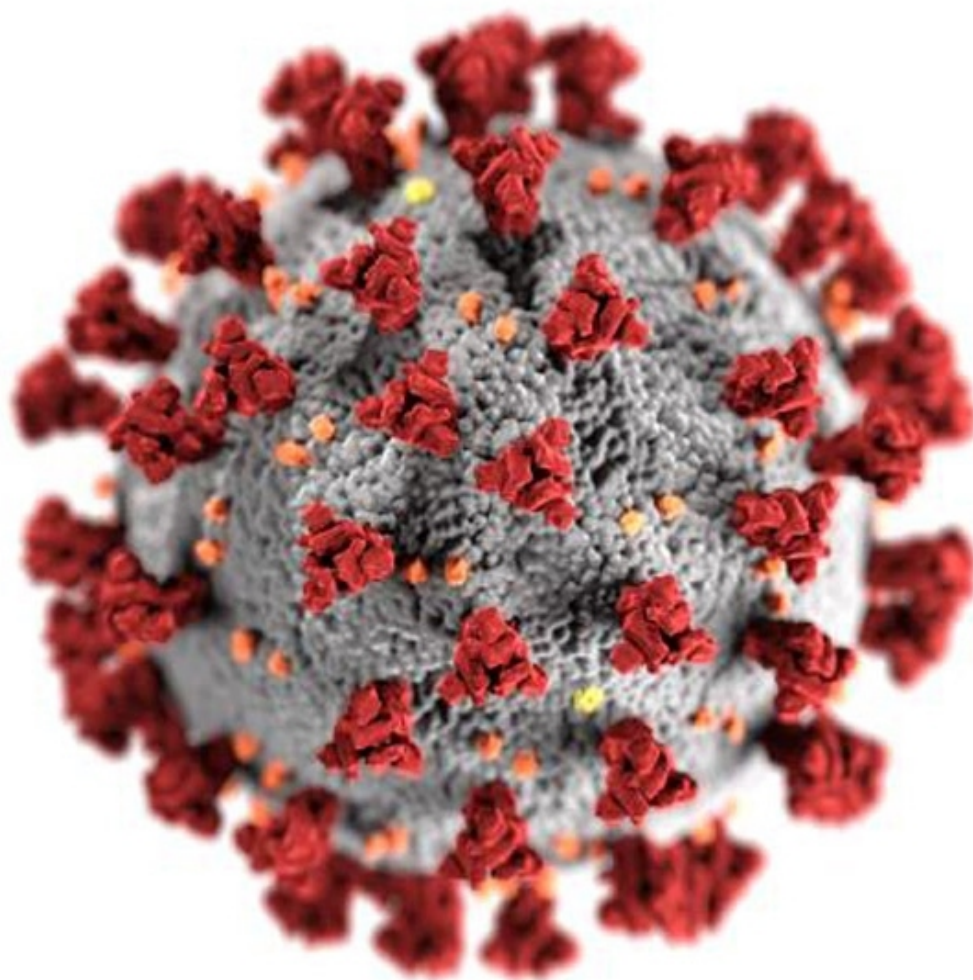


WestAfrica

INSIGHT



COVID-19

IN WESTFRICA:

Responses and Impacts



Centre for Democracy & Development
Centre pour la démocratie et le développement

WestAfrica

INSIGHT

Editorial Team

Editor in Chief

Idayat Hassan

Editor

Jamie Hitchen

Project Officer

Juliet Ugwu

Contributors

Bintu Mansaray

Bintu Mansaray is a medical doctor, a paediatric public health specialist and health systems researcher.

Ramatoulaye Sonko

Ramatoulaye Sonko is a Data Science Fellow at HackCville.

Alhassan Ibrahim

Alhassan Ibrahim is a programme officer at the Centre for Democracy and Development who specialises in tracking disinformation networks and the intersection of democracy and technologies.

Wuraola Solomon

Wuraola Solomon is a research analyst

Juliet Ugwu

Juliet Ugwu is a programme officer at the Centre for Democracy and Development

Ebehi lyoha

Ebehi lyoha is a columnist at Stears Business and a PhD Candidate in Economics at Vanderbilt University, specialising in industrial organisation and international trade.

Haddija Jawara

Haddija Jawara is communication consultant with the World Bank in The Gambia. She also works for the Gambia Press Union as a senior programme officer.

Chitra Nagarajan

Chitra Nagarajan works to build peace and defend human rights, including those of women and girls.

Rosemary Ajayi

Rosemary Ajayi is the founder of the Digital Africa Research Lab. DigiAfricaLab explores the use and misuse of social media in Africa and develops strategies to mitigate potential harms.

Kwabena Yeboah

Kwabena Yeboah is a writer based in Accra, Ghana.

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Centre for Democracy and Development

16, A7 Street, CITEC Mount Pleasant Estate,
Jabi- Airport Road, Mbori District, Abuja, FCT.

P.O.Box 14385

+23492902304

www.cddwestafrica.org

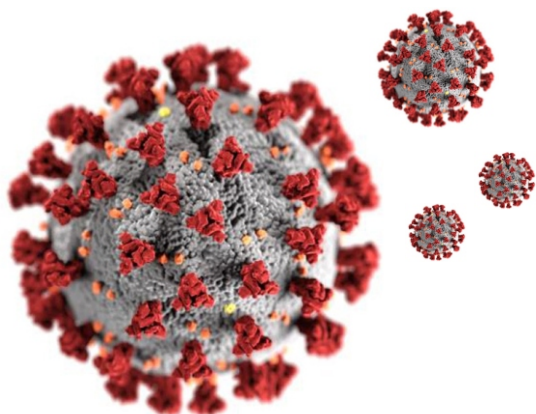
cddav@cddwestafrica.org

T: @cddwestafrica F: [facebook.com/centrefordemocracy.anddevelopment](https://www.facebook.com/centrefordemocracy.anddevelopment)

Kindly send us your feedback on this edition via: feedbackwai@cddwestafrica.org

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EDITORIAL



This Issue: Covid-19 in West Africa: Responses and Impacts

As of 26 June, more than 65,000 cases of Covid-19 have been recorded across the 15 countries which comprise the Economic Community of West African States, since the pandemic first arrived in the region from Europe, through Nigeria in late February.

This special edition of West Africa Insight gives space to an array of experts to share their reflections on the way governments in the region have so far handled the pandemic and the wider impacts it has had on society at large.

Three pieces look at country specific responses. Bintu Mansaray questions the level of preparedness of the Government of Sierra Leone to respond to the pandemic despite the recent experience of Ebola. She writes instead of the critical role that individual citizens are playing to defeat the virus. Ramatoulaye Sonko is concerned that the Macky Sall administrations poor track-record of managing funds with accountability and transparency and the recent relaxing of lockdown restrictions could undermine Senegal's Covid-19 response efforts. Whilst Alhassan Ibrahim seeks to uncover if two Nigerian states – Kogi and Cross River – really have been able to remain free of the virus. Or whether they are simply denying its existence.

Wura Solomon and Juliet Ugwu then provide a brief round-up of regional response trends. Focusing on the challenges of enforcing lockdowns when trust in security personnel is low and the need for governments to provide financial relief to those

operating on the margins. A West Africa wide perspective is also offered by Ebehi Iyoha who discusses the impact that the virus has had on trade in the region and ways in which governments can best prepare for trading under the African Continental Free Trade Area; scheduled to start in January 2021.

In The Gambia the reduced flow of remittances is having a serious economic impact as Haddija Jawara explains. Many Gambians in the diaspora have lost jobs during the pandemic, limiting their ability to support families back home. Violence against women and girls in Nigeria, a significant issue before the pandemic, has worsened due to the lockdown restrictions and reduction in support services argues Chitra Nagarajan who outlines five key reforms that the government should enact to better tackle the issue. Staying in Nigeria, Rosemary Ajayi looks at the role social media has been playing in spreading credible health information during the pandemic. But she raises concerns as to whether the 'infodemic' of misleading and false means that social media is doing more harm than good.

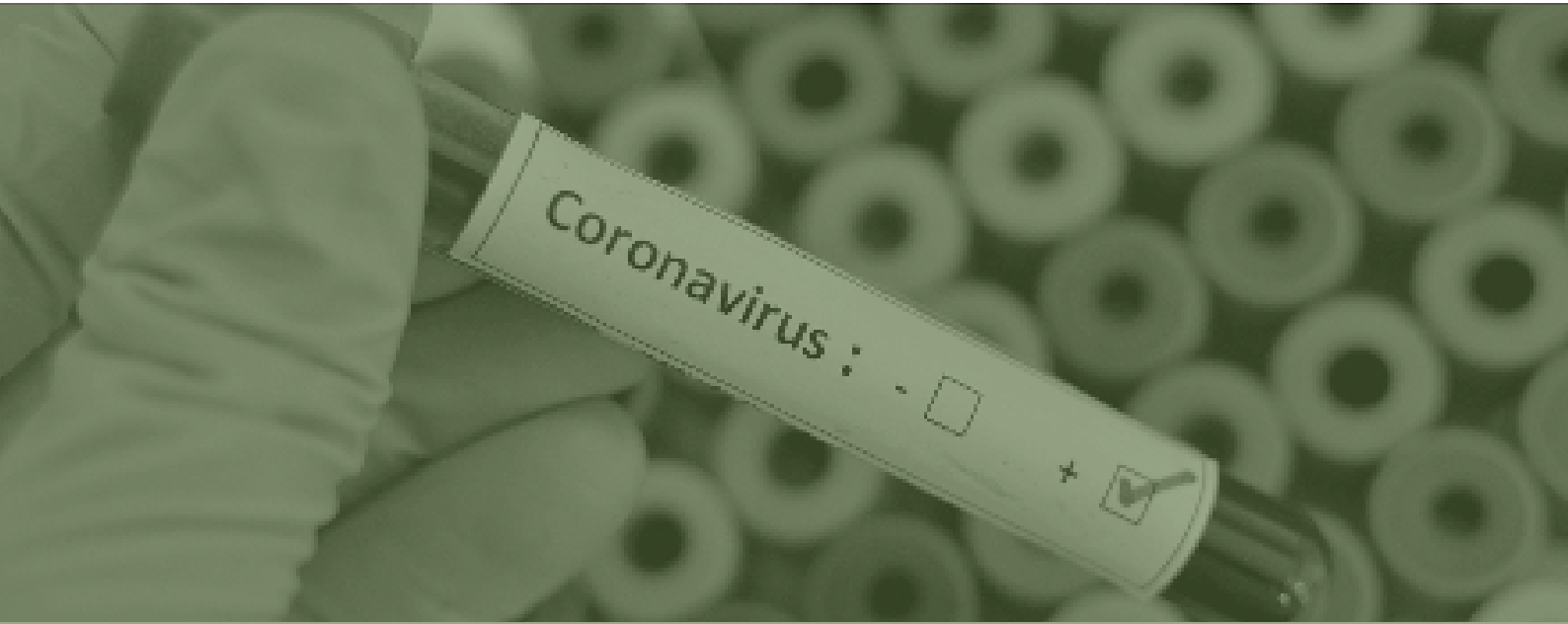
To conclude Kwabena Yeboah offers some personal reflections from life in Accra during Covid-19. For him, the virus has provided a potent reminder of the cities embedded inequalities and how these these different realities have shaped peoples experience of, and response to, Covid-19.

Idayat Hassan
Director
CDD West Africa

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CITIZEN RESPONSES TO COVID-19 IN SIERRA LEONE



Sierra Leone had no recorded cases when Covid-19 was declared a pandemic by the World Health Organization on 11 March 2020. However, in recognition of its global spread, the government activated the National Covid-19 Emergency Response Center, reconstituted structures established during the Ebola outbreak, held daily meetings and made plans to quarantine anyone coming into the country. The level of preparedness the government displayed was encouraging.

Having eventually fought off a devastating Ebola epidemic between 2014-2016 there was confidence that the country could, if not easily then adequately, do the same with Covid-19. Especially given the fact that Covid-19 is a viral disease – like Ebola – with hygiene and contact tracing key to stemming the spread. When Bangladesh had its first death from the virus, a colleague on the frontline contacted me asking for advice on what Sierra Leone had done to ensure safe hospital visitations and dignified but safe burials during Ebola.

Poorly prepared?

On 31 March 2020 Sierra Leone recorded its first confirmed case of Covid-19. A few days later, a second individual, with over a hundred contacts, tested positive. Sierra Leone has now recorded more than 1,000 cases. The index case had no positive contacts, suggesting that Covid-19 had entered the country undetected. It quickly became clear that preparations were not as comprehensive as they should have been and that the country had been living with a false sense of security. The construction of treatment centres only began once a positive case was confirmed, the same was true for the purchase of oxygen concentrators, drugs and vehicles. Health workers were belatedly being trained on virus specific case management in April 2020.

Almost three months after the first recorded case, frontline staff are only receiving their allowances after threats of strike action. Financial disbursements from the Ministry of Finance were slowed by bureaucratic

procedures put in place to prevent misappropriation of funds that was a feature of the Ebola outbreak. People in quarantine homes and isolation centres continue to complain of deplorable conditions and insufficient food supplies. A lack of trust in government, has meant that measures such as a nationwide 9pm curfew, inter-district travel restrictions, and wearing masks in public are not being properly enforced.

Lockdown measures have also been questioned. Unlike other countries in the region that have instituted longer and more structured lockdowns, Sierra Leone has done only two three-day lockdowns. The government has insisted that this decision was due to issues of food insecurity – a view supported by a survey done by the Institute of Governance Reform that found only 4% of people would be able to provide food for their families for more than two weeks. But the question that remains is why have one at all in this case given there is no evidence to suggest a three-day lockdown will significantly impact on transmission.

With the government struggling to gain the confidence of their citizens in the handling of the outbreak, people have turned to each other for support.

sets this project apart from government spending, is the weekly publication of expense accounts detailing exactly how contributor's money is being spent. Her initiative is one of many citizen-driven responses to Covid-19.

Mercury International SL, a sports betting and lottery company, donated Le500 million (US\$51,000) to the Covid-19 National Response Fund. They have also provided food supplies to Bo Government Hospital, Connaught Hospital's Isolation Unit and the Aberdeen Women's Centre, the latter two both located in Freetown. Marian Kaikai, CEO of the fashion brand Madam Wokie, is working with the Mayor's office in Freetown to produce facemask. By the end of May, it had already distributed more than 60,000 to market traders and others in the city as part of the 'Mask Up Freetown' campaign. With recent studies showing the importance of wearing masks in flattening the Covid-19 curve, this is a vital intervention.

On WhatsApp too, Sierra Leoneans at home and abroad have discussed ways of helping their fellow countrymen and women. The Network for Change group – comprising professionals from different walks of life – has raised funds to buy food items for vulnerable communities in Freetown ahead of the three-day stay at home orders. Many other WhatsApp groups have undertaken similar efforts to mobilise group resources or expertise to support at-risk individuals or communities.

The people's response

Vickie Remoe, a local media personality and communications strategist, set up the Covid-19 Dignity Project to raise funds for isolation and treatment centres around the country after discussions with frontline health workers highlighted the lack of medical supplies and lifesaving drugs available to adequately manage patients conditions. As of 16 June it had raised \$50,000, with \$27,000 already spent on medications, cleaning supplies, buckets and drinking water, along with basic equipment such as pulse oximeters, blood pressure machines and glucometers. What



“

The outbreak has also highlighted the important role individual citizens and the private sector can play in supporting health systems



Sustainable structures

Structures built or rehabilitated during the Ebola outbreak that ended four years ago had been abandoned. Resources to fight Covid-19, first had to be spent on rehabilitating them for use. This should serve as a clear reminder to the government and donors that building permanent structures, equipping them, and training personnel is key for ensuring health sector preparedness. Infectious disease departments, ready to respond to outbreaks, should be set up in all tertiary hospitals across the country with each district having at least one. These departments would be used to treat regular infections but could be quickly transformed in the event of an outbreak.

Covid-19 has offered a clear reminder of the important role that communications and social mobilisation play in public health. Communication specialists, social workers and psychologists,

trained on public health sensitisation, should be embedded within the Ministry of Health and Sanitation. This can help to ensure that messaging is tailored towards different groups of the populace, with varying levels of education and day-to-day realities.

The outbreak has also highlighted the important role individual citizens and the private sector can play in supporting health systems strengthening. The government must capitalise on this momentum to continue to improve medical facilities, train and compensate health care workers and ensure that needed supplies are readily available. Four years after winning the fight against Ebola, Sierra Leone has another virus to defeat, but the resilience and perseverance of its citizens should offer hope that it will be able to do so.

Bintu Mansaray is a medical doctor, a paediatric public health specialist and health systems researcher.

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REACTIVE NOT PROACTIVE: SENEGAL'S STUTTERING RESPONSE TO COVID-19



In Wolof there is a saying, “mën ko deffôko, tëllé ko moko gën”. In English it means that to have the ability to do something and fail to do it, is even worse than not being able to do it at all.

The 2014 Ebola outbreak in West Africa met a coordinated and well-prepared Senegalese Ministry of Health. A health emergency system ensured a quick and effective response to its first—and only—case of the Ebola virus disease and avoided an outbreak on the scale experienced in Guinea, Liberia and Sierra Leone. Although the Ministry of Health's response to Ebola was rightly applauded, the lack of cases meant that the outbreak only partially tested Senegal's health emergency system. Covid-19 has provided a much sterner test and has highlighted challenges within the state apparatus to manage large-scale health emergencies despite the preventative structures in place.

No time to relax

On 4 June, almost two months after it came into force, President Sall decided to relax the government's dawn-to-dusk curfew and open the transport sector. On 29 June Sall lifted the state of emergency to support the struggling economy. This came in response to popular protests but were also an effort to deflect attention away from a series of corruption allegations and scandals that have dogged Sall's administration. Data collected for the 2019 Global Corruption Barometer found that 43% of Senegalese surveyed thought corruption had increase in the previous year. However, this loosening of restrictions has led to a surge in new cases. From a little under 4,000 confirmed cases of Covid-19, Senegal had over 5,250 two weeks later. If the Sall administration is to reduce the growing spread of the virus their strategy must shift from being reactionary and take a more proactive approach.

Senegal's 50,000 plus tests conducted so far puts it among the continents leaders when it comes to testing but a more targeted trace and test approach, aimed at all neighbourhoods where cases have been reported, is needed. Working more closely with community leaders will ensure that testing is done in areas where technological infrastructure is less accessible and intricate social relations are best understood by residents. This can limit the risk posed by asymptomatic individuals by ensuring that they are subject to the prescribed quarantine measures before having the chance to infect others. Targeted testing should also extend to key workers, particularly those who regularly interact with members of the public. Police, for example, should be tested on a weekly basis.

Whilst the government appears to have listened to protestors demands for the restrictions to be relaxed, it has failed to take on board advice from sector experts as it seeks to restart society. Its attempt to re-open schools in early June, irrespective of warnings from teacher unions and educators, was subsequently abandoned after several secondary school educators tested positive for Covid-19 in the southern region of Casamance. The government should learn from this experience and keep schools closed until it can ensure the safety of teachers and pupils. For those who have upcoming exams distance learning – that is already being provided through television and radio programming – should continue.

Clearly there are economic imperatives behind the decision to remove restrictions, but these should not be given priority above the health of citizens. Second waves of Covid-19 cases in South Korea and Beijing have shown that the virus can very quickly return. With the number of cases having risen sharply since early June, President Sall should reconsider plans to open the country further until better preventative measures have been put in place. This includes ensuring that all border checkpoints for those entering the country by land, sea, or air, are equipped with infrared monitoring devices to isolate anyone with a fever. Testing, and mandatory isolation for those who receive positive results at approved government facilities, will be key. Mandating the wearing of masks in public places should also be introduced, but only when the government is able to provide free masks to those unable to

Softening the Impact



The Programme de Résilience Economique et Sociale (PRES), launched in April, aimed at softening the economic damage caused by Covid-19. Its provisions include a FCFA 69bn (US\$118 million) fund for food, a FCFA 100bn (US\$171 million) fund for sectors most affected by the outbreak and tax relief for companies. These are much needed sources of survival for many Senegalese whose businesses and jobs have been severely disrupted by the outbreak. However, there are already concerns that the funds are not properly being accounted for. Mansour Faye, Minister for Community Development and Social and Territorial Equity, and brother-in-law to President Sall, has allegedly awarded the contract for the transport of food – allocated by PRES – to a friend whose company has been in liquidation since 2019. Since the announcement of the relief package in April, the population has not received money or food, or heard anything about how the allocated funds are being spent.

A US\$442 million injection by the International Monetary Fund in April, made at the request of Sall, should also be viewed with caution as under his presidency the debt-to-GDP ratio in Senegal has almost doubled. To support domestic enterprise the government should ensure that its recovery efforts prioritise support for in-country value chains. Senegalese tailors are renowned for their work and would be more than capable of producing the masks required to allow the



government to issue one per person. The fabric too, can be sourced from local markets. Enlisting the help of university engineers as part of a technology task force to find creative solutions for containing the virus that can be provided by domestic manufacturers should also be explored.

These efforts should all be part of the strategy for dealing not just with Covid-19 but its aftermath. For now, the government is focused on measures that can deliver impacts in the short-term, but these will work best, if they are part of a coherent, clearly articulated long-term plan.

Ramatoulaye Sonko is a Data Science Fellow at HackCville.

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Staying at zero: COVID-19 AND POLITICAL GAMES IN CROSS RIVER AND KOGI STATES



As the world battles a global pandemic, it has become clear that Covid-19 is not just a health problem but a political one too. In Nigeria it has shone a light on governance shortfalls. Nigeria's index case of Covid-19 was recorded on 28 February, but it was a month before President Buhari outlined any substantial steps that would be taken to fight the virus. The national strategy eventually put in place saw an initial lockdown, but one that covered just two of Nigeria's 36 states - Lagos and Ogun - and the Federal Capital Territory (FCT). The lockdown restrictions have gradually eased. But despite the President outlining a tripartite approach that is led by the Covid-19 Presidential Task Force in collaboration with the Nigeria Centre for Disease Control (NCDC) and the Ministry of Health, for the most part states have been left to their own devices, with mixed results.

In northern Nigeria, state governors have made a mockery of inter-state travel bans as they have moved thousands of Almajirai across state borders. Kano state has been under the spotlight for its governor's initial refusal to acknowledge the existence of Covid-19 in the state, culminating in a week of 'strange' deaths. The state now has the third largest number of cases according to NCDC figures. However, whilst cases of Covid-19 have risen across the country, two states have largely avoided recording any cases. Kogi state has three according to the NCDC - figures its state government denies - whilst Cross River remains the only state not to have recorded a single case of the virus.

Kogi vs NCDC

Kogi state is popularly known as the confluence state of Nigeria as it sits at the very heart of the country where the rivers Niger and Benue meet. The state shares a border with ten others and is a major transit hub between the north and south of the country. Over the past three months, the state government, led by Governor Yahaya Bello, has been at the centre of controversy regarding the response to the pandemic, or lack thereof.

In the first week of May, a federal NCDC rapid response squad was dispatched to the state to provide logistical support and to ascertain the veracity of Kogi's virus free status. But the government refused to allow the team to operate unless they first spent fourteen days in isolation. They subsequently left. Normally the NCDC only declares results based on samples they have obtained from the state testing centres, which are then taken to approved test labs. However, since Kogi state has barred the NCDC from operating unless it complies with its stringent isolation measures, it is unable to do so.

But on 28 May NCDC announced Kogi's first two cases, a third followed on 3 June. Figures that have been vehemently denied by the state government which issued a statement after the cases were declared by NCDC stating that, "we will not be a party to any fictitious Covid-19 claims which is why we do not recognise any Covid-19 test conducted by any Kogite outside the boundaries of the state". The three cases so far recorded by NCDC are of Kogi residents who left the state and were subsequently tested.



The Kogi state government is making the case that they can conduct the testing without any of the federally approved test kits, certified test labs or NCDC oversight. Whilst the Kogi state branch of the Nigerian Medical Association has publicly decried the state response, and called on them to provide evidence to support claims of hundreds of negative tests, many citizens support the state governor, believing that the NCDC is simply out to exploit the pandemic for monetary gain. Reflecting narratives that have been prominent across Nigeria's vibrant WhatsApp and Facebook groups. However, the games being played between authorities in Kogi and the NCDC are likely to have the most severe consequences for residents of the state. Individuals who can now add the risk of a pandemic to the daily threats they face from insecurity, banditry, political thuggery and corruption.



Testing barriers

Unlike Kogi state, Cross River has neither barred the NCDC from operating in the state, nor disputed any figures announced by the body. In May, the Commissioner for Health in Cross River State, Betta Edu, attributed the Covid-19 free status of the state to Governor Ben Ayade's "proactive efforts". But is this really the case?

As of 17 May, Cross River had only carried out a total of seven tests for Covid-19. Since then they appear to have stopped sending samples to the NCDC as there is no record of any tests being done in the last month. All of the initial seven tests came out of a single test laboratory of the University of Calabar Teaching Hospital that is almost 500km away from the state capital – from where tests are collated before being sent to NCDC – a journey of more than eight hours by road.

Instead of locking out the NCDC, the state authorities have instead put in place logistical barriers that make it exceedingly difficult to comply with standard testing procedures. Just as in Kogi, confirmed cases of Covid-19 have been announced only in persons who left the state and were tested on arrival in other states. A press statement released on 10 June by the Bauchi state government claimed that 15 of the 69 Covid-19 cases it had recently recorded were directly attributed to persons who had arrived from Cross River state. "In Bauchi we are not pretending", the statement went on to say.

Actions matter most

It is time for Cross River and Kogi to stop pretending. On June 18 a member of the Cross River State House of Assembly died after suffering with 'flu-like' symptoms, the day before Yahaya Bello's top aide had passed away after suffering from similar symptoms. The states are in danger of repeating the tragedy of 'unusual deaths' that took place in Kano.

In Kano it was left to citizens to stand up for their right to expect responsible and responsive leadership. Citizen-led campaigns such as 'Kano Against COVID' have shown the power of citizens coming together to effect change. Their efforts have fostered greater synergy between public and private sectors, supported the development of a governance and delivery framework resulting in mobile testing centres set up across the state and ensured greater access to personal protection equipment and public information about the virus.

Political office is meant to be about fulfilling the holder's obligations to the state and its residents. Nigerian politicians in Kogi and Cross River have become so narcissistic that they have forgotten that their office is not about them as individuals or a reflection of them. The image of a state as Covid-19 free or not is neither here nor there. The number one priority must be the safety and welfare of those who voted them into power in the first place.

Covid-19 could have been a moment for elected officials to stand up and set a positive example. Some have accepted that responsibility, but others have chosen to continue down the path of false rhetoric and make-believe.

Alhassan Ibrahim is a programme officer at the Centre for Democracy and Development who specialises in tracking disinformation networks and the intersection of democracy and technologies.

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Lockdowns and Livelihoods: Reflections on West Africa's Covid-19 response so far



The initial response of West African leaders to the Covid-19 pandemic was to follow international measures to curb the spread of the virus. By the end of March, with less than 1,000 confirmed cases in the region, several countries had implemented movement restrictions. Liberia enforced a total ban on movement while Benin, Ghana, Sierra Leone, Senegal and Nigeria were among those implementing partial lockdowns, putting in place curfews and travel restrictions and closing borders. But as the virus began to spread and West Africa recorded more cases, questions about the suitability and practicality of these have been contested.

Enforcing lockdowns

Notwithstanding the economic impacts of these lockdown measures, enforceability is also problematic across the region as many governments, or the security forces tasked with applying the law in practice, are not trusted by residents. According to the most recent Afrobarometer survey data, just 48% of West Africans trust their elected leaders. Faith in the police is also low, with 25% of West Africans responding “not at all” when asked for their level of trust in these security personnel. A propensity to resort to violence and force has played out during the lockdown, leading to an increase in human rights violation in late March and April 2020.

According to a report by Nigeria’s National Human Rights Commission (NHRC), the security forces used “excessive or disproportionate” force that resulted in eight documented

incidents of extra-judicial killing and 18 deaths between 30 March and 13 April in Kaduna, Abia, Delta, Niger, Ebonyi and Katsina states. The NHRC also recorded 33 incidents of torture, inhuman and degrading treatment and 27 incidents of violation of the right to freedom of movement, unlawful arrests and illegal detentions. Perhaps unsurprisingly Nigerians have the lowest trust in the police in the region according to Afrobarometer, with 48% declaring they had no trust at all in their work during a 2018 survey.

In Guinea, Human Rights Watch has reported that the security services have harassed, intimidated, and arbitrarily arrested opposition members and supporters using Covid-19 restrictions as the official premise. In Sierra Leone, journalists have been intimidated for offering criticism of the government's pandemic response. Better communication, in which the rationale for a decision being taken is explained, rather than violently compelling citizens to comply, is required.

Economic realities

The decrease in economic activity that has accompanied the Covid-19 outbreak has led the World Bank to predict that the region will experience its first recession in 25 years, with growth rates potentially falling as low as -5.1% in 2020. Cognisant that longer-term lockdowns are unsustainable, countries such as Ghana and Nigeria have removed restrictions in major cities and replaced them with guidelines to manage activities. In Nigeria, the guidelines include two-metre physical distancing requirements in workplaces and other public spaces, provision of handwashing facilities or sanitizers in all public places, the mandatory use of non-medical face masks for all persons while in public and the prohibition of gatherings of more than 20 people outside of the workplace.

Given the structural characteristics of West African economies, a prolonged lockdown as a long-term response to Covid-19 has proved unsustainable. In cities like Abidjan, Lagos and Dakar millions of people live in densely populated urban areas, often with communal access to services. A significant percentage are employed in the informal sector meaning that they need to work on daily basis for their income. They do not have access to social benefits such as health insurance, paid leave or unemployment benefits. Elongated lockdowns threatened their very means of survival.



State support

Advanced economies are better prepared to work remotely and resort to online economy complimented with support provided for the most vulnerable and low-income citizens. Canada, for instance, launched the Emergency Response Benefit, which provides temporary income support to those unable to work because of Covid-19. So far, 11 West African countries have introduced social protection packages in response to the pandemic. In April, the Senegalese government set aside CFA 64.6bn (US\$10m) to boost economic and social resilience by strengthening the health sector and providing support to households, small businesses and their employees. But challenges of low coverage, difficult application processes and concerns over accountability have impacted on its implementation.

But social protection programmes are important as they help put cash into poor people's pockets, preventing them from going hungry or selling their assets for survival. They also help to sustain the agriculture sector, which ensures food production. According to the World Food Programme an estimated 11.4 million people in West Africa were in immediate need of food assistance between March and May 2020, including 5.1 million in Nigeria, 1.6 million in Niger and 1.6 million in Burkina Faso. A pre-existing challenge driven by regional insecurity that is being exacerbated by the pandemic. By August 2020, that figure is expected to rise to 17 million. Ensuring that food systems and food supply chains are adequately maintained is one of the most important actions for West African governments to take in the coming months.



Way forward

As at the 23 of June, the total number of Covid-19 cases in West Africa had exceeded 63,000. That figure continues to rise. Whilst public health measures aimed at halting the spread of the Covid-19 pandemic are necessary it is imperative that governments across the region ensure that fundamental human rights are protected and

respected when they are being enforced. It is also imperative that authorities are taking steps to gradually repair the trust deficit. In the short-term this can be done by listening to the concerns of citizens and providing much needed, temporary financial support.

Wuraola Solomon is a research analyst and Juliet Ugwu a programme officer at the Centre for Democracy and Development

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Integrated economies: Post-pandemic trade in West Africa



Last year, things were looking up for African economic integration. The African Continental Free Trade Area (AfCFTA) agreement reached its 22-member ratification threshold and officially came into force on 30 May 2019. Trading in goods originating on the continent with significantly reduced tariffs was set to commence on 1 July 2020. Most West African economies were poised to take advantage of the ensuing rise in intra-continental commerce and business expansion. An AfroChampions report on Year Zero of the AfCFTA, ranked 9 of the 15 countries in the Economic Community of West African States (ECOWAS) in the top half of African countries in

terms their of commitment to, and readiness for, the implementation of the landmark trade agreement.

Against this backdrop of heady expectations, the Covid-19 pandemic has come as a rude shock. The start of trading under the AfCFTA agreement has been tentatively rescheduled to January 2021 as countries grapple with lockdowns and border closures. What does this mean for intra-African trade? Will the pandemic pose a significant setback, merely pause the process, or could it even accelerate the pace of economic integration?



Looking inward

In times of crisis, governments tend to focus primarily on domestic matters. And with good reason: West African economies are dealing with both the immediate impact of a public health emergency and its second-order effects on the economy. Given a combination of falling revenues from oil in Nigeria and other commodities in Mali, Togo, Benin and Sierra Leone, sharp declines in tourism revenues for Cabo Verde and The Gambia and overall capital flight from emerging markets, the International Monetary Fund (IMF) projects that Real Gross Domestic Product (GDP) in West Africa will contract by 1.4% in 2020. Governments have had to make tough decisions to reduce the impact of the coming recession. Ghana and Cote D'Ivoire have taken on additional loans even with debt-to-GDP ratios of 63.8% and 52.7% respectively. These measures, while fiscally strenuous, are advisable to avoid austerity when small businesses and vulnerable populations are in dire need of support.

Trade negotiations are not an immediate priority. Closing land borders has had a significant effect on trade, even though some restrictions are ostensibly on passenger travel alone. A sizable portion of cross-border trade in the region is informal, characterised by traders traveling with their goods, rather than bulk shipments by truck. Limiting people's movements has significantly reduced the trade that occurs via this channel.

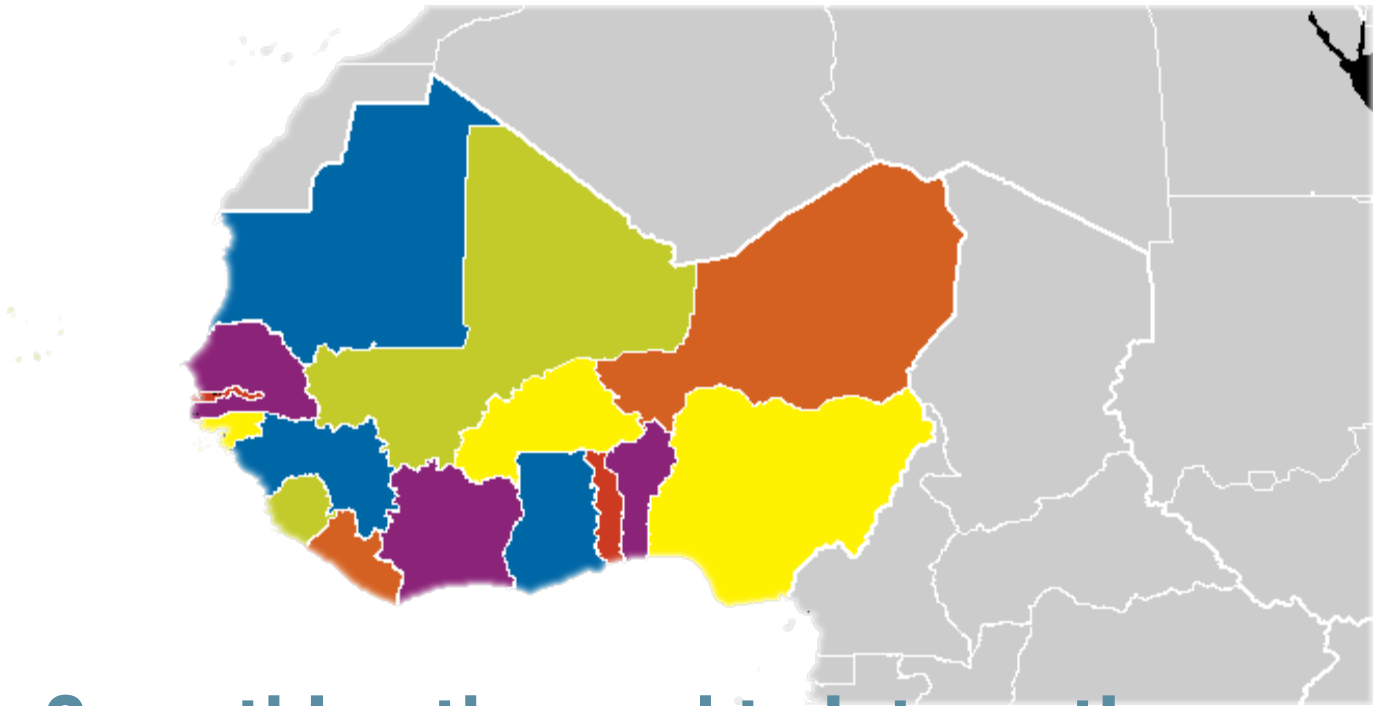
Protectionist economic arguments may gain traction even after the pandemic abates. Nigeria, the largest economy in the region, had shut its border with Benin before the Covid-19 crisis. This effort to shield domestic producers from foreign competition helps explain why it has not yet ratified the AfCFTA agreement. With businesses likely to face lower domestic demand during a recession, further clamour for protection could lead the Nigerian government to further deepen its isolationist approach.

Global remoteness, regional connectedness

Global supply chains have experienced disruptions since the initial outbreak of Covid-19 was confirmed early this year in China. Multinational firms are likely to respond in one of two ways: sourcing from locations closer to home or relying more on automation to reduce the need to produce in low-wage locations and the risks posed by worker illness. Neither bodes well for West African companies that were hoping to integrate into global value chains with low-cost labour as their value proposition.

Additionally, the impact of Covid-19 on one of West Africa's most important trade and investment partners is likely to further weaken the region's ties to the global economy. The IMF estimates that China's economic growth will slow to 1.2% this year, a far cry from 6.1% growth in 2019. This may dampen the extent of its economic involvement in West Africa, and its ability to extend lines of credit for infrastructure projects in the region. Figures from the American Enterprise Institute's China Global Investment Tracker indicate that investment and construction deals in the region totalled \$94.6 billion between 2005 and 2019, declining significantly last year.

Regional trade and cooperation, therefore, appears to be the most promising avenue for West African economies looking to industrialise and move up the value ladder. In the short term, trading with the rest of the continent is particularly important for ECOWAS countries because of the non-complementary structure of their economies. According to the 2019 African Integration Index, ECOWAS scored lowest on productive integration because its members rarely export intermediate goods to each other. This suggests West African countries do not currently specialise in producing goods for which a natural value chain involving their immediate neighbours already exists. Looking toward complementarities with African countries in other regions should be a short-term priority. For example, West African cotton producers like Benin, Burkina Faso, Mali and Senegal could benefit from producing intermediate textile products and integrating these with garment supply chains supporting industries in Egypt, Ethiopia and Kenya.



Smoothing the road to integration

As domestic demand shrinks with the Covid-19 induced recession, West African governments need to recognise that granting firms access to larger markets through trade liberalisation is their best bet for speeding up their post-pandemic economic recovery. Countries like Ghana, that were favourably disposed to increasing regional trade, should stay the course. ECOWAS foreign and trade ministers appear eager to resume trade and have proposed the gradual reopening of the region's borders in July.

When trading under the AfCFTA does commence in January as planned, governments should commit to making the process as smooth as possible. Tariffs are one part of trade costs, but their elimination alone will not suffice. Governments will need to reduce other logistical barriers to trade by reorienting customs agencies, promptly addressing complaints about predatory behaviour by border officials and coordinating with each other to simplify paperwork requirements and verification procedures. Part of the AfCFTA support funding

from the African Development Bank, World Bank, and the IMF should be directed toward medium-term investments in cross-border transportation, as well as extending loan facilities to exporters.

Finally, governments should be just as aggressive about marketing trade liberalisation policies as they are about enacting them. According to a 2018 report by Boston Consulting Group, West Africa is home to ten of the 75 African companies leading the economic integration drive on the continent, but success should not rest solely on the efforts of these giants. By raising awareness about newly available opportunities under the AfCFTA, West African governments will ensure that smaller firms are also able to take advantage of these changes and minimise delays in the impact of these policies being realised. The second Intra-African Trade Fair, now scheduled for September 2021 in Kigali, presents a natural focal point for West African governments' trade promotion efforts. The time to lay the groundwork is now.

Ebehi Iyoha is a columnist at Stears Business and a PhD Candidate in Economics at Vanderbilt University, specialising in industrial organisation and international trade.

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Reduced remittances: Covid-19's economic impact on The Gambia



Despite recording only 28 confirmed cases and one death as of 12 June 2020, The Gambia has been hit hard by Covid-19. All border crossing points have been sealed, schools and places of worship have been shut down and many businesses have faced restrictions on their operations. These lockdown measures, many of which have been in place since mid-March, have wreaked havoc on the financial well-being of the average Gambian.

In 2019, unemployment in The Gambia stood at 9% of the population while youth unemployment stood at 12.5%. The 2019 Gambia

Labour Force Survey Report found that between 2014 and 2018, a total of 61,500 Gambians migrated out of the country, with more than 75% of these migrants citing a lack of employment opportunities as their main reason for leaving. The Covid-19 pandemic has further impacted job prospects – the tourism industry has laid off thousands of workers in the past few months as travel restrictions impact on this key sector of the economy. As a result, a lot of unemployed and underprivileged Gambians are hoping that financial assistance will come from their relatives and families living abroad.



A reliance on remittances

It is estimated that 144,000 Gambians live outside the country – mostly in Europe and North America. A 2017 study by the International Fund for Agricultural Development found that Gambian migrants contributed 22% to the country's GDP in 2016. The Central Bank of The Gambia estimates that in 2019, remittances to The Gambia totalled US\$318.5 million, an increase of US\$40.7 million on the previous year. These remittances are primarily used by recipients to take care of day-to-day activities such as feeding, housing and transportation costs. Many Gambians also rely on these remittances to pay for education expenses, meet healthcare needs and to support businesses.

However, with strict lockdown measures being implemented all over the world to curtail the spread of Covid-19, Gambian migrants are finding it increasingly hard to eke out a living overseas, which in turn is making it difficult for them to send back money to their families. While figures from the Central Bank show the country received a total of US\$84 million in remittances for the first three months of 2020, projections from the World Bank suggest that remittances to countries in sub-Saharan Africa could drop by 23.1% in 2020. This is largely due to a fall in the wages and employment of migrant workers, who tend to be more vulnerable to economic shocks.



Undocumented and under pressure

According to Abdoulie Nget, a Gambian who now lives in Frankfurt, Germany, most of the Gambian migrants he knows have either lost their jobs completely or had their normal work hours significantly reduced. Those who have lost their jobs now rely on social welfare cheques from the German government. For Abdoulie “these social welfare cheques [totalling €350 per month] are not even sufficient to cover rent, food expenses, and utilities, let alone allow for one to send money back home to our families”.

Amadou Wuyeh Manga, who runs a money transfer business in Germany mainly targeting Gambian diaspora, has seen his business hit hard by the Covid-19 standstill. Before the pandemic Amadou would collect funds to be sent to the Gambia – charging a rate of around €10 per transfer. He would then use a bank account in The Gambia to pay the intended recipients of the remittances. After collecting up to €3,000, Amadou would have an agent fly from Germany to The Gambia to credit the account with the cash collected in Germany, which would then enable him carry out another cycle of money transfers. However, with travel restrictions being enforced all over the Europe since mid-March, his business account has now run out of money.

But it is undocumented Gambian migrants that have been hit hardest. Even if they have been able to retain some form of income, they are unable to send it back to dependents in The Gambia. “There are a good number of undocumented migrants living in Germany who cannot send money through conventional means such as Western Union due to their status. They, and their families back home have been the most affected by the situation my business is in, as I can no longer help them send money to The Gambia”, Amadou told West Africa Insight.

Binta Bojang a mother of three in Bundung, Kanifing Municipality has not received any money from her husband since March. Binta's husband went to Italy in 2017 but has been unable to secure a residence permit. She has resorted to petty trading and depending on her parents for support. “I haven't had a bag of rice at my house since April. My biggest fear now is waking up and not having anything to feed my children”.



Alleviation efforts

In April 2020, the Government of The Gambia, launched a Covid-19 food aid programme worth Ds734 million (US\$14 million). Through this initiative, the government intends to distribute 360,000 bags of 50kg of broken rice, and the same amounts of 50kg bags of sugar and 10 litre drums of refined cooking oil. It aims to cover 84% of Gambian households in need of support. In addition to efforts of the government, grassroots organisations have also donated food items to feed families in need. These aid packages will alleviate some of the financial strain caused by dwindling remittances, but how much of a help this brings to struggling Gambian families will be determined by how long the global pandemic, and resulting shutdown, lasts.

The World Bank estimates that remittances to low- and middle-income countries will recover quickly and rise by 5.6% to US\$470 billion globally in 2021. But this economic recovery will likely depend on the discovery of a Covid-19 vaccine or cure, which remains some way off.

In the past, remittances have been counter-cyclical; with the Gambian diaspora able to send more money back home in times of domestic crisis. This time, however, the pandemic has affected all countries, making assistance harder to come by for the most vulnerable members of society. Until Covid-19 lockdown measures ease globally, and migrant workers get back to work, families back home in The Gambia will continue to feel the pinch of lost remittances.

Haddija Jawara is communication consultant with the World Bank in The Gambia. She also works for the Gambia Press Union as a senior programme officer.

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Nigeria's perpetual emergency: Violence against women and girls



On 11 June 2020, the Nigerian Governors' Forum declared a state of emergency on sexual and gender-based violence. The same day, the Attorney General announced the creation of an inter-ministerial committee on gender-based violence. The following day, President Buhari joined the chorus, writing that he was "particularly upset at recent incidents of rape especially of very young girls". A few days later, the Inspector General of Police described rape as a serious and wicked offence, urged Nigerians to report it, and revealed that the equivalent of one rape every five hours had been reported to the police between January and May 2020. But why are all these powerful men suddenly speaking about this topic when they were previously more or less silent?

The past few months have seen increased attention paid to violence against women and girls with several shocking cases and statistics making the headlines. Four men gang-raping a 13-year-old girl in Kaduna. A 16-year-old girl abducted and gang raped in Bauchi. A 22-year-old student raped, beaten and murdered while studying in a church in Edo. A 66-year-old man in Yobe using chocolate and sweets to gain the confidence of girls as young as seven, before raping them. With this reporting and discussion has come increased determination and pressure from women's rights activists – and mobilisation of those new to this movement. This increased public consciousness and campaigning has forced Nigeria's political elite to speak out.

A growing epidemic

Violence against women and girls is not a new phenomenon in Nigeria. It was rife even before Covid-19 struck. At least one in four girls and one in ten boys experience sexual violence before the age of 18 according to a 2014 study by the National Population Commission and UNICEF. Early and forced marriage is common: 68% of girls in the north west and 57% of girls in the north east are married before they turn 18. Meanwhile, rates of female genital mutilation/ cutting are as high as 49% in the south east and 47.5% in the south west. This violence does not stop with adulthood. 17.4% of girls and women aged 15-49 have experienced physical and/or sexual violence from their intimate partners at least once in their lives according to Nigeria's 2013 Demographic and Health Survey.

This violence has increased during the Covid-19 pandemic. Although comprehensive data is lacking, a recent nationwide report by UN Women found a 56% increase in reported incidents between late March and early April. Lagos saw an almost fivefold increase in reported incidents. But the fact that the spike in Lagos cases dwarfs that of other states does not mean violence levels are lower elsewhere. Lagos has a proactive State Domestic and Sexual Violence Response Team that encourages reporting as well as committed women's rights activists that push for state action and support survivors that is not replicated throughout the country.

While most cases reported in the media are of sexual violence by strangers, levels of intimate partner-violence are higher, as is sexual violence by people known to survivors. The current restrictions are exacerbating factors such as poverty and economic uncertainty, food insecurity, household tensions, substance abuse and mental health issues known to cause this violence. Women's rights activists say there are indications marital rape incidence has also increased since the pandemic started. Sexual exploitation and abuse in which women are forced to exchange sex for food, shelter, safety, and other resources, rise during times of economic and financial hardship. People working with young women have observed an increase in online violence including bullying, slut-shaming and sharing of intimate photographs in revenge for ending relationships.



Unable to seek help

Globally, less than 40% of women who experience violence seek help, and if they do, they most often turn to family and friends for assistance. But access to support networks has been eroded by pandemic restrictions. Those providing services to survivors are not classed as key workers and as such have struggled to get passes to exempt them from movement restrictions. Counselling services have moved to being offered over the phone, but this limits access to those without mobiles and risks conversations being overheard. Police officers are less available to attend to reports as they have been assigned other duties. Court cases are either not proceeding or have moved online, problematic both from a due process point of view and as it risks retraumatizing survivors.

In the north-east, Sexual Assault Referral Centres in Adamawa, Borno and Yobe states have reported reduced numbers of cases during the periods of movement restrictions. This has less to do with a decline in incidents and more to do with barriers to reporting. Increased numbers of police officers and members of vigilante groups on the street, charged with ensuring adherence to restrictions, not only inhibit movement but also increase the risk of sexual harassment. People worry going to a health clinic will lead to (mis)diagnosis of having the virus and a subsequent fortnight in an isolation centre. Abusive partners may have increased their controlling behaviour. Women and girls with disabilities are one of the groups most at risk of violence but their reduced access to services and social networks, increased dependence on others, and inability to access information on services available, all increase the coercive control abusive family members and caregivers can have over them.



Actions not words

Federal and state governments have not prioritised gender-based violence in Nigeria's response to Covid-19. There has been little sustained effort to investigate changing incidence and trends, develop effective responses or increased actions to prevent. But renewed attention in recent weeks provides an opportunity to improve service provision and prevention.

Five key areas should be focused on. First is the creation of a centralised system to collate, analyse and share data; providing an evidence base for action. Next is dismantling barriers for survivors to seek help, particularly attitudes that blame and stigmatise victims not perpetrators. Thirdly, states must establish and channel funds to dedicated violence against women and girls centres to improve holistic service provision. These centres must be run by women's rights activists with a thorough understanding of patriarchal norms and should focus on all kinds of violence against women and girls. Fourthly, police

and court systems must be made survivor friendly, replicating mechanisms such as the GBV Special Court in Lagos, with personnel trained on how to handle gender-based violence cases. Lastly, and perhaps most importantly, concrete action on prevention is required. Learning from a global repository of knowledge on what works to prevent violence could quickly provide the evidence for interventions.

Before Covid-19, violence against women and girls in Nigeria was at pandemic levels. The full extent of the impact of the virus is still unknown, but many known drivers of gender-based violence, including those linked to economic hardship, will last for some time, particularly as Nigeria looks set for another recession. Now is the time for concerted action that better prevents violence, changes attitudes and provides life-saving services for victims and survivors. The government is at last speaking about these issues. It must now act.

Chitra Nagarajan works to build peace and defend human rights, including those of women and girls.

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Facts and Falsehoods: Social Media and Nigeria's Covid-19 response



In Nigeria where Facebook alone has an estimated 27 million subscribers, social media can play an important role in supporting efforts to quickly disseminate credible health information, provide situation reports and mobilise Nigerians to act in the fight against Covid-19. However, these digital platforms also have the potential to severely undermine such efforts and cause considerable harm by facilitating the spread of misleading and false information, conspiracy theories and unverified remedies.

Engaging citizens

Unlike during the 2014 Ebola outbreak in Nigeria, government institutions at the national and state levels are now much more active on social media. By the time Nigeria recorded its first case of Covid-19 on 27 February 2020, the Nigeria Centre for Disease Control (NCDC) had already been using its social media channels to raise awareness about preventative measures for several weeks. The Lagos State government used Twitter to support initial contact tracing efforts.

In March, as part of the NCDC's #TakeResponsibility campaign, the organisation worked with online influencers and Nollywood stars, providing them with infographics and materials which they could incorporate into tweets, audio clips and videos on Instagram, Facebook and WhatsApp. This strategy ensured

messages had a wide reach. But given that trust in the source is a key factor people use to ascertain veracity, also made them more likely to be believed.

Twitter chats and live events on Facebook and Instagram have created more opportunities for citizens to engage directly with officials and others on the frontlines than ever before. An initiative developed by the non-governmental organisation Nigeria Health Watch to improve both awareness and acceptance of the virus documents the stories of survivors and frontline workers using the hashtag #MyCOVID19NaijaStory. The hashtag has also been used by the Lagos State government and the Federal Ministry of Information and Culture to share videos of survivors as part of its efforts to address the stigma associated with the virus.

The NCDC also converted its WhatsApp hotline into a Covid-19 chatbot that provides up-to-date information about the virus. The chatbot's 11-item menu also allows users to report Covid-19 cases. The NCDC's use of WhatsApp is particularly significant,

as its usage is on the rise across rural and urban Nigeria. Although the chatbot is a positive initiative, it could be enhanced further by incorporating local languages and the capacity to submit queries outside of the 11 pre-programmed topics.

Remedies', conspiracies and Nigeria's infodemic

For all its positive uses, social media can also have detrimental impacts. In February 2020, the World Health Organisation declared “we’re not just fighting an epidemic, we’re fighting an infodemic. Fake news spreads faster and more easily than the virus and can be just as dangerous.”

Some of this dangerous information is being created and distributed on social media with the deliberate intent to cause harm, to undermine public health institutions or for political purposes. This intent to mislead is what differentiates disinformation from misinformation. However, both are detrimental to individuals and society. During the Covid-19 pandemic in Nigeria, false and misleading information has originated from various sources including government officials, politicians, religious leaders, traditional rulers, owners of media organisations, mainstream media, pranksters, troll farms and even well-meaning citizens. It can originate offline before being amplified on social media or can be fabricated online before being spread offline when mainstream media fail to apply proper journalistic rigour in sourcing stories.

In March 2020, His Imperial Majesty, Ooni Adeyeye Enitan Ogunwusi, Ojaja II, shared a “Corona Virus Solution” on Instagram and Facebook. In the video, which also spread to Twitter and WhatsApp, the King and spiritual leader of the Yoruba people of south western Nigeria, presented a recipe consisting of fruit, vegetables and herbs. It was picked up by mainstream media, who spread it to an even wider audience. When Doyin Okupe—a medical doctor and former media aide to two different Nigerian presidents—was discharged from a Covid-19 treatment centre, he posted his treatment regime—which included

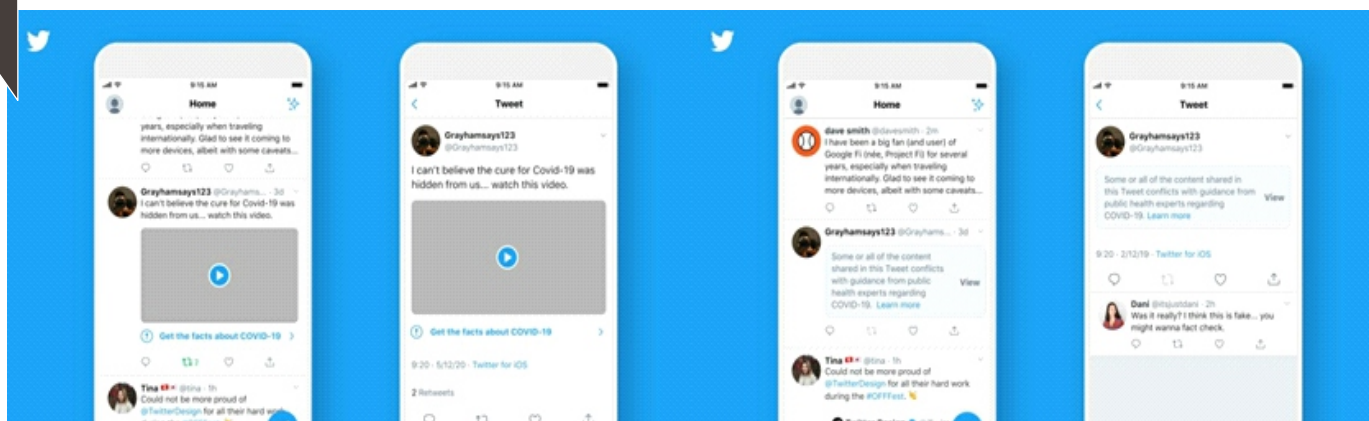
“

During the Covid-19 pandemic in Nigeria, false and misleading information has originated from various sources including government

hydroxychloroquine and herbs—on social media with the suggestion it was a cure of sorts. This kind of information is particularly dangerous in Nigeria, where self-diagnosis and self-medication is the norm and prescriptions are not required for the purchase of medicines.

The views of British conspiracy theorist David Icke such as the 5G Covid-19 claim have also gained traction in Nigeria during the pandemic. In part, due to his videos being amplified and endorsed by prominent offline figures, with large online followership. Chief Femi Fani-Kayode, a former presidential spokesman and federal government minister, shared Icke's videos to his 956,000 Twitter followers and 540,000 Facebook fans. Fani-Kayode also uses social media to share links to his own blog where he makes outlandish claims about Bill & Melinda Gates' agenda to “depopulate Africa with their evil Covid-19 vaccine”. As someone who wields significant influence in Nigeria, his decision to share these falsehoods could contribute to vaccine hesitancy among citizens and policymakers. In 2003, the polio vaccine was banned in parts of northern Nigeria amid concerns about its ‘real’ purpose.

Those with less social prominence and influence find more creative ways to deliver coordinated disinformation campaigns. An ongoing investigation by the Digital Africa Research Lab has unearthed hundreds of tweets from what appears to be a coordinated network of accounts using targeted hashtags to spread disinformation aimed at undermining confidence in the World Health Organisation, the Nigerian government and the NCDC's Covid-19 response. These include claims that the government is inflating the Covid-19 numbers—20,919 confirmed cases, with 525 deaths as at 22 June—to embezzle public funds that have been made available for tackling the pandemic.



Fact over fiction

Efforts to mitigate the harms from health disinformation and misinformation include measures introduced by fact-checking organisations. Africa Check, Dubawa and Agence France-Presse— Facebook’s third-party fact-checking partners in Nigeria—debunk stories in different local languages. In June 2020, Africa Check introduced Keep the Facts Going, a media literacy initiative that addresses the dangers of spreading unverified information.

Social media companies have also provided support to public health authorities in Nigeria and other African countries in addition to introducing new features to combat Covid-19-related misinformation. In May 2020, Twitter announced it would begin applying notices to “tweets containing potentially harmful, misleading

information related to Covid-19”, with links to independent fact-checks.

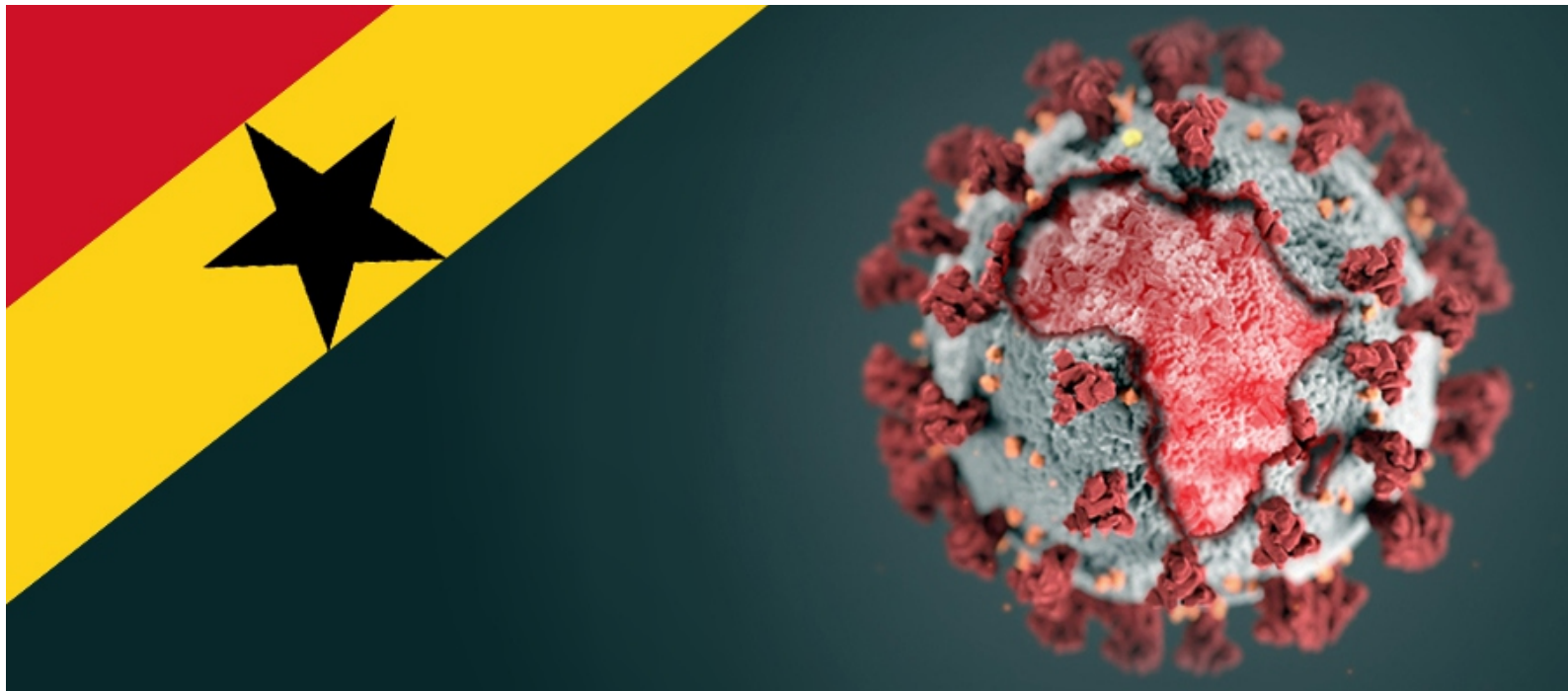
However, just as people have taken steps to protect themselves and others from Covid-19, there is a need for individuals to take steps to protect each other from harmful health information. Before liking, retweeting, quote-tweeting, reposting, or sharing any public health information on social media, Nigerians should pause and try to ascertain the veracity of the content. Only when they have a degree of certainty it is accurate, should they broadcast it to their friends, family and followers.

Rosemary Ajayi is the founder of the Digital Africa Research Lab. DigiAfricaLab explores the use and misuse of social media in Africa and develops strategies to mitigate potential harms.

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Accra's inequalities: Personal reflections in the time of Covid-19



It is started as a rumour. Then, it was confirmed. A student at the University of Ghana in Accra, had contracted Covid-19. On 15 March 2020, the university suspended all academic activities. On campus, there were palpable fears. Student stood in groups, discussing the announcement that the vice chancellor had made. We searched our minds for the contacts that we had previously made, the places that we had been to and wondered if we too might have been exposed.

I live in the one of the graduate blocks on the university campus. When the announcement was made, final year students were concerned about their academic projects given they were just a few months short of graduation. They feared the suspension of the academic activities would interfere with the completion of their courses. In other halls of residence, students sang, danced and celebrated the temporary suspension of lectures.

Three days earlier, Ghana's Health Minister Kwaku Agyemang-Manu had announced the country's first two confirmed Covid-19 cases: a Norwegian embassy officer and a Ghanaian United Nations official. Both had arrived by air.

By now, the World Health Organization (WHO) had, after much deliberation and delay, declared Covid-19 a pandemic.

Self-quarantine followed the suspension of lectures. We were advised to stay indoors as much as possible. Then a few days later, Ghana's president Nana Akufo-Addo announced restrictions on social gatherings including academic activities. Slowly students deserted the university campus after the authorities issued a memo to students asking them to do so. But I stayed.

Every day, I would stand at the balcony of the room that I occupied. The university campus was empty of people and unusually subdued. The trees seemed to have found a new life as they danced to the dictation of the wind. The birds chirped and the grass grew undisturbed.

For the first time in many years, I stopped and valued the beauty of nature. I exercised and cooked. I laughed and hoped for things. I grieved for my mother whom I had lost a few months before the lockdown and whose funeral was dragging. Everything stopped as I lived. But I knew that I was privileged.



A different reality

Accra is a city whose foundation is built on the very idea of inequality. When the British colonial government in 1876 made Accra Ghana's capital city, it was a tiny fishing port. But as the presence of British traders grew the city, it was struck by several outbreaks of infectious diseases that led to its segregation. In 1908, 300 people died in what is present-day Ghana after an outbreak of Bubonic plague.

Europeans settlements were formed to prevent the transmission of diseases from the so-called natives. This created a divide between the rich and poor that exists to this day. Former European settlements like Ridge and Cantonments remain some of the most affluent parts of the city. Informal settlements formed around these areas and other 'planned' neighbourhoods. Areas like Madina gradually became the labour pool for the city in the post-independence era.

Madina borders the northern edge of the University of Ghana campus. It is a hub for immigrant workers, especially those from northern Ghana, and countries including Nigeria,

and a market centre. In March, the main market was ordered to shut down. But the market quickly sprang back to life as restrictions were eased on 19 April.

The same month, a viral video on social media appeared to show market women in Madina scorning the occupants of a local government authority vehicle. The white pickup draped with posters that aimed to communicate awareness about Covid-19, and fitted with a public address system, retreated. It was alleged that the vehicle had gone to enforce Covid-19 protocols which included physical distancing and the wearing of face masks. The local assembly was concerned that the market women were not adhering to these precautions.

They were right. In the market, the women were not wearing face masks. They were not physically distancing. They went on with their normal duties as if nothing had happened. I heard people say that the disease existed only for rich people; that the poor would be spared.



Divergent priorities

What I had seen on the University of Ghana campus was an environment of fear. Every night, as we gathered to hear updates from the television set, we imagined all sorts of scenarios. We talked about our collective risks and fears. We stayed indoors because we could afford to.

But for those in Ghana's informal settlements like Madina, the shutdown to prevent Covid-19 was itself a matter of life and death. Ghana's economy is largely informal and meagre incomes are earned on a day to day basis. I heard people lament over how they were going to get food for themselves and their families. The virus was, and still is, a secondary concern.

When Ghana's president lifted the lockdown, he insinuated that it was up to individuals to take care of themselves. Because food markets have been identified as potential Covid-19 hotspots, local governments have been sanitising markets. They have also been conducting outreach to educate citizens about the virus. But provision of personal protective equipment has been left to the individual. Ghana had a little more than 1,000 cases when the lockdown was lifted in April, in late June it passed 15,000.

There is not enough data to show which areas are driving the surge of Covid-19 cases in Accra. But all over the country, working class communities including mining towns have been identified as hotspots. It is time to recognise that issues of inequality are also a public health concern.

Kwabena Yeboah is a writer based in Accra, Ghana.

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