

## Risk of rising death toll in West Africa: COVID-19 meets hunger

COVID-19 is a health crisis that will have a severe impact in West Africa, not only in terms of morbidity and mortality rates but it will further exacerbate existing vulnerabilities, especially in food security and nutrition. Between June and August 2020 19 million people in West and Central Africa are predicted to be in food and nutrition insecurity (*Cadre Harmonisé* analysis, March 2020). The impact of COVID-19 on already stretched health systems and precarious livelihoods, could result in more people dying of the consequences of hunger, of undernutrition or of a mortal disease that will not be treated.

**As they participate in the *Réseau de Prévention des Crises Alimentaires* (RPCA) to reflect on the food and nutrition security situation, Economic Community of Western African States (ECOWAS) governments, donors and INGOs need to act together and commit to:**

- **stopping the pandemic and tackle its and restrictive measure's negative effects on vulnerable populations' livelihoods,**
- **sustaining food security and access to health services,**
- **maintaining and scaling up the current level of response to the ongoing humanitarian crisis in the Sahel and Lake Chad Basin regions.**

### **LOCKDOWN AND RESTRICTION OF MOVEMENT MEASURES CANNOT BE THE ONLY RESPONSE IN WEST AFRICA**

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Governments in the region are doing their utmost to limit the spread of the COVID-19 through border closures, market closures and restriction of movements and the current mobilisation should be recognized. However, these measures could have a collateral impact on the situation of the poor and poorest households, which depend on the informal economy for their already fragile livelihoods and day-to-day survival. Restrictions of movement will limit people's ability to move in the event of a security crisis. They will limit pastoralists' ability to move in case of the lack of pasture or water (which is a key coping strategy in the Sahel) and will affect herd concentrations in some areas, hence possibly increasing conflicts between pastoralists and farmers in these areas.

The situation in West African countries, as in many Southern countries, is more complex than Northern countries because of poor hygiene and sanitation<sup>1</sup>, overcrowding in urban slums and displaced people's camps, fragile health systems, and the poor health of some of the population. Measures that have been introduced to minimise transmission in Northern countries such as social distancing will be challenging due to larger household sizes, intense social mixing between the young and elderly and livelihoods based on daily and frequent interaction for income generating activities, access to water, energy sources or food (daily visits to markets as there is no capacity to store fresh products or the financial capacity to buy in bulk and store). Confinement might also be very difficult - if not impossible - to implement in areas where populations already lack proper shelter, such as areas receiving many IDPs. The number of vulnerable people is also potentially higher, for example: people with comorbidities (undernutrition, malaria, HIV, etc.), elderly people with limited social networks, internally displaced people (IDPs), refugees and vulnerable host communities. Women, given their role in health care at the family, community and occupational levels, are the first to be exposed to infection.

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<sup>1</sup> In Sub-Saharan Africa, about three quarters of the population don't have access to basic hygiene facilities at home. JMP, UNICEF, WHO, Progress on household drinking water, sanitation and hygiene, 2000-2017.

However, there are existing strengths in the sub-region that should be built on to cope with the impact of the virus. Communities, used to facing disasters, have developed mitigation mechanisms and coping strategies on which interventions should be based. There is a strong informal network of leaders at community level (community leaders, religious leaders, businessmen and businesswomen, traditional healers, youth groups, etc.) that could be used to deliver messages on hygiene and other protection measures to be taken, on limitation of movements, etc. The governments and the international community learnt from epidemic crises such as Ebola and can build on experiences to implement a rapid response with strong, inclusive and transparent coordination mechanisms.

## **BEYOND THE PANDEMIC, THE NEGATIVE EFFECTS ON HEALTH SYSTEMS, LIVELIHOODS, FOOD AND NUTRITION SECURITY IN WEST AFRICA**

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*A heavy burden of the epidemic on already weak health systems could leave many diseases untreated, including lethal diseases and undernutrition, and increase the mortality rate.*

Studies of the Ebola outbreak in West Africa suggest that about as many people died because they could not get treatment for malaria, HIV and tuberculosis as from the Ebola virus itself. The COVID-19 will potentially have a major impact on health either by impacting people directly, or by diverting the medical focus from other lethal diseases and undernutrition.

Despite the lessons learned from the Ebola outbreak to strengthen primary care services to be better prepared for epidemic outbreaks, health systems have remained weak. For instance, in Sub Saharan African countries, only half of health facilities have basic water services, and one out of five sanitation services<sup>2</sup>, leading to poor WASH practices that will severely limit capacity to stop virus transmission. With less than 0.5 doctors per 1000 people on average in the region<sup>3</sup>, shortages of medical equipment and lack of infrastructure, it is difficult to imagine how countries will face the epidemic and will ensure access to health services, when it is already a challenge for millions of people.

Furthermore, in Sahel countries, health systems are put under stress ten months out of twelve, especially by seasonal epidemics and peaks in acute malnutrition<sup>4</sup>. It will be at the highest point of stress in a few months when the rainy season comes with malaria and cholera. Although further research and data collection is urgently needed to understand the exact impact of the virus on undernourished individuals, malnutrition may cause additional vulnerability. From what has been observed in the region with other diseases such as malaria or the Ebola virus, populations will become more vulnerable to undernutrition if they are affected by COVID-19, when, on the other hand, undernutrition is a risk factor for diseases and death. It is then essential to ensure that the response to COVID-19, while being a priority, doesn't disrupt the treatment of children suffering from malnutrition, as well as the treatment of other diseases.

*Because of its heavy impact on livelihoods, COVID-19 could lead to a deepened food security crisis*

The precariousness of everyday life means that the economic effects of COVID-19 in West African countries could be catastrophic without any mitigation measures. The impact of COVID-19 on the economy has been seen even before the virus reaches the continent, with a dramatic decrease of North to South money transfers (remittances), following confinement measures in Northern countries. The restriction on movements and business will impact daily economic activities from whom many households are depending, for some even to put food on their plate in the evening. The impact on the livelihoods of women, who are largely dependent on the informal economy and the agribusiness sector, will result in a decrease or absence of income that will be critical to maintaining the family's food and health needs. Restriction measures will also lead to an overall reduction in trade which could

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<sup>2</sup> JMP, UNICEF, WHO, WASH in Health Care Facilities, Global Baseline Report, 2019.

<sup>3</sup> Source: WHO

<sup>4</sup> Action Against Hunger, Sahel - *Évaluation de la résilience des systèmes de santé face aux urgences sanitaires et nutritionnelle*, July 2018.

have a heavy toll on the economies of the countries of the region: many urban businesses (sources of employment in these areas but also employment for seasonal migrants - rural migrants seeking income in the city) depend on external imports and the unrestricted functioning of goods flows. African economies are highly dependent on imports, and mainly export raw materials whose market value is collapsing because of the COVID-19 epidemic. This will intensify the economic impact. Once again, drawing from the lessons learnt from the Ebola outbreak, COVID-19 may soon have specific impacts on farmers' livelihoods: they could have limited access to inputs such as seeds and/or not be able to sell their products because of the closure of markets. Some regions could face labour shortages because of restriction of movements.

Because of this heavy impact on livelihoods, COVID-19, although a health crisis, could very much lead to an aggravation of an already existing food and nutrition security crisis for West Africa. The impacts of COVID-19 on food supply and demand will directly and indirectly affect the four pillars of food security and nutrition: availability, access, utilization and stability. Instability in supply chains could impact market supply and thus food availability. The closure of markets will reduce the access of the poorest populations to necessities, especially in rural and peri-urban areas. In the cities, poor and poorest households will not be able to afford to buy their supplies in the supermarkets that have remained open, where processed food products are more expensive. In addition, restrictions could result in the loss of jobs and income for millions of people working in the informal sector, including workers in the agri-food chain, who end up with products they cannot sell on markets.

The recent *Cadre Harmonisé* analysis hasn't considered the potential impact of the pandemic. The anticipated situation for the coming lean season, 19 million food and nutrition insecure people, is the background on which the health crises will be developing. In some countries the food and nutrition situation has been deteriorating significantly compared to 2019 with for instance a tripling of the population in phase 3 or worse in Burkina Faso and a number multiplied per ten in Sierra Leone.

## RECOMMENDATIONS

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### Make protection of the most vulnerable a priority

- Affected country governments, United Nations agencies and INGOs should use the most up-to-date assessments to evaluate specific needs in relation to COVID-19 primary and secondary impacts on existing vulnerabilities (poor and very poor households, people with comorbidities).
- Specific attention should be dedicated to refugees and IDPs who are at risk of being forgotten.

### Adopt a “do no harm” approach to stop the outbreak

Governments, with support from donors, United Nations agencies and the INGOs, should urgently:

- Support health facilities to improve infection prevention and control (IPC) and ensure the availability of material to protect their medical teams, but also to ensure the continuity of primary health care services, with the definition of priorities: sustain health interventions linked with mortal diseases (including TB, malaria, HIV, undernutrition) and include them in treatment protocols, preparedness and protection strategies, while postponing non-essential services.
- Ensure that confinement (if implemented) and restrictions of movements are accompanied by targeted measures to ensure that essential needs remain covered and livelihoods preserved, including facilitating humanitarian access.

All stakeholders should:

- Ensure that the response builds on community strengths and is community-driven (using existing community and faith-based groups), with community involvement and contribution on development of plans and strategies and inclusion of communities' existing coping strategies.
- Invest in the implementation of water, sanitation and hygiene activities and focus on behavioural changes and barriers measures.
- Ensure that people have the life-saving information they need to protect themselves and others (from the virus and to reduce its impact on health, social life, and the economy), but also that they receive mental health support, when possible.

- As much as possible, provide support to the national and local health authorities in priority to avoid the development of a parallel emergency 'health system' and to strengthen the health systems in the long run.

Donors should:

- Support a global COVID-19 response in West Africa (not only in countries with Humanitarian Response Plans), while ensuring essential services remain supported in all situations, including conflicts and refugee settings.
- Ensure that funding dedicated to the epidemic is, as much as possible, flexible in order to adapt to the rapid evolving situation.

Focus on livelihoods now and start building more resilient food systems to prevent future food crises

Governments, with support from donors, United Nations agencies and INGOs, should:

- Ensure restrictions of movements and quarantine measures are accompanied by social safety nets for poor and very poor households including blanket feeding and when possible cash transfer for very poor and poor households.
- Take emergency political measures to ensure continuity in the whole value chain (handling food supply, transport, storage, distribution) and support farmers to ensure the continuity of food production.
- Let food transportation continue between countries despite borders shutdown, especially when countries rely on such exchanges to ensure food security on their territory.
- Closely monitor food prices and markets with transparent dissemination of information, and take measures to mitigate price increase. Monitoring of prices in rural areas can be adapted by mobilising the network of cereal producers' organisations in the Sahel countries.
- Anticipate the crisis is going to last as the impacts of the pandemic and measures taken to tackle it will have mid- and long-term consequences.
- Direct their efforts towards the promotion of sustainable practices through the development of agroecology, eco-pastoralism and agroforestry. These models, preserving biodiversity and well-functioning ecosystems, are the sine qua non condition to prevent similar crises in the future.
- Rethink the current agriculture model and build territorialised food systems that ensure short supply for consumers and markets for producers.