy. But African nations can find it difficult to cope with the huge crisis due to several weaknesses in its health care sector. For instance, most African countries have a shortage of doctors and health care workers along with having very few hospital beds per capita, limited critical care units, short supply of ventilators, etc. Other than this, a large section of African population is suffering from diseases like malaria, HIV/AIDs, anemia, malnutrition, etc. which are known for weakening the body’s immune system. According to WHO, around 26 million people in the region are HIV positive while over 58 million children are malnourished and stunted (Callaghan & Swilling, 2020). Under such circumstances, it is quite likely that the severity of COVID-19 would be far more in the younger population of Africa in comparison to the rest of the world.

Oil and other commodities: With disruptions in global trade and travel and falling oil consumption in Chinese and other economies, there has been a decline in global oil demand. The situation has been worsened with the global fall in oil prices. All this can severely impact the economies of oil producing and exporting nations like Nigeria, Ghana, Libya, Algeria, etc. According to the UN Economic Commission for Africa, the oil exporting African nations could face revenue losses of up to USD 65 billion (Smith, 2020). Apart from oil, fall in the prices of other commodities also will severely impact the resources of several African nations. This is because
commodity exports constitute a huge proportion of the GDP of many African economies. For instance, commodity exports for Congo constitute 70 per cent of its GDP and the country’s exports to China amount to 50% of its total GDP. Moreover, 70 per cent of the world’s cobalt is produced in Africa’s copper belt region with China being the biggest importer of Cobalt in the world (Callaghan & Swilling, 2020).

**Agriculture:** Border closures, disruption in supply chains and trade can cause major problems for food security in most African nations. Countries for whom agricultural products form a major part of exports can suffer huge losses due to a declining demand for agricultural produce from Asian economies. For instance, Agricultural Business Center has stated that South Africa could face export losses of around USD 2.5 billion (Uzu, 2020). Moreover, African countries suffer from poor storage facilities and a low mechanisation level of farms. Shortage in labour force due to lockdowns and quarantines can cause disruptions in production and processing of crops that are labour intensive in nature. All this will further lead to food price hikes and food shortage. Already in countries like Ghana, prices of basic food products have risen due to panic buying.

**Supply Chain:** Since China plays a crucial role in the global supply chain, many African economies are dependent on Chinese imports for goods like electronics, household items, textiles, etc. For example, around 60 per cent of South Africa’s clothes and textiles are imported from China (Callaghan & Swilling, 2020). Due to the disruptions in supply chain, many small and medium sized enterprises in major African countries have been made to shut down their operations.

**Airline:** Due to the lockdowns and disruptions in global travel, the airline industry worldwide has suffered from severe losses. Since the time the coronavirus has started to spread, the airline sector in Africa has suffered from losses of around USD 4.4 billion in revenue. IATA data suggests that international bookings have fallen by 20 per cent and domestic travel has reduced by 15 per cent in Africa for the months of March and April in 2020 (Callaghan & Swilling, 2020). As a result of the collapse in the airline industry, the tourism and hospitality sectors have also been adversely affected.

**Immediate Solutions**

Considering the crisis that the outbreak has unfolded around the globe and also in African region, some of the immediate measures include using fiscal and monetary policies to protect domestic economies. The governments in various African nations need to increase their expenditures on health and other sectors and stimulate domestic demand.
There is a need to give economic relief packages to small and medium sized businesses to help them deal with the crisis, as they are likely to face cash and working capital crunch. All regional institutions within African continent should ensure proper movement of food and other essential supplies and try to minimize any wastages taking place within the supply chain.

To provide additional fiscal resources, the pace of implementation of African Continental Free Trade Area should be enhanced. As the African Economic Outlook 2019 shows that if other developing countries were to reduce their tariffs and nontariff barriers by half, then Africa could gain up to 4.5 per cent of its GDP or around USD 134 billion each year (Monga, 2020).

As the IMF and World Bank have called for debt relief to be given to the world’s poorest countries, debt forgiveness is important for the African region as well. The continent’s total external and domestic debt stock is around USD 500 billion and there has been a rise in the median Debt to GDP ratio from 38 per cent in 2008 to 54 per cent in 2018. Hence, without debt forgiveness the African countries could be pushed into negative growth per capita (Monga, 2020).

The outbreak of COVID-19 poses serious human, economic and social challenges and various stakeholders along with the national governments of African countries need to come together to cope with the crisis.

Endnote

References


Nature is a great leveller. It is proved time and again when a natural disaster strikes. A flood or a forest fire or a cyclone or an earthquake is clear example of how nature does not discriminate not only between human beings but also between human and other living beings. Floods and fire in forests have revealed umpteen times as to how man and other wild animals cohabited for survival for days long. Remember Noah’s Arch.

However, competition is the credo of the living world when nature remains placid and does not vent her fury on anyone. Survival of the fittest becomes the normal rule of the game and inter-specie rivalry, coupled with intra-specie competition, becomes the order of the day for survival. Such competitive attitude is fuelled by specie level perspectives of scarcity in resources. The predators prevail over their prey in competition but nature ensures that the vanquished ones multiply at a much faster rate to sustain their existence. Obviously, there are instances of symbiotic relations among some particular species. They are exceptions.

The significant difference between human beings and the rest of the living kingdom lies in

*Milindo Chakrabarti*
the fact that while the latter follow the natural laws in letter and spirit, Homo sapiens have learnt to follow a path that entails “control over nature” as a means for sustenance. The means for livelihood made available by nature appear too little to satiate human wants. We have been able to replicate many natural processes applying our deep understanding of the laws of nature – physical as well as biological. Our confidence in being capable of replicating the rest of natural processes, that are still beyond our comprehension, by tomorrow, if not today, itself has made us to believe that we are ready to rein in nature as per our will.

We have developed mechanisms to add gravity defying capabilities in our movements. Medical science has helped us improve life expectancy beyond what the nature would permit in her heydays. We can seed clouds to bring rains to perched lands even when nature is not obligating. We build irrigation canals to divert natural flows of water to far flung areas. We have developed technologies to extract the solar energy that remained trapped in fossils for millions of years. Nuclear capabilities we developed are strong enough to destroy the globe along with nature many times over. Natural forests were felled to be replaced, often by sylvicultural plantation, and converted to other possible land use practices.

These made us not only complacent but also place our complete confidence on competition as the fundamental moving force to drive societal progress. The control over nature decides our power to control the rest of the living kingdom, including those among the human beings, who unfortunately lag behind in their capacities to control nature. We call them less developed. We divide humanity into two distinct groups. On the one hand, we have the group with capabilities to control and there are the rest, on the other, who look forward to receive support from the former in improving their control on nature and be ready to be controlled – willingly or forcibly – in return. Thus comes the legitimacy of competition and its

Understanding Nature in Bits And Pieces

Unfortunately, our quest for control over nature happened in bits and pieces. We overlooked the fact that nature operates as a unique complex system where infinite numbers of natural processes are intricately linked. We failed often to understand or even appreciate this interdependence across the different natural processes and used our knowledge of natural laws in a sense as if these processes can be initiated independent of one another. Construction of irrigation canals has been found to have disturbed the
natural flow of water, resulting in devastating floods. Indiscriminate felling of forests is claimed to have contributed to the threat of climate change and even spread of zoonotic viruses into the human domain. The spread of Ebola, SARS, MERS and the present pandemic linked to Novel Corona Virus is attributed to virus strains jumping from animals and finding human bodies as safe hosts to replicate. Construction of extensive network of roads in the Himalayan region is often cited as reasons for recurrent landslides. Bridges over rivers are alleged to contribute to extensive siltation, while dams restrict movement of aquatic species to their natural spawning habitats.

**From Comparative Advantage to Competitive Advantage: Increasing Inequality**

Increased control over nature instilled confidence in human being to usher in a competitive regime. Nation states came up to strengthen the space for competition with each nation state emerging as the unit of operation. The national borders, created artificially, even bifurcating a natural landscape that was undisturbed for years, became the new normal. And we derived our identities from our passports and immediately lost our specie level primary identity of being a member of Homo sapiens family. We devised mechanisms to define global wellbeing as an aggregate of national state of wellbeing with competition among nations being efficient and effective in improving the level of national welfare. The notion of ensuring intra-nation competition also set in gradually to make competition the elixir for achieving a higher quality of life the famous argument by David Ricardo professing the virtue of comparative advantage for global gain was turned upside down in favour of competitive advantage. Comparative advantage argued for two-way exchange of goods between countries based on their relative capabilities. Even if a country is capable of producing both the commodities with a competitive edge, it is preferable in the interest of increased global welfare that a country specialises in the product in which it is relatively more efficient and procures from the commodity from the other country the product in which it is relatively less efficient. This argument may well be surmised as a statement favouring cooperation between two countries. The present day emphasis on competitive advantage to guide global exchange completely ignores the spirit of cooperation espoused by Ricardo.

The arguments in favour of competitive advantage created a sharp global divide. Those who developed the competitive edge formed the powerful group, while those who lost out formed the residual group. Further, the gap between those lying at the top of the income
ladder and those at the bottom in most of the countries increased consistently. Make no mistake, the competitive advantages have largely resulted from our thorough and utter disregard of complexities in the natural system that would impinge on the sustenance of man-nature relationship of interdependence.

**Man-Nature Interdependence: Sustaining The Crucial Balance**

The COVID-19 pandemic struck right at this juncture when we started talking about inclusive development that would leave no one behind and launched efforts to reach the sustainable development goals (SDGs) within a stipulated time frame. This is also a vantage point in the history of mankind when the concerns about possible threats to humanity arising out of global warming and climate change are being raised repeatedly and consistently. Both these concerns call for maintaining the delicate balance between man-nature relationship that emphasises the existence of human beings as a part of nature and not as her controller. This calls for greater cooperation among all of us as Homo sapiens, transcending the borders of our national identity. The narrow national interests we pursued in the spirit of competition have to be shunned considerably to ensure our sustenance as a specie.

What can be a better example than the global havoc caused by COVID-19 virus. With the number of people globally infected touching almost 30 million when the number of countries yet to affected can be counted by the fingers, and more than 206 thousand persons succumbing to the attack, it is no longer difficult to realise the necessity of a shift from a competition-led model of global welfare to a cooperation-led one. Without any debate, it may be convincingly argued that the most important domain that calls for immediate global cooperation is related to provision of health services. This pandemic has shown clearly that the morbidity and mortality profile of an individual is not independent of that of others. A virus, unfortunately, does not respect the national borders as it spreads. The strictest possible immigration laws cannot stop it entering the geographic space of any country, howsoever globally powerful through completion it has emerged to be.

**In Favour of Global Cooperation In Health Care Services**

The easiest way to begin global cooperation in right earnest is in health care services, specifically those linked to infectious diseases. Emergence of a new infectious disease throws challenges that are often without any known solution to begin with. Quite obviously, the interdependence between nature and the new virus cannot be overemphasised. The challenge
lies in deciphering some of these interlinkages. And we require a global effort in place.

Health services can be divided into two domains – curative and preventive. Diagnostic services bridge these two bridges. In case of a new disease, not much is known about the new pathogen. What are its biological and molecular characteristics? How does it enter a living body and how does it replicate itself inside the body of the host? How can its capacity to replicate be controlled? What pharmacological principles may be applied to prevent mortality of a patient who has been infected? What supportive medical services are to be delivered to the patients? All these questions are to be answered simultaneously to reduce the risks of mortality. In order to be effective in providing such curative services to those infected at the earliest, a concerted effort by the experts all across the globe – in a cooperative spirit and shunning the standard competitive approach – is of primary interest.

Preventive measures are applied at two stages. Firstly, it involves measures to prevent spread of infection of the disease. Standard public health related protocols have been well designed through experiences of several such bouts of infectious diseases in the past. Some tweaking here and there to bring in the specific symptomatic characteristics of the disease can be developed without much loss of time. The second measure is linked to development of a vaccine that can serve the role of a prophylactic which, if administered, would bolster the immunity of the individual to attacks by the pathogen and thereby prevent further spread of the disease.

Joint collaborative efforts at global level can be through a network of R&D organisations with funding from public and philanthropic sources, that would not be interested in claiming intellectual property rights on their research outputs is perhaps the best solution to these issues. Members of such a network should also be engaged in continuous communication to identify future threats of new pathogens emerging and possible remedial measures that would help arrest recurrence of another pandemic. Such knowledge and the services created out of them would be deemed as a global public good, beyond the scope of generating any private profit. The same principles should be applied in case of development of diagnostic kits.

As the present pandemic set in, we realised that the prevailing health infrastructure available to provide hospitalisation and associated curative services is grossly inadequate, not just in the poorer countries but also in many of the high income countries as well. We cannot afford to be caught off guard again, if such a pandemic recurs in
the future. A large dose of investment in global health infrastructure is a necessary imperative. To reiterate, given the low expected rate of return, as pandemics do not happen frequently, the investments will not be forthcoming from sources that are interested in immediate return. Public investments, including sovereign and possibly, pension funds will have to invest heavily in such an initiative.

A pandemic resulting out of the spread of an altogether unknown pathogen, throws up another big challenge. In our quest for actions to minimise loss of lives, the livelihood security of millions has been set aside. Imposition of strict lockdown and “social distancing measures” has led to loss in jobs for many. Economic activities have come to a near complete halt with a huge negative impact on the present production levels. Uncertainties prevail about the time these economies would require to limp back to normalcy. Even doubts persist, if we are heading to a new normal. The cost of treatment, often availed of in private facilities, on the face of lack of adequate public healthcare support also has been substantial. A large section of the global community, under such an uncertain situation, would look for some income support to tide over the present distress and uncertainties in the future. Curiously enough, such demands for income support would not just be forthcoming from some select countries. It is going to be a pan-global necessity. A global basic income support fund to be of use in the event of future pandemic is the need of the hour. The resources may be used in case of other natural disasters as well. Each country may be obligated to contribute to this fund which will grow through judicious investments during normal years and will be used only during global exigencies. Regional groupings of countries may also set up additional support funds to be used during health related crisis at regional levels. The annual accretions to the fund may be used for meeting some of the urgent needs towards achievement of SDG 3 related to health.

The institutional mechanisms needed to facilitate the implementation of these proposals may be worked out amicably if a consensus is achieved. It is, however, beyond doubt that none of the existing mechanisms of international cooperation – multilateral or bilateral - are in a position to take up these tasks. We require an altogether different set of working principles and institutional mechanisms to operationalise the proposals.
Guidelines for Contributors

1. DCR is a refereed multi-disciplinary international journal. Manuscripts can be sent, as email attachment, in MS-Word to the Managing Editor (milindo.chakrabarti@ris.org.in).

2. Manuscripts should be prepared using double spacing. The text of manuscripts should not ordinarily exceed 1500 words. Manuscripts sent for peer review section may be limited to 5000 words. Such submissions should contain a 200 word abstract, and key words up to six.

3. Use ‘s’ in ‘-ise’ ‘-isation’ words; e.g., ‘civilise’, ‘organisation’. Use British spellings rather than American spellings. Thus, ‘labour’ not ‘labor’. (2 per cent, 3 km, 36 years old, etc.). In general descriptions, numbers below 10 should be spelt out in words. Use thousands, millions, billions, not lakh and crore. Use fuller forms for numbers and dates — for example 1980-88, pp. 200-202 and pp. 178-84. for example ‘the eighties’, ‘the twentieth century’, etc.

Reference Style: References should be appended at the end of the paper. References must in double space, and should be same author(s) is cited, then arrange them chronologically by year of publication.

All references should be embedded in the text in the APA style. For details please refer to Course and Subject Guides: https://pitt.libguides.com/c.php?g=12108&p=64730

Invitation to Join our Mailing List

If the reader wishes to be added in our mailing list in order to receive the soft version of Development Cooperation Review, kindly send in details along with organisational affiliations to RIS at email : dgoffice@ris.org.in. Also specify if hard copy is desired.

Call for Contributions

We invite contributions from interested readers on issues related to development cooperation in general and South-South Cooperation in particular. Contributions may also capture theory, practice and associated debates on development cooperation. Reviews of latest publications - books, monographs, reports - are also welcome. Any institutional upcoming events on development cooperation may also be captured in DCR. The contributions should be restricted to not more than 1500 words.

For editorial information, contributions, feedback and comments: mail to milindo.chakrabarti@ris.org.in and dgoffice@ris.org.in

Introduction of a Section on Peer Reviewed Articles/Essays

In keeping with suggestions, feedbacks and accumulated experience, we have decided to introduce a section, containing peer reviewed full length articles/essays. Interested scholars willing to contribute are requested to send in their manuscripts (preferably in not more than 5000 words) to the editorial office.
About Development Cooperation Review

Development Cooperation Review (DCR) aspires to capture holistic narrative around global development cooperation and fill an important knowledge gap towards theorisation, empirical verification and documentation of Southern-led development cooperation processes. Despite growing volumes of development partnerships around the Southern world, there remains an absence of detailed information, analysis and its contribution to global development processes. Even though there have been sporadic efforts in documenting some of the activities, a continuous effort in chronicling the diverse experiences in South-South Cooperation (SSC) is still absent. RIS, in joint publication with GDI, FIDC and NeST has endeavoured to launch DCR, a quarterly periodical, to fill this gap.

About Research and Information System for Developing Countries (RIS)

RIS is a New Delhi–based autonomous policy research institute envisioned as a forum for fostering effective policy dialogue and capacity-building among developing countries on global and regional economic issues. The focus of the work programme of RIS is to promote South-South Cooperation and collaborate with developing countries in multilateral negotiations in various forums.

@RIS_NewDelhi

About Global Development Initiative (GDI)

Established at RIS, the Global Development Initiative (GDI) aims to institutionalise knowledge on India’s development initiatives and promote their replication as part of knowledge sharing in Asia and Africa with the help of its institutional partners, including civil society organisations. It attempts to explore and articulate global development processes within a micro framework and works as a unique platform to collate and assimilate learning processes of other countries towards promotion of equity, sustainability and inclusively based on multi-disciplinary and multi-functional approach.

About Network of Southern Think Tanks (NeST)

Knowledge generated endogenously among the Southern partners can help in consolidation of stronger common issues at different global policy fora. Consequent to the consensus reached on many of these issues at the High-Level Conference of Southern Providers in Delhi (March 2013) and establishment of the subsequent Core Group on the SSC within the UNDCF (June 2013), the Network of Southern Think-Tanks (NeST) was formally launched at the Conference on the South-South Cooperation, held at New Delhi during 10-11 March 2016. The purpose of the NeST is to provide a global platform for Southern Think-Tanks for collaboratively generating, systematising, consolidating and sharing knowledge on SSC approaches for international development.

@NeST_SSC

About Forum for Indian Development Cooperation (FIDC)

FIDC aims to encourage detailed analysis of broad trends in South-South cooperation and contextualise Indian policies by facilitating discussions across various subject streams and stakeholders based on theoretical and empirical analysis, field work, perception surveys and capacity building needs.

@FIDC_NewDelhi
DCR is brought out by GDI as part of cross-learning and sharing of development cooperation practices in Global South.
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